



4 COLBY DRIVE
LEDYARD, CT 06339
HTG. CONTRACTOR LIC. #387363
HOD# 0000167
(860) 464-7628

Credit Card Authorization Form

Visa, MasterCard, Discover, or American Express

ANDERSEN OIL ACCT # _____

LAST NAME: _____

FIRST NAME: _____

ADDRESS: _____

CONTACT PHONE #: _____

I, _____ AUTHORIZE ANDERSEN OIL COMPANY
TO CHARGE MY VISA / MASTERCARD / DISCOVER / AMERICAN EXPRESS
ACCOUNT FOR PARTS AND SERVICES PROVIDED AND FOR PURCHASES
OF HEATING OIL, KEROSENE, OR DIESEL FUEL UNLESS SPECIFICALLY
NOTIFIED BY ME. THIS AUTHORIZATION IS VALID UNTIL REVOKED BY
ME IN WRITING.

SIGNED: _____ DATE: _____

NAME ON CARD: _____

CARD # _____

EXP DATE: _____