



105 West Dewey Ave., Bldg. B Suite 230, Wharton, NJ 07885

973-366-9111 Phone 973-366-5592 Fax

wwwFossilFuelOil.com

Account #

### Automatic Delivery Application

(Complete this form entirely)


Name _____ Spouse _____		Social Security No. _____		Social Security No. _____	
Billing Address _____			City _____	State _____	Zip Code _____
Delivery Address _____			City _____	State _____	Zip Code _____
Home Phone _____		Cell/Work Phone _____		E-Mail Address _____	
Please Circle: Own or Rent		If Renting, How Long Years Months		Landlord Name _____	
				Landlord Phone _____	
Employer Name _____			Employer Phone _____	Position _____	How Long? Years Months
Employer Address _____			City _____	State _____	Zip Code _____

**PAYMENT METHOD**

Debit Card    Credit Card

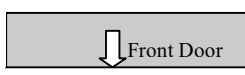
Visa     MasterCard     Discover     American Express     Amex Security (4 digit #) \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Signature Panel Code (3 digit #) \_\_\_\_\_



**Tank Information**

What size tank do you have?     275 gallon     330 gallons     550 gallon     1000 gallon     Other \_\_\_\_\_

<b>Tank Information</b> <input type="checkbox"/> Above Ground <input type="checkbox"/> Under Ground  <b>Where is your oil fill pipe located?</b> <input type="checkbox"/> back left <input type="checkbox"/> back center <input type="checkbox"/> back right <input type="checkbox"/> left  <input type="checkbox"/> right <b>(Use Diagram)</b> <input type="checkbox"/> front left <input type="checkbox"/> front center <input type="checkbox"/> front right	Oil Used For: <input type="checkbox"/> Heat <input type="checkbox"/> Heat and Hot Water How much oil is in the tank now? _____ When will you be needing the first delivery? _____ House color, Nearest cross street, Special requirements. _____ _____
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How did you hear about Fossil Fuel Oil? \_\_\_\_\_    Yearly Consumption Of Oil \_\_\_\_\_

**Delivery and Payment Authorization Agreement**

**\*This agreement will be renewed automatically each calendar year. If, you move, sell or for any other reason wish to terminate services, cancellation must be in writing and will become effective upon our receipt of the notice. Any remaining balance owed to Fossil Fuel Oil will be due immediately.**

\* Applicant, upon signing this agreement, you grant Fossil Fuel Oil permission to enter upon your premises to automatically fill your oil tank(s) and to charge the credit account specified on this application for the product delivered.

\*Your delivery ticket is your invoice and your balance is due and payable immediately upon receipt. For your convenience, your credit, debit or checking account will automatically be charged following your delivery. In the event that you fail to pay your balance in full within thirty (30) days from the date of your delivery, you will be charged a FINANCE CHARGE EQUAL TO 1.5% MONTHLY on the unpaid balance. THE ANNUAL PERCENTAGE RATE IS 18%. If it is necessary for Fossil Fuel Oil to hire an attorney or collection agency to collect the amount due from you, you agree to pay Fossil Fuel Oil reasonable attorney and/or collection agency fees.

\* Everything I have stated in this application is correct to the best of my knowledge.

\*I hereby authorize Fossil Fuel Oil to check my credit and employment history.

NOTICE: 1) The Federal Equal Opportunity Act prohibits creditors from discriminating again credit applications on the basis of sex or marital status. The Federal agency that administers compliance with this Agreement concerning this creditor is The Equal Credit Opportunity, Federal Trade Commissions, Washington, D.C. 20580

2) You are entitled to a copy of this agreement and the information regarding your rights to dispute billing errors.

3) **Do not sign before completing the application and reading the entire Authorization Agreement.**

Applicant Signature: _____ Date _____	Company Rep _____ Date _____
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