



**Heating Oil**  
 1555 Van Horn Road  
 Fairbanks, AK 99701

**Residential  
 Credit Application**  
 Psi-credit@petrostar.com  
 Fax (907) 452-0644

**Bulk Plant Sales**  
 418 Illinois Street  
 Fairbanks, AK 99701

**Applicant:** \_\_\_\_\_  
**Birthdate:** \_\_\_\_\_ **Home Ph.:** \_\_\_\_\_  
**Social Security #:** \_\_\_\_\_  
**Employer:** \_\_\_\_\_ **Ph.:** \_\_\_\_\_  
**Length of Employment:** \_\_\_\_\_  
**Position:** \_\_\_\_\_ **Monthly Income: \$** \_\_\_\_\_

**Co-Applicant:** \_\_\_\_\_  
**Birthdate:** \_\_\_\_\_ **Home Ph.:** \_\_\_\_\_  
**Social Security #:** \_\_\_\_\_  
**Employer:** \_\_\_\_\_ **Ph.:** \_\_\_\_\_  
**Length of Employment:** \_\_\_\_\_  
**Position:** \_\_\_\_\_ **Monthly Income: \$** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
**Physical Address:** \_\_\_\_\_  
**Invoices and Statements will be emailed.**  
**Email Address:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_  
**Length at Current Address:** \_\_\_\_\_ **Amount of Mortgage or Rent Payment: \$** \_\_\_\_\_  
**Own:**  **or Rent:**  **If Renting, Name of Landlord:** \_\_\_\_\_  
**Name of Personal Reference:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**PROMISE TO PAY**

I promise that everything stated in this application is correct to the best of my knowledge. I also promise to pay Sourdough Fuel for all charges billed for goods and services within 30 days of invoice/billing. Should I default, I understand that automatic deliveries will be suspended if satisfactory arrangements have not been made. Default is failure to pay the full amount of all charges within 30 days after billing, or for Budget Plan customers, when the required monthly payments are not paid as agreed. Late payments will be assessed a finance charge of .875% per month. I hereby authorize Sourdough Fuel to obtain credit reports in connection with this application. If this account becomes delinquent and is assigned to a collection agency, a collection fee will be added to the delinquent balance and charged to me.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Would you prefer Automatic Delivery (please fill out request)  or Call-In Service**

**REQUEST FOR AUTOMATIC DELIVERY OF HEATING OIL**

I authorize Sourdough Fuel to deliver heating fuels and to keep an adequate supply in my storage tank at all times without further notice and to thereby provide Automatic Delivery Service to:

**Delivery Address:** \_\_\_\_\_  
 (For additional deliveries, please request a supplemental form.)

**In addition to authorizing Sourdough Fuel to run credit checks as needed, I further agree that any and all purchases and deliveries from Sourdough Fuels will be governed by the Sourdough Fuel Terms and Conditions attached hereto and incorporated fully herein.**

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**BUDGET PAYMENT PLAN**

Avoid high winter fuel bills by prorating your annual use over a predetermined number of months.

We recommend beginning in August and ending in June. Notification of our payment plan will be sent in July.

Are you interested in this plan? Yes  No  \_\_\_\_\_

# RESIDENTIAL CREDIT APPLICATION

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*(If you have more than one delivery address, please request a second information section sheet.)*

Physical Address: \_\_\_\_\_

Directions to Home: \_\_\_\_\_

House Description: \_\_\_\_\_

Do you need to be called before delivery? Yes  No  (Unnecessary calls may delay your delivery)

If so, why? \_\_\_\_\_

May we leave a message and make delivery? Yes  No

Dogs: Yes  No  How many? \_\_\_\_\_

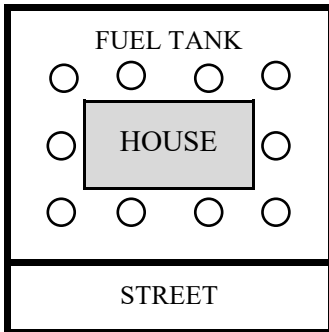
Are they kept: Inside  or Outside

When was the last delivery? \_\_\_\_\_

Was the tank filled? Yes  No

Who was the last fuel supplier? \_\_\_\_\_

When do you want the first delivery? \_\_\_\_\_



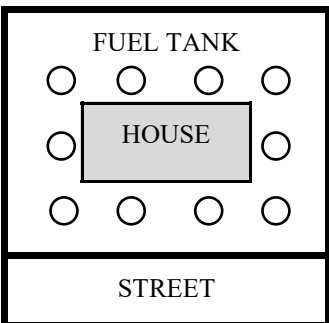
1). Heating Oil Tank Location: \_\_\_\_\_

Autofill: Yes  No  Tank Size: \_\_\_\_\_ Above Ground:  or Below Ground:

What type of furnace, boiler, or stove do you have? (We do not deliver to barrels.)

HWBB:  Toyo:  Monitor:  Drip:  Forced Air:  Other: \_\_\_\_\_

*(If you have another tank at this physical address, please provide the following information for the additional tank.)*



2). Heating Oil Tank Location: \_\_\_\_\_

Autofill: Yes  No  Tank Size: \_\_\_\_\_ Above Ground:  or Below Ground:

What type of furnace, boiler, or stove do you have? (We do not deliver to barrels.)

HWBB:  Toyo:  Monitor:  Drip:  Forced Air:  Other: \_\_\_\_\_

Are there tanks on the property other than a heating oil tank?

Yes  No  If yes, please provide information: \_\_\_\_\_

Do you use any other form of heat source? Wood stove  Pellet stove  Other \_\_\_\_\_