

Harper Oil Products, Inc.

P.O. Box 6325

Florence, KY 41022

Florence (859)283-1001

Fax No. :(859)283-9314

Maysville (606)564-4036

Personal Information:

Individual Name: _____ E-Mail _____

Mailing Address: _____

Delivery Address: _____

Telephone No. (Home): _____ (Work) _____ No. Of dependents _____

Social Security or Federal ID No.: _____ Date of Birth: _____

Do you own ___ rent ___ your home? Amount of Monthly Payment: _____

Employment Information:

Employer: _____ Address: _____

Position: _____ Since: _____ Monthly Income: _____

Former Employer: _____ Address: _____

Position: _____ Since: _____ Monthly Income: _____

Check the items below that you anticipate buying:

Gasoline ___ Diesel Fuel ___ Heating Fuel ___ Lubricants ___ TBA ___ Other ___

Who was your former supplier of these items? _____ Phone No.: _____

Check the item that best describes the type of account that you wish to establish:

Consumer _____ Agriculture _____ Dealer _____

Co-Applicant:

Name: _____ Relationship: _____

Social Security No.: _____ Date of Birth: _____

Employer: _____ Address: _____

Position: _____ Since: _____ Monthly Income: _____

Bank Reference: *Bank Name* _____ Address _____

City State Zip *Account No.* *Phone No.*

Signature for Bank Privacy Act _____ Fax Number _____

Credit References:

Credit Grantor Address	City	State	Zip	Account No.	Phone No.
1. _____					
Fax _____					
2. _____					
Fax _____					
3. _____					
Fax _____					

In applying for credit with Harper Oil Products, Inc., the undersigned agrees that all invoices are due in accordance with the terms as stated on our invoices, Net 30. A charge of one and a half percent (1 1/2%) interest per month will be charged on balances past due.

In giving you this application, I/We give you permission to check references and information listed and authorize those listed to release to Harper Oil Products, Inc. Information regarding their credit reference with the Applicant(s) including bank balances, loan experiences, account balances, etc.; this Application may be retained whether or not it is approved and you are authorized to check credit and employment history and to answer questions about your credit experiences with me.

Authorized Signature

Co-Applicant Signature

Date



CERTIFICATION OF MOTOR FUELS NONHIGHWAY USE

See instructions on reverse side.

SECTION A

I hereby certify that motor fuels purchased from this date forward without payment of the Kentucky motor fuels tax is used exclusively for nonhighway purposes. The nonhighway use of this fuel is indicated below.

Gasoline

(1) Agricultural purposes (KRS 138.358(2))

_____ (Print) Kentucky Motor Fuels Tax Refund Permit Number

Special Fuels

(2) Personal residence (KRS 138.358(1))

_____ (Print) Purchaser's Driver's License Number

(3) Agricultural purposes (KRS 138.358(2))

_____ (Print) Kentucky Motor Fuels Tax Refund Permit Number

(4) Resident nonprofit religious, charitable or educational organization, or state or local government agency (KRS 138.358(3))

_____ (Print) Kentucky Sales and Use Tax Exempt Number

(5) Rail locomotive power and unlicensed company vehicles and equipment (KRS 138.240(2)(f))

_____ (Print) Kentucky Motor Fuels Tax Refund Permit Number

(6) Other nonhighway use in unlicensed vehicles and equipment (KRS 138.358(4))

_____ (Print) Kentucky Motor Fuels Tax Refund Permit Number

SECTION B *(Please print each item)*

Nonhighway use storage tank(s) located at:
(List each tank separately by fuel type—additional space provided on reverse for purchasers with multiple tanks.)

Gasoline Special Fuels

Tank Capacity

Street or Highway

City

State

ZIP Code

Exempt motor fuel purchased from:

_____ Name of Kentucky Licensed Motor Fuels Dealer

_____ Street or Highway

GL- _____

FL- _____

_____ Kentucky Motor Fuels Dealer License Number

City

County

State

ZIP Code

SECTION C

I acknowledge that any exempt motor fuels used for any purpose other than provided in this certification may result in imposition of applicable penalties provided by law. I understand that the individual or company for which this certification is executed will be liable for applicable tax, penalty and interest on such fuel.

_____ (Print) Name of Purchaser

_____ Signature of Purchaser or Authorized Company Representative

_____ Date Signed

This certificate shall remain in full force and effect until or unless revoked in writing.

