

## Residential 30 Day Credit Account Application

To sign up for our 30 day credit account, print and complete this form then drop it off to one of our office locations, fax it to **902.367.2459** or simply apply online at [www.feasiblefuels.ca](http://www.feasiblefuels.ca)

**Charlottetown** | 425 Mt Edward Rd. | 902.940.5140     **Montague** | 500 Main St. | 902.361.5140

### Applicant Information

\_\_\_\_\_ Date of birth:  /  /   
 First name Middle name Last name     dd mm yyyy

### Delivery Address

\_\_\_\_\_ Do you rent or own?  
 Street City / Town Postal Code Years at address     Rent Own

### Billing Address (if different from delivery address)

\_\_\_\_\_  
 Street City / Town Province Postal Code

### Contact Information

\_\_\_\_\_ **Subscribe to e-Billing**  
 Primary phone Secondary phone Email address     Yes No

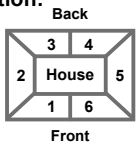
### Previous Address (if at current address less than 2 years)

\_\_\_\_\_ **Did you rent or own?**  
 Street City / Town Postal Code Years at address     Rent Own

### Employer Information

\_\_\_\_\_  
 Employer name Job title Employer phone Years with employer

### Delivery Information

<b>Installed equipment:</b> (check all that apply)	<b>Delivery type:</b>	<b>Tank capacity:</b>	<b>Tank location:</b>	<b>Amount in tank:</b>
Baseboard heating	Automatic	910 Litres	Inside	Empty
Forced air furnace	Order when needed	625 Litres	Outside	1/4 Full
Wood stove		Unknown		1/2 Full
Heat pump		Other _____		3/4 Full
Oil hot water heater	<b>Tank fill pipe location:</b>			Full
Electric hot water heater	Location number _____	<b>House size in square feet:</b> _____	<b>Amount of oil used last year:</b> _____	in Dollars
Indirect hot water heater				in Litres
				in Gallons

### How did you hear about Feasible Fuels?

TV     Radio     Newspaper     Social Media     Online Search     Recommendation     Friend     Other \_\_\_\_\_

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. As a credit approved customer I agree to pay all balances within 30 days from statement date, any late payments will be subject to 2% interest charges per month. A 300 Litre minimum delivery is required.

I have read and agree to the terms and conditions stated above.

Customer Signature \_\_\_\_\_

Date \_\_\_\_\_