

FRONTIER OIL CO  
PO BOX 188  
S CHINA, ME 04358  
445-4617 OR 1-800-773-2409

AUTHORIZATION AGREEMENT FOR  
PRE-AUTHORIZED PAYMENTS (DEBITS)

I/We hereby authorize O'Brien Oil dba/Frontier Oil Co to initiate debit entries to My/Our

Debit/Credit Card  Checking/Savings account indicated below and to debit the same  
to such account.

**Debit/Credit Card Withdrawal**

My Debit/Credit Card is a: \_\_\_\_\_ Visa \_\_\_\_\_ Master Card \_\_\_\_\_ Discover Card

Credit Card # \_\_\_\_\_ Exp date \_\_\_\_\_ CVV2# \_\_\_\_\_ (3 Digit code)

Street # credit/debit card statement is mailed to : \_\_\_\_\_ Statement Zip Code: \_\_\_\_\_

**Checking/Savings Account EFT**

DEPOSITORY/BANK NAME: \_\_\_\_\_

ROUTING # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

Specific Amount \$ \_\_\_\_\_ or Not to Exceed \$ \_\_\_\_\_

Frequency  Daily  Weekly  Monthly  On Delivery - Will Call/Automatic

This authorization will remain in full force and effect until O'Brien Oil dba/Frontier Oil Co has received written notification from Me/or either of Us of its termination in such time and in such manner as to afford O'Brien Oil dba Frontier Oil Co and Border Trust Co a reasonable opportunity to act on it.

Name \_\_\_\_\_ Account # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Account # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**If checked: \_\_\_\_\_ Please attach a voided check.**

Mail/fax completed authorization form and sample "Voided check" to:

Frontier Oil Co, PO Box 188, S China, ME 04358 or fax to: (207) 445-3010

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**FOR COMPANY USE ONLY**

DATE RECEIVED \_\_\_\_\_ Processed by \_\_\_\_\_

FOLLOW UP ACTION REQUIRED: