

**INFORMATION SHEET**  
**FOR GIRARD BULK SERVICE ACCOUNT**

COMPANY

**APPLICANT:** \_\_\_\_\_

**NATURE OF BUSINESS:** \_\_\_\_\_

**RECOMMENDED PRICE GROUP:** \_\_\_\_\_

**RELATED ACCOUNTS:** \_\_\_\_\_

**NOTES:**

**MANAGER'S SIGNATURE:** \_\_\_\_\_

COMPANY



**WHOLESALE MARKETER ACCOUNT APPLICATION**

**ESTEVAN**

(306)637-4370

Fax: 634-5905

**OXBOW**

(306)483-2826

Fax: 483-2484

**CARLYLE**

(306)453-2262

Fax: 453-2302

**ALIDA**

(306)443-2466

Fax: 443-2354

**REDVERS**

(306)452-3216

Fax: 452-3767

**Other Locations: Lampman – Carnduff – Kipling – Stoughton - Storthoaks (Keylock)**

**\*\*AN INCOMPLETE APPLICATION MAY CAUSE A DELAY IN PROCESSING YOUR APPLICATION \*\***

**OPERATING NAME:** \_\_\_\_\_

**NATURE OF BUSINESS:** \_\_\_\_\_ **# of years in business** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **PROV:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**PHONE: BUSINESS (\_\_\_\_) \_\_\_\_\_ HOME (\_\_\_\_) \_\_\_\_\_ CELL (\_\_\_\_) \_\_\_\_\_**

**FAX:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ACCOUNTS PAYABLE CONTACT NAME:** \_\_\_\_\_

**IF CORPORATION OR PARTNERSHIP:**

**PERSONAL GUARANTEE IS REQUIRED ON ALL CORPORATIONS AND PARTNERSHIPS (COPY ATTACHED)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**PROVIDE THREE SUPPLIER REFERENCES:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

# PAYMENT METHODS:

## **1) Pre Authorized Debit (PAD):**

Paying your bill at Girard Bulk Service using PAD saves you time, money and gives you peace of mind that your bill is being paid on time. Many of you may be using this option now to pay for services like utilities, etc. If you are interested in signing up for PAD payments, please contact our Accounts Receivable Administrator at 306-637-4707 and we will further explain the process and provide necessary bank forms.

## **2) Online Payments:**

We accept payment from all major banks as a bill payment option as well. If you are interested, please contact our Accounts Receivable Administrator at 306-637-4707.

We encourage you to consider these fast, easy and secure electronic methods of paying your account at Girard Bulk Service Ltd. We believe you will see the immediate benefits of using either of these methods and we will ensure that we are here to help you set up such payments and answer your questions.

## **3) Cheque or Cash:**

Any payments received after the 25<sup>th</sup> of the month will be charged with a 2% late payment fee

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## **NOTE:**

All invoices and statements will be automatically emailed. If you require copies of signed invoices please notify our office and they will be emailed as they are produced.

It is mandatory that Cardlock customers be set up to receive cardlock invoices by email

\* Email address: \_\_\_\_\_

## **ESTIMATED MONTHLY PURCHASES:**

UNLEADED: \_\_\_\_\_ L

CLEAR DIESEL: \_\_\_\_\_ L

DYED DIESEL: \_\_\_\_\_ L

OTHER (IE LUBES, PROPANE, TWINE, ETC): \$ \_\_\_\_\_/MONTH

## **CREDIT AMOUNT REQUESTED:**

\_\_\_\_\_ \$

**TERMS OF CREDIT**

- 1) **PAYMENTS ON ACCOUNT ARE DUE IN FULL BY THE 25<sup>TH</sup> OF THE MONTH FOLLOWING THE STATEMENT**
- 2) A LATE PAYMENT FEE IS CHARGED ON ALL OVERDUE ACCOUNTS AT THE RATE OF 2 % PER MONTH (26.82 % PER ANNUM)
- 3) GIRARD BULK SERVICE LTD. RESERVES THE RIGHT TO USE DISCRETION TO LIMIT OR WITHDRAW CREDIT AT ANY TIME.
- 4) CUSTOMER IS RESPONSIBLE/LIABLE FOR ANY AND ALL PURCHASES MADE UNDER THIS CARD/ACCOUNT
- 5) ALL CHEQUES RETURNED NSF WILL BE CHARGED A \$25.00 SERVICE CHARGE
- 6) I PERSONALLY GUARANTEE THAT SAID BUSINESS ABOVE WILL BE RESPONSIBLE FOR ALL AND/OR ANY CHARGES MADE THROUGH THIS AGREEMENT
- 7) ALL INFORMATION ON THIS FORM WILL BE KEPT STRICTLY IN THE CONFIDENCE OF GIRARD BULK SERVICE LTD. TO BE USED SOLELY FOR THE PURPOSE OF OBTAINING CREDIT INFORMATION
- 8) IF GIRARD BULK SERVICE SHOULD HAVE TO INITIATE A COLLECTION PROCESS AGAINST THE CUSTOMER, A COLLECTION FEE OF 10% OF BALANCE OR A MINIMUM OF \$250.00, WILL BE ADDED TO THE OUTSTANDING BALANCE OF THE CUSTOMER ACCOUNT AT THE TIME

