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Authorization to Use Credit Card/E-Check

We would like to request your signature to process your credit card for the purchase of oil, propane, service, installations, or any services rendered by Daniels Energy.

check, to place for any se	•	pane, service, installations, or ergy. The card will be held on
Credit Car	d Number:	Exp
E-Check:	Bank Routing Number:	
	Bank Account Number:	
Name of Bank		Checking or Savings
Name On	Checking or Savings:	······································
Signature		Date
Card Own	er Billing Address	·
Card Own	er Billing City, State, Zip Code	
CSR:		Account #: