## Surner Heating Co., Inc.

60 Shumway Street Amherst, MA 01002 (413) 253-5999 34 Montague City Road Greenfield, MA 01301 (413) 773-5999

## WWW.SURNERHEAT.COM

## Authorization Agreement for Credit/Debit Card or E-Check Payment

Customer Name:					
Customer Address:					
Customer Telephone:					
Customer Email:					
Sign me up for E-Billing	: Yes No				
Customer hereby Autholisted below.	rizes Surner Heating to	o Process Paym	nents Using the Cr	edit/Debit Card or E-Check Information	
Surner Heating Account	t/Customer #(s):				
Credit/Debit Card Circle type of Card:	American Express	Discover	Master Card	Visa	
Credit/Debit Card Numb	oer:				
Credit/Debit Card Expiration Date:			Security Code:		
Name as it appears on	Credit/Debit Card:				
Billing Address on credi	t Card (if different than	address listed	above)		
E-Check Rook Pouring #:			Rank Account	#·	
Bank Routing #:			Bank Account #:		
Please Process Paymo	_			•	
MONTHLY BUD	GET PAYMENTS	DELI	VERIES*	SERVICE	
*Would you like to sta	rt Automatic Deliverie	es: Yes	No If yes,	what is your current tank level?	
Either the customer or S notification is effective w				e by written notice to the other. Written	
By signing this form, the or written approval.	customer acknowledg	jes that change	s may be made to	the above information with either verbal	
Date:	Print Name:				
Signature:					
Office use only					
			Dat	e:	