

Established 1946



Family Owned & Operated

CUSTOMER INFORMATION APPLICATION

#1) Mr. Mrs. Ms. _____ Social Security# _____ AGE _____
(Spouse, or other responsible party)
#2) Mr. Mrs. Ms. _____ Social Security# _____ AGE _____

ADDRESS _____ CITY _____ ZIP _____
COUNTY _____
TELEPHONE# _____ DO YOU: OWN RENT (Circle One)

LENGTH OF TIME AT YOUR PRESENT ADDRESS _____ EMAIL: _____

NAME OF MORTGAGE HOLDER OR LANDLORD _____
Landlord:
PREVIOUS OCCUPANT, IF KNOWN _____ PHONE# _____
YOUR PREVIOUS ADDRESS _____

#1) PLACE OF EMPLOYMENT _____ ADDRESS _____
NUMBER OF YEARS _____ TELEPHONE# _____

#2) PLACE OF EMPLOYMENT _____ ADDRESS _____
NUMBER OF YEARS _____ TELEPHONE# _____

NEAREST RELATIVE _____ ADD: _____ PHONE# _____

PREVIOUS FUEL SUPPLIER _____ METHOD OF REFERRAL TO OUR CO. _____

CIRCLE TYPE OF ACCOUNT: FUEL OIL KERO GAS PROPANE D/F SERVICE
TANK SIZE _____

DO YOU WISH: (Circle One) AUTOMATIC DEL WILL CALL - IF AUTO, WHAT

IS YOUR YEARLY USAGE? _____ DO YOU GET YOUR HOT WATER FROM
OIL, PROPANE, OR ELECTRIC? HOW MUCH OIL/LP IN YOUR TANK NOW? _____

I agree that in the event of default in the payment of any amount due and if this account is placed in the hands of an agency or attorney for collection I will pay an additional charge equal to the cost of collection including agency and attorney fees and court costs incurred and permitted by laws governing these transactions. Also, I understand there is 1.5% per month service charge * 18% * annual * \$.50 minimum on any past due balance. I hereby give authorization to check my credit rating.

NAME _____ SIGNED _____ DATE _____

(OFFICE USE ONLY) ANY PRICE QUOTED BY DRUM OIL REPRESENTATIVE: _____