

Welcome to Reeder Distributors Inc.

Thank You for your decision to join the Reeder Distributors Inc. family. We are a 2nd generation owned and operated company, in Ft Worth Texas for over **48 years**. Our staff is dedicated to Honesty, Integrity, and Customer Service. We have the ability and the experience to handle your account in a professional manner.

Enclosed is a fillable credit application, ACH form, a vehicle list, and a drivers list. Our program is set up on Weekly Billing- Net 7 Days. Most customers pay by ACH.

The cards can be customized to your specific needs. We make every attempt to get your cards processed correctly and timely. Please allow 10 to 14 Days for delivery.

** Note: Production is currently on Covid 19 protocols—please be patient. **

If you have any questions or need any help, please call me at (817) 456-4423, or call Debi Harpole at (817) 429-5957. Please scan all of the forms, and then EMail back to **jimb@rdinc.us.** I will get your order started promptly.

Thanks again and Welcome Aboard. I appreciate your business and will do whatever it takes to keep your trust. Let me know if I can help in any way,

Sincerely,

Jim Boone



Remit to: P.O. Box 225264 Dallas, TX 75222-5264 Correspondence: P.O. Box 8237 Fort Worth, TX 76124 Ship To: 5450 Wilbarger Fort Worth, TX 76119

Phone 817.429.5957 • Toll 800.722.3103 • Fax 817.429.9052 Visit our website at: www.reederdistributors.com

Credit Application

Business Information				Sa	ales Rep
Legal Company Name			State	e Taxpayer ID (9 digi	t) Federal ID (11 digit)
Billing Address			City	State Zi	p County
Physical Address			City	State Zi	p County
Office Phone	Fax		Website		DUNS#
Accounts Payable Contact		Phone	Ema	il	
Purchasing Agent		Phone	Ema	iil	
Credit Limit Requested	Years in Business	☐ Corporation	☐ LLC ☐ Partnersh	iip 🗌 Sole Pro	pprietorship
		☐ PO Required	☐ Job Name Required	☐ Sales Tax E	xempt Dyed Diesel User
Type of Business	Industry (SIC Code)			(Attach Exemp	t Cert) (Attach Signed Statement/Bond)
Owner(s) or Partners (A	Attach additional shee	t if necessary)			
Name		Title	Social Security N	Number	% Ownership
Name		Title	Social Security N	Number	% Ownership
Bank Reference					
Bank Name		Contact Name	Phone	Fax	Email
Address		City	State Zip	A	ccount # (Required to obtain reference)
Credit References – NO	CREDIT CARD OR FUE	L CARD REFERENCES			
Company Name		Contact Name	Phone	Fax	Email
Address		City	State	Zip	
Company Name		Contact Name	Phone	Fax	Email
Address		City	State	Zip	
Company Name		Contact Name	Phone	Fax	Email
Address		City	State	Zip	



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Type of A	Account R	equest	t ed			
		□ В	ulk Fuel	☐ Cardlock/Fleet Cards	☐ Service and/or Equipme	nt
Credit Te	erms and	Agreen	nent			
			-	int, the undersigned, hereafter referred to as RDI, unless ot	_	to the following terms in all credit transactions authorized company officers.
	purchase may be a RDI rese Custome consume All debts this agree deliveries prior to a The unda agrees to institute Custome later than other informant account This agree con execution and agree and account the agree and account the agree con execution account the agree con execution and account the agree con execution and account the agree con execution and account the agree con execution account the agree c	reporter rves the reporter rves the reporter or hos and or ementers. Applies where the posterior the jud. The reporter reporter is a such where so the jud. The reporter reporter is a such where so the jud. The reporter report	Net 7 days fed to indust e right, at its esents, warr ousehold put ther obligat written notice dicant's or gritten notice of further again month; a hurisdiction a es to review alendar days ion reflected bove informative in related to nercial or co DI to such a t is determine	from date of invoice. RDI does not try trade group associations if the sole discretion and without not trans and acknowledges that creations of any kind, regardless of creatification must be served on and uarantor's obligations under this elementary. The sole of the sol	ot extend pay when paid terms and/or established credit lice, to change credit limits or or dit extended by Reeder will be feedit limit requested or extended received by RDI should applicate agreement shall remain in full feeturned check an all collections of in Tarrant County, Texas should provided by Reeder in either ele nd/or statement of any errors of the change of 1 authorize the reference RDI to secure information regalle organization and authorize the native execution by RDI at its hones.	ther credit terms at any time. for business purposed and not for personal, d, are subject to the terms and conditions of ant or guarantor wish to limit product force and effect for all indebtedness incurred 1.8% annual rate) on all balances over 30 days at costs and legal fees incurred. Customer further ld any action on applicants account be octronic or printed form, and to notify RDI not or disputes with respect to transactions and d the transaction therein shall be binding on rences listed on this application to release to arding applicant's or guarantor's credit history in release of information regarding applicant's
PRINT N	ame & Titl	le		Signature		Date
said app this guar	licant for granty. Gua	goods s	sold and del	ivered on or after this date. The is under this guaranty are indepe	Credit Terms and Agreement al endent of the applicant.	It when due of all charges for the account of bove is hereby incorporated and made part of
PRINT N	ame			Signature		Date
Guaranto	or's Home	Addre	!SS	City	State	Zip



P.O. Box 8237, Fort Worth, Texas 76124 Phone: 817.429.5957 Fax: 817.429.9052 www.reederdistributors.com

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS (ACH DEBITS)

COMPANY NAME
COMPANY FEDERAL ID NUMBER
We hereby authorize Reeder Distributors, Inc. to initiate debit entries to our Checking Account indicated Below and the depository (bank) named below to debit the same to such account.
Bank Name
Bank Address
Bank ABA Number Account Number
This authority is to remain in full force and effect until Reeder Distributors, Inc. has received written notification from us of its termination in such time and in such manner as to afford Reeder Distributors, Inc. a reasonable opportunity to act on it. After the account has been charged, we have the right to have the amount of an erroneous debit credited back to my account by Reeder Distributors, Inc., provided we send written notice of such debit entry in error to Reeder Distributors, Inc.
NAME
SIGNED
DATE

^{**}Please print and hand sign document**

VEHICLE CARDS LIST

** Fillable-Enter your information below the headings **





4

Company Name Contact Name Date

Vehicle ID # Numbers Only	Unit#	Vehicle Description Year, Make, and Model (17 Character limit)	Dept.	Fuel Types Allowed	Total Tank Size	Fueling Trans. Per Day	Daily Gallon Limit	Weekly Gallon Limit	D.E.F \$ Weekly	Oil Per Week\$	Other Per Wk\$	Off Road Use Y or N
Example	Of	How To Fill Out The Form	Dept.	Fuels	Tank	D	D	D	D	\$	\$	Y-N
26743	PU-403	2010 Ford F-250 X	Service	Diesel	35	3	105	735	12	20	0	N
54091	Gen-408	Generator 5943 XL	Maint.	Unlead	15	3	60	315	N/A	5	15	Y
												NO
												NO
												NO
												NO
												NO
												NO
												NO
												NO
												NO
												NO
												NO
												NO

^{**} Please Note** **D=Denial** You will be denied any transactions past this number

Driver List

** Fillable-Enter your information below the headings **





Company Name Contact Name Date

No.	Last Name, First Name	Driver ID (pin #)	No.	Last Name, First Name	Driver ID (pin #)
1			13		
2			14		
3			15		
4			16		
5			17		
6			18		
7			19		
8			20		
9			21		
10			22		
11			23		
12			24		