NATIONAL OIL & GAS, INC.

United Oil Corporation

Return Form to: National Oil & Gas
P.O. Box 476
Bluffton, IN 46714

or

Email to: AR-TEAM@NATLOIL.COM

New Customer Form

WHAT TYPE OF PRODUCTS WILL YOU BE PURCHASING FROM US? (Please check all that apply)

PROPANE/LP ☐ FUEL/HEATING OIL ☐ GAS/DIESEL ☐ K1/MINERAL SPIRITS ☐ OTHER ☐

NAME: _____

SPOUSE'S NAME: _____

BILLING ADDRESS: _____

CITY: _____ **STATE**: _____ **ZIP**: _____ **COUNTY**: _____

Do you OWN or RENT your home? Please select one. **OWN** **RENT**

DELIVERY ADDRESS: _____

CITY: _____ **STATE**: _____ **ZIP**: _____ **COUNTY**: _____

PRIMARY PHONE: _____ **SECONDARY PHONE**: _____

Would you like to receive **INVOICES** and **STATEMENTS** via email (s)? **YES** **NO**

VALID EMAIL(S): _____

Would you like to sign up for **ONLINE ACCESS**, where you can view your invoices, statements, past payments, etc. online?
YES **NO**

VALID EMAIL(S): _____

If your account should be tax-exempt, please return a tax-exempt form with this completed form to prevent taxes from being charged on your invoices.

NATIONAL OIL & GAS OFFICE USE ONLY!

ACCOUNT ID: _____ SALESPERSON: _____

LOCATION: _____ DATE OF FIRST CALL: _____

TANK(S) SIZE: _____ OWNED OR LEASED? _____