

Application for Credit

Dergquist	DATE:
Company Name:	Type of Business – Check All That Apply
Bill To Address:	Propane Dealer
	Bulk
City	Number of Bobtails
STZIPCty	Cylinder Delivery
Ship To:	Cylinder Exchange
	Dispenser Dealer
City	Showroom
STZIPCty	Propane Plant Builder
	Propane Transport
Phone//	Propane Truck Builder
Fax//	New
Email	Repair
Invoice by: Mail Fax Email	Electric Utility
Residential address? YN	Fuel Oil Distributor
	Hearth or Grill Shop
In business how long?	Manufacturer
	Natural Gas Utility
() Corporation () Sole Proprietorship	Rental Store
() Partnership	
	Other
President	
Bank Reference	Taxable Yes No
Contact	
	*We are required by law to have a copy of your
	Sales Tax Exempt Certificate on file. Please
Trade References: Name, Address, Phone & Fax 1.	forward with this application.
	Signature
2	Title
	The undersigned hereby agrees to abide by our normal
	terms which are net 30 days from invoice date. A service
3	charge of 1 ½% per month will be added on all past due
	invoices (an effective rate of 18% per annum). Orders may
	be delayed if there are past due invoices.

Return by email, fax or mail to:

Email AR@bergquistinc.com Fax 567-290-2799|Bergquist, Inc. Attn: Hope, 1100 King Rd., Toledo OH 43617



OH 800-537-7518 | KY 800-448-9504 | IN 800-662-3252 | MO 800-821-3878 | MN 800-328-6291 Your questions answered by the people who know propane equipment.