

Guy's Incorporated
Guy's Oil Service Station, Inc.

87 West Main Street

Niantic, CT 06357

Tel. 860-739-8700

Fax 860-739-6471

CT License 305555 H.O.D. #154 & #1088

CREDIT APPLICATION

Automatic Budget

Will Call Bulk

Name _____ Social Sec #. _____

E-mail: _____

License No. _____ D.O.B. _____ Home Phone (Area Code) _____ - _____ - _____

Cell Phone # _____ - _____ - _____

Co-Applicants Name _____ Social Sec. No. _____

E-mail: _____

Delivery Address _____ Own/Rent How Long _____ Mos./Yrs.

City/Town _____ State _____ Zip Code _____

Billing Address _____ State _____ Zip Code _____

Employer _____ Address _____

Type of Business _____ Phone (Area Code) _____ - _____ - _____

E-mail: _____

Years There _____ Gross Monthly Salary \$ _____ Position/Department _____

Co-Applicant Employer _____ Address _____

Phone (Area Code) _____ - _____ - _____ Ext. _____ Email Address _____

Landlord's Name _____ Phone (Area Code) _____ - _____ - _____

Personal Reference _____ Phone (Area Code) _____ - _____ - _____ Cell _____ - _____ - _____

Active Military: YES/NO. Branch of Service _____ Rank: _____ Station: _____ CO Phone # _____

Master Card/VISA/Discover/ AMEX _____ Exp. Date _____ CVV _____

How did you hear about us? _____

Previous oil supplier _____

Tank Size _____ Gal. Fill pipe Location _____

Domestic Hot Water Oil _____ Electric _____ Gas _____ Service Contract Type _____

Applicants consent to a credit check based upon the information provided in this application. Guy's Inc. expects payment within 30 days and will apply a finance charge of 1 1/2% (18% annually) on a monthly basis. I (we) agree to pay any collection and attorney fees due to default of payment, should that become necessary. I (we) agree to notify Guy's Inc. in writing, faxing or email in the event the I (we) are moving, want to change the type of delivery service, or wish to close this account. The information I (we) have provided is correct and I (we) have read and agree to the terms of this retail agreement.

Signature of Applicant _____ Date _____

Signature of Co-Applicant _____ Date _____

Credit Department Use Date _____ Account no. _____

"Where Service is First"