

Business Credit Application
Feasible Fuels

Name/Address

Last:	First:	Middle Initial:	Title:
Company Name:			Tax I.D. Number
Address:			
City:	Province:	Postal Code:	Phone:
Email:			

Company Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates:	
Province/Country:	Corporation <input type="radio"/> Partnership <input type="radio"/> Proprietorship <input type="radio"/> Other <input type="radio"/>
If Other Please Explain:	
If Division/Subsidiary, Name of Parent Company:	
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	
City:	Province: Postal Code: Phone:

Trade References (please provide a minimum of two references)

Company Name	Phone Number	Address	Contact Person

Delivery Information

Tank Size:	Equipment: Furnace <input type="radio"/> Water Heater <input type="radio"/> Farm Equipment <input type="radio"/> Other <input type="radio"/>
If Other Please Explain:	
Delivery Schedule Type:	Automatic <input type="radio"/> Call In <input type="radio"/> Interested in E-Billing: Yes <input type="radio"/> No <input type="radio"/>

We declare that the above information is true, correct and complete and is given to induce the Company to extend credit. We authorize the Company to make such credit investigation as the Company sees fit, including contacting the above trade references and banks and obtaining credit reports. We authorize all trade references, banks and credit reporting agencies to disclose to the Company any and all information concerning the financial and credit history of my company and myself.

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

Company Name: _____ Feasible Fuels Sales Representative: _____

Authorized Signature: _____ Date: _____

Title: _____

Printed Name: _____