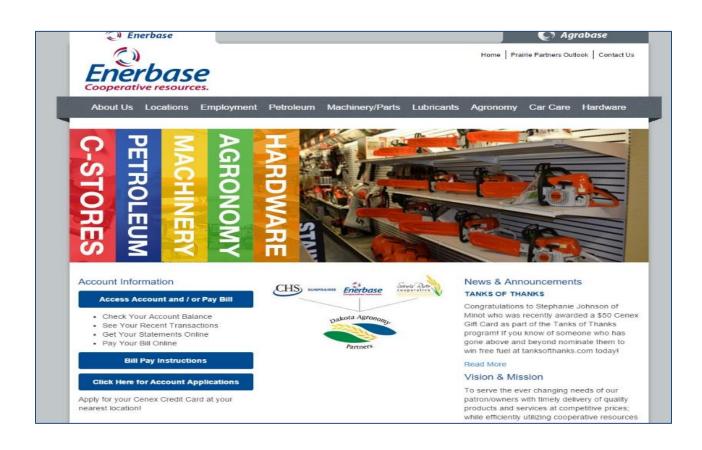
ENERBASE ACCOUNT APPLICATION-CONSUMER						
APPLICANT INFORMATION						
Name:						
Date of birth:		SSN:	Phone:			
Current address:						
City:		State:	ZIP Code:			
Previous address:						
City:		State:	ZIP Code:			
Statements emailed: YES or	NO					
Email Address:						
	EM	PLOYMENT INFORMATION				
Current employer:						
Employer address:			How long?			
Phone:	E-mail:		Fax:			
City:		State:	ZIP Code:			
Position:		Hourly or Salary (please circle)	Annual income:			
CO-APPLI	CANT I	NFORMATION, IF FOR A JOII	NT ACCOUNT			
Name:						
Date of birth:		SSN:	Phone:			
Current address:						
City:		State:	ZIP Code:			
Previous address:						
City:		State:	ZIP Code:			
	EM	PLOYMENT INFORMATION				
Current employer:						
Employer address:			How long?			
Phone:	E-mail:	l a	Fax:			
City:		State:	ZIP Code:			
Position:		Hourly or Salary (please circle)	Annual income:			
of Minot is authorized to c answer questions about m signed by an authorized p	check out ny/our cr arty. Th	oplication is correct to the best t my/our credit history now an redit experience with their com e signature implies agreement of finance charges that may acc	d in the future and to pany. This application is with the credit policy of			
APPLICATION INFORMATION						
I authorize Enerbase to verify the information provided on this form as to my credit and employment history.						
Signature of applicant Date						
Signature of co-applicant, if for joint account Date						



ONLINE BILL PAY!

Pay your bill online at www.enerbase.coop

Full instructions for online bill pay are listed at www.enerbase.coop under Bill Pay Instructions.





CREDIT POLICY

- Before anyone is allowed to charge, they must complete a credit application and meet our credit policy requirements.
 Patron/Dividend accounts are not charge accounts.
- > Open account patrons will be billed monthly and statements will be mailed on or before the fourth day of the month following. All open accounts will be due and payable in full on the 25th day of the month following the month of purchase.
- If payment is not received by the 25th, the account will be put on COD. Credit on all products and services will be discontinued immediately.
- > Open accounts that are continuously delinquent and past due 90 days will be put on a cash basis indefinitely!!
- The company will not be held responsible for regular scheduled deliveries (keep full) if the patron's account is past due.
- ➤ All past due accounts must be paid before the next delivery will be made.
- Minimum deliveries for bulk LP, gas, and fuel are 200 gallons. There will be an additional fee if the delivery is less than 200 gallons.
- Cash customers must pay for deliveries in full before the delivery is made.
- Fuel assistance Cash customers must have their percentage paid in full before delivery will be made.
- A finance charge of 1.5% per month, or an annual percentage rate of 18% will be charged on any amount over 30 days old.
- > Management will determine the dollar amount of credit given to any individual or company.
- Management reserves the right to refuse or limit credit privileges to anyone, at any time, based on ability to pay, financial condition & previous experience, as we see fit.
- > Suppliers' liens will be filed on accounts over 90 days or as needed. (to be determined by credit manager)

NOTICE TO COMPANIES THAT PAY BY INVOICE: Enerbase makes every reasonable effort to obtain information you require on your tickets, (bulk deliveries) including signatures, PO numbers, etc. However, it is the **primary responsibility** of the business seeking credit to insist that their employees provide all information at the time of the sale.

SIGNATURE:		

DEAR PATRON:

To comply with federal laws in reporting 1099 patronage dividends, we must also report the social security number or federal identification number of all patrons receiving dividends. If this is not reported, the internal revenue service will now assess your cooperative a \$50 penalty for each patron not having a social security number or a federal identification number. To comply with federal law and to avoid a \$50 penalty, we need the following information on file.

