

## **AUTHORIZATION AGREEMENT FOR ELECTRONIC DEPOSITS**

PO Box 19246 Springfield, IL 62794-9246 Email: Tessa@BiPetro.com Fax: (217) 391-8006

Contact Us: (217) 391-8006

Bi-Petro Assigned Owner Number(s)	
Social Security No*/Federal Tax ID*	*Last four digits only.
Owner Name(s)	
-or-	
Business Name/Trust/Estate, etc.	
Address	
City, State & Zip	
Telephone Number(s)	
Email Address(es)*	
	*Payment detail will be sent via email and not mailed through the Post Office.
Bank Name	
Bank Routing Number*	
For checking accounts, please include a voided check.	*The routing number is exactly nine digits and is the first set of numbers at the bottom of the check. It always begins with 0, 1, 2, or 3. Please verify with bank.
Bank Account Number	
Type of Account (Check One Only)	Checking O Savings O
deposit entries shall pertain to payments by	lectronic deposit entries to my account at the financial institution named above. Such Bi-Petro, Inc. to the undersigned in conjunction with purchases of crude oil. This tify Bi-Petro, Inc., in writing, of any changes, allowing Bi-Petro, Inc. 30 days to act on
Signature	Date
Signature	Date

Visit Our Website: www.bipetro.com