



14B JAN SEBASTION DR. SANDWICH, MA 02563 I 508-833-8666 I Fax: 508-888-9034

Date	_						
А	UTOMA	TIC FUEL DELIVE	RY APPLICATIO	N			
Applicant's Name							
	Last	First	Initial	Initial			
Delivery Address							
	Street	City	State	Zip Code			
☐ Own ☐ Rent If Renting – Name, Addres	ss, & Phone of	Owner					
Mailing Address							
	Street	City	State	Zip Code			
Phone – On Cape Cod		Home	Cell or Business				
Name of BoilerSerial # of Boiler							
Credit Card #Cape Cod Biofuels is author			3 digit code o this credit card.				
Terms and Authorization – Read Carefully Before Signing							
Seller is not responsible for agrees to pay all costs of colimited to, Attorney fees Do not si	Schedule. (Budue to conditor of God, govern Seller is not reil) it is the Buyor any fuel runcollection incurand expenses	uyer) understands and ag ions beyond its control, in ment regulations or fuel s sponsible for any fuel run er's responsibility to insula- out or any damages resulared by Seller in the enfor	rees that: (i) Seller shall icluding but not limited to shortages; (ii) accurate furout or any damages respectively have adequate furouting there from or incidencement of this agreement of the effect of a sealed in ER	not be responsible for o strikes, fires, accidents, all consumption rates ulting there from or all inventory on hand and ental thereto. Buyer nt, including but not instrument.			
Applicant's Signature Da			Date				