

Kuskie Fuel Services, LLC

P.O. Box 207, Crook, CO 80726

Phone: 970-886-2121 - Fax: 970-886-2120

BULK FUEL SERVICES

PROPANE _____

CLEAR DIESEL _____

DYED DIESEL _____

NL GAS _____

TRANSPORT LOADS _____

CUSTOMER AGREEMENT (2025)

Please print all information or make sure writing is legible. Thank you.

All information is confidential and used only to maintain your account.

Name(s): _____ Date: _____

Businesses, please provide the name(s) of owner (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number (s): _____ EMAIL: _____

How long at this address? _____ Own? _____ Rent? _____

Recent purchase? Who was prior property owner? Did they have service with us? _____

(THIS HELPS US WITH TANK LOCATION)

If rental, landlord name, phone, and address: _____

DOB: _____ SS# OR TAX ID: _____

Employer: _____ Address and Phone: _____

Names of any others who are allowed to charge to your account: _____

Where should propane or fuel be delivered, if different than address above? _____

Any cross-roads or driver directions? _____

Who owns propane tank? _____ Who owns fuel tank(s)? _____

Propane tank serial # (located on plate on tank) _____ (REQUIRED)

Tank Size (Reads as Water Gallons) _____

PROPANE ROUTE DELIVERY: TOP OFF 4-6 WEEKS IN WINTER SEASON (Oct – May)

PROPANE CALL-IN DELIVERY DAY IS WEDNESDAY. EMERGENCY TRIPS SUBJECT TO COD + FEES.

CUSTOMER HAS RECEIVED DUTY-TO-WARN. (INITIAL HERE) _____

CUSTOMER GUARANTEES PAYMENT FOR DELIVERIES AND SERVICES. (INITIAL HERE) _____

- ALL NEW ACCOUNTS TERMS ARE COD FOR A MINIMUM OF 4 DELIVERIES AND PAYMENTS AND/OR FOUR BUSINESS CYCLES/STATEMENTS. AFTER GOOD PAYMENT HISTORY HAS BEEN ESTABLISHED, COD CUSTOMERS MAY BE MOVED TO TERMS OF NET 30. PLEASE REQUEST AND SUBMIT A CREDIT AGREEMENT FORM IF INTERESTED IN A NET 30 ACCOUNT
- ALL COD ACCOUNTS MUST ARRANGE PAYMENT PRIOR TO DELIVERY.
- PLEASE LET US KNOW OF CHANGES IN YOUR CONTACT INFORMATION. WE WILL PERIODICALLY REQUEST ACCOUNT INFORMATION UPDATES.

PLEASE SIGN AND DATE THIS CUSTOMER AGREEMENT FORM. NO DELIVERIES WILL BE MADE WITHOUT THIS SIGNED AGREEMENT ON FILE.

DATE: _____