



1201 Oakfield Drive
P.O. Box 1110
Brandon, FL 33509-1110
(813) 681-4279 • Fax: (813) 685-8631
www.AutomatedPetroleum.com

Automated Petroleum & Energy Co., Inc.

DEALER APPLICATION

DATE _____

STATION INTERESTED IN _____ STATION # _____

ADDRESS _____

NAME _____
FIRST LAST

SPOUSE _____
FIRST LAST

SOCIAL SECURITY # _____ (SPOUSE S/S #) _____

DATE OF BIRTH _____ (SPOUSE DATE OF BIRTH) _____

HOME ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE # _____ MOBIL PHONE # _____

E-MAIL ADDRESS _____

SINCE YOU'VE EXPRESSED AN INTEREST IN BECOMING AN APEC SERVICE STATION DEALER, AND THERE IS A POSSIBILITY OF OUR WORKING TOGETHER, WE ARE ANXIOUS TO GET TO KNOW YOU AS WELL AS WE CAN. THE INFORMATION REQUESTED ON THE FOLLOWING PAGES WILL HELP US LEARN ABOUT YOU AND HELP US DETERMINE YOUR LIKELIHOOD OF SUCCESS AS AN APEC DEALER. EACH OF THE QUESTIONS PERTAINS TO AN IMPORTANT FACTOR OF SUCCESS IN THE OPERATION OF A SERVICE STATION. PLEASE ANSWER THEM ALL. NATURALLY, THE INFORMATION WILL BE CONSIDERED STRICTLY CONFIDENTIAL.

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How long have you lived at the present address? _____ years _____ months. List other addresses in the last 5 years _____

EDUCATION

HIGH SCHOOL ATTENDED _____ YEARS _____
COLLEGE ATTENDED _____ YEARS _____
OTHER _____ YEARS _____

SERVICE STATION EXPERIENCE

1. COMPANY _____ ADDRESS _____
FROM _____ TO _____ SUPERVISOR _____
REASON FOR LEAVING _____
2. COMPANY _____ ADDRESS _____
FROM _____ TO _____ SUPERVISOR _____
REASON FOR LEAVING _____

OTHER EMPLOYMENT EXPERIENCE

1. COMPANY _____ ADDRESS _____
FROM _____ TO _____ SUPERVISOR _____
REASON FOR LEAVING _____
2. COMPANY _____ ADDRESS _____
FROM _____ TO _____ SUPERVISOR _____
REASON FOR LEAVING _____
3. COMPANY _____ ADDRESS _____
FROM _____ TO _____ SUPERVISOR _____
REASON FOR LEAVING _____

Describe any selling experience you have had _____

Have you ever kept or helped keep business records? _____

PERSONAL REFERENCES

NAME ADDRESS PHONE NUMBER

NAME ADDRESS PHONE NUMBER

NAME ADDRESS PHONE NUMBER

CREDIT REFERENCES

FIRM ADDRESS PHONE NO.

Do you own property? _____ What and where? _____

Balance owed? \$ _____ Amount of payments \$ _____

If you rent your "home" what do you pay for rent? \$ _____ Do you own furniture appliances? _____

Amount owed? _____ Do you own a car? _____ Make and model _____

Balance owed? \$ _____ What is the total amount of your indebtedness? \$ _____

Total monthly payments \$ _____

Do you have other monthly income? _____ Source? _____ Amount \$ _____

How much life insurance do you carry? \$ _____ How much monthly income do you and your family require? \$ _____ Why are you interested in getting into the service station business? _____

What hours do you intend keeping the station open? _____ Is it your intention for you and your employees to be in uniform while working at the station? _____

List any community organizations you have been active in _____

List any hobbies you have _____

APPLICANT'S SIGNATURE

FINANCIAL STATEMENT OF:

FIRM NAME: _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____

AT CLOSE OF BUSINESS ON _____ **20** _____

(PLEASE ANSWER ALL QUESTIONS. WHEN NO FIGURES ARE INSERTED, WRITE WORD "NONE")