I, THE UNDERSIGNED, AGREE TO PAY ALL BILLS UPON RECEIPT OF STATEMENT, TO COMPLY WITH ALL THE CREDIT TERMS AND CONDITIONS AS STATED ON THIS APPLICATION, AND CONSENT TO YOUR OBTAINING FROM AND EXCHANGING WITH ANY CREDIT REPORTING AGENCIES, FINANCIAL INSTITUTIONS, GOVERNMENT AGENCIES OR OTHER PERSONS ANY INFORMATION AS YOU MAY REQUIRE IN CONNECTION WITH ANY CREDIT BEING CONSIDERED OR HEREAFTER GRANTED. I FURTHER AGREE THAT IF GIRARD BULK SERVICE HAS TO TAKE LEGAL ACTION OR INITIATE COLLECTIONS, A COLLECTION FEE WILL BE CHARGED TO MY ACCOUNT OF UP TO 10% OF OUTSTANDING BALANCE WITH A MINIMUM CHARGE OF \$250.00 FAILURE TO COMPLY WITH THE CREDIT TERMS WILL RESULT IN YOUR CREDIT BEING REVOKED. IF YOU HAVE ANY QUESTIONS OR WOULD LIKE TO CHANGE ANY ACCOUNT INFORMATION, PLEASE CONTACT THE OFFICE AT 306-637-4370. TO EXTEND YOUR CREDIT, YOU WILL HAVE TO MAKE A REQUEST AND YOUR CREDIT INFORMATION MAY BE REVIEWED.

**APPLICANTS SIGNATURE** \_\_\_\_\_ **DATED** \_\_\_\_\_

**\*\*Signature Must Be From Signing Authority\*\***

**FOR OFFICE USE ONLY**

ACCOUNT # _____	PRICE BLANKET _____
CREDIT LIMIT \$ _____	
CARD # _____	DATE ORDERED _____
_____	
_____	AUTHORIZED BY _____

# Application

## Petro-Canada <sup>TM</sup> SuperPass <sup>TM</sup> Cards provided by Girard Bulk Service Ltd

Please complete highlighted areas

**Please tell us about your business...**

<b>Company name / Registered business name</b>					How <input type="text"/> years <input type="text"/> months	
Suite / Unit no.	Street address	City	Province	Postal code		
Subsidiary of	Doing business as	Business telephone number ( ) ( )	Cellular telephone number ( ) ( )	Fax number ( ) ( )		
Type of business	Legal status <input type="checkbox"/> Corporation <input type="checkbox"/> Individual proprietorship (owner operator) <input type="checkbox"/> Partnership					
<b>Owner(s) / Partners(s) Name and Residential Address</b>				<b>Social Insurance Number <i>optional</i></b>		
Occupation <i>Owner operator / individuals only</i>				Employer name <i>Owner operator / individuals only</i>		

**Please give us some references...**

Bank / Trust company / Credit union name and branch address	Account number
Other Suncor/Petro-Canada account names	Account number
<b>Current fuel supplier</b>	Account number
	Financial statement available <input type="checkbox"/> yes <input type="checkbox"/> no

**Credit References / Suppliers *Please attach separate list if required***

Name	Address	Telephone Number	Account Number

**Please tell us about your fleet...**

Estimated monthly fuel purchases at Petro-Canada service stations in Canada \$	Estimated monthly fuel purchases at Petro-Cardlock in Canada \$		Coloured fuel required <input type="checkbox"/> Yes <input type="checkbox"/> no
Number of vehicles	Type of vehicles <input type="checkbox"/> cars / light trucks <input type="checkbox"/> medium duty trucks <input type="checkbox"/> heavy duty trucks		Cards used by brokers <input type="checkbox"/> yes <input type="checkbox"/> no
Fleet / Operations Manager name		Accounts Payable contact name	

**Please sign below...**

The undersigned request(s) a Super Pass Card(s) and renewal(s) or replacements thereof from time to time. Use of the Super Pass Card(s) will constitute acceptance of the Agreement which will accompany the card(s) when issued. The undersigned hereby certifies this information to be true and complete. **The undersigned consent(s) to Girard Bulk Service Ltd obtaining from, exchanging with or disclosing to other credit grantors and recognized credit bureaus any and all information concerning the undersigned for the purposes of ensuring the accuracy of this information, conducting ongoing credit investigations, monitoring credit status and entering into and performing the Agreement.** The undersigned is authorized to make this application.

