



PO Box 158 | Wind Gap PA 18091 610-863-3835 | 610-863-5687 Fax  
 950 Pennsylvania Ave, Pen Argyl, PA 18072

IF CORPORATION LIST OFFICERS:

**BUSINESS CREDIT APPLICATION**

Account No.:		Date:			
Name of Business:		FID or SS #:			
Billing Address:		Delivery Address:			
Telephone #:		Telephone #:			
Tax Exempt: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, #:		Number of Years Operating:		Are purchase order #'s needed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, blanket P.O. #:	
Usage?	<input type="checkbox"/> Heat	<input type="checkbox"/> Fork Lift	<input type="checkbox"/> Pump Station	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Other
If other explain:					

**Schedule of Initial Prices and Fees**

Minimum Annual Purchase: \_\_\_\_\_ Initial Propane Price: \_\_\_\_\_  
 Special Delivery Fee: \_\_\_\_\_ \$99/\$150 wknd\_\_ per delivery Tank Removal Charge: \_\_\_\_\_ \$95-\$190\_\_\_\_  
 Meter Deposit Charge: \_\_\_\_\_ N/A \_\_\_\_\_ Minimum Usage Fee: \_\_\_\_\_ (If applicable)  
 Diagnostic Fee (Service tech) \_\_\_\_\_ \$95-\$150 \_\_\_\_\_ Meter System Fee (Metered Service): N/A

IF INDIVIDUAL BUSINESS:

Owner's Name:	Owner's Social Security #:
Spouse's Name	Spouse's Social Security #:
Address:	Home Phone #:

IF PARTNERSHIP LIST PARTNERS:

Name:	Social Security #:
Address:	Telephone #:
Name:	Social Security #:



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Name:	Title:
Address:	Telephone #:
Name:	Title:
Address:	Telephone #:
Name:	Title:
Address:	Telephone #:
Federal I.D. #:	

**Property:** Lessig will provide the appropriate propane storage tank(s) ("tank") or cylinder and related equipment (in Lessig's opinion), which will, at all times, remain the property of Lessig and will not become a fixture or part of applicant's or businesses real estate. A UCC-1 may be filed with the appropriate state where the tank(s) is/are located.

**Delivery Price:** Business shall pay Lessig's rates, fees or charges in effect on the date that propane is delivered to business customer. Lessig reserves the right to change its rates or charges if need be without prior notice. The price of propane varies based on market influences, Lessig's costs, volume of use, and other factors.

**Equipment Operation and Access:** Lessig shall maintain the equipment in good operating condition at all times. We hereby agree that Lessig shall have right of entry at all times upon premises at any or all reasonable hours of the day for the purpose of removal, inspection, and repair or to maintain the equipment. Access will be granted to Lessig without question or hindrance by business or the businesses agents. Business customer will always be responsible for maintaining accessibility to said equipment.

This information is given for the purpose of obtaining credit and is warranted to be true. You may make any such investigation in respect to my credit as you deem necessary or advisable. I agree to pay any balance I owe to Lessig within thirty (30) days of receiving my bill. I agree to pay finance charges that will accrue on the unpaid balance at the rate of 1½% per month (18% A.P.R.). I understand that legal action may be taken if I fail to fulfill this contract and I will be responsible for all collection costs including interest, filing fees, and attorney fees of not less than \$215.00.

**Personal Guarantee:**  
 I hereby personally and unconditionally guarantee the payment of all merchandise and other charges incurred by the above referenced applicant.

Applicant Signature:	Title:
Applicant (Print Name):	Date:

Note: This form must be filled out completely in order for customer to receive credit line with our company. *All information will be kept confidential.*