

## 21 Austin Drive, Marlborough, CT 06447 Phone: 860-365-5218 | Fax: 860-365-5219 HOD #964 LIC# HTG.0396438-S1

## PROOF OF OWNERSHIP OF PROPANE TANK

Name:	
Billing Address:	
Phone Number: Email:	
Credit Card Number:	EXP:
All customer owned tanks are COD. Please provide payment information. This card	will be charged upon each delivery.
Please select delivery option (circle one): Will Call • Automatic •	Scheduled
** Please fill out tank location for our drivers and any special instructions (ex. Fill fr tank located right side of house, call ahead if you have dogs, etc.)	
Please note will call customers must provide 7-10 days notification for delivery. CPI call customers and special delivery charges may incur if customer runs out.	P is not responsible for run outs for will
I, hereby states that the	(Aboveground/Underground)
propane tank located at:	
is owned bya	nd not by another propane company.
The propane is used for:	
By signing this form, I attest that all the information on this form is accurate Propane & Petroleum to fill this tank.	and I hereby authorize Connecticut

SIGNATURE

DATE

Connecticut Propane & Petroleum shall not be liable for any loss sustained by Customer as a result of the exhaustion of Customer's supply of propane, nor for any injuries to persons, damage to property or loss due to the negligence by Customer, its employees, or assigns. Connecticut Propane & Petroleum shall not be liable for incidental or consequential damages. By signing this form, Customer agrees to the terms and conditions.