



# DEVINEBIOHEAT

**Made on American soil.**

1. Please download and complete the application below to begin the process of establishing a Devine Bioheat account.
2. When complete, fax the application to (203) 857-4609. A customer care representative will contact you to confirm receipt of your application. Please call us at 866-4421 if you need assistance.
3. This form is offered online as a convenience, if you prefer we can fax or email you the form.
4. You may provide your social security number and credit card to us over the phone.

Date \_\_\_\_\_ Start Date \_\_\_\_\_

Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Home Address Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bill to Address Address \_\_\_\_\_

(if different)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Home \_\_\_\_\_ Cell \_\_\_\_\_ Business \_\_\_\_\_

Employment Name of Company \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card Type V MC AMEX D Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ V Code \_\_\_\_\_

Previous Oil Company Name \_\_\_\_\_

Complete the following if applicable to you:

Rental Property Landlord's Name \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I would like to have price protection Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_

I would like to pay by CREDIT CARD at delivery to receive a 5¢/gallon discount Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_

I would like to pay by a budget plan Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_

I heat my hot water with (check all that apply) Oil \_\_\_\_\_ Gas \_\_\_\_\_ Electric \_\_\_\_\_ Solar \_\_\_\_\_ Other \_\_\_\_\_

I would like my heating equipment to be covered by a service contract. Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_

The number of oil burners I have is 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ Not Sure \_\_\_\_\_

My estimated yearly oil usage is \_\_\_\_\_ gallons

The size of my oil tank is 1-275 \_\_\_\_\_ 2-275 \_\_\_\_\_ 1-330 \_\_\_\_\_ 2-330 \_\_\_\_\_ 550 \_\_\_\_\_ 1,000 \_\_\_\_\_ Not Sure \_\_\_\_\_

I am interested in a tank protection plan. Yes \_\_\_\_\_ No \_\_\_\_\_ Not Sure \_\_\_\_\_

I, We, the undersigned hereby agree to unconditionally guarantee the payment of all oil and/or services furnished to the above account within 30 days from date of invoice. I, We, understand that a finance charge of 1.5% per month will be added to all unpaid balances which are past due. In the event of default, I, we, agree to pay attorney's fees and other costs of collection of any unpaid balance due.

I, We, hereby authorize Devine Bros. Inc. to charge to my, our, above credit card the charge of all fuel oil and other services rendered to my, our, account if this account balance is past 30 days of the services rendered.

The undersigned shall allow Devine Bros. Inc. to deliver oil utilizing its "automatic delivery" system until the account is terminated in writing by the undersigned or by his/her representative.

The undersigned shall allow Devine Bros. Inc. to purchase oil for him/her and agree to pay for the oil according to the terms set herein.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number of Signer \_\_\_\_\_

