

IP&E Holdings, LLC (dba IP&E Guam)

Ste. 100 643 Chalan San Antonio

Applicant Information

Name:					
Trade Name (if any):					
Type of Business:			Years of Operation:		No. of Employees:
Business Location Addr	ess:				
Business Mailing Addre	ess:				
Telephone Number:			Fax Number:		
Email Address:					
Partnership []			Corporation []	Sole Proprietor []
		F	Principal Officers		
	Nama			Pocition	
Name			Position		
	Bu	siness Credit Refe	erences: (Local Bus	iness Pref	erable)
Supplier's Name			Telephone & Fax Numbers		
			(t)		(f)
			(t)		(f)
			(t)		(f)
Current Fuel Supplier:					
Approximate credit limit required: \$ (P		\$ (Per	month)		
Estimated monthly fue	l purch	ases (gallons):			
Gasoline Diesel		Lubes		Other	
					ITHLY PURCHASES ARE NESS LICENSE WITH

APPLICATION.



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Bank Reference(s)

Name of Bank	Type of Account	Acco	Account Number	
		Checking [] Savings []		
		Checking []		
		Savings [] Checking []		
		Savings []		
thorization to Release Information				
The undersigned authorized the above cr IP&E Guam, in connection with his application copy or facsimile of this form shall be dee	ation for credit with IP&E Guan	and its applicable	e companies.	
pplicant:	Date:			
ompany	Title			
inted Name	Signature			
e company officers prepared to sign personal guarantee	es if deemed necessary?	Yes	No	
nder penalties of perjury, the undersigned declares that	the statements herein are true and corr	ect to the best of my/or	ur knowledge.	
uthorized Representative(s)	Signature	Date		
int Name and Title				
	N ALL THE ABOVE INFORMATION PRI			

For Office Use Only

Received by:	Date:				
Reference:					
Notes / Comments:					