

3711 LeHarps Road, Youngstown, Oh 44515 330-792-1100—800-362-9410 FAX: 330-792-1462

internal USE Only			
Cust #_			
Approv	/al:		

C.O.D. Requirements

Date:				
Heating Oil Customers Only Tank or Fill Location: Does Tank Whistle Work? Yes No (Ex: Front, Back, In Garage Ect.)				
Name:				
Billing Infomation • (Enter Delivery Address On Right If Needed)	Name:			
Address:	Address:			
City	City			
State	State			
Zip	Zip			
Telephone Number:	Fax Number:			
E-Mail Address:				
Fed Id. #:	Products: □-Lubricants □-Fuel			
Credit/Debit Card Information				
me Telephone				
Name	тенерноне			
Card Number Expir	ation Code On Back			
Persons Authorized to Make Purchases:				
•	2			
Bank References				
Bank Name:				
Address:				
Telephone: Contact Person				
Bank Account #				
C.O.D. Agree	ement			
Terms are payment upon receipt of shipment from Lyden C may be in the following forms: Company Check, Certified fu will result in terms changed to prepay. A NSF bank fee of to Lyden Oil Company. If suit is brought to enforce payment collection fees. Signature on this form acknowledges the tecontained is true and correct.	Dil Company. C.O.D. (cash on delivery) payments unds/money order or credit card. NSF checks \$50.00 will be charged for each check returned nt of your account you agree to pay additional			
Signature Title	e Date			
Printed Name				

Territory:_

Internal Use Only

Salesman:_