INDIVIDUAL CONSENT & SUBSTITUTE W-9

I hereby consent to include in my gross income, as how or hereafter provided in the federal income tax laws, the stated dollar amount of each written notice of allocation which I receive from Enerbase with respect to my patronage occurring during the current and all subsequent taxable years of this cooperative. This individual consent shall be revocable by me at any time if in writing.

CHECK THIS BOX IF YOU H	AVE BEEN NOTI	FIED BY IRS THA	AT YOU ARE SUE	BJECT TO BACKUP WIT	HOLDING ()
() PRODUCER –	· HAVE A RISK	(IN AGRICUI	.TURE		
() NON-PRODU	CER				
NAME AS SHOWN ON YO	LID INICOME TAY	DETLIDNI	:	SSN:	-
		A NE I UNIV	F	ED ID NUMBER	
BUSINESS NAME, IF DIFFE	RENT FROM ABO	OVE			
CHECK APPROPRIATE LINI	E:INDIVIE	DUALC	ORPORATION	PARTNERSHIP	LIMITED LIABILITY COMPANY
				PHONE	
MAILING ADDRESS					
			F-MAII AI	DDRESS	
CITY	STATE	ZIP CODE	2 1717 1127 11		
DOB:/					
Under the penalties of pe	rjury, I certify th	at the informa	tion provided or	n this form is true, cor	rect, and complete.
SIGNATURE		PRINT	NAME		TITLE
DATE			_		

Thank you very much for your application. To better serve you please indicate how you are planning to use your new Enerbase charge account:

1.	What are you planning on charging?	Circle all that	apply		
	Bulk Products (Oil, Fuel, Propane)	C-Store Purch	ases	Hard	ware/Parts
2.	Are you a producer – Farmer or Ranch	er?	YES	or	NO
3.	Are you planning on charging at our C Stores?		YES	or	NO
4.	How much of credit limit are you requ	esting?	\$		
5.	. How many charge cards will you need?				
	(Remember you will not be able to ch	arge at the C-St	ores wit	hout or	ne)
	Ada	<u>litional In</u>	<u>form</u>	<u>atio</u>	<u>ı</u> :
1.	The Enerbase card is NOT a contract the month billed. Finance ch				ent balance is due by the 25 th of or all amounts past due.
2.	We CANNOT restrict your cha what they are allowed to cha	_	You m	ust sį	peak with your family about
3.	We WILL NOT give receipt co	-		-	bility of the person making the
4.		r can obtain	a copy	, from	print at the pump. If the pump inside. We cannot provide a to sign a receipt.
5.	The cards are numbered. Macase one card needs to be ca		eep tr	ack o	f who has which card number in
6.	If a card is LOST OR STOLEN aware. We will need to know make sure all cards are acco	w the numbe			all charges until we are made d to shut it down so please
7.	If you do not receive a state We do not know if your mail	-			e office if charges were made. ered.
Filled	out by:				Dated:



Cardholder Agreement

This a	greement is made	and entered into on		, by and between
Enerb	ase Cooperative F	esources, Minot, North D	akota, hereafter referred t	o as
"Coop	erative" and		, account number s "Patron."	
		_, hereafter referred to as	s "Patron."	
1.	Patron understand cardholders.	ls that Cooperative facilities	shall be for private use by de	signated
2.		ost or stolen, Patron must n y charges or expenditures th	otify Cooperative. Until this in at may occur.	s done, Patron is
3.			structed as to proper use of the ons so designated by such ma	•
4.	instructed as to pr	·	g equipment to persons who by Cooperative's manager or	
5.	operated and to a	ccept responsibility for cont ense Class 1 liquids into con	ipment unattended at any tim rolling all sources of ignition. tainers not in compliance witl	Patron further
6.	policy of this Coop off date, which is t will results in auto account. In addition due amounts over	erative is payment in full wi he last day of each month. matic invalidation of your op on, our present credit policy 30 days old, applies to all ac	IT POLICY OF THE COOPERATI thin twenty-five (25) days of the Failure to comply with payme perating account and immedity, which includes an annual fire eccounts. Patron also understate ecchanged without notice by O	the statement cutent of your account ate COD of your annce charge on past ands that the price
7.	Patron understand constitute authori agreement and the	Is and agrees that any violat ty for the Cooperative to im- e use of Cooperative facilitie	ion of the terms of this agree mediately, and without notice es. Patron also may terminate we with payment in full for all	ment shall e, terminate this e this agreement at
8.	There will be no ex	ceptions to this agreement.		
 Credit	Annroval	Patron Signature	 Date	



Identification Card Order Form

Name/Company:
Current Enerbase Customer Number (located at the top left side of statement)
Number of Cards Needed:
Signature:
If you have any questions, feel free to call our Main Office at 701-852-2501
The Enerbase ID Card will look like this:

