



Dixie-Denning Supply Co.

705 S Wall St

P.O. Box 517

Benson, NC 27504

Ph. 919-894-3824 Benson

Ph. 919-639-2141 Angier

Fax 919-894-2871

Dear Valued Customer,

Dixie-Denning would like to take this opportunity to welcome you as a new customer to our propane family. We are glad to have you with us and allowing us to take care of your propane needs.

At Dixie-Denning, our goal is to provide you with friendly, fast, and reliable propane deliveries and competent and efficient service. Our customers are the most important part of our business and we will work hard to ensure your complete satisfaction now, and for as long as you are a customer.

Dixie-Denning operates on an automatic delivery basis for all customers. Automatic deliveries mean you should never run out of propane. If at any time a customer decides the automatic delivery should be stopped, the customer is then responsible for monitoring and calling in advance for gas. Additional delivery fees may be applied in the event there is not a delivery truck on your particular route. We do understand that all customer needs are unique and important, so we will work hard to satisfy your needs.

Again, thank you for entrusting Dixie-Denning to take care of your propane needs.

Sincerely,
Dixie-Denning Supply Co.

Terms & Conditions

- If an account is over 90 days past due, it may be sent to TekCollect Inc. for reconciliation and additional fees will apply. *Fee: \$30.00
- A finance charge of 1 1/2 % per month will be applied to all accounts over 30 day. (Annual percentage of 18%)
- Rental charges may be applied according to usage and tank size.
 - 120 Gallon Tank Rental Fee \$60.00 Annual Fee Plus Tax
 - 250 Gallon and Larger Rental Fee \$85.00 Annual Fee Plus Tax

By signing our customer application, you agree to our terms and condition and understand how Dixie-Denning Supply Co operates.

Dixie Denning Supply Co.
New Customer Application
Benson: Fax 919-894-2871 Angier Fax: 919-639-0225

Applicants Name: _____ Co-Applicants Name: _____

Applicants Date of Birth: _____ Co-Applicants Date of Birth: _____

Applicants DL #: _____ Co-Applicants DL #: _____

Delivery Address: _____
Street # Street City State Zip **COUNTY

Mailing Address: _____
P.O. Box or Street Address City State Zip

Home Phone # _____ Co-Applicants Cell # _____

Applicants Cell # _____ Co-Applicants Work # _____

Applicants Work # _____

Email: _____ Emailed Statements: Yes No

Detailed driving directions to customer location:

L.P. Appliances (circle all that apply):

Gas Pack # 1	Gas Pack # 2	Water Heater	Space Heater
Logs	Range	Dryer	Outdoors Grill
Generator	Cylinders Refills	Other _____	

Number of Tanks needed: _____ Tank Size(s): _____ Tank owned By: Company or Customer

NOTICE Signing this application makes you aware and responsible for all charges to your account. Finance charges calculated at a monthly periodic rate of 1.5% (Annual Rate of 18%) will be charged on all unpaid balances outstanding 30 days or more as of billing date.

• Signed: _____
Applicant Date

Signed: _____
Co-Applicant Date

FOR OFFICE USE ONLY:
Account # Assigned: _____ Driver: _____ Route: _____