



# Customer Setup Package

Lincoln Oil Co., Inc.  
22 South Main Street  
Greenville, SC 29601  
[www.lincolnergysolutions.com](http://www.lincolnergysolutions.com)



22 South Main Street, Greenville, SC 29601  
Email: [credit@lincolnergysolutions.com](mailto:credit@lincolnergysolutions.com)  
Phone: (864) 242-3003 Fax: (864) 242-9445

## CUSTOMER SETUP PACKAGE

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Thank you for choosing to partner with Lincoln Oil. Our goal is to make the set up for a new customer a smooth and easy transition. In this packet, you will find useful information about Lincoln as well as information we will require from you. To efficiently set up new customers, please complete the requested forms and return to the following email address: [credit@lincolnergysolutions.com](mailto:credit@lincolnergysolutions.com).

### REQUESTED FORMS AND INFORMATION

- Credit Application
- Credit Agreement
- Financial Information
  - W-9
  - 2 years financial statements
  - Latest year-to-date financial statements
- Payment Authorization Form
- State Tax Licenses

OFFICE USE ONLY		
Date Customer Entered:	Employee Initial:	Vendor Code:



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## CREDIT AGREEMENT

### AUTHORIZATION

The Applicant acknowledges and agrees to the need for verification of all information on this application. Applicant hereby authorizes all banks, businesses, and persons identified on this application to disclose and furnish (both in writing and verbally), all information requested by Lincoln Oil Co., Inc., ("Lincoln Oil") by telephone, fax, or written correspondence and hereby releases, waives and disclaims all claims against Lincoln Oil and all such banks, businesses, and persons arising out of such disclosures. Buyer further authorizes Lincoln Oil to obtain a full and complete credit history.

### CREDIT APPLICATION TERMS AND CONDITIONS

In consideration of the offer to extend credit, and for other good and valuable consideration received, or to be received by the Applicant, by the signature of its authorized representative set forth below, hereby agrees to the terms and conditions set forth in this document. **DO NOT SIGN UNLESS YOU HAVE READ AND AGREED TO THE PROVISIONS OF THE CREDIT AGREEMENT SET FORTH BELOW.**

#### DEFAULT

It is understood and agreed that all invoices for purchases under this Credit Agreement shall be paid in full by 10 days after the invoice date, unless otherwise specified per sales contract. In the event Applicant is delinquent in payment, finance charges may be applied. If any collection efforts are implemented, or litigation is initiated to enforce the terms of this Agreement, Applicant hereby agrees to pay all costs of collection, including any attorney fees which may be incurred by Lincoln Oil in its collection efforts or in the enforcement of the terms and conditions set forth on this Agreement. Any returned checks, drafts, ACH payments and/or wire transfers will be charged back to the Applicant along with a \$35.00 handling fee.

#### PROHIBITION AGAINST DISCRIMINATION

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants based on sex or marital status, or any other discriminating basis. The federal agency that administers compliance with this law concerning Lincoln Oil is the Federal Trade Commission, 225 Peachtree Street, Suite 1500, NE, Atlanta, Georgia, 30303. Lincoln Oil has the right to deny credit to any applicant and retains the right to close any account initiated by this agreement whenever it deems necessary. In such instances, Lincoln Oil will give a statement of its reason for such action as required by federal law. Applicant acknowledges that such credit, if granted, shall not be used for consumer purchases, but rather for business, agricultural or commercial purposes, only.

### AUTHORIZATION AND SIGNATURE

The undersigned certifies that the information contained herein is true, complete and correct. This information is being furnished with the understanding that it is being used to determine the amount and conditions of credit to be extended to the Applicant. The undersigned certifies that he/she is authorized to sign the Application and Credit Agreement for and on behalf of such party.

\_\_\_\_\_  
Printed Name and Title of Authorized Representative

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

*Questions regarding this application, please contact your sales manager or Debbie Northcutt, Credit Manager.  
Please return this agreement to [credit@lincolnergysolutions.com](mailto:credit@lincolnergysolutions.com).*



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(Please complete all fields, items left blank will delay processing)

### CREDIT APPLICATION

#### BUSINESS CONTACT INFORMATION

Company Name:			
DBA (if different than above)			
Mailing Address:		State:	ZIP Code:
Physical Address:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Date Business Commenced:		Federal I.D.#:	DTN#:
<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		Other:	

#### BILLING INFORMATION

Contact Name:					
Email Address:			Phone:		Fax:
<u>Contact Name</u>		<u>Email</u>		<u>Receipt Preference</u>	
			Fax	Email	DTN
Draft Notice	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pricing	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Credit	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RINS	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### SUPPLIER REFERENCES

