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RETAIL FUEL DELIVERY AND SERVICES AGREEMENT

DATE: _____

NAME FIRST _____ LAST _____ LAST 4 SSN: _____

SERVICE ADDRESS _____ CITY _____ STATE _____ ZIP _____

CROSS STREET _____ EMAIL _____

PHONE: HOME _____ WORK _____ CELL _____ DOB _____

DIFFERENT BILLING ADDRESS ☐ YES ☐ NO

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP _____

CURRENT EMPLOYER _____ CITY _____ STATE _____ ZIP _____

☐ OWN ☐ RENT #YRS _____ L/L FIRST _____ LAST _____ PH: _____

CURRENT SUPPLIER _____

LESS THAN 2 YRS AT CURRENT ADDRESS:

PREVIOUS ADDRESS _____ CITY: _____ STATE: _____ ZIP _____

BUDGET PLAN ☐ YES ☐ NO PURPOSE: ☐ HEAT ☐ HOT WATER TANK SIZE: _____ ☐ AST ☐ UST

HEATED RMS _____ SQ FOOTAGE _____ ANNUAL USAGE _____ GALS. #RESIDENTS _____

SYSTEM OPERATIONAL? ☐ YES ☐ NO HOW IS HOT WATER HEATED _____

HOW FULL IS TANK _____ FILL LOCATION _____

SPECIAL DELIVERY INSTRUCTIONS: _____



BUYERS RIGHT TO CANCEL

YOU, THE BUYER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. SEE THE ENCLOSED NOTICE OF CANCELLATION FORM FOR AN EXPLANATION OF THIS RIGHT.

SIGNATURE: _____

DATE: _____