



MUTUAL LIQUID GAS & EQUIPMENT CO., INC.

CORP OFFICE: 17117 S. BROADWAY, GARDENA CA 90248

NEW ACCOUNT INFORMATION & APPLICATION FOR CREDIT

<hr/> <small>BUSINESS NAME</small>	<hr/> <small>DBA</small>	<hr/> <small>YR ESTABLISHED</small>
<hr/> <small>DELIVERY ADDRESS</small>	<hr/> <small>PHONE</small>	<hr/> <small>FAX</small>
<hr/> <small>BILLING A/P ADDRESS (IF DIFFERENT)</small>	<hr/> <small>BILLING A/P PHONE</small>	<hr/> <small>BILLING A/P FAX</small>
<hr/> <small>BILLING A/P CONTACT NAME & PHONE EXT</small>	<hr/> <small>BILLING A/P EMAIL (REQUIRED)</small>	
<hr/> <small>NATURE OF BUSINESS</small>	<hr/> <small>FEDERAL TAX ID#</small>	<hr/> <small>INCORPORATED? Y or N</small>
<hr/> <small>IF INCORPORATED: PROPRIETOR, PARTNER OR OFFICER NAME & HOME ADDRESS</small>	<hr/> <small>STATE?</small>	<hr/> <small>NAME OF PARENT COMPANY (IF SUBSIDIARY)</small>
<hr/> <small>SOCIAL SECURITY #</small>		

Credit Requested \$ _____

Have you ever declared bankruptcy? Y or N

CREDIT REFERENCE (1)

<small>NAME OF REFERENCE</small>	
<small>STREET ADDRESS, CITY STATE & ZIP</small>	
<small>ACCOUNT NUMBER</small>	<small>PHONE NUMBER</small>

CREDIT REFERENCE (2)

<small>NAME OF REFERENCE</small>	
<small>STREET ADDRESS, CITY STATE & ZIP</small>	
<small>ACCOUNT NUMBER</small>	<small>PHONE NUMBER</small>

CREDIT REFERENCE (3)

<small>NAME OF REFERENCE</small>	
<small>STREET ADDRESS, CITY STATE & ZIP</small>	
<small>ACCOUNT NUMBER</small>	<small>PHONE NUMBER</small>

BANK INFORMATION:

<small>NAME OF BANK</small>
<small>STREET ADDRESS, CITY STATE & ZIP</small>
<small>ACCOUNT NUMBER</small>

PROPANE USE: State and Federal authorities require that proper taxes are collected consistent with the use of propane.

Please select the tax category below for your propane purchases:

- Forklift Fuel.** Mutual will collect appropriate tax for forklift fuel from your propane purchases
- Motor Vehicle Fuel**
 - + Mutual will collect all taxes including California Road Tax, Federal Tax and Sales Tax
 - + Customer has a State User Fuel Tax Permit (exemption). Mutual will collect Federal Tax and Sales Tax Only
Customer State User Fuel Tax Permit # _____
 - + Customer will pay Federal Tax on Customer's IRS Form 720. Mutual will collect State and Sales Tax only
 - + Customer's Alternative Fueler-IRS Registration #, if applicable _____
 - + Fuel used under Transit Districts under Section 8655
- Retail, Non-Motor Fuel Use.** Mutual will collect only Sales Tax
- Resale.** Customer Resale # _____ Please attach Resale Certificate
- Other.** Please describe _____

SIGNATURE: *A standard Credit Reference Sheet that includes all information may be attached. MUST be signed below to run credit. Thank you*

Terms of Credit are NET 30 DAYS. Customer agrees to remit within 30 days or be subject to C.O.D. service.

Customer agrees to service charges of 1.5% per month on balances in excess of 30 days

<hr/> <small>PROPRIETOR, PARTNER OR OFFICER SIGNATURE</small>	<hr/> <small>DATE</small>
<hr/> <small>PRINT NAME</small>	<hr/> <small>TITLE</small>

Please complete, sign and return completed application to Joshua Hibbard in our Corona Office

1310 E. Sixth St. Corona, CA 92879 **Email: Josh@mutualpropane.com** **FAX: 310-515-2633** PH: 951-283-4135

<small>MUTUAL PROPANE INTERNAL USE:</small>
