

NEW COSTONER IN O & CRE	DIT APPLICATION	N	
LAST NAME: FIRST NAME	FIRST NAME:		M.I:
OTHER NAME (SPOUSE/BUSINESS) :			
PRIMARY PHONE: SECONDARY	NDARY PHONE:		
EMAIL:	DATE OF BIRTH:		
I'D LIKE TO OPT OUT OF RECEIVING EMAILED STATEMENTS:			
DELIVERY ADDRESS:			
CITY:	STATE: IOWA	ZIP:	
MAILING ADDRESS (IF DIFFERENT) :		•	
CITY:	STATE: ZIP:		
DELIVERY PREFERENCE: KEEP FULL SCHEDULED DELIVERY	IF SCHEDULED DELIVERY, CONTACT T-J GAS WHEN AT 30%, REMAINING IN TANK OR HIGHER		
DO YOU OWN OR RENT THIS PROPERTY: OWN RENT			
SPECIAL DELIVERY INSTRUCTIONS:			
PRIMARY PROPANE USES (CHEC	K ALL THAT APPLY)		
RESIDENTIAL: HEAT: WATER HEATER: COOKING:	CLOTHES DRYER:		FIREPLACE:
OTHER (DESCRIBE)			
COMMERCIAL/AG: HEAT: WATER HEATER: LIVESTOCK:	GRAIN DRY	/ER:	LIFT TRUCK:
OTHER (DESCRIBE)			
EMPLOYER/OCCUPATION:			
WORK PHONE:			
BANK REFERENCE: (NAME & PHONE)			
Credit Terms: Our credit policy is payment in full within 30 days of invoice accounts more than 30 days from the current invoice date. Our FINANCE CH outstanding past-due balances must arrange payment before their next fil delivery. If your account is past due, and you have not arranged a payment services. Information provided in this form is confidential. We can be serviced to the confidential of the confidential of the confidential of the can be serviced to the confidential of the confidential of the confidential of the can be serviced to the confidential of the confidential of the confidential of the can be serviced to the confidential of the confidential	IARGE IS AN 18% ANNUA II. After 60 days you ma t plan, T-J Gas may withl	AL PERCENTAGE by be placed of the provision	GE RATE. Accounts with n a cash only basis for of further products or
SIGNATURE:	DATE:		
APPROVED BY:	DATE:		