



CUSTOMER INFORMATION SHEET

How did you hear about us?  Website  Mailer  Yellow Pages  Newspaper Ad  Billboard Ad  Word of Mouth

Name(s): \_\_\_\_\_  
Last Name (or Company Name) First Name(s)

Delivery Address: \_\_\_\_\_  
*\*Please include Green/Emergency # if applicable*

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Nearest Crossroads: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

Cell No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Do You Own or Rent Your Home?  Own  Rent - *If Renting, please provide landlord information below \*Note: All tenants are on a "COD" basis. Pre-payment of fuel is required before it will be delivered. Please allow a minimum 48 hours' notice for deliveries. Thank you.*

Landlord Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

**BILLING INFO/ADDRESS** (if different from above):

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**PREVIOUS ADDRESS** (if less than a year at the above address):

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Personal Guarantee:** We hereby affirm that the information herein given for the purposes of obtaining Credit is true and correct. Arthurs Fuel Inc., or its agent is hereby authorized to check the credit worthiness of the applicant/principals. It is agreed that all payments will be made on/by their due date, in accordance with the terms of sales. NET 30 DAYS from DATE OF INVOICE unless otherwise stated in writing to the applicant from Arthurs Fuel Inc. In consideration for the granting of credit to the Person/Company the undersigned hereby personally guarantees the due payment of all goods and services supplied to the company at its request and payments of all monies, which are now or shall at any time become owing to Arthurs Fuel Inc. The undersigned shall be held and bound to payments of the amount guaranteed and responsible for all recovery costs.  
2% INTEREST PER MONTH WILL BE CHARGED ON OVERDUE ACCOUNTS (26.824% PER ANNUM)

Customer Signature: \* \_\_\_\_\_ Date: \_\_\_\_\_

Name (Please Print): \* \_\_\_\_\_

*Continued...*

