



Consumer Credit Application

#101 - 1024 Great Street, Prince George BC, V2N 2K8

Phone: 250.563.5823 Fax: 250.563.5824 Toll Free: 1.855.880.7827

Email: credit@swpetroleum.ca

PERSONAL INFORMATION				
First Name and Last Name				
S.I.N - optional		Date of Birth		Drivers License Number
Mailing Address		City	Province	Postal Code
Home Phone #		Email		
Cell Phone #		Amount of credit requested (Estimated Monthly purchases)		Own Home Rent Home
Employer		Position		Years with current employer
FINANCIAL INFORMATION:				
Bank Name		Branch Address		
Branch Telephone #		Account #		Years at this Bank
TYPE OF SERVICE REQUESTED:				
Cardlock ☐	How Many Cards		Fuel Delivery ☐	Oil & Lubricants ☐
PREFERRED METHOD OF PAYMENT				
☐ In office only ☐ Cash ☐ Debit ☐ Cheque ☐ Visa/MC ☐ Online ☐ Automatic credit card				

DISCLAIMERS:	
<i>The Applicant</i> authorizes Star West Petroleum Ltd. to obtain personal credit reports and other credit information (the "information") and <i>the Applicant</i> acknowledges that this authorization is granted in connection with the application for credit. <i>The Applicant</i> consents to the collection, use and disclosure of the information by Star West Petroleum Ltd. to assess <i>the Applicant's</i> financial status, creditworthiness and ability to guarantee the obligations of <i>the Applicant</i> to Star West Petroleum Ltd. now, and in the future.	
PAYMENT TERMS :	<i>The Applicant</i> agrees to pay, in full for all charges within the terms specified by Star West Petroleum Ltd. upon acceptance of this application.
INTEREST:	<i>The Applicant</i> agrees to pay interest on all overdue amounts at a rate of 24% per annum, compounded monthly.
COST RECOVERY:	<i>The Applicant</i> agrees to pay all legal fees and costs incurred by Star West Petroleum Ltd. to recover overdue monies owed to Star West Petroleum Ltd. by <i>the Applicant</i> .
IN THE EVENT OF A DISPUTE:	In the event of a dispute between <i>the Applicant</i> and Star West Petroleum Ltd., the laws of the Province of British Columbia will apply.
<i>I/we the above hereby acknowledge that upon signing this document, the information that has been provided is certified to be true and complete and that it will be used by Star West Petroleum Ltd. to ascertain my/our credit worthiness.</i>	

PRINT NAME:
SIGNATURE:
DATE:

Office Use Only:	
Account Number	Credit limit
Salesperson	Lube Group ☐ Fuel Group ☐ Farmer ☐