



Credit Application

Return to: Adelphia Gateway, LLC
1415 Wyckoff Rd.
Wall, NJ 07719
Fax no. (848) 206-8400
Email: AdelphiaMarketing@AdelphiaGateway.com

Instructions: Complete the form and attach your most recent copies of the following items (as applicable), Annual Report, Audited Financials, Form 10K, and Form 10Q

Shipper/Company ("Applicant") Information

Name: _____
(legal name of business entity)

D-U-N-S: _____

Address: _____

Credit Contact #1

Name: _____

Title: _____

Phone: _____

Email: _____

Fax: _____

Credit Contact #2

Name: _____

Title: _____

Phone: _____

Email: _____

Fax: _____

CREDIT INFORMATION (continued)

Accounts Payable Contact

Name: _____

Title: _____

Phone: _____

Email: _____

Fax: _____

Marketing Contact

Name: _____

Title: _____

Phone: _____

Email: _____

Fax: _____

Business Entity Information

Type of Entity (i.e., corporation, LLC, etc.) _____

Jurisdiction of formation (i.e., state or province) _____

Fiscal Year End _____ D&B No: _____

Description of Business Activity: _____

Parent Company

Name: _____

Address: _____

D&B No: _____ If necessary, will parent guarantee payment? Yes No

CREDIT INFORMATION (continued)

Trade References:

1. Company: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Fax: _____

2. Company: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Fax: _____

3. Company: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Fax: _____

Bank References:

Name: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Fax: _____

CREDIT INFORMATION (continued)

1. We hereby authorize Adelpia Gateway, LLC to obtain or exchange any information that may be required relative to this Application from any source, including Applicant's financial institutions, trade suppliers, and credit information databases. Applicant authorizes each source to provide such information.

2. The undersigned Applicant certifies that the information supplied on this Credit Application is accurate and correct as of the date appearing below.

By: _____
Authorized Signature for Applicant

Name: _____

Title: _____

Date: _____