

New Customer Set-up and Credit Form

Please fill out all sections below and return to your Stratum representative or send to accountsreceivable.us@stratumreservoir.com. All information included in this form will be kept confidential.

General Company Information

Company Name:

D-U-N-S#:

Parent Company Name:

Year Company Started:

Address:

P.O. Box:

City:

State/Province/Region:

Postal/Zip:

State/Country Incorporated:

Add'l Address Type (Billing, Delivery, etc.):

State/Province/Region:

Additional Address:

State/Country Incorporated:

City:

Postal/Zip:

Main Line Phone:

Website:

Credit Limit Requested:

Billing Requirements

Customer requires proforma signature prior to invoice submittal
Purchase order required

Third party billing system used? If yes, enter system name:

If Open Invoice, please supply:

Customer site:

Customer department:

*If 3rd party system used, please submit complete instructions for opening AN account with this application

Email for invoice submittal, if applicable:

Invoice currency required?:

AP contact name:

AP contact phone #:

Custom billing requirements (i.e. include AFE#, PO#, or Routing ID on invoice):

Tax Requirements

*If yes, submit exemption certificate with application.

State/Country Incorporated? (Yes, No):

Tax ID# or SS#:

*Please attach a copy of your W-9 with this application.

Stratum Reservoir

New Customer Set-up, cont.



Financials

For the most recent quarter/year, please provide:

	Most Recent Quarter	Most Recent Year
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Revenue:	
Gross Margin:	
Net Income:	
Total Assets:	

Please provide, Total Current Liabilities for: 2018:

2019:	
Current YTD:	

Trade References

Please provide at least 3 Trade References below:

Business Name:	Contact Name:	
	Contact Phone #:	Contact Email:
Business Name:	Contact Name:	
	Contact Phone #:	Contact Email:
Business Name:	Contact Name:	
	Contact Phone #:	Contact Email:
Business Name:	Contact Name:	
	Contact Phone #:	Contact Email:

Bank References

Please provide at 1 Bank Reference below:

Bank Name:	Contact Name:	
	Contact Phone #:	Contact Email:

Authorization

Customer authorizes Stratum Reservoir Intermediate, LLC, its subsidiaries and/or affiliates ("Stratum Reservoir") to contact trade and bank reference(s) listed above. Additionally, Customer authorizes bank listed above to release checking/saving/loan account information to Stratum Reservoir. All information released to Stratum Reservoir will be held in the strictest of confidence and used solely in the adjudication of credit terms for purchases made through Stratum Reservoir.

Customer Representative Signature:

Title: _____ Date: _____

To digitally sign this form, double click the "signature" field above and enter digital signature. When complete, email document to your Stratum contact or accountsreceivable.us@stratumreservoir.com. If you prefer to manually sign, please print, sign, scan, and email the form.