ASSETS	DOLLARS	CENTS	LIABILITIES	DOLLARS	CENTS
Cash in Bank	\$		Accounts Payable	\$	
Cash on Hand	\$		Notes Payable - Secured		
Accounts Receivable			Owing to	\$	
(Amounts Pledged \$	\$		Notes Payable - Unsecured		
Notes and Trade Acceptances Receivable			Banks	\$	
(Amounts Pledged \$	\$		Partners or Officers	\$	
Merchandise Inventory			Other	\$	
(Not on Consignment or Conditional Sale)			Taxes Payable:		
(Amounts Pledged \$	\$		Withholding and Payroll	\$	
Other Current Assets: (Describe)	\$		Federal and State Income	\$	
	\$		Other	\$	
	\$		Accrued Payroll and Other Expense	\$	
	\$		Other Current Liabilities: (Describe)		
	\$			\$	
	\$			\$	
TOTAL CURRENT ASSETS:	\$		TOTAL CURRENT LIABILITIES:	\$	
Land and Buildings (Depreciated Value)	\$		Mortgage on Land and Buildings	\$	
Leasehold Improvements (Amortized Value)	\$		Chattel Mortgage on Merchandise or		
Machinery, Fixtures and Equipment			Equipment	\$	
(Depreciated Value)	\$			\$	
Due From Others - Not Customers	\$		Other Liabilities - Unsecured	\$	
Other Assets: (Describe)	\$			\$	
	\$		TOTAL LIABILITIES:	\$	
	\$		{ Capital		
	\$		Net Worth or { Stock \$	_____	
	\$		{ Surplus \$	_____	
	\$		TOTAL LIABILITIES AND NET WORTH:	\$	
TOTAL ASSETS:	\$				

If Partnership, name partners: _____

If Corporation, name officers: _____

CIA

worksheet

capital investment analysis

Station Name: _____ Representative: _____

Date: _____ Information Prepared For: _____

The following outlines costs that should be considered when determining the amount of capital needed to properly maintain, market, and develop a successful site. This form is designed to be a training tool, and is in no way intended to be a foundational guide for operating expenses. For a professional business plan or situation analysis, you are advised to consult an attorney, CPA, or any other certified business professional.

Initial Costs:

Monthly Expenses:

ESTIMATED CAPITAL REQUIRED:

ESTIMATED MONTHLY EXPENSES:

Training Class (\$ _____)

Rent \$ _____

Security Deposit (\$ _____)

Taxes \$ _____

First Months Rent (\$ _____)

Insurance \$ _____

First Months T & I (\$ _____)

Utilities \$ _____

First Months POS (\$ _____)

Credit Card Fees: \$ _____

Business Op. APEC (\$ _____)

Fuel Expenses: \$ _____

Business Op. Other (\$ _____)

Average Monthly POP \$252.00 **

Inventory (\$ _____)

Business Development \$300.00 ***

Equipment (\$ _____)

Maintenance \$ _____

Carwash (\$ _____)

Cash Shortages \$ _____

Grand Opening (\$ 3000.00)*

Payroll, T&I \$ _____

Fast Food Addition (\$ _____)

Personal / SBA Loan Payment \$ _____

Utility Deposits (\$ _____)

TOTAL PROJECTED \$ _____

Monthly Expenses Times .35 (\$ _____)

* Prices and available funds may vary between brands.

TOTAL REQUIRED (\$ _____)

** Monthly point of purchase advertising is available to all APEC dealers through Universal Screen Graphics in Brandon. Monthly, quarterly, and yearly packages are available, and are highly recommended for increased sales and promoting product awareness.

Personal Funds + \$ _____

Personal / SBA Loan + \$ _____

TOTAL CASH AVAILABLE \$ _____

*** Business Development may include issuing coupons, sponsoring local charities and events, participating in marketing programs, or direct mail / newspaper advertising.



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 (813) 681-4279
 Fax: (813) 685-8631

Automated Petroleum & Energy Co., Inc.

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

LOCATION _____ COMPANY ID NO. _____
 (please print) (if applicable)

I hereby authorize Automated Petroleum & Energy Company, Inc. hereinafter called "Company" to initiate debit entries and credit entries and adjustments for any entries in error to my Checking Account indicated below and the depository named below, hereinafter called "Financial Institution", to debit and/or credit the same to such account.

FINANCIAL INSTITUTION _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____
 (a voided check must be attached)

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

DATE _____ SIGNATURE _____

PRINT NAME _____

SIGNATURE _____

PRINT NAME _____

Attach Voided Check

AFFIDAVIT

State of Florida]
County of _____]

BEFORE ME, the undersigned authority personally appeared _____, who first being duly sworn, deposes and says:

1. I am over the age of eighteen and am competent to make this Affidavit.
2. I am in the process of entering into an agreement to purchase a business, a dealer contract and a lease (documents) with Automated Petroleum & Energy Company, Inc. (APEC), for a convenience store/gasoline station located at _____.
3. At no time prior to my execution of these documents did APEC represent to me that the sales/gallage records for convenience store products and gasoline sales generated by any prior occupants of this location, whether APEC, its dealer or some third person, which records were subsequently given to me, were in fact accurate.
4. At no time did APEC represent or guarantee me that I would sell any certain dollar volume of convenience store items and/or gasoline on a monthly basis at this location.
5. I have not and am not relying upon any representation made by APEC concerning the profitability of this location in deciding to enter into the business acquisition documents, lease (including all addendums), dealer contract, and any related documents, but instead have relied upon the results of my own inspections, investigation and due diligence.
6. APEC has not in any way prevented me from conducting any independent inspections, investigation and due diligence regarding sales and profitability of this location which I deemed necessary prior to executing the documents in question.

