

W.C. ESP

PERSONAL COMFORT

Heating, Air Conditioning and Propane

CREDIT CARD AUTHORIZATION

Account #: _____ Date: _____

Name: _____

Billing Address: _____

In order to update our Credit Card Customer's records, we are requesting that you complete and sign this form and return it back to our office.

I hereby authorize **W.C. Esp Inc.** to charge my credit card for the following:

- FUEL OIL AND PROPANE DELIVERIES
- SERVICE
- SERVICE CONTRACT *(Oil accounts only)*
- INSTALLATIONS
- ALL

Card Holder's Name: _____

Mailing Address: _____

Credit Card #: _____

Exp. Date: _____

- MASTERCARD VISA DISCOVER

Cardholder Signature: _____

Fuel oil and propane deliveries are to be billed out on credit card the following business day.

**All balances unpaid after 30 days will be automatically applied to your credit card on file.*

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