

## RESIDENTIAL CUSTOMER ACCOUNT APPLICATION

Date of Application: Applicant Name: Applicant Phone #: Spouse's Name: Spouse's Phone #: Service (Delivery) Address: Applicant Texas Driver's License #: City, State, Zip: Applicant Date of Birth: Billing Address: (if different than service address) Tank Size: City, State, Zip: Do you **RENT** or **OWN** your home? Email Address: If you RENT, Landlord Name: Landlord Phone #: Preferred Method of Billing: MAIL or E-MAIL What appliances run on propane in your home? Do you have a gate? If yes, what is your gate code? (Please contact us if this changes) Any additional instructions that we need to know? Previous propane supplier (if applicable)? Applicant Signature: Date:

\*A SERVICE CHARGE OF 1 ½% PER MONTH (18% PER ANNUM) WILL BE ADDED TO ALL OVERDUE INVOICES PAST 30 DAYS.