

RAND WADE OIL CO. INC
NEW CUSTOMER CREDIT APPLICATION
fax: 252-747-4147, email: custserv@randwadeoil.com
Drop Off/Mail: 3565 Hwy 258, PO Box 127, Snow Hill, NC 28580

APPLICANTS NAME: _____

CO-APPLICANTS NAME: _____

APPLICANTS DATE OF BIRTH: _____	CO-APPLICANT'S DATE OF BIRTH _____
APPLICANTS SS# _____	CO-APPLICANT'S SS# _____
HOME PHONE # _____	CO-APPLICANT'S HOME PHONE _____
CELL PHONE # _____	CO-APPLICANT'S CELL PHONE _____
WORK PHONE # _____	CO-APPLICANT'S WORK PHONE _____
EMPLOYER _____	CO-APPLICANT'S EMPLOYER _____
COUNTY WHERE PRODUCT WILL BE DELIVERED _____	

DELIVERY ADDRESS _____
(House #) (Road Name) City State Zip

MAILING ADDRESS _____
(PO Box or Street Address) City State Zip

EMAIL ADDRESS _____

DO YOU OWN OR RENT THE PROPERTY TO BE HOOKED UP? OWN RENT (CIRCLE)
IF RENTAL PROPERTY, LIST THE NAME OF LANDLORD: _____
LANDLORD'S PHONE # _____

DETAILED DRIVING DIRECTIONS TO CUSTOMER LOCATION:

LP APPLIANCES (Circle all that apply)

GAS PACK	INSIDE FURNACE	DUAL FUEL/HYBRID FURNACE	TANK WATER HEATER
TANKLESS WATER HEATER	SPACE HEATER	LOGS	RANGE/STOVE
GAS CLOTHES DRYER	OUTDOOR GRILL	GENERATOR	

OTHER _____

IS THIS A NEW LP GAS INSTALLATION? _____ YES _____ NO	TANKS OWNED BY:
CURRENT ANNUAL USEAGE _____	_____ COMPANY
IF NO, WHO IS YOUR CURRENT SUPPLIER? _____	_____ CUSTOMER
PHONE NUMBER _____	

_____ By my initials here, I understand that information given in this application will be used to run a credit inquiry. Information contained in the credit inquiry will be used by Rand Wade Oil Company, Inc. to determine my credit terms. In some instances a deposit may be required.

_____ By my initials here, I have received a copy of, and agree to Rand Wade Oil Company, Inc.'s "Customer Policies and Procedures".

_____ BY MY INITIALS HERE, I AGREE THAT I HAVE BEEN TOLD ABOUT SAFETY OF PROPANE AND HAVE BEEN PROVIDED A MAILER ON IMPORTANT PROPANE SAFETY INFORMATION TO REFER TO AT ANYTIME.

SIGNED _____ DATE _____
APPLICANT

SIGNED _____ DATE _____
CO-APPLICANT