

100 Washington St North
 Auburn, ME 04210
 800-377-9433
 www.maineoxy.com



Individual Account Application

Please choose an account type:

- Charge: Credit Limit Desired \$ _____
- Cash on Delivery (COD)
- Credit Card

Billing Information	Shipping Information (If Different)
Name	Name
Address	Address (No PO Boxes)
City, State & Zip Code	City, State & Zip Code
Billing Phone	Shipping Phone

SSN:	Method of Invoicing:
Driver's License Information:	<input type="checkbox"/> Email
License #: _____	<input type="checkbox"/> Mail
State: _____	<input type="checkbox"/> Fax
Exp Date: _____	E-mail Address:
DOB: _____	_____

TERMS: 30 DAYS FROM THE DATE OF INVOICE. SERVICE CHARGES OF 1.5% PER MONTH WILL BE CHARGED ON OVERDUE ACCOUNTS

I agree to pay according to the above terms and to be liable for all service charges (currently at the rate of 1.5% PER MONTH, 18% PER ANNUM) on any amount still outstanding beyond the end of the month following the purchase. Customer agrees that TITLE TO CYLINDERS WILL REMAIN SOLELY WITH MAINE OXY ACETYLENE SUPPLY COMPANY. Also, it is agreed that any collection or legal fees which are incurred by MAINE OXY in the collection of this account will be the responsibility of the undersigned.

This agreement constitutes a security interest in the equipment which are the subject of thereof. Lessee grants a security in, and a general lien upon the equipment and proceeds thereof. The lessee agrees to cooperate with the Lessor and expressly permits Lessor to execute and file financing statements and take such other actions as shall be required to perfect the Lessor's security interest in the Equipment in accordance with this Agreement.

The signature below guarantees that the above information is true and further authorization to obtain information necessary to complete this account application.

Date

Authorized Signature

Printed Name

X _____

Credit Department Use Only

Account #: _____ **Branch:** _____ **Salesperson:** _____ **Territory:** _____ **Initials:** _____

Credit Limit (if applicable): _____ **Payment Terms:** _____