

Personal Account ** KEET TV **

Corporate Office P.O. Box 4868 • Eureka, CA 95502 Phone (707)443-1645 Fax (707)443-0175

Fortuna Division 2435 Newburg Rd • Fortuna, CA 95540 Phone (707)725-2364 Fax (707)725-6233 Southern Humboldt Division 1300 Redwood Dr • Garberville, CA 95542 Phone (707)923-3380 Fax (707)923-2051

Cloverdale Division
70 Commerce Ln., Suite K • Cloverdale, CA 95425
Phone/Fax (707) 894-0776

APPLICANTS INFORMATION Mailing Address_____ City____ State__ Zip___ Hm Phone(___) Residence _______ City ______ Zip ______ Cell Phone(_____) _ Phone(____) Address Employer_ Current Position_____ Length of Employment____ Take Home Pay \$____ Monthly \(\text{Weekly} \) Name of Nearest Relative Not Living With You_____ _____Relationship_____ _____ City_____ State____ Zip____ Home Phone(____) Address ____ CO-APPLICANT INFORMATION Full Name______ SS#_ - - Date of Birth / / Mailing Address City State Zip Hm Phone(___) ______ City_____ State____ Zip____ Cell Phone(___)___ Residence _____Address_____ Employer____ Phone() Current Position___ CREDIT REFERENCE *Please Attach Additional Sheet if Needed* _____Address_____City_State Zip _) ____ Fax(____) ___ Contact Name____ Phone(_____ Account #_____ _____City____State Zip Name Address Fax() _____Contact Name_ Phone(_ ____ Account #___ BANK ACCOUNT INFORMATION City____ Bank State Account # _____ □Checking □Savings FLEETWIDE CARD INFORMATION ISSUE FLEETWIDE CARD(S) TO: (REQUIRED 5 DIGIT CUSTOM DRIVER ID) WHAT FUELS SHOULD THIS CARD ACCESS? (CIRCLE ALL THAT APPLY) Off Hwy Diesel Gas Diesel Gas Diesel Off Hwy Diesel Gas Diesel Off Hwy Diesel Gas Diesel Off Hwy Diesel

Diesel

Off Hwy Diesel

ACCESS CARD AGREEMENT		
By signing below the undersigned hereby agrees to r instruct all authorized users on its account in the property compliance with regulations. The undersigned shall damage which arise from the acts or omissions of the standard which are acts or of the acts of the	per and safe use of facilities, including observance of a indemnify and hold harmless from and against any class a undersigned and by acts of those authorized to use unauthorized use of any card issued to Customer unti n. The Customer also accepts liability for any attorned ted immediately to (707)443-1645 (available 24 hours ER I.D.TO AVOID UNAUTHORIZED USE, NEVER ST	all safety procedures, use of safety devices and aims and costs including bodily injury and property this account by the undersigned. il such time as L & M Renner, Inc. is notified the card by's fees incurred in collection of any, unauthorized a day, 7 days a week). NOTE: EACH FUELING TORE YOUR DRIVER I.D. WITH THE CARD. Separate and distinct from the process of issuing credit by, not a credit card, to be used at an automated atton 13401 of the California Business and
□ □ By checking this box and signing below, you agree to and acknowledge the "Access Card Agreement" stated above.		
OLOMATUDE		
SIGNATURE	PRINT NAME	DATE
AGREEMENT TO PAY CHARGES		
The undersigned hereafter referred to as "Customer", agrees to the following terms in all credit transactions with L & M Renner, Inc. unless otherwise agreed to in writing by authorized Company officers at its headquarters in Eureka, CA, and that the venue for litigation of all disputes concerning this contract shall be Humboldt County Superior Court, unless L & M Renner, Inc., at its sole discretion, consents to a different venue, or applicable law otherwise requires. PAYMENT TERMS Delivered Bulk Oil and Fuel Invoices – 10 days from date of delivery Cardlock and all other L & M Renner, Inc. Invoices – 15 days from statement date The undersigned further agrees that L & M Renner, Inc. may assess: a late fee of 2°% (24% annual rate) at the end of each month on all unpaid balances 30 days from statement date; a handling charge of \$35 for each returned check, EFT or Credit Card; a \$25.00 *Account Invalidation Fee* on accounts past due. Credit and access card may be suspended at any time. In the event of default, customer agrees to pay all collection costs and legal fees. CUSTOMER agrees to review all statements provided by L & M Renner, Inc. in either electronic or printed form, and notify L & M Renner, Inc. not later than 15 calendar days after the date of each statement of any errors or disputes with respect to transactions and other information reflected therein. After 15 calendar days, each such statement and the transaction(s) therein shall be binding on CUSTOMER. Customer agrees and acknowledges that L & M Renner, Inc. has the unilateral right to cancel this account at anytime with or without notice. I warrant the above information to be true, correct and complete and I authorize the references listed on this application to release to L & M Renner, Inc. information regarding applicant's credit history from any commercial or consumer reporting agency or trade organization. If approved, I authorize the release of any information regarding applicant's accounts. I authorize L & M Renner, Inc. to secure infor		
APPLICANT SIGNATURE	PLEASE PRINT NAME	DATE
CO APPLICANT SIGNATURE	PLEASE PRINT NAME	DATE
CONTINUING PERSONAL GUARANTEE Person(s) signing Personal Guarantee: The undersigned individually, jointly and severable unconditionally guarantees to L & M Renner, Inc. due and punctual payment performance, and discharge of all debts, obligations, and liabilities, as may now exist and may therefore arise, and agree to be bound by all the terms and conditions described in this application, including but not limited to the provisions of the Credit Agreement. A separate action or actions may be brought and prosecuted against the undersigned whether action is brought against the account holder or whether the account holder is joined in any such action or actions; and the undersigned waive the benefit of any statute of limitations affecting their ability hereunder or the enforcement thereof.		
GUARANTOR SIGNATURE HERE	PRINT FULL NAME	DATE
	FOR OFFICE USE ONLY	