



CUSTOMER APPLICATION FOR YOUR BUSINESS

P.O. Box HM 373
Hamilton HM BX, Bermuda

Tel: (441) 295-3111
Fax: (441) 295-8311

www.bermudagas.bm
info@bermudagas.bm

Business Name: _____

Street Address: _____

Mailing Address: _____
(if different from above)

Contact Name: _____ Position: _____

Tel.: _____ Fax: _____ Cell: _____

E-mail Address: _____ *(for e-billing)* Main Purpose of Business: _____

Type of Business: Limited Liability Co. Partnership Sole Proprietorship

Date Established (DD/MM/YY): _____ No. of Employees: _____

Bank: _____ Bank Contact Name: _____ Tel: _____

Company Details:

Name of Parent Company: _____
(if applicable)

Address: _____

Subsidiary Business(es): _____

Details of Officers:

Name: _____ Title: _____ Tel.: _____

Name: _____ Title: _____ Tel.: _____

Name: _____ Title: _____ Tel.: _____

Local Credit References:

Company Name: _____ Tel.: _____

Company Name: _____ Tel.: _____

Company Name: _____ Tel.: _____

Credit Card MasterCard Visa Name on Card: _____
Company Name: _____

Card Number _____ Expiration date: _____ CVS _____

Credit Card Billing Address: _____

TERMS:

I understand that gas cylinders and tanks supplied by Bermuda Gas & Utility Company Ltd., hereinafter referred to as BGU, to my premises remain the property of BGU and that BGU shall have an exclusive right to refill and maintain the said cylinders and tanks. BGU shall attend at my premises and recover each cylinder to be refilled or repaired and shall replace each cylinder so recovered with a replacement cylinder properly filled with LPG or alternatively BGU will attend my premises to refill tanks from a bulk delivery vehicle. I recognise that no third party supplier shall refill or repair the cylinders or tanks provided by BGU, whether in situ or off premises. I recognise that any breach of this agreement entitles BGU to an immediate right to recover the cylinders or tanks in my possession and terminate this agreement, without notice to me and without any credit for any unused LPG, and will negate any consumer safety protection. I recognise that the early termination of this agreement will result in loss to BGU and I agree to pay liquidated damages in the amount of \$1,000.00 per cylinder or tank to cover those losses. I agree to the policies, terms and conditions of BGU. These policies, terms and conditions are subject to change upon notification from BGU. I give permission to BGU to obtain information from any source to verify any statements made in this application. I understand that this account will be activated upon confirmation of receipt by BGU of the required pre-payment. I agree to advise BGU of any change to the information provided herein or in the event that I plan to leave the Island. I agree that all late payment fees, agency charges, legal costs and other expenses incurred by BGU in attempting to recover overdue amounts will be charged to my account. Late fees will be incurred if payment is not received within 30 days of statement date. Late fees will be the greater of either \$5.00 or 3% of the overdue balance. This provision shall survive termination of this agreement, howsoever caused, and whether at the instance of the customer/you or BGU.

Signature: _____

Date: _____