

25 Enterprise Dr. Chatham, MA 02633 1-508-945-5599

www.whiteleyfueloil.com

*****RESIDENTIAL CREDIT APPLICATION*****															
APPLICANT INFORMATION															
Last Name		First Name			Middle Init. Jr/Sr		r Soc	Social Security #			Date of Birth				
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Current Mailing (Billing	g) Address	Apt#	City	/				Sta	te	Zip		Yrs at	Addr.	Own/Rent	
														☐ OWN ☐RI	ENT
Deliver To: (If Differer	nt Than Mailing Add	dress)	City	,				Sta	te	Zip		Previo	us Oil I	Jser? Y/N	
Deliver 10. (II Dillerer	ic man rianing had	11 (33)	City					Jtu		Z P			S \square		
Home Phone N	obile Phone Work Phone			Email Address						Previous/Current Oil Supplier					
													,		
Previous Address (If le	ess than 5 years at	Current) City	/			State			Zip		Yrs at Addr.		Own/Rent	
	,		,											OWN DRI	ENT
How Did You Hear Of \	Whiteley Fuel Oil?														
Employer Name & Address					City			State	7in		Posit	tion	Ye	ears at Employ	ver
zmproyer mame econad					0.07				p		. 00.			5a.5 ac 2p.o	, 0.
Landlord Name & Addr				City			State	Zip		Tele	phone				
***CO-APPLICANT					M:ddla		11	10"		Casial	l Caa			ata of Divita	
Last Name	First Nar	ne		Middle		JL	/Sr		Social	Sec	urity #	Di	ate of Birth		
Current Mailing (Billing	a) Address	Apt #	C	ity						State	Zi	р	Ye	ears at Addres	S
		<u> </u>													
Previous Address (If less than 5 years at Current) City				ity						State	Zi	р	Ye	ears at Addres	S
Home Phone Mobile Phone Work P					hone Emai					ail Address					
Employer Name & Address City						S	tate	Zip		Position	on		Ye	ears at Employ	/er
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APPLICATION CONTINUED ON REVERSE															

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APPLICATION AGREEMENT: PLEASE READ AND UNDERSTAND THE FOLLOWING BEFORE SIGNING THIS APPLICATION

Applicant/Co-Applicant does specifically authorize Whitely Fuel Oil ("WFO") to request a consumer credit report in connection with this application or in connection with updates, renewals, extensions, or enforcements of any credit granted as a result of this application. The Applicant/Co-Applicant may inquire of WFO whether or not a consumer credit report(s) was/were obtained and shall be told the name and address of the consumer's reporting agency that gave the report(s). Applicant/Co-Applicant authorizes WFO to start a credit investigation based upon the above information which was voluntarily provided. The information provided is true and accurate. BANKRUPTCY: A bankruptcy proceeding is not presently in progress or expected. FAIR CREDIT REPORTING ACT DISCLOSURE: application for sales on credit may be considered by WFO, now and from time to time, as to whether it continues to meet the credit requirements of NEC. MASSACHUSETTS RESIDENTS: Massachusetts law prohibits discrimination on the basis of marital status or sexual orientation. IF YOU ARE MAKING THIS APPLICATION INDIVIDUALLY AND NOT JOINTLY WITH YOUR SPOUSE, PLEASE PROVIDE THE FULL NAME AND CURRENT ADDRESS OF YOUR SPOUSE. TERMS: A FINANCE CHARGE OF 1 1/2% PER MONTH WHICH IS AN ANNUAL PERCENTAGE RATE OF 18% WILL BE APPLIED TO AMOUNTS OVER 30 DAYS. WE FIGURE THE FINANCE CHARGE ON YOUR ACCOUNT BY APPLYING THE PERIODIC RATE TO THE "ADJUSTED BALANCE" OF YOUR ACCOUNT. WE GET THE "ADJUSTED BALANCE" BY TAKING THE BALANCE YOU OWED AT THE END OF THE PREVIOUS BILLING CYCLE INCLUDING ANY UNPAID FINANCE CHARGES AND SUBTRACTING ANY PAYMENTS AND CREDITS RECEIVED DURING THE PRESENT BILLING CYCLE. Finance charges will be applied on a monthly basis. If a lawyer or legal proceedings are necessary to enforce collection, the Applicant/Co-Applicant agrees to pay all reasonable attorneys fees and costs. AGREEMENT: This application and its terms will be an agreement in effect as of the date of acceptance by NEC and it shall continue in effect until terminated in writing by Applicant/Co-Applicant or WFO. <u>DELIVERIES</u>: Unless otherwise requested, deliveries will be made in accordance with WFO's automatic degree-day service. Use of this service does not nullify the Applicant/Co-Applicant's responsibility to see that an adequate fuel inventory is on hand. NOTICE: Do not sign this Agreement if you believe important information has been omitted. You are entitled to a copy of this Agreement. FACSIMILE: An electronic transmission (fax) or copy of one shall be effective, enforceable and valid as if it contained any original written signature.

Applicant Signature							Date					
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Co-Applicant Signature							Date					
Credit/Debit Ca	rd for Bal	ances Over	30(Thirty) Da	ys / Card Num	ber / Pre Au	th Chg.	orm Attached (If Applicable) Expiration Dat					
□VISA □ M	C DI	SC										
	**	Y ****	******									
Tank Size	Delivery 1	Instruction	S	Discount Terms			Date of Last Serv	Fuel Type				
Service Contrac	ct			System Inform	nation		•	FILL LOCATION				
☐ PLAN A	☐ PLAN	NK □ PMI	☐ FHW ☐	FWA 🔲	STEAM	☐ HYDRO-AIF						
Special Instr	ructions,	/Notes:		☐ HEAT ON	ILY H	N TANK	KLESS □ HW	5 6 7				
				Delivery Type			AMOUNT IN	3 8				
				AUTOMAT	TIC			2 9				
				WILL CAL	L 🗆				1 0			
ACCEPTED BY WFO (Print)				AUTHORIZED	SIGNATURE		DATE					
CREDIT: Check	ked By	Date	Approved	Ву	Date	Limit	Туре					
		☐ YES ☐ NO)			REG L/I	_ COD	Cash/CC Only				