



Credit Application

Innofuel Salesperson _____

Innofuel Plant _____

Mail To: Innofuel Energy Solutions, LLC, 11 Stanwix Street, 21st Floor, Pittsburgh, PA 15222 or Fax to 412-995-5515 Attn: Credit Dept

Company Legal Name (Attach W9): _____ Phone: _____

DBA Name: _____

Physical Address: _____ D & B Number: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____ Fax: _____ Cell: _____

Form of Business: _____ Corporation _____ Partnership _____ Proprietorship Fed Id# _____

If not a public company and no rating is available from one of the credit rating companies, most recent audited financials are required.

Bill to address if different from above: _____

Accounts Payable Contact _____ Phone No _____

Branch of a Corporation, HQ Location _____

Subsidiary / Division of a Corporation, Parent Name _____

Sales Tax Exempt [] No [] Yes **If Yes, attach copy of sales tax exemption or direct pay certificate with this application.**

Name and Title of Owners or Officers: _____

1 _____ 2 _____

Credit References

TRADE: (1) Name _____ Fax # _____

Address _____

E-Mail Address _____

City _____ State _____ Zip _____

Phone _____ Person to Contact _____

(2) Name _____ Fax # _____

Address _____

E-Mail Address _____

City _____ State _____ Zip _____

Phone _____ Person to Contact _____

(3) Name _____ Fax # _____

Address _____

E-Mail Address _____

City _____ State _____ Zip _____

Phone _____ Person to Contact _____

BANK: Name _____ Account # _____

Address _____ Fax # _____

City _____ State _____ Zip _____

Phone _____ Person to Contact _____

The above information is offered as a basis for the extension of credit. We hereby authorize you to contact our trade and bank references for credit information, as may be required by your firm. This information is confidential and for the use of Innofuel Energy Solutions, LLC and its affiliates. I / We the Applicant, agree to pay within the terms printed on invoices issued for goods and or services of Innofuel Energy Solutions, LLC and its affiliates. If I/We the Applicant fails to pay according to said terms and Innofuel Energy Solutions, LLC incurs any collection costs to secure payment, I/We the Applicant agree to pay any and all collection costs. Additionally, should litigation to recover payment of unpaid invoices be necessary, the Applicant agrees and acknowledges that suit shall be filed in the Court of Common Pleas of County of Allegheny, and that Innofuel Energy Solutions, LLC may recover all costs of suit, including reasonable attorneys' fees. Failure to remit payment within terms could result in orders being placed on hold as well as a late payment charge of 1.5% percent per month on the unpaid past due balance.

By signing this application the Applicant is accepting the above conditions as a basis for granting credit.

Authorized Company Signor

Print Name _____ Title _____ Date _____

Signature _____ Phone: _____ Credit Requested \$ _____

(Open account balance)

Please Remember to attach W9, State Tax Forms and Licenses