



New Customer Credit Application

Applicants Name: _____ Co-Applicants Name: _____

Applicant's Date of Birth: _____ Co-Applicants Date of Birth: _____

Applicants SS/Fed. ID # (copy) _____ Co-Applicants SS/Fed. ID # (copy) _____

Applicants DL # (copy) _____ Co-Applicants DL # (copy) _____

Delivery Address: _____
Street# Street City State Zip

Mailing Address: _____
P.O. Box or Street Address City State Zip

Home Phone # _____ Applicants Work Phone # _____

Cell # _____ Co-Applicants Work # _____

Detailed driving directions to customer location: _____

LP/Oil Appliances (check all that apply):

- Gas Pack Oil Pack LP Water Heater Oil Water Heater
- Gas Logs Range Dryer Outdoors Grill
- LP Generator Oil Generator LP Space Heater Oil Heater

of tanks needed: _____ Tank Size(s): _____ Aboveground Underground

Tank Owned by: Company or Customer

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

Signed: _____
Applicant

Date

Signed: _____
Co-Applicant

Date

FOR OFFICE USE ONLY:

Date Received: _____

Approved Credit Limit \$ _____
 Denied Deposit Amount \$ _____