

FERRELL FUEL CO., INC.

Quality Petroleum Products

P. O. Box 850 (410) 272-4650
Aberdeen, Maryland 21001 (410) 575-7083
(800) 924-9478
www.ferrellfuel.com FAX (410) 272-4588

OFFICE USE ONLY

ACCT # _____
DATE APPROVED: _____
APPROVED BY: _____

RESIDENTIAL APPLICATION

APPLICANT INFORMATION:

NAME: _____ HOME PHONE: _____
ADDRESS: _____ CELL PHONE: _____
CITY: _____ STATE: _____ ZIP CODE: _____
EMPLOYER NAME: _____
ADDRESS: _____
SOCIAL SEC. NUMBER: _____ DATE OF BIRTH: _____
E-MAIL: _____
Receive Invoices and Statements by e-mail

CO-APPLICANT INFORMATION:

NAME: _____ HOME PHONE: _____
ADDRESS: _____ CELL PHONE: _____
CITY: _____ STATE: _____ ZIP CODE: _____
EMPLOYER NAME: _____
ADDRESS: _____
SOCIAL SEC. NUMBER: _____ DATE OF BIRTH: _____
E-MAIL: _____

* * * * *

TERMS: By signing below, I agree to the following. My account is due 30 days from date of service. Any check, electronic funds transfer ("e-check"), or draft which is refused, declined and/or returned by the financial institution upon which it is drawn shall be assessed a Fee of \$35.00. In the event the returned item remains unpaid and legal relief is sought, under Maryland Law the account holder may also be responsible for penalties, including but not limited to, an amount up to two (2) times the amount of the returned item not to exceed \$1,000.00 in penalties. Past Due Balances shall accrue Finance Charges at the rate of 1 1/2 % per month (18% per year). Should it become necessary to collect any Past Due Balances, I shall be responsible for all costs associated with collection, including but not limited to, all Finance Charges, Attorneys Fees of 33 1/3% of the total amount due and owing, court costs and other costs incurred by Ferrell Fuel Co., Inc. I consent to Ferrell Fuel Co., Inc. and its agents receiving information as it pertains to my credit history in consideration of providing goods, services, etc. Acceptance of partial payments – even if marked as "payment in full" – does not waive Ferrell Fuel Co., Inc.'s right to pursue any balance owed them. In the event of a lawsuit, I agree to the jurisdiction and venue of Maryland, the application of the laws of the State of Maryland and waive any rights to trial by jury.

_____(SEAL)
APPLICANT SIGNATURE

DATE

_____(SEAL)
APPLICANT SIGNATURE

DATE