



HOLLYFRONTIER
CORPORATION
CREDIT APPLICATION

Company Name			
Physical Address			
Mailing Address			
Phone #	()	Fax #	()

Principals & Contacts:

Majority Shareholder		Chief Financial Officer	
Name		Name	
Email		Email	
Phone #	()	Phone #	()

Credit Contact		Accounts Payable Contact	
Name		Name	
Email		Email	
Phone #	()	Phone #	()

Type of Business:		D-U-N-S® Number:	
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Limited Liability Co.
<input type="checkbox"/> Branded	<input type="checkbox"/> Unbranded	<input type="checkbox"/> Wholesale	<input type="checkbox"/> End-User

DOE / EIA Classification:

<input type="checkbox"/> C - Excl 782C	<input type="checkbox"/> E - Excl Refiners	<input type="checkbox"/> F - Farmers/Utilities	<input type="checkbox"/> I - Industry
<input type="checkbox"/> R - Railroad	<input type="checkbox"/> T - Transportation/Commercial/Institutional	<input type="checkbox"/> U - End User	<input type="checkbox"/> W - Wholesale

Financial Statements are required for open credit consideration.

- For all non-publicly traded companies, please submit the last 2 years of audited financial statements.
- Financial statements will be requested a minimum of once per year to perform ongoing credit reviews.

All information provided will remain confidential and is for the purpose of obtaining credit with HollyFrontier Refining & Marketing LLC, its successors or assignees (HollyFrontier). Applicant agrees to reimburse HollyFrontier for all return check charges, attorney's fees, court costs, and other charges if this account should be placed for collection. All invoices not paid within terms are subject to accrued interest on all past due balances at the rate of 18% per year (1.5% per month) or maximum allowed by state law. HollyFrontier reserves the right to furnish payment experiences to credit reporting agencies such as Experian and Dun & Bradstreet. Failure to provide tax exempt certificates will result in taxes being assessed.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____

REV. 7/11