

Kenmore, WA 98028

1-866-822-8281

Personal Information

		Application for Credit				
Last Name of Applicant	First Name	Middle Initial	Social Security #		Driver's License #	
Last Name of Co-Applicant	First Name	Middle Initial	Social Security #		Driver's License #	
					Own _____ Rent _____	
Street Address		City	State	Zip	Year's Lived	Check One
Previous Street Address		City	State	Zip	Current Phone Number	
Name and Address of Landlord of Mortgage Holder					Phone Number	

Employment Information

Applicant's Employer Name and Address		Position	Years	Phone Number
Co-Applicant's Employer Name and Address		Position	Years	Phone Number

Credit References

Please list two credit references and a personal reference above						Phone Numbers	
Bank Name and Address						Account Number	
Service Requested							
Automatic Refill ____		Customer Will Call ____					
Please Check One			Previous Fuel Supplier		Gallons in Tank	Tank Size	Front
15 Day Disc/Net 30 ____		Monthly Budget ____	Credit Card Guarantee ____		Always Charge to Credit ____		
Credit Account Type Required: Please Check One						Locate Tank w/X	
Credit Card Number:			Expiration Date:		Cardholder Name:		
Credit Information Required for Account Guaranteed and Credit Card Billings Above							
<p>The information that I have provided in this application is true and I hereby authorize Snyder Oil Company to investigate and obtain a credit report.</p> <p>Snyder Oil Company shall keep the information contained in this application confidential. It shall only be used to determine the credit limit, service status and collection of your account.</p>				<p>Please not the following items that apply to your account:</p> <ul style="list-style-type: none"> • Prices are subject to change without notice. • If you have chosen Automatic Refill Service, you hereby authorize Snyder Oil to keep your tank full at all times. • You shall give written notice to Snyder Oil Co. if you change service. • Snyder Oil Co. reserves the right to stop Automatic Refill Service with written notice to customer. 			
X _____				X _____			
Signature of Applicant				Signature of Co-Applicant			