

New West Oil Company LLC – Credit Application  
Customer Set-up Information

**Company Name:** \_\_\_\_\_

Salesperson: \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **St** \_\_\_\_\_ **Zip** \_\_\_\_\_

**TAX INFORMATION:** Please complete and sign the enclosed W-9 and Form 5000 TPT Exemption Certificate

**CUSTOMER CONTACT INFORMATION:** To ensure your account is set up with the proper contacts.

	PURCHASING CONTACT	ACCOUNTING CONTACT <i>(For receiving and paying invoices)</i>	OTHER
<b>Name:</b>			
<b>Phone:</b>			
<b>Fax:</b>			
<b>Email:</b>			
<b>Address:</b>			

**SHIP TO INFORMATION:**

Please provide us with your ship to information. If you have more than 3 Delivery Locations, please attach to a separate sheet of paper.

	Address	City	State	Zip
<b>Ship to 1</b>				
<b>Ship to 2</b>				
<b>Ship to 3</b>				

**ELECTRONIC INVOICES:** In an effort to improve the timeliness of Invoices and to reduce the amount of paper printed and mailed, by checking this box you agree to receive your invoices from New West Oil at the email address above.

**STATEMENTS:** Yes, my company requires monthly statements. **Please specify:**  Email, or  Fax  
***Note: Monthly statements are sent out by request only, based on this election.***

**EFT/ACH:** Yes I would like to receive an Electronic Funds Transfer Authorization form to allow New West Oil Company to debit my account automatically.