



Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

How long at residence: \_\_\_\_\_

SSN: \_\_\_\_\_ (SSN is required to process the application)

**Bank References:**

Bank: \_\_\_\_\_ Account Type: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Business References:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please specify billing requirements (authorized person to purchase on this account, etc.)

\_\_\_\_\_

Authorization: I certify that all statements made by me in this application are for the purpose of obtaining credit and are correct to my knowledge. I authorize these references to release my credit status and to provide such other information as Francis Oil & Propane, Inc. may require. This undersigned expressly agrees to make payment in full to Francis Oil & Propane, Inc. by the 24<sup>th</sup> of the month following the month deliveries are made. Account balances outstanding for more than 30 days are subject to a finance charge of 1.5% per annum. The undersigned agrees to pay a reasonable attorney's fee and all other costs and expenses incurred in the collection of any obligation of the undersigned. This credit application, once accepted by Francis Oil & Propane, Inc., shall become part of every invoice to applicant and is incorporated herein. This application shall remain Francis Oil & Propane, Inc. property whether or not it is accepted and approved.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Francis Oil & Propane, Inc. 913 Lynchburg Ave. Brookneal, VA 24528

Office: 434-376-2418 Fax: 434-376-3351 Toll Free: 800-314-5702