

G.A. Bove & Sons, Inc.

76 Railroad Street, Mechanicville NY 12118

Phone: (518) 664-5111

Fax: (518) 664-6463

Email: customerservice@bovefuels.com

RETAIL CREDIT APPLICATION & CREDIT AGREEMENT

Sales Representative: _____

Name _____ SS# _____ DOB ____/____/____

Delivery Address _____ City _____ State _____ Zip _____

County _____ School District: _____ How long at current address? _____

Day time Phone Number: _____ Evening Phone Number: _____ Other Number: _____

Best Time to Reach You: (circle preference) Daytime / Evening Email Address: _____

Mailing Address (if different than above)

Address _____ City _____ State _____ Zip _____

Owner Tenant Landlord Name: _____ Landlord Phone Number: _____

Employment _____ Address _____

Spouse's Name _____ SS# _____ DOB ____/____/____

Employment _____ Address _____

Previous Home Address _____ City: _____ State: _____ Zip: _____ Years There: _____

Name of Last Fuel Supplier: _____ Reason for Changing: _____

How did you hear of our company? Newspaper Saw trucks Customer Referral Web Search Other

Credit Card Deduction Authorization Agreement (Please read carefully)

I hereby authorize G.A. Bove & Sons, Inc. and/or its affiliates to initiate payment deductions from my credit card Account pursuant to the following: If the charge on my account is not paid within 45 days, I expressly authorize and agree that the entire balance owed with interest will be charged against the credit card account listed below. I understand and acknowledge I will receive notice in 10 days that my credit card has been charged to pay off the present balance due. *This authorization will remain in effect until written notification is received from the customer or G.A. Bove & Sons, Inc. of the agreement termination.*

Credit Card Number: _____ Exp Date: ____/____

Signature-Guarantor/Charge Acct. Customer

Automatic Credit Card Deduction Authorization Agreement (Please read carefully)

By checking the above box, I hereby authorize G.A. Bove & Sons, Inc. and/or its affiliates to initiate payment deductions from my Credit Card Account pursuant to the following: I understand that my credit card number on file will be charged accordingly for deliveries and service work based upon my established credit terms with G.A. Bove & Sons Inc. For Charge Account Customers my credit card will be charged within 10 days of delivery or services rendered. *This authorization will remain in effect until written notification is received from the customer or G.A. Bove & Sons, Inc. of the agreement termination.*

Terms and Agreement

Notice to buyer(s): Do not sign before you read the agreement below You are entitled to a copy of this agreement and the information regarding your rights to dispute billing errors. I hereby authorize you or any credit reporting agency employed by you to investigate the references herein listed or any other information stated above to determine my qualifications for a credit account. I also hereby authorize G.A. Bove & Sons, Inc. to run and obtain a credit report at any time. In the event my account is turned over to an attorney for collection, I also agree to pay any collection costs incurred by G.A. Bove & Sons Inc. on my account and an attorney's fee of the unpaid balance. I understand that deliveries are payable within 30 days. If deliveries are not paid within 30 days, I will pay a finance charge of 1.5% a month and my account may be placed on hold. Please be advised any returned checks will be submitted to Cyber Collect.

Buyer Signature	Date:	Spouse Signature:	Date:
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DELIVERY INFORMATION SHEET

Customer Name: _____ Account # _____

Delivery Address: _____ City: _____ County: _____ School District: _____

Delivery instructions: (please include description of home)

FOR FUEL OIL OR WINTER BLEND

Product to be delivered: _____

Size of tank? 275 550 1000 Other

Approximately how much fuel is in your tank right now? _____ Gallons

Above or Underground Tank: _____

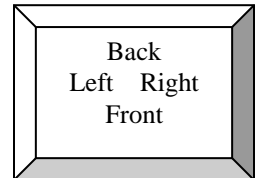
Do you heat your hot water with oil? Yes No

Which delivery method would you prefer? _____ Automatic _____ Will Call

Do you have an alternate heat source? ___ Pellets/Wood ___ Solar ___ Space Heaters ___ Coal ___ Other

Notes _____

Using the diagram below, if you were facing the front of your home, mark an x the location of your oil fill pipe.



FOR PROPANE

New Tank Install or Existing Tank: _____

How many tanks? _____

Size of tank? 25gal 50gal 100gal 500gal 1000gal other _____

Aboveground Underground What is the percentage in existing tank? _____

Use for propane? Heating Hot water Cooking Fireplace Pool Generator Dryer

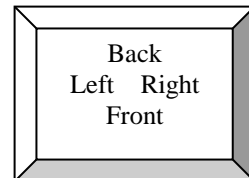
Which delivery method would you prefer? _____ Automatic _____ Will Call

Do you have an alternate heat source? ___ Pellets/Wood ___ Solar ___ Space Heaters ___ Coal ___ Other

If you own the propane tank – please include a copy of proof of ownership and serial number

Notes _____

Using the diagram below, if you were facing the front of your home, mark an x the location of your propane tank location.



Would you be interested in a service contract for your heating system? Yes No