

Legal Company Name:		
DBA or Business Name:		
Address:		
City:	State:	Zip:
Federal Tax ID #:	Phone:	Email:
Business Type:	☐ Partnership ☐ Corporation ☐ Subsi	idiary of
Nature of Business:		
State Incorporated In:	Date of Ir	ncorporation:
Principals	Position	n
	Fetimated Monthly Heago	:Credit Requested:
FINANCIAL REFERENCES	Estimated Monthly Osage.	Cledit nequested
	City/State:	Phone No:
Major Suppliers	City/State.	I Holle No
	City/State:	Phone No:
	City/State:	
	·	Phone No:
		ncome statement on all customers. (They will be held in strict confidence.)
Important Notice to Customer – 1. The information supplied is accu. 2. I authorize investigation of all st. 3. I/We, recognizing that my/our in	your signature acknowledges that: urate as of the date shown; tatements or other credit data herein and release of such in	oformation to DCC Propane, LLC or any of its subsidiaries, from any & all sources; If the credit history of the undersigned, hereby consents to and authorizes the
Authorized Signature		Date
Authorized Signature		Date
OFFICE USE ONLY:		
☐ COD Required	DM Signature/Date	
☐ Credit Authorized	RM Signature/Date	
Notes		