



To ensure prompt processing, please print carefully and provide all information requested.

To apply for your **Personal Gas King Charge Card**, simply complete the form below and mail it to our Head Office or leave it at one of our locations for forwarding to our credit department. Once we have processed your information, a credit representative will contact you to customize your new account. Please allow approximately 5 business days for a response to your application.

# Charge Card Application

The  
*Personal*  
Way to Go!

**Please print.** If you require an account in your corporate name, please refer to our Corporate Charge Card Application. This application is also available to be printed from [gasking.com](http://gasking.com).

Mr  Mrs  Ms  Miss  Other

## Applicant

First name	Middle initial	Last name
<input type="text"/>		
Address	City	Province Postal code
<input type="text"/>		
Telephone	Facsimile	E-mail
( )	( )	<input type="text"/>

## Personal Information

Previous address (If above is less than 2 years)	Date of birth	Drivers license number & province
<input type="text"/>	Mo Day Year	<input type="text"/>
Social insurance number (optional)	Spouse's first name	Name & telephone number of nearest relative (Not living with you)
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Employment

Employer name & address			
<input type="text"/>			
Telephone	Facsimile	Occupation	Time with employer
( )	( )	<input type="text"/>	Years <input type="text"/> Months <input type="text"/> <input type="checkbox"/> Full time <input type="checkbox"/> Part time
Previous employer name & address (If present employer is less than 2 years)			
<input type="text"/>			
Telephone	Facsimile	Occupation	Time with employer
( )	( )	<input type="text"/>	Years <input type="text"/> Months <input type="text"/> <input type="checkbox"/> Full time <input type="checkbox"/> Part time

## Credit References & Financial Institution

Other Gas King account number (If applicable)	Bank name
<input type="text"/>	<input type="text"/>
Credit references (e.g. Credit card / Personal loan)	Account number
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>
	Address
	<input type="text"/>
	Account number
	<input type="text"/>
	Telephone
	<input type="text"/>

## Agreement

I agree that Gas King Oil Co. Ltd. may make the usual credit enquiries in connection with the application and authorize the exchange of credit information. I certify that the information contained on this application is true and correct. The undersigned requests Gas King Charge Cards and renewals or replacements thereof from time to time. I will review the terms and conditions of the Gas King Cardholder Agreement which will accompany the credit acceptance letter and understand that my use of the card will constitute acceptance of those terms and conditions.

Date	Signature of applicant	Name of applicant
Mo Day Year	<input type="text"/>	<input type="text"/>