NOBLE	FUELS
-------	-------

New Customer Application APPLICANT INFORMATION		
Current Address:		
City:		
State:		
ZIP Code:		
Phone:		
Cell Number:		
Please indicate if you rent or own:		
If Renting please give name of owner:		
Phone Number:		
Cell number:		
What City will we be delivering to?		
Color of House		
Street Address		
City		
State		
Zip Code		
Fuel Level Tank 1		
Fuel Level Tank 2		
Maximum capacity of Tank 1		
Maximum capacity of tank 2		
Where are the fills located?		
How many fills are there?		
I authorize Noble Fuels To deliver fuel oil to my residence and or place of business according to the information I have provided above. You also agree that your oil tank is safe, is not leaking, has no visible rust, and is sitting on 4 legs. If you are not sure whether your tank meets this criteria, please call us before ordering		
Please type or sign full name:		
Date:		
Additional Notes:		
After completion of form please email to Administration@noblefuelsinc.com		