



OIL # _____
LP # _____
APPROVAL _____

APPLICATION FOR CREDIT

THIS APPLICATION MUST BE SIGNED AND RETURNED TO ACTIVATE YOUR ACCOUNT

NAME: _____ **SOC. SEC. #** _____

STREET: _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE#** _____

E-MAIL ADDRESS: _____

Billing Address (if different) _____

CO-APPLICANT: _____ **SOC. SEC #** _____

PREVIOUS ADDRESS
If less than 1 year: _____

DO YOU OWN OR RENT YOUR RESIDENCE.

If renting
LANDLORD'S NAME & PHONE # _____

PREVIOUS OIL OR PROPANE GAS SUPPLIER: _____

WHAT TYPE OF ACCOUNT DO YOU WISH TO OPEN? OIL PROPANE BOTH

HOW DID YOU HEAR ABOUT HOLDEN OIL? _____

THE OFFERING OF CREDIT TERMS IS SUBJECT TO THE VERIFICATION OF CREDIT WORTHINESS OF THE APPLICANT. THE UNDERSIGNED AUTHORIZES HOLDEN OIL, INC. TO REVIEW THE INFORMATION ON THE APPLICANTS CREDIT REPORT TO ESTABLISH CREDIT TERMS. ANY BALANCE REMAINING UNPAID 30 DAYS AFTER BILLING DATE IS SUBJECT TO A FINANCE CHARGE AT A PERIODIC RATE OF 1.5 % PER MONTH (18% ANNUALLY.) THE UNDERSIGNED GUARANTEES PAYMENT OF ANY DEBT INCURRED ALONG WITH ANY REASONABLE COLLECTION COST THAT MAY BE INCURRED.

SIGNATURE _____ **DATE** _____

SIGNATURE _____ **DATE** _____

FUEL OIL • PROPANE • DIESEL FUEL • GASOLINE • HEATING SERVICES

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