Company Name:		Contact Name:			
Mailing Address:		State:	ZIP Code:		
Phone:	Fax:	E-mail:			
Company Name:		Contact Name:			
Mailing Address:		State:	ZIP Code:		
Phone:	Fax:	E-mail:			

#### BANK REFERENCE

Bank Name:		Contact Name:			
Mailing Address:		State:	ZIP Code:		
Phone:	Fax:	E-mail:			

#### AGREEMENT

I/We the undersigned certify that the information contained herein is true and correct and is supplied to **LINCOLN OIL CO., INC ("LINCOLN OIL")** or the purpose of granting credit to the applicant. I/We authorize **LINCOLN OIL** to verify our credit background(s) and further authorize our credit references to release information directly to **LINCOLN OIL**. Applicant agrees to the following terms: a) Net amount due 5 days after invoice date, unless otherwise specified per sales contract, remittance detail is emailed for reconciliation purposes; b) Finance charges may be applied on any balance due after due date; c) Applicant agrees to pay all costs of collection including collection agency fees, costs and attorney's fees; d) Applicant will advise **LINCOLN OIL** of any change of address or ownership of the Applicant.

\_\_\_\_\_  
 Printed Name and Title of Authorized Representative

\_\_\_\_\_  
 Signature of Authorized Representative

\_\_\_\_\_  
 Date

Please return this application to: [credit@lincolnergysolutions.com](mailto:credit@lincolnergysolutions.com)



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### PAYMENT AUTHORIZATION FORM

I hereby authorize Lincoln Oil Co., Inc. ("Lincoln Oil") to initiate a credit/debit entry to my checking/savings account at the financial institution indicated below, and initiate adjustments, if necessary, for any transactions debited/credited in error. This authorization will remain in effect until Lincoln Oil is notified in writing to cancel it in such time to afford Lincoln Oil and the financial institution a reasonable opportunity to act on it.

\_\_\_\_\_  
VENDOR NAME VENDOR #

\_\_\_\_\_  
NAME OF FINANCIAL INSTITUTION LOCATION (CITY, STATE)

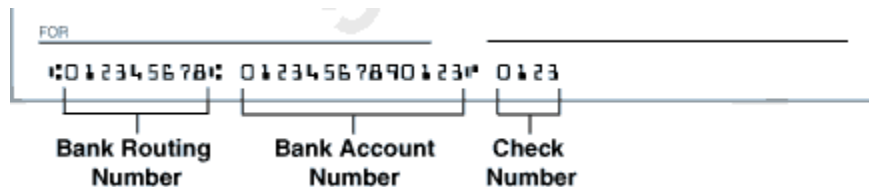
ACCOUNT TYPE: \_\_\_\_\_ ZBA \_\_\_\_\_ CHECKING \_\_\_\_\_ SAVINGS \_\_\_\_\_ OTHER

ROUTING/TRANSIT NUMBER

□ □ □ □ □ □ □ □ □

ACCOUNT NUMBER

□ □ □ □ □ □ □ □ □ □ □ □ □ □



\_\_\_\_\_  
REMITTANCE EMAIL

\_\_\_\_\_  
NAME (PLEASE PRINT) SIGNATURE DATE

*After submitting this form, please email a copy of either a voided check or bank letter to [credit@lincolnergysolutions.com](mailto:credit@lincolnergysolutions.com)*



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## **CONTACT INFORMATION**

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Please send all remittances, invoices and/or accounting questions to one of the following email addresses listed below:

Remittance Email

[remittances@lincolnergysolutions.com](mailto:remittances@lincolnergysolutions.com)

Invoice Email Address

[invoices@lincolnergysolutions.com](mailto:invoices@lincolnergysolutions.com)

Accounting

[accounting@lincolnergysolutions.com](mailto:accounting@lincolnergysolutions.com)

### **ACCOUNTING TEAM**

Ray Greer, Controller

[rgreer@lincolnergysolutions.com](mailto:rgreer@lincolnergysolutions.com)

Phone: (864) 382-2103

Jamie White, Treasury Accountant

[jamie.white@lincolnergysolutions.com](mailto:jamie.white@lincolnergysolutions.com)

Phone: (864) 382-2109

Danyela Shaw, Billing Specialist

[dshaw@lincolnergysolutions.com](mailto:dshaw@lincolnergysolutions.com)

Phone: (864) 382-2120

Amy Smith, Accounts Payable Specialist

[amy.smith@lincolnergysolutions.com](mailto:amy.smith@lincolnergysolutions.com)

Phone: (864) 382-2106

Amy Webb, Accounts Payable & Accounts Receivables Specialist

[awebb@lincolnergysolutions.com](mailto:awebb@lincolnergysolutions.com)

Phone: (864) 302-9524