



Phone (509) 547-3326  
 Fax (509) 547-1259  
 Email: credit@connelloil.com  
 or mail: PO Box 3998, Pasco, WA 99302

Locations: Pasco, Connell, Oroville,  
 Spokane, Sunnyside, Yakima and  
 Ritzville dba Bronco Farm Supply



**Application to Purchase** (check all that apply): **BULK FUEL LUBES CARDLOCK OTHER** SALESMAN \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

Would you like to receive your invoices/statements by (check one) Mail Fax Email email address COMPLETE BELOW

**INDIVIDUAL ACCOUNT APPLICANT (for personal account only)**

INDIVIDUAL	NAME (First, Middle Initial, Last)		SPOUSE'S NAME		EMAIL ADDRESS:	
					TELEPHONE ( )	
	DATE OF BIRTH	/ /	SOC SEC#	CELL ( )	FAX ( )	
	BILLING ADDRESS			CITY	STATE	ZIP CODE
	STREET ADDRESS			CITY	STATE	ZIP CODE
	EMPLOYER			Telephone ( )	YEARS EMPLOYED	
	SPOUSE'S EMPLOYER			Telephone ( )	YEARS EMPLOYED	

**BUSINESS ACCOUNT APPLICANT This Business is a** Sole Proprietorship Partnership Corporation LLC

BUSINESS	FULL LEGAL NAME		TELEPHONE ( )	Fax ( )		
	DBA		FEDERAL ID #	Years in Business		
	BILLING ADDRESS			CITY	STATE	ZIP CODE
	STREET ADDRESS			CITY	STATE	ZIP CODE
	PARENT COMPANY			ADDRESS	Telephone #	
	PO's REQUIRED Y or N			Would you like to pay by ACH Y or N IF Yes, Form will be sent for Set up with the Bank		

**OWNERS/OFFICERS**

NAME 1 (FIRST, MIDDLE, LAST)	Cell ( )
NAME 2 (FIRST, MIDDLE, LAST)	Cell ( )

**ACCOUNTS PAYABLE CONTACT**

NAME	Email	Telephone ( )	FAX ( )
SALES TAX EXEMPT YES (PLEASE ATTACH RESELLER'S PERMIT OR FARMERS EXEMPT FORM) NO		CREDIT REQUESTED \$	

**INDIVIDUAL AND BUSINESS ACCOUNT APPLICANTS COMPLETE ALL BANK AND TRADE REFERENCES**

<b>BANK AND BRANCH</b>		
BANK NAME	BRANCH	Account #
Telephone ( )	Fax ( )	Contact Name

**TRADE REFERENCES**

<b>(1) COMPANY NAME</b>		
CONTACT	Telephone ( )	Fax ( )
<b>(2) COMPANY NAME</b>		
CONTACT	Telephone ( )	Fax ( )
<b>CURRENT PETROLEUM SUPPLIER</b>		
	Telephone ( )	Fax ( )

**CUSTOMER AGREEMENT ~ TO BE COMPLETED BY ALL APPLICANTS**

The undersigned hereby makes this application for credit, by doing so acknowledges/grees that Creditor may utilize outside credit reporting services to obtain information on the undersigned. The signing of this agreement shall constitute authorization to the Creditor to utilize consumer credit information to appropriately evaluate the extension of business or personal credit. Payment will be due in full within 15 days of the statement date, unless otherwise noted on the invoice. I agree to pay a finance charge of 1.5% per month (18% per year) on any delinquent balances, any reasonable attorney fees, court costs, and/or collection fees incurred in the collection of unpaid accounts. All legal actions will be held in Franklin or Benton Counties. All information furnished will be held strictly confidential. **There will be a \$35.00 fee for all returned checks.**

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Print Name \_\_\_\_\_  
 (MUST BE SIGNED BY PRINCIPAL, OWNER OR PERSON AUTHORIZED TO REPRESENT ACCOUNT)

**Business Owner Information: (Please print)**

Name: \_\_\_\_\_ Spouse's Name \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_ DOB: \_\_\_\_\_ SocSec#: \_\_\_\_\_

*I authorize CO-Energy to run a personal credit check on myself. I personally guarantee all charges incurred on this account.*

Owners Signature \_\_\_\_\_ Print Name \_\_\_\_\_  
 Spouse's Signature \_\_\_\_\_ Print Name \_\_\_\_\_

**Pacific Pride Customers only:**

Have you ever had a Pacific Pride card before?    YES    NO

If yes, with what company? \_\_\_\_\_

When was the card(s) last used? \_\_\_\_\_

OFFICE USE ONLY	
SCHED _____	V DISC _____
SALE CODE _____	BILL CODE _____

<input type="checkbox"/> <b>GENERAL PACIFIC PRIDE CARD (ACCESSES ALL NETWORK SITES)</b> <input type="checkbox"/> <b>PORT OF KENNEWICK</b> <input type="checkbox"/> <b>RICHLAND YACHT CLUB</b> <small>(MUST BE A MEMBER)</small> <input type="checkbox"/> <b>CLOVER ISLAND YACHT CLUB</b> <small>(MUST BE A MEMBER)</small> <p><b><u>THE 3 OPTIONS ABOVE CAN ALSO ACCESS "ALL" NETWORK SITES, PLEASE CHECK IF YOU WANT THIS CAPABILITY</u></b> <input type="checkbox"/></p> <p>The following card choices will only access the site specified. If you wish to access any other site, you will also need a General Card above.</p> <p style="text-align: center;"><input type="checkbox"/> <b>PROSSER AIRPORT</b></p>
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**ALL CARDS HAVE ACCESS TO CAR WASHES, BATHROOMS AND OIL VENDING MACHINES IN ADDITION TO THE FUEL TYPE SPECIFIED BELOW:**

- \* ALL PRODUCT "WITHOUT" OFF ROAD = GAS & ON ROAD (CLEAR) DIESEL
- \* ALL PRODUCT "WITH" OFF ROAD = GAS & BOTH DIESELS (CLEAR & DYED)
- \* DIESEL ONLY = ON ROAD DIESEL (CLEAR)
- \* GAS ONLY = ALL GAS (87 AND 91) (89 ALSO AVAILABLE IN SUNNYSIDE, WA ONLY)

FOR GENERAL CARDS, PLEASE LIST IN THE SPACE PROVIDED THE LABEL YOU WOULD LIKE ISSUED TO EACH CARD, PREFERRED PIN NUMBER, AND CHECK THE BOX FOR THE TYPE OF PRODUCT THAT YOU WOULD LIKE EACH CARD TO ACCESS.

CARD LABEL <small>(WILL PRINT ON INVOICES FOR EASIER ID) (i.e. truck number, driver name)</small>	Pin# <b>Preferred</b> <small>Leave blank for computer pick</small>	ALL	ALL	ON-ROAD	*OFF-ROAD	GAS
		PRODUCTS <small>W/OUT OFF-ROAD</small>	PRODUCTS <small>*WITH OFF-ROAD</small>	DIESEL <small>ONLY</small>	DIESEL <small>ONLY</small>	ONLY

\* OFF ROAD DIESEL AVAILABLE AT DAVENPORT, ELTOPIA, LIND, OROVILLE, RITZVILLE, WASHTUCNA & SUNNYSIDE

**\*\* Phoenix system cards are for bulk fueling cards only ~ Not Pacific Pride, PacPride are noted above.**  
**Phoenix system requests:** Number of cards requested \_\_\_\_\_ (PIN number will be assigned)