



Putnam Valley Petroleum Corp

100 Buckshollow Road
Mahopac, NY 10541
PH: 845-628-8393 Fax: 845-628-8396
Email: admin@putnamoil.com

AUTOMATIC DELIVERY REQUEST FORM

Last Name _____ First Name _____ Date _____

Are you the owner? ___ Yes ___ No. If no, owner's name _____

Owner's address _____ Tel# _____

How did you hear about Putnam Valley Petroleum Corp.? _____

Former/current oil supplier _____ Date of last delivery? _____

Why do you want to switch from current supplier? _____

Delivery Address _____

City _____ State _____ Zip Code _____

Closest cross street _____

Tel # _____ Cell # _____ Other # _____

Other contact _____ E-Mail address _____

Residential ___ or Commercial Property ___

Oil Tank Size _____ Oil Tank Location _____ Underground? ___ Yes ___ No

How much oil is in tank now? _____ Where is the oil fill? _____

Where is the vent pipe? _____ Approx. oil used per year _____

Oil Heat only ___ or Heat & Hot water? ___ Do you heat w/wood? ___ If so, how often? _____

Payment Method: Cash ___ Check ___

Credit Card: Type _____ # _____ Exp.Date _____ CVV _____

Cardholder Name (as it appears on card): _____

Billing Address _____

City _____ State _____ Zip Code _____

I hereby authorize Putnam Valley Petroleum Corp. to charge my credit card for oil deliveries and services rendered (not covered under service contract). I have received the terms & conditions including the cancellation policy.

Authorized Signature: _____ Date: _____

Automatic Delivery Conditions:

- All home heating fuel must be supplied by Putnam Valley Petroleum Corp. (PVP).
- All invoices must be paid when due. Late fees and charges will apply to all past due accounts.
- This agreement is valid upon receipt of signature and will remain in affect unless written cancellation is received by PVP 10 days prior to delivery.
- PVP exercises the right to terminate this contract based on oil consumption.

By signing below you hereby authorize PVP to make automatic deliveries to the above-mentioned property and agree to the terms above.

Authorized Signature _____ Date _____

Print _____