

## Pennsylvania Customer Application

**NOTICE:** Completion of this form does not bind protection. Protection will be in force when we issue you a Service Agreement.

- 1.) Name: \_\_\_\_\_
- 2.) Tank Address\* Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_
- 3.) Telephone No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_
- 4.) Name of Fuel Oil Dealer: **Self Heating & Cooling, Inc.** Phone #: **267-803-4840**

### UNDERGROUND

**Must be an Approved Underground System**

- **must include proof of testing results approved by us and less than two (2) years old.**

**Annual Cost: \$250.00**

- 5.) Tank size: \_\_\_\_\_
- 6.) If this is a commercial property what type of building is it? \_\_\_\_\_  
How many stories? \_\_\_\_\_ What is the nature of the operation? \_\_\_\_\_
- 7.) Has this tank been used to heat a dwelling for the past 18 months?  Yes  No  
If no, please explain: \_\_\_\_\_
- 8.) Do you have an Automatic Delivery Agreement?  Yes  No (You must have & remain on automatic delivery.)
- 9.) Do you intend to remove/abandon/replace your fuel oil storage tank in the next year?  Yes  No
- 10.) Is your dwelling for sale or do you plan to sell this property in the next six (6) months?  Yes  No
- 11.) Do you have any reason to suspect your fuel oil system has leaked or is leaking fuel oil?  Yes  No
- 12.) Have you ever had a "no heat" call because of water in the oil system at this location?  Yes  No  
If yes, please explain: \_\_\_\_\_
- 13.) Do you have or have you had similar coverage on your Tank?  Yes  No Expiration Date: \_\_\_\_\_
- 14.) Where is the tank located on the property? \_\_\_\_\_  
If there is another tank on the property within 20' of the tank to be insured provide size, location and contents of each tank: \_\_\_\_\_

### APPLICANT'S WARRANTY STATEMENT

At the time of signing this Application, I am not aware of any current or prior emission, discharge, or release of fuel oil from my fuel oil system. I understand that knowingly providing false or inaccurate information will be cause for disqualification and/or termination from the ProGuard Program. I further understand that there is no protection afforded under the terms of the program for Voluntary Pulling/Abandonment of a tank as per the terms of the contract in the first 12 months of my protection. I have also read the Service Agreement and agree to the terms and conditions described therein.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**\* Mailing Address if different than tank location:**

Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_  
(OVER) 2009 REVISION-NON-DIRECT

## Customer Sign Up Procedures:

If you are applying for protection under The ProGuard Program, please follow these steps:

1. Complete the customer application on the previous page. Be sure to read and answer all questions, sign and date the application.
2. If you have an underground tank you must arrange for a tank test or soil test with at least three borings sent individually or as a composite to a state certified laboratory. Please contact an environmental testing company certified by the Department of Environmental Protection. **Advanced Tank Services 800-440-8265 and Eco Logic Environmental 877-729-8265 are both offering discounts for ProGuard customers.**

**We do not accept testing results from the following companies:**

- ANCO Environmental Services, Inc.
- Meridian Environmental
- Environmental Insurance Consultants
- Tank Tek
- Independent Detection Company (IDC)
- Tank Automation
- American Tank Service of Morristown or Toms River

If your heating oil system has been tested in the past 24 months a new test is not required. Just mail the results of the test to us with your completed application and **check made payable to us.**

3. Upon receipt of the completed application, we will request a Site Inspection.
4. Please allow ten working days for the ProGuard Program to respond.

**MAIL TO:**

Self Heating & Cooling, Inc.  
219 Keith Valley Road  
Horsham, PA 19044-1408