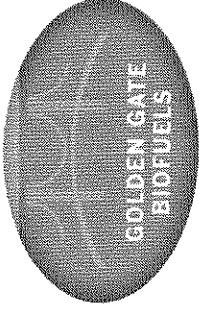


GOLDEN GATE
PETROLEUM

Golden Gate Petroleum

501 Shell Avenue Martinez, CA 94553
Tel: 925-228-2222 Fax: 925-957-9587



GOLDEN GATE
BIOFUELS

Confidential Golden B.U.G. Credit Application

- Type of Application: Consumer Application Complete Section 1, 2 & 3
 Commercial Application Complete Section 3, 4, & 5

Golden BUG Applicant Full Name _____ () _____ ()
 Home or Business Telephone _____ Fax _____

Street _____ City/State _____ Zip _____

Email Address: _____ Cell Phone: _____

SECTION 1: Consumer Accounts Payment Method

A: PRE-PAYMENT:

Amount to be Loaded on the Card: \$ _____ Date Initial Payment Made _____

Payment Made by () CASH () Check # _____ () Credit Card (complete Below Application) () Other _____

***Future Pre-Payments must be mailed to our credit department at the above address. Verbal Credit Card Authorizations must be called in to the Credit Manger.

B: CREDIT CARD ON FILE AUTHORIZATION:

I, _____ (NAME), hereby authorize Bay Area Diablo Petroleum DBA Golden Gate Petroleum, to charge my credit card account in the amount not to exceed: \$ _____

() VISA () MasterCard () American Express () Other _____

Credit Card Number: _____

Expiration Date: _____ / _____ VID Code: _____

Credit Card Billing Address: _____

Street: _____

City: _____ State: _____

Zip Code: _____ Telephone: () _____ - _____

As the credit card holder, I hereby authorize Golden Gate Petroleum to charge my card on the 1st and 15th of every month for all fuel purchases made using my Golden B.U.G Membership Card. As the credit card holder, I also authorize Golden Gate Petroleum to charge my credit card for future purchases verbally approved by me. Authorization valid () indefinitely for Credit Card on File Customers () One time Verbal Authorization for Pre-Payment Customers. I will notify Golden Gate Petroleum in writing if I wish to make any changes in this authorization. Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. GGP will keep all information entered on this form strictly confidential

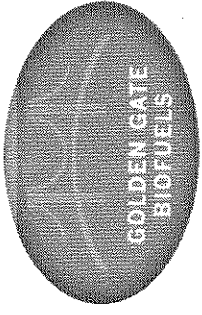
Cardholder's Signature _____

Date _____



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**GOLDEN GATE
BIOFUELS**

SECTION 2: Bank References

Bank Name: _____ Address: _____
 Phone: (_____) _____ Street _____ City, State _____ Zip _____
 Account Type: _____
 Savings Account Number _____ Checking Account Number _____

Have you Ever filed for Bankruptcy: NO YES, If So: Year Chapter:

SECTION 3:

A. Golden Gate Petroleum Consumer and Commercial Acknowledgment

In consideration of extending credit for the purchase of products, equipment, and/or services for my business or personal use, I agree to the following terms and conditions related to these purchases:

1. Our terms are payment in full within 15 days of delivery
2. Invoices not paid within 30 days from date of delivery will be subject to a finance charge of 1.5% per month (annual rate of 18%.) Each returned check will be subject to a \$25.00 handling charge. In the event any invoice is not paid when due, the person or company to whom the product, equipment, and or services were furnished agrees to pay all cost of collection including attorney fees. If suit is brought, the customer agrees that the venue will be at the choice of GOLDEN GATE PETROLEUM.
3. It is the responsibility of the customer to provide resale, exemption or other documents, that affect the taxation of purchases. If such are not in the possession of GOLDEN GATE PETROLEUM at the time of sale, the customer is liable for any taxes charged on the sale, regardless of future submission of tax documents.
4. The person or business applying for credit may be required to grant to GOLDEN GATE PETROLEUM security interest in the following collateral (including proceeds thereof) to secure payment of any obligations: all accounts, accounts receivable, and other rights to payment, all equipment, and all inventory, including without limitation all petroleum products, as more specifically stated in the financing statement. The undersigned agree to execute the financing statement and any other documents required for GOLDEN GATE PETROLEUM.

Primary _____ Secondary _____

Social Security _____ Date: _____ Social Security _____ Date: _____

B. Personal Guarantee

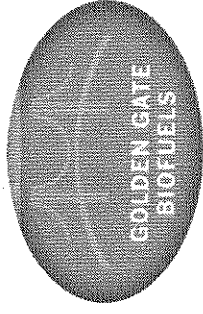
WE, THE UNDERSIGNED, in consideration of the sales of fuel and related products on open account by GOLDEN GATE PETROLEUM to _____, in which we are stockholders/owners, hereby guarantee personally and unconditionally the payment when due of any account of said sales and acknowledge that credit would not be available except with this guaranty.

Primary _____ personally Secondary _____ personally



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SECTION 4: Commercial Application Fill Out Below Sections

Type of Business/Organization:

- Limited Partnership General Partnership Sole Partnership Corporation (State: _____ Year: _____)
 Limited Liability Corporation (State: _____ Year: _____)

Contractor License No. _____ CAL P.U.C. No. _____
 Dunn & Bradstreet No. _____

Principal Business Activity: _____ Date Est. _____

Do You: Rent Own Bldg. Lease (Agent: _____) Phone: (____) _____

Name of Principals: _____ Phone: (____) _____

Street _____ City/State _____ Zip _____

Social Security No. _____ Date of Birth: _____

Name of Principals: _____ Phone: (____) _____

Street _____ City/State _____ Zip _____

Social Security No. _____ Date of Birth: _____

SECTION 5: Commercial Established Credit - Preferably Petroleum Suppliers
(Open Accounts/NOT CREDIT CARDS)

1. Name of Firm: _____ Telephone (____) _____ Fax: (____) _____

Address: _____ Street _____ City/State _____ Zip _____

Account No. _____ Contact Person in Credit Department: _____

2. Name of Firm: _____ Telephone (____) _____ Fax: (____) _____

Address: _____ Street _____ City/State _____ Zip _____

Account No. _____ Contact Person in Credit Department _____

3. Name of Firm: _____ Telephone (____) _____ Fax: (____) _____

Address: _____ Street _____ City/State _____ Zip _____

Account No. _____