FURTHER AFFIANT SAYETH NOUGHT.

Affiant

State of Florida]
County of _____]

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced _____ as identification and who did take an oath.

Notary Public - State of Florida

(Seal)

GUARANTY

For value received, the undersigned endorses, guarantees, and promises to pay to **Automated Petroleum & Energy Company, Inc.** all amounts due or becoming due on the obligation of _____ evidenced by the terms and conditions set forth in the agreement attached hereto. The undersigned agrees **Automated Petroleum & Energy Company, Inc.** may proceed against the undersigned directly and independently, and the cessation of liability of _____ for any reason other than full payment, shall not affect the liability of the undersigned hereunder.

Print or Type Guarantor's Name

Guarantor's Signature

Address

() _____
Phone

Witness

Witness

I certify that at a meeting of the Board of Directors of _____ on _____, 20_____, at which a quorum was present and acting throughout, the following resolutions were adopted, that the resolutions have been entered upon the regular minute book of this corporation, are in accordance with the Articles of Incorporation and By-Laws, have not been modified or amended, and are now in full force and effect.

Resolved:

1. (Designate the number of signatures required and authorized signers by title or by name if untitled.) (Number of signatures required - Check appropriate block.)

One Two Three Other _____

That the following _____

_____ of this corporation are hereby authorized to purchase and to obtain credit for this corporation from **Automated Petroleum & Energy Company, Inc.**, terms as may seem to them advisable and to make and deliver notes, drafts, acceptances, agreements and any other obligations of this corporation therefor, in form satisfactory to **Automated Petroleum & Energy Company, Inc.**, signed by _____ and as security therefor to pledge, withdraw, exchange and substitute any property of this corporation with full authority to endorse or guarantee the same in the name of the corporation, to execute and deliver all instruments and assignments, and to affix the corporate seal, and also to discount any bills receivable or paper of any kind (negotiable or otherwise) with full authority to endorse same in the name of this corporation.

2. That all authorizations contained herein shall continue in full force and effect until revoked or modified by written notice actually received by **Automated Petroleum & Energy Company, Inc.**, setting forth a resolution to that effect stated to have been adopted by the Board of Directors of this corporation and signed by the secretary or the assistant secretary of this corporation, and **Automated Petroleum & Energy Company, Inc.** is hereby authorized and directed to at all times rely upon the last resolution of which **Automated Petroleum & Energy Company, Inc.** has actual written notice as to the authorization contained therein and as to the persons who from time to time are its officers, and their signatures, when such notice is signed by one purporting to be the secretary or assistant secretary of this corporation.

I further certify that the forgoing resolutions are fully in accord with and pursuant to the Articles of Incorporation and By-Laws of this corporation.

I further certify that the following persons, whose genuine signatures appear below, are officers of this corporation in the capacity set opposite their respective signatures, to-wit:

President (Print or Type)

President Signature

Vice-President (Print or Type)

Vice-President Signature

Secretary (Print or Type)

Secretary Signature

Treasurer (Print or Type)

Treasurer Signature



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STATION INSURANCE

**PLEASE PRESENT THIS TO YOUR INSURANCE AGENT TO ENSURE
PROPER COVERAGE AS STATED IN ARTICLE 11 OF THE LEASE**

◇ LIABILITY	
Each occurrence	\$1,000,000.00
To include:	
• Liquor Liability	
• Assault & Battery	
◇ GARAGEKEEPER	\$45,000.00 (where applicable)
◇ FIRE LEGAL LIABILITY	\$200,000.00 *
◇ CAR WASH	\$25,000.00 (where applicable)
◇ GLASS COVERAGE	
◇ APEC NAMED AS ADDITIONAL INSURED	
◇ WORKMANS COMPENSATION	

** Minimum amount. May vary depending on value of location.*

**AN UPDATED CERTIFICATE OF INSURANCE MUST BE SENT TO
AUTOMATED PETROLEUM & ENERGY COMPANY EACH YEAR WITH
YOUR NAME AND YOUR CORPORATION NAME IF APPLICABLE**

APEC
Training and Circle K Training
“2021”



Without training
a successful business
venture is greatly
reduced!!!!!!

