

Account No. _____

T.W. PHILLIPS GAS AND OIL CO.

CREDIT APPLICATION AND AGREEMENT FOR GAS SERVICE

Date _____

(Please PRINT and complete BOTH sides of application)

Name(s) (1) _____ and/or (2) _____

Service Address _____ Apt _____ Floor _____ City _____ State _____ Zip Code _____

Mailing Address _____ Apt _____ Floor _____ City _____ State _____ Zip Code _____

What is your? Contact Phone No. _____ Work Phone No. _____

What is your Social Security No.? (1) _____ (2) _____

What is your Driver License No.? (1) _____ (2) _____

Is gas used for heat? Yes ___ No ___ Are you a Senior Citizen? Yes ___ No ___

Are there any major health related problems at your residence? Yes ___ No ___

List full names of all persons residing at property.

Name _____	Relationship _____	Date of Birth _____
Name _____	Relationship _____	Date of Birth _____
Name _____	Relationship _____	Date of Birth _____
Name _____	Relationship _____	Date of Birth _____
Name _____	Relationship _____	Date of Birth _____
Name _____	Relationship _____	Date of Birth _____

What is your previous address? _____ How Long _____

For Office Use Only _____

Service Class: RS _____ RT _____ PPT _____ Credit Report _____ Rating _____

Credit Appr _____ Service Denied _____ Security Dep. _____ Amount \$ _____ Form 19 (08/98)

Do You? Own ___ Rent ___ If Rent do you have one (1) year lease? Yes ___ No ___

Monthly Payment? \$ _____ Name of Landowner/Mortgage Co.? _____

Address Landowner/Mortgage Co.? _____ Phone No.? _____

Are You? Married ___ Single ___ Divorced ___ Separated ___ Widow ___ Other ___

(1) Are You Employed? Yes ___ No ___ Employer? _____ How Long? _____

Phone No.? _____ Monthly Income? \$ _____ Previous Employer? _____

(2) Is Your Spouse Employed? Yes ___ No ___ Employer? _____ How Long? _____

Phone No.? _____ Monthly Income? \$ _____ Previous Employer? _____

If not Employed list income source and amount? _____ \$ _____

Credit References: Other Utility Service provided by? _____

Bank /Branch? _____ Charge Card Type? _____

HAVE YOU EVER USED T.W. PHILLIPS GAS and OIL CO. SERVICE? Yes ___ No ___

IF YES, WHAT ADDRESS? _____ WHEN? _____

I/We hereby make application to T.W. Phillips Gas and Oil Co. ("T.W. Phillips") for natural gas service to be used at the above address. I/We agree to be jointly and severally responsible for the gas service according to the applicable Rates, Rules and Regulations set forth in T.W. Phillips' Tariff, as approved by and filed with the Pennsylvania Public Utility Commission. I/We further agree that in case I/we should move from the above address and wish to use T.W. Phillips' gas service at a new location, this contract shall apply. If asked, however, I/we will make new application and enter into a new agreement for gas service at the new location where it is to be used. I/we give permission to T.W. Phillips to perform any investigation of my/our credit history as it deems necessary. I/We affirm and declare that all of the information in this application is true and correct and given for the purpose of obtaining gas service from T.W. Phillips. I/We realize that any willful misrepresentation may lead to criminal charges and/or the denial of gas service to my/our address.

Applicant(s) _____ Accepted By _____

Signature(s) (1) _____ And/Or (2) _____

Fuel assistance and other T.W. Phillips Gas and Oil Co. Programs are available. For additional information For T.W. Phillips