



Municipal Application
P.O. Box 1 • 640 W. Montana
Kalispell, MT 59903-0001
(406) 755-4321 • Fax (406) 756-8591
E-Mail: accounting@cityservicevalcon.com

Office Use Only
Representative: _____
Site Location: _____
Account #: _____

Municipality Information				
Name of Municipality				Federal ID #
Billing Address	City	State	Zip	County
Contact Name	Contact Telephone Number ()	Alternative Number ()	Contact E-Mail Address	
Billing Contact Name	Billing Telephone Number ()	Fax Number ()	Billing E-Mail Address	
Delivery Address (If different from Billing)	City	State	Zip	County
Type of Municipal Entity <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> School Dist <input type="checkbox"/> Other: _____			Type of Authority <input type="checkbox"/> Commissioners <input type="checkbox"/> Mgmt. Board <input type="checkbox"/> Other: _____	
Product of Interest				
Do you or have you had an account with CityServiceValcon? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Account Number: _____				
Which products do you wish to purchase?				
<input type="checkbox"/> Aviation (Select) <input type="checkbox"/> Jet Estimated Monthly Gallons: _____ <input type="checkbox"/> 100LL Estimated Monthly Gallons: _____				
<input type="checkbox"/> Fuel Cards Estimated Monthly Gallons: _____ *EFT Authorization Form required when applying for fuel cards.				
<input type="checkbox"/> Heating Oil Tank Sizes: _____				
<input type="checkbox"/> Lubricants				
<input type="checkbox"/> Propane <input type="checkbox"/> Own Tank <input type="checkbox"/> Rent Tank Tank Sizes: _____				
<input type="checkbox"/> Wholesale Fuels <input type="checkbox"/> Check this box if greater than 4000 Gallons				

Credit Terms and Credit Agreement

Payment Terms. Payment terms are as stated on invoices. These payment terms are subject to modification by CityServiceValcon upon written notice to the undersigned. The municipal entity agrees to pay upon receipt of invoice those amounts invoiced to applicant by CityServiceValcon. A finance charge at the rate of 1.5% per month (18% per annum), or the maximum amount allowable under Montana law, whichever is lesser, on all past due amounts will be assessed. The municipal entity further agrees to pay handling charges for all returned payments. Payment shall be due at the Kalispell office unless directed otherwise by an authorized CityServiceValcon representative. Any billing dispute must be made and submitted in writing to the Kalispell office within 30 days of the date of invoice.

Authorized Statement of Fact. I represent and warrant the above information to be true, correct and complete and I further represent and warrant that I am executing this document on behalf of such entity and have full authority to bind such entity to these credit terms.

Verification of Relationship. I agree to provide CityServiceValcon a copy of the meeting minutes granting authorization to enter into a business relationship with CityServiceValcon. Failure to provide such authorization may result in the immediate revocation of credit.

Governing Law. It is agreed that all attorney's fees and other collection costs incurred in connection with the collection of any amounts due shall be paid by the entity bound by this application. Venue of any legal action to collect any amounts due shall be Flathead County, Montana, unless otherwise specified in any contract.

The municipal entity agrees to and shall adhere to CityServiceValcon's credit policy. The municipal entity consents to receive faxes, telephone calls, and/or emails from or on behalf of CityServiceValcon. The municipal entity has received and signed CityServiceValcon's Credit Terms and Credit Agreement. CityServiceValcon reserves the right, in its sole discretion, to eliminate or reduce the amount of credit extended by CityServiceValcon to the undersigned at any time in the future.

Authorized Signature

Please print name and title

Date

Authorized Signature (If applicable)

Please print name and title

Date