



# Hamilton's Propane

Family owned since 1988

## Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email \_\_\_\_\_

Social security# \_\_\_\_\_

Drivers license# \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

## Propane Appliances

What appliances in home or business use propane \_\_\_\_\_

\_\_\_\_\_

Square Feet of home or business \_\_\_\_\_ Average Gallons use per year \_\_\_\_\_

## Emergency Contact Information

Full Name \_\_\_\_\_  
*Last* *First*

Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

**To Become a new Customer Fill out and Send back to Hamiltons**

**Fax: 248-627-4832**

**Mail: P.O box 709  
Ortonville Mi 48462**

