

New Shipper Credit Application

Company Legal Name: _____

Billing Address:

Street: _____
City: _____ State and Zip _____

Physical Address: same as Billing Address? (Insert checkmark)

Street: _____
City: _____ State and Zip _____

Account Payable Contact

Name: _____ Phone: _____
E-mail: _____

Business and Service Summary

Type of Business: _____
Federal ID#: _____ Parent Company Name: _____
Product or Service: _____ Work Location(s): _____
Credit Limited Requested: _____

Principal Officer(s)

Name	Title
_____	_____
_____	_____
_____	_____

Please include the following supplemental information:

- ◆ A list of trade & bank references, including phone & fax numbers.
- ◆ A recent financial statement & operating statement, preferably fiscal year end with complete notes. If fiscal financial is over six (6) months old, an interim financial statement is required. After review, Andeavor might require personal financial statements and guarantees from one or more principals or stockholders or other additional security.
- ◆ Copies of tax exemption certificates that would exempt federal or local taxes. Please note: all taxes will be imposed on products unless certificates are received and in good order.

Submitted by: _____

Date: _____

Send to: Andeavor Logistics
19100 Ridgewood
Parkway San Antonio,
TX 78259
Attn: Brandon Cruthirds, Credit
Manager Tel: 210-626-6401
Fax: 210-745-4483
Brandon.Cruthirds@andeavor.com