



AUTHORIZATION FOR USE OF UPS ACCOUNT

Please fill out the information below and return to Oils by Nature, Inc.

Company: _____
Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Phone Number: _____

UPS Account #: _____

Conditions of Use:

- By signing this agreement I/we are giving Oils by Nature, Inc. permission to use this UPS account for all shipping required by me or my company.
- By signing this agreement I/we are confirming that this UPS account is current and valid.
- By signing this agreement I/we are confirming that we will inform Oils by Nature, Inc. within 30 days if this account should become null, void or closed.
- By signing this agreement I/we confirming that we shall be responsible for any outstanding charges left by a null, void or closed UPS account. These charges will be paid by a credit card immediately upon notice.
- The agreement will be in effect until cancelled by either party in writing.

By: _____
Title: _____
Date: _____

Accepted by Oils by Nature, Inc. on: _____