

Applicant Signature:

CREDIT APPLICATION

APPROVED	DISAP

2345 Pruden Blvd. P.O. Box 1245 Suffolk, VA 23434 Telephones:

APPROVED	DISAPPROVED
# Card Issued:	Credit Limit:
Init:	

Date: _

OFFICE USE ONLY

	(757) 934-0550 (800)	924-5823 _{DA}	TE:	Init:			
	INDIVIDUAL ACCOUNT You assume liability for purchase	es. Credit data may be re	eported only in your nan	ne. An applicant, although marrie	d, may apply for an i	ndividual acc	ount.
	DESIGNATED USER ACCOU If your spouse will use this accoution.		use's full name. If spous	se will not use account, designate	other user, if any. Fi	ll in all of the	applica-
	JOINT ACCOUNT Fill in all of the application, and had names subject to federal and you		nis request. Both signer	rs assume liability for all purchase	es. Credit data may b	e reported in	both
	COMMERCIAL ACCOUNT You may request a commercial of	redit card account by co	ompleting the application	n, and have it signed by an author	ized company repres	entative.	
COMPAN	Y INFORMATION:	ount out a document by ou	mplotting the application	i, and have it eighed by an dame.	izoa company roproc	onida vo.	
Company:			Pho	ne:			
Address: _							
Date of Inc	corporation:		Proprietorship	Established:			
Partnershi	p Established:		Years In Busine	ess:			
Nature Of I	Business:		FIN # :				
	AL INFORMATION:						
	ne:			-			
	nployer:						
Work Phor	ne:		Occupation :				
IF CO-AP	PLICATION, PLEASE COMPLE	TE BELOW:					
Name:		Addres	s:				
Home Pho	ne:	Date of Birth:	So	cial Security Number:			
	ip to Applicant: Spouse Ot						
	T RELATIVE NOT LIVING WITH		******	• • • • • • • • • • • • • • • • • • • •	*****	•••••	• • • • •
Name:		Address:					
Phone:		Relationship	to Applicant:				
BANK RE	FERENCE:	••••••	******	• • • • • • • • • • • • • • • • • • • •	*****	••••	• • • • •
Bank Name	e:	Account Nui	mber:		Checking	Saving	Loan
Bank Name	e:	Account Nui	mber:		Checking	Saving	Loan
	EFERENCE:	•••••	******	• • • • • • • • • • • • • • • • • • • •	*****	*****	• • • • •
1. Name	o:	Address:			_ Opening Date (MM	YY):	
Accou	unt Number:		Balance: \$	Monthly Payment: \$			
2. Name	e:	Address:			_ Opening Date (MM	YY):	
Accou	unt Number:		Balance: \$	Monthly Payment: \$			
	:						
Accor	unt Number:		Ralanco: \$	Monthly Payment: \$			

Co-Applicant

_ Signature:

Date:_



Guarantor:

Supreme Petroleum, Inc.

Mailing Address 2345 Pruden Blvd. P.O. Box 1246 Suffolk, Virginia 23434

(757)934-0550—(800) 924-5823

Security Agreement/Personal Guarantee

In consideration of Supreme Petroleum, Inc., its successors or assigns, above named person, firm, partnership, corporation or their assigns or succession of One Dollar (\$1.00) and other valuable consideration, hereby acknowledged, I/We, the undersigned guarantors, do hereby uncor Supreme Petroleum, Inc., its successors or assigns, the full payment of the above named person, firm, partnership, or corporation or their succeshall be construed as an absolute, continuing and unqualified guarante persons, firm, partnership or corporation or their assign or successors. Inc., its successors or assigns shall not be required to proceed first again person, firm, partnership, or corporation or successors before resorting for payment. I/We specifically waive any requirement that we be give payment by said person, firm, partnership, or corporation or their assign promise to pay besides the principle due on this obligation, a sum of thirt for attorney's fees and/or collection charges, if placed in his hands for of further waive any homestead exemption as to any liabilities incurred und make this guarantee binding on our heirs, successors, administrators, or that by extending credit to the above name person, firm, partnership, of assigns or successors, Supreme Petroleum, Inc., shall have accepted this further means of acceptance shall be presented.	ccessors and in further the receipt whereof is additionally guarantee to any and all charges by ssors. This guarantee e of payment by said a Supreme Petroleum to I/We the guarantors in Notice of Default of s or successors. I/We percent (30%) thereof collection or suit. I/We the guarantee, and executors. I/We agree or corporation or their
further means of acceptance shall be necessary.	
IMPORTANT NOTICE	
THIS INSTRUMENT CONTAINS A CONFESSION OF JUDGEMENT CONSTITUTES WAIVER OF IMPORTANT RIGHTS YOU MAY HAVE AS A I THE CREDITOR TO OBTAIN A JUDGEMENT AGAINST YOU WITHOUT AN	DEBTOR AND ALLOWS
Please complete application and this guarantor's signature section, date the	nese forms and submit.
Signature—Corporate	Date
Signature—Personal	Date