SECURED INFORMATION PAGE *Necessary for Credit Approval* *Necessary for Credit Card information retainage*

Date of completion Social Security Information:					
Applicant Name		SS#			Signature
Co Applicant Name		SS#			Signature
Credi	t Card Information:				
I	wish to have my credit card charged for the following: (check all that apply)				
*	All product deliveries charged to my account				
*	All HVAC service charged to my account.				
*	All monthly budget charges on the 10 th of each month for the duration of my budget plan.				
	*Credit card number:				
*Card holder name as it appears on the front of the card:					
	*Expiration date:	*CVV :		(3 digit nu	mber on back of card)
	*Credit or Debit Card (Plea	se circle one)			
	erstand that I will not receive edit card receipt after such ch			•	es. Hometowne Energy will provide a hard copy of y credit card.

In the event that my credit card is not honored, an invoice for deliveries and HVAC charges will be mailed to the customer and remain unpaid on the above account until paid by the customer. In the case of dishonored monthly budget payments, the customer will be notified by phone and the budget payment will remain unpaid until other arrangements are made by the customer.

It is the responsibility of the CUSTOMER to keep this credit card information up to date with the correct credit card number and expiration date.

*Customer Signature

*Date

Denotes Required fields; This request will not be honored if not complete and/or without the customer's signature.

Please sign this form where applicable and return to Hometowne Energy. This will be securely filed with your customer information.