

**Bumgardner**   
**& Flasher Oil, Inc.**  
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14313 Extract Road,  
Mount Union PA 17066

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**CREDIT APPLICATION**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Employer phone:** \_\_\_\_\_

**Employer address:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Length of employment:** \_\_\_\_\_

**Spouse's name:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Employer address:** \_\_\_\_\_

**Spouse's occupation:** \_\_\_\_\_

**Length of employment:** \_\_\_\_\_

**Bank name:** \_\_\_\_\_

**Bank phone number:** \_\_\_\_\_

**Residence:**

Rent

Buying/Own

**If renting:**

**Landlord name:** \_\_\_\_\_

**Landlord phone number:** \_\_\_\_\_

**Previous heating fuel supplier:** \_\_\_\_\_

**Please provide 2 relatives and 2 business credit references:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Business name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Business name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

Please submit form to Bumgardner & Flasher Oil. Form can also be e-mailed to [darlene@bumgardnerflasheroil.com](mailto:darlene@bumgardnerflasheroil.com).

**PLEASE ALLOW 2 WEEKS FOR APPLICATION TO BE PROCESSED**