

**BLAKEMAN PROPANE INC.**  
801 W Converse, PO Box 45  
Moorcroft, WY 82721  
307-756-3302 or 866-259-7736 / 307-756-9614 fax

**BUSINESS ACCOUNT APPLICATION**

BUSINESS NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
DELIVERY CONTACT PERSON \_\_\_\_\_ AFTER HRS PHONE # \_\_\_\_\_  
PROPANE SERVICE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
BILLING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
AP CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

BUSINESS TYPE: SOLE PROPRIETOR \_\_\_\_\_ LTD \_\_\_\_\_ LLC \_\_\_\_\_ CORP \_\_\_\_\_ SS# OR FED TAX ID# \_\_\_\_\_ Tax Exempt \_\_\_\_\_  
Please provide exemption form

**NAMES OF OWNERS OR OFFICERS:**

**TITLES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PURCHASE ORDERS REQUIRED? YES \_\_\_ NO \_\_\_ SIGNATURES REQUIRED? YES \_\_\_ NO \_\_\_ **ATTACH SPECIAL BILLING INSTRUCTIONS**  
DELIVERY STATUS: ON ROUTE \_\_\_ CALL IN \_\_\_ LEAVE A COPY AT DELIVERY SITE? YES \_\_\_ NO \_\_\_

BANK REFERENCE \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
BANK ADDRESS \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

**BUSINESS REFERENCES:**

NAME \_\_\_\_\_ CONTACT \_\_\_\_\_ FAX # OR EMAIL \_\_\_\_\_  
NAME \_\_\_\_\_ CONTACT \_\_\_\_\_ FAX # OR EMAIL \_\_\_\_\_  
NAME \_\_\_\_\_ CONTACT \_\_\_\_\_ FAX # OR EMAIL \_\_\_\_\_

IS THE PROPERTY TO BE SERVICED LEASED OR OWNED? \_\_\_\_\_ IF LEASED, PLEASE PROVIDE THE FOLLOWING:

PROPERTY OWNER INFORMATION: NAME \_\_\_\_\_ TELEPHONE # \_\_\_\_\_  
FORMER FUEL SUPPLIER \_\_\_\_\_ REASON FOR SUPPLIER CHANGE \_\_\_\_\_  
REASON FOR CHOOSING US \_\_\_\_\_

TANK SIZE (Size is determined by the number of propane appliances & propane usage. Some sizes may not be available).

PROPOSED TANK SET DATE \_\_\_\_\_ DESCRIPTION OF PROPOSED TANK LOCATION \_\_\_\_\_  
\_\_\_\_\_

LOCATION ACCESSIBLE FOR INSTALLING AND FILLING THE TANK? YES \_\_\_ NO \_\_\_ IF NO, LIST ANY OBSTACLES THAT MAY HINDER SERVICE \_\_\_\_\_

If trenching is required, Blakeman Propane will call for locates. Customer agrees to pay for any charges that may occur for line locates and agrees to hold Blakeman Propane Harmless in the event that underground service lines (telephone, electrical, cable tv, sewer, water, etc.) are damaged as a result of trenching.

**INSURANCE REQUIREMENTS** – Customer shall provide insurance coverage pursuant to the terms of Appendix 1 to this Tank Lease Agreement.

BUSINESS NAME \_\_\_\_\_

**CREDIT TERMS:** Charges are due upon receipt of propane. Charges not paid within 30 days of purchase of propane may be subject to a finance charge of 2% per month or 24% per annum. Failure to pay charges and/or interest may result in a referral collection. Customer agrees to pay all reasonable costs of collections, including attorney's fees and court costs. I understand that collection notices may be sent to me by email.

**I (WE) agree to the tank lease and credit terms listed above & authorize Blakeman Propane Inc. to obtain credit information.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**If this account application and agreement is for a corporation or a limited liability company, I hereby give my (our) personal guarantee as to all terms of the above agreement.**

Guarantor (Signature) \_\_\_\_\_ Printed Name \_\_\_\_\_

Guarantor (Signature) \_\_\_\_\_ Printed Name \_\_\_\_\_

**FOR OFFICE USE ONLY**

CREDIT CHECK RESULTS \_\_\_\_\_ CREDIT LIMIT \_\_\_\_\_ APPROVED/DISAPPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

TYPE OF ACCOUNT: CBD (cash before delivery) \_\_\_\_\_ COD (cash on delivery) \_\_\_\_\_ CHARGE (due within 30 days after delivery) \_\_\_\_\_

COUNTY OF LOCATION \_\_\_\_\_ PRICE CODE \_\_\_\_\_ ROUTE \_\_\_\_\_ WILL CALL / FILL BY DAYS (CIRCLE 1)