

	Sioux Lookout	Pickle Lake	Dryden	Red Lake	Kenora	Thunder Bay
Phone	807-737-2250	807-928-2261	807-223-2666	807-735-9920	807-468-6050	807-473-4449
Fax	807-737-2617	807-928-2970	807-937-4338	807-735-1237	807-468-7278	807-473-4418

Application for Furnace Oil

Date:	Account Number (for office use only):		
Name	Name	e of Spouse/Partner:	
Mailing address:		City:	Postal Code:
E-mail Address:			Statements are sent by e-mail
Home Phone #:	Cell #	:	
Owner Rent (Name	e of Landlord)		
Delivery address:		City:	Postal Code:
Please check if you would like	e on-call or automatic fil	ls: On-call Autom	atic (not available for Prepay accounts)
Please check if you would like Comprehensive Inspection Co			atic (not available for Prepay accounts)
	mpleted (date)		atic (not available for Prepay accounts)
Comprehensive Inspection Co	mpleted (date)		atic (not available for Prepay accounts)
Comprehensive Inspection Co Copy on File Yes No _	mpleted (date)		atic (not available for Prepay accounts)
Comprehensive Inspection Co Copy on File Yes No Do you have an oil fired hot w	mpleted (date) vater heater? Yes	No	
Comprehensive Inspection Co Copy on File Yes No Do you have an oil fired hot w Employment	mpleted (date) vater heater? Yes	No For How Long?	
Comprehensive Inspection Co Copy on File Yes No Do you have an oil fired hot w Employment Employed by:	mpleted (date) /ater heater? Yes Work N	No For How Long?	

Credit References: (Name, Address, Phone number) Please supply two: (Not required for COD or Credit Card accounts)



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Payment Plan Options

PLEASE CHOOSE ONE OF THE FOLLOWING PAYMENT OPTIONS

(x) PREPAY – minimum delivery is \$500.00. <u>Fills are on an on-call basis and must be pre-paid prior to</u> <u>delivery.</u>

(x) Credit Card Account: I authorize the full amount owing on my account to be charged to the credit card listed below, every Thursday.

Credit card Number:	*******	Expiry Date: _	CVV:
Name on the credit card:		VISA	MASTERCARD
Signature of card holder:			

When your account has been approved you will receive a call from a Morgan Fuels employee for the middle 8 digits of your credit card number.

(x) Personal PAD (Pre-authorized debit): Additional Personal PAD form required to be filled out

(x) Budget Personal PAD (Pre-authorized debit): 12 Equal Pre–Authorized Payments based on previous year's consumption, (Additional Personal PAD form required to be filled out)

Information for Budget Plan:

- ✓ Plans run from September 1st August 31st
- ✓ There will be no interest charged on budget plan accounts unless the account is not paid in full by August 31st. If it is not paid in full, it will not be eligible for budget for the next heating season.
- ✓ Budget plan customers will be set up for automatic delivery.
- ✓ Budget amounts vary depending on home heating history, home size, etc. **They are based on estimates so there may be an amount owing at the end of the season or there may be a credit.
- ✓ Pre-authorized payments can be set up for the 1^{st} or 15^{th} of each month.
- ✓ Customers may be contacted to adjust payments if it appears remaining payments are insufficient to cover balance or if payments appear to be higher what is required.

MORGAN FUELS

TERMS on which MORGAN FUELS grants credit

- 1. A service charge of 2.0% per month (26.8% per annum) calculated and payable monthly will be applied on any amount which is past due.
- 2. The company account is considered delinquent if not paid in full by the due date. Additional deliveries may be suspended until past due amounts are paid in full (unless other arrangements are approved). Any invoices past due are subject to listing for collection with the Credit Bureau.
 - A charge of \$25.00 will be levied against any N.S.F. cheques, or rejected preauthorized payments and all future deliveries will be Prepay until said account is paid in full.

CONSENT

The Applicant hereby

- a) Acknowledges that they understand and accepts the terms on which Morgan Fuels grants credit
- b) Consents to Morgan Fuels conducting a credit information search from any credit reporting agencies with respect to the Company, any principal thereof, or the spouse of any principal.

The above information is for the purpose of obtaining credit and is warranted to be true. The Customer agrees to pay all bills upon receipt and to abide by the terms and conditions in effect at the time of purchase. The Customer hereby authorizes Morgan Fuels to whom this application is submitted to obtain such credit reports as may be deemed necessary to properly consider this application for credit

Signature	Signature
**Automatic Delivery Customers Only:	
I, acknowledge that I must provide written notice to Morgan Fuels if I wish to have deliveries suspended. I will be responsible for payment for all deliveries made to the address above until written notice has been provided.	I, acknowledge that I must provide written notice to Morgan Fuels if I wish to have deliveries suspended. I will be responsible for payment for all deliveries made to the address above until written notice has been provided.
Signature	Signature
Date	Date