

Shoshone Propane Applications

Date: _____

Customer(s) Names: (1) _____ (2) _____

Drivers License No: (1) _____ (2) _____

State: (1) _____ (2) _____

Billing Address: _____

City: _____ State: _____ ZIP Code: _____

Delivery Address: _____

City: _____ State: _____ ZIP Code: _____

E-Mail Address: (1) _____ (2) _____

Telephone: (1) Work: _____ (2) Work: _____

(1) Home: _____ (2) Home: _____

(1) Cell: _____ (2) Cell: _____

Employer: (1) _____ (2) _____

Occupation: (1) _____ (2) _____

OWN - Copy of Proof of Ownership _____ Employee Initials

RENT _____ Employee Initials

Landlord's Name: _____

PROPANE SECURITY DEPOSIT: \$ _____

Customer's Initials: (1) _____ (2) _____

(Please Complete Both Sides of Application)

DIRECTIONS TO PROPERTY: _____

CIRCLE ONE: STICK BUILT HOME / MANUFACTURED HOME

BUILT BY: _____ YEAR BUILT: _____

HOME SQUARE FOOTAGE: _____

CLEAR ACCESS TO PROPERTY / TANK: YES NO

DISTANCE OF RISER / TANK FROM HOME: _____

ALL GAS LINES AND APPLIANCES INSTALLED AND CONNECTED? _____

ELECTRICITY ON? YES / NO

PROPANE APPLIANCES: FURNACE W/H

DRYER FREE STANDING RANGE

BUILT IN OVER & COOKTOP BBQ FIREPLACE

POOL HEATER JACUZZI OTHER _____

*GAS SAFETY PACKET RECEIVED: Customer's Initials (1) _____ (2) _____

I have been informed of the Regulatory Impact Fee (1) _____ (2) _____

Comments: _____

All accounts must be paid IN FULL within 30 days of purchase. A LATE CHARGE will be added, computed at a periodic rate of 1 1/2% a month, which is an ANNUAL PERCENTAGE RATE of 18% calculated from the date of purchase of amounts unpaid 30 days or more. Your account MUST BE CURRENT to take advantage of any discount offered

Auto Fill Account YES / NO

Customers Signature

Customers Signature