<b>Applicant name <i>Please PRINT</i></b>	Applicant position / Title	E-mail address
<b>Applicant signature</b> <b>X</b>	<b>Date</b>	Language preference <input type="checkbox"/> English <input type="checkbox"/> French

Petro-Canada is a Suncor Energy business

<sup>TM</sup> Trademark of Suncor Energy Inc. Used under licence.

**Please complete both sides and fax both sides to: 306-634-5905**

## Business Account and Card Customization

### Petro-Canada <sup>TM</sup> SuperPass <sup>TM</sup> Cards provided by Girard Bulk Service Ltd

Please complete the following in full to tailor your SuperPass account and cards to your specific needs.  
Call 306-637-4370 if you have any questions or special requirements.

Company name/Registered business name

**Please choose your card options...**

<input type="checkbox"/> Driver assigned card	Number of cards	<input type="checkbox"/> Vehicle assigned card	Number of cards	Note: For added security, all
<small>ask driver name on card</small>	<input type="text"/>	<small>card to have to collect</small>	<input type="text"/>	

**Please complete below the information to be embossed on the second and third lines of your cards. Please attach a separate list if more than 4 cards are required. Note: maximum 21 characters per line. This information will be used for assigning the PIN.**

Card no.	Embossing Line 2 (e.g. Company Name / Driver Name)	Embossing Line 3 (e.g. Driver Name / Vehicle Number)
001		
002		
003		
004		

**Please complete the following if you qualify for tax exempt coloured fuel<sup>†</sup> Available at Petro-Pass<sup>™</sup> Cardlock only.**

<input type="checkbox"/> Saskatchewan <i>Please provide a</i>	TEFU / AFB number	<input type="checkbox"/> Alberta	<input type="checkbox"/> British Columbia <i>Please provide a copy of</i>
<input type="checkbox"/> Ontario <i>We will contact you.</i>		<input type="checkbox"/> Manitoba <i>We will contact you.</i>	

**Please choose your additional card and service options (only if wanted)**

- Record odometer reading at time of purchase
- Record other information at time of purchase (e.g. unit number) Available at Petro-Pass sites only.
- Yes! Please call me to customize my cards for location and product access:**

reverse <sup>†</sup>Contact your provincial taxation office to confirm. <sup>™</sup>Trademark of Suncor Energy Inc. Used under license

**Please complete both sides and fax both sides to: 306-634-5905**

**How many cards?** \_\_\_\_\_

**Do you want just gas, just diesel, or gas & diesel, dyed diesel?** \_\_\_\_\_

**(If you are a farmer and have PFT# you can only get dyed in SK, so if you want a card with dyed you have to order a separate card, if you want all your cards with dyed they will be restricted to SASKATCHEWAN only)**

**Do you want certain pins? \_\_\_ If yes please list the pins you want below!**

**Do you want them mailed out or picked up?** \_\_\_\_\_

**Phone # to call to pick them up:** \_\_\_\_\_

# Guarantee for Indebtedness of an Incorporated Company Or Unincorporated Partnership

**To Girard Bulk Service Ltd.:**

In consideration of Girard Bulk Service Ltd. dealing with

\_\_\_\_\_, (hereinafter the Customer), the undersigned

hereby guarantee(s) payment to Girard Bulk Service Ltd. of all present and future debts and liabilities owing to Girard Bulk Service Ltd. from or by the Customer or by any successor corporation of the Customer.

It is agreed that no change in the name, objects, capital stock or constitution of the Customer, shall in any way affect the inability of the undersigned. If the Customer shall amalgamate with one or more other corporations, this guarantee shall continue and apply to all debts and liabilities owing to Girard Bulk Service Ltd. by the corporation continuing from the amalgamation.

It is further agreed that this shall be a continuing guarantee, and shall cover and secure any ultimate balance owing to Girard Bulk Service Ltd., including all costs, charges and expenses which occur from the Customer.