Training is
the foundation to
SUCCESS

SCHEDULE IS SUBJECT TO CHANGE, NOTICE WILL BE GIVEN

TRAINING SESSIONS

- # 1 ... January 12th thru January 22nd
- # 2 ... February 8th thru February 17th
- # 3 ... March 8th thru March 17th
- # 4 ... April 5th thru April 17th
- # 5 ... May 4th thru May 14th
- # 6 ... June 8th thru June 16th
- # 7 ... July 12th thru July 23rd
- # 8 ... August 10th thru August 20th
- # 9 ... September 13th thru September 24th
- #10 ... October 5th thru October 15th
- #11 ... October 25th thru November 5th
- #12 ... December 6th thru December 15th.

RUBY/SAPPHIRE

- CIRCLE K TRAINING**
- February 18th and February 19th
- CIRCLE K TRAINING
- APEC
- CIRCLE K TRAINING
- June 17th and 18th
- APEC
- CIRCLE K TRAINING
- APEC
- CIRCLE K TRAINING
- CIRCLE K TRAINING
- Dec 15th and Dec 16th

Note: There will also be a two day POS training class following the 8 days of APEC Training Class. All participants must wear THERE BRAND UNIFORM TO CLASS!

WHERE: APEC Office
1201 Oakfield Drive
Brandon, Florida
(Map Attached)

TIME: Each BASIC CLASS starts on a Monday from 8:30 a.m. to 4:30 p.m.

CIRCLE K TIMES TO BE ANNOUNCED TO PARTICIPANTS

****** ALL NEW DEALERS ARE REQUIRED TO ATTEND ******

(PRINT NAMES)

Station Name: _____

Dealer Name: _____

TELEPHONE NUMBER CELL _____

E-MAIL ADDRESS _____

Others Attending: Up to two additional attendees within six months
If there is room in the class.

Training Session # _____

Please return this portion to your APEC representative or fax it to our office at (813) 685-315-1639 by noon the Friday prior to the training session you have selected. Also a cashiers check in the amount of \$900.00 made out to APEC, should be given to your brand representative Friday, prior to training! The \$900.00 dollar check is non refundable however you may attend any session in the future within a twelve month period! I also understand that I will not receive any incentives I may qualify for until completion of APEC training school. I agree to these terms as of this date: _____, and signature _____.

**TRAINING
REGISTRATION FORM
Circle K in Brandon Florida**



Participant Information (please print)		Complete all information		
Last Name (please print)	First Name	Initial	Store (Franchise) Owner	
Store Mailing Address (please print)		City	State	ZIP
Store Phone #	Franchise Business Consultant		Site #	
Office or Home Mailing Address		City	State	ZIP
Home Phone # ()	Business Phone # ()	Cell # ()		
Confirmation Materials Will Be Sent To Your e-mail Address:				
Emergency Contact:				
Name:		Phone : ()		
Your position in company: (Check ALL that apply)				
<input type="checkbox"/> Franchisee/Supervisor:		<input type="checkbox"/> Site Manager:		
<input type="checkbox"/> Other: Title:		<input type="checkbox"/> Employee		
<i>Years of management experience in the c-store industry. Years of retail experience</i>				
Years____Months____		Years____ Months____		
<i>Class Enrollment (Check ALL That Apply)</i>				
<input type="checkbox"/> SMART Classroom (8 days)		Select Class Date:		
Important!!!				
Please read confirmation packet and complete pre work required for class once received. Thanks COST \$800.00 PER STUDENT		Participant Signature		Date

e-mail to training@apecgas.com

A. Embassy Suites Tampa Brandon
10220 Palm River Rd, Tampa, FL
(813) 653-1905

B. Spring Hill Suites Tampa Brandon
1051 S Falkenburg Rd, Tampa, FL
(800) 627-7468

C. Hampton Inn Tampa/Brandon
10110 Horace Ave, Tampa, FL
(813) 661-8888

D. Holiday Inn Express Tampa-Brandon
510 Grand Regency Blvd, Brandon, FL
(813) 643-3800

**E. Homewood Suites by Hilton Tampa-
Brandon**
10240 Palm River Rd, Tampa, FL
(813) 685-7099

F. La Quinta Inn & Suites Tampa Brandon
Regency Park
310 Grand Regency Blvd, Brandon, FL
(813) 643-0574

G. Courtyard Tampa Brandon
10152 Palm River Rd, Tampa, FL
(813) 661-9559

H. Fairfield Inn & Suites Tampa Brandon
10150 Palm River Rd, Tampa, FL
(813) 661-9719

**I. Homestead Studio Suites Tampa -
Brandon**
330 Grand Regency Blvd, Brandon, FL
(813) 643-5900

J. La Quinta Inn & Suites Tampa Brandon
West
602 S Falkenburg Rd, Tampa, FL
(813) 684-4007

