



Customer Application

SWAN FUEL SERVICE, INC.
1615 E. Mason St. Dansville, MI 48819
Phone: 517-623-6087 Fax: 517-623-6079

NAME: CONTACT PERSON:

ADDRESS: CITY: ZIP:

TOWNSHIP: COUNTY:

NEAREST CROSSROADS: BETWEEN &

DO YOU RENT OR OWN YOUR HOUSE? RENT OWN

LANDLORDS NAME: PHONE:

BILLING ADDRESS (IF DIFFERENT):

PHONE # CELL # DATE OF BIRTH:

SOCIAL SECURITY # DRIVER'S LICENSE #

MARITAL STATUS: MARRIED SINGLE SPOUSE:

EMPLOYED BY: HOW LONG:

FEDERAL ID # (BUSINESSES):

EMAIL OR PAPER STATEMENTS (CHOOSE ONE): EMAIL PAPER

EMAIL ADDRESS:

HOME HEATING CUSTOMERS:

TANK SIZE: SQUARE FOOTAGE OF HOME:

CURRENT FUEL SUPPLIER: CURRENT TANK PERCENTAGE: %

NEW CONSTRUCTION: YES OR NO

ARE WE DIGGING A NEW LINE: YES OR NO IF YES APPROXIMATE FOOTAGE?

APPLIANCES RUNNING OFF TANK: FIREPLACE BOILER GENERATOR POOL HEATER
HOT WATER FURNACE DRYER STOVE SPACE HEATER

IS PROPANE YOUR MAIN SOURCE OF HEAT? YES OR NO IF NO WHAT IS:

I WOULD LIKE TO BE: KEEP FULL OR WILL CALL

FINANCIAL RESPONSIBILITY

HAVE YOU FILED BANKRUPTCY? YES OR NO IF YES WHEN ?

THIS INFORMATION IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT I'M RESPONSIBLE TO PAY FOR SERVICES RENDERED, INCLUDING REASONABLE ATTORNEY'S FEES AND COSTS OF COLLECTION IN THE EVENT OF DEFAULT. I FURTHER UNDERSTAND THAT IF A PAYMENT BECOMES 30 DAYS PAST DUE, DELINQUENCY AT THE LESSER OF THE ANNUAL RATE OF 1.8% OR THE MAXIMUM ALLOWABLE RATE, WILL BE DUE ON DELINQUENT AMOUNTS FROM THE DATE THE PAYMENT WAS DUE.

SIGNATURE DATE