This contract shall be construed in accordance with the laws of the Province of Saskatchewan and the Courts of Saskatchewan shall have jurisdiction over all disputes which may arise under this contract. All debts and liabilities present and future of the Customer to the undersigned are hereby postponed to the debts and liabilities of the Customer to Girard Bulk Service Ltd. and all moneys received by any of the undersigned, or their assigns thereon, shall be received as Trustees for Girard Bulk Service Ltd. and be paid to Girard Bulk Service Ltd.

The undersigned acknowledge(s) that this Guarantee has been delivered free of any conditions and shall remain in full force and effect until all debts and obligations hereby secured have been paid and released.

**As witness, the hands of the undersigned at \_\_\_\_\_, Saskatchewan**

**this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.**

**Witness** \_\_\_\_\_

**Guarantor** \_\_\_\_\_

Printed \_\_\_\_\_

Printed \_\_\_\_\_

**Witness** \_\_\_\_\_

**Guarantor** \_\_\_\_\_

Printed \_\_\_\_\_

Printed \_\_\_\_\_

**CUSTOMER AUTHORIZATION**  
**TO RELEASE CREDIT INFORMATION**  
**To GIRARD BULK SERVICE LTD.**

The customer permits Girard Bulk Service Ltd. to receive information on his/her behalf for the purpose of credit reference only.

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(Please print or Type)

I, \_\_\_\_\_,

Name

\_\_\_\_\_

Title (if applicable)

Of \_\_\_\_\_, at \_\_\_\_\_,

Business Name (if applicable)

Contact Telephone Number

And having the mailing address,

\_\_\_\_\_

Mailing Address

City

Province

Postal Code

Do hereby authorize, GIRARD BULK SERVICE LTD., to request and receive account information for the purpose of credit reference only.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**GIRARD BULK SERVICE LTD**  
**PETRO-PASS CARDLOCK**

**ESTEVAN**

(306)637-4370  
Fax: 634-5905

**OXBOW**

(306)483-2826  
Fax: 483-2484

**CARLYLE**

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**ALIDA**

(306)443-2466  
Fax: 443-2354

**REDVERS**

(306)452-3216  
Fax: 452-3767

**Other Locations: Lampman – Carnduff – Kipling – Stoughton - Storthoaks (Keylock)**

This notice is to advise you that, as a Girard Bulk Service Ltd. cardholder, in order to use Petro-Canada's Petro Pass/cardlock/keylock facilities, you must train all your card/key users (i.e. your employees or representatives that will be using the facilities for product purchases) on the safe usage of dispensing fuel.

**The following outlines safe operating and emergency procedures.**

\*\*\*\*\*

**Notice to Farmers**

**Pursuant to The Fuel Tax Act, 2000 and the accompanying Regulations, this cardlock or keylock facility is not to be used to pump tax exempt gasoline directly into the tank of a motor vehicle.**

\*\*\*\*\*

**Dispensing Operations**

- Turn Off All Ignition Sources
- Driver Should Familiarize Themselves Of The Location Of The Emergency Shut Down Button
- Driver Shall Remain In Attendance During Fueling. **Do Not Leave The Pump Nozzle Unattended.**
- Do Not Block Or Jam Nozzles Open.
- In The Event Of Fire or Mishap Activate Emergency Shutdown.
- Filling Of Non-Approved Containers Prohibited.

**In The Event Of A Spill, The Customer Is Responsible For The Costs Associated With Cleanup**

**Petro-Pass Operating Instructions**

*Ensure the pump you chose is available*

- Insert card in appropriate card slot and remove in one smooth motion. You will hear a beep that indicates a valid reading of the card.
- Follow Instruction As Displayed On The Screen.
- Press Enter After Each Instruction.

**Emergency Procedures**

- There are signs posted at the PetroPass / Cardlock facilities which provide 24 hour telephone numbers to be used in emergencies including fires, product leaks or spills and personal injuries.
- Stop product flow/press emergency shut-off switch.
- In The Event Of A Fire, Get Away From Area.
- Do not start or move your vehicle.
- Report spill by calling the emergency number posted.
- Use absorbent material to contain spill.
- **DO NOT TAKE PERSONAL RISKS**

**If you have any questions, problems, or would like to report a lost or stolen card, call Girard Bulk Service Ltd at one of the above locations. Public phones are available at or near all locations. To report problems, malfunctions or spills, call the emergency number posted at the location.**

**I have read and I understand the safe operating and emergency procedures.**

**Name: \_\_\_\_\_ Date: \_\_\_\_\_**