



P.O. Box 3127
74 Plain St.
Brockton, MA 02304
508-587-2139

www.CampelloKeith.com

Gas Station Credit Application

Name of Business: _____

Tax ID # _____

Contact Person: _____

Address: _____

City _____ State _____ Zip Code _____

Telephone _____ Extension _____

Vehicles:

Make	Year	Type	Plate #	Fuel Type

Authorized Signatures:

Printed Name/Signature _____

Printed Name/Signature _____

Printed Name/Signature _____

Printed Name/Signature _____

Credit References:

1 _____

2 _____

3 _____

Terms: Due in full on the 15th of the following month

I, the undersigned, personally guarantee payments due on this account as stated above.

Printed Name/Signature _____ Date _____

Managers Approval: _____