

Credit Application Form

Date	Sales Agent
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Customer Details

Name

Business Type	Ltd	PLC	Partnership	Sole Trader
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Customer Registered Address

Address Line 1	Address Line 2
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Address Line 3	County	Postcode
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Trading Address (Please only fill out if different from registered address)

Address Line 1	Address Line 2
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Address Line 3	County	Postcode
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Business Details

Business Sector	Company Reg Number
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Years Trading	VAT Number
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Director

Full Name	Email
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Telephone	Mobile
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Contact 1

Full Name	Full Name
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Job Title	Job Title
-----------	-----------

Department	Department
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Email	Email
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Telephone	Telephone
-----------	-----------

Mobile	Mobile
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Contact 3

Full Name	Full Name
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Job Title	Job Title
-----------	-----------

Department	Department
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Email	Email
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Telephone	Telephone
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Mobile	Mobile
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Accounts Contact

Full Name	Job Title
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Email for Invoicing	Email for Price Notif
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Telephone	Text for Price Notif
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Security (Please set your password and answer 3 of the below security questions)

Account Password	Mothers Maiden Name
Town of Birth	Name of First Pet
Name of First School	Make of First Car

Product Details

Please indicate average monthly volumes for any of the following products that you use:

Product	Est. Monthly Usage L £	Product Use		
Fuel Cards		N/A		
Bulk Diesel		N/A	Only fill out if you require bulk deliveries:	
Bulk Gas Oil			Are there vehicle restrictions to the delivery point?	Y N
Bulk Kerosene				
Bulk Lubricants			Please indicate vehicle size: (R = Rigid, A = Arctic)	R A
Barrel Lubricants				
Lubricants Cannister			Special Instructions	
Bulk AdBlue				
AdBlue IBC				
AdBlue Cannister			RDCO Number (If applicable)	

Bulk Delivery Address

(If more than one delivery address, please fill out delivery addresses form)

Address Line 1	Address Line 2
Address Line 3	County
Postcode	Opening Times

Trade References

Name	Contact Name
Address Line 1	Telephone
Address Line 2	Email
Address Line 3	
County	
Postcode	

Name	Contact Name
Address Line 1	Telephone
Address Line 2	Email
Address Line 3	
County	
Postcode	

Bank Details

Name of Bank	Account Name
Bank Address	Account Number
	Sort Code

To process your application the following must be completed:

By signing below, you agree that we have your consent and the consent of any other employee, or director whose personal information you have given in this application. It may be necessary to pass on the personal information to a third party credit agent or insurers. You also agree to our terms and conditions.

For example, we may pass the information to a credit agency /credit insurer where a search may be conducted on the information, so that an approved credit facility may be considered for you/your business.

Application to be signed by Director or Owner of Business.

I/We have read the Terms and Conditions overleaf and agree to abide by them:

Name	Position
Signature	Date

Additional Delivery Addresses (Please fill this out if you have more than one delivery address)

Address Line 1	Are there vehicle restrictions to the delivery point?	Y	N
Address Line 2	Is this delivery address able to accommodate for:	R	A
Address Line 3	(R = Rigid, A = Arctic)		
County	What is the average load size at the delivery point?		
Postcode			
Opening Times	Special Instructions		
Main Contact			
Telephone			

Address Line 1	Are there vehicle restrictions to the delivery point?	Y	N
Address Line 2	Is this delivery address able to accommodate for:	R	A
Address Line 3	(R = Rigid, A = Arctic)		
County	What is the average load size at the delivery point?		
Postcode			
Opening Times	Special Instructions		
Main Contact			
Telephone			

Address Line 1	Are there vehicle restrictions to the delivery point?	Y	N
Address Line 2	Is this delivery address able to accommodate for:	R	A
Address Line 3	(R = Rigid, A = Arctic)		
County	What is the average load size at the delivery point?		
Postcode			
Opening Times	Special Instructions		
Main Contact			
Telephone			

Fuel Card Details

Sales Person	Date
Company Name	Main Contact
No. of cards to be ordered	Position

Fuel Cards

Embossing details maximum of 28 characters

Card No.	Network	Card Type (Shell)	Embossing Details	Product Restriction	Card Charge
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

TOTAL CHARGE (ex. VAT)

Comments Box

Customer Confirmation

I confirm that I am authorised to order additional fuel cards on behalf of the above named company / business, and agree to your terms and conditions set out below, and that all supplies of fuel and / or products are subject to Fuelogic's standard terms and conditions, as amended from time to time, and I authorise you to make the above amendments to the company's / business' account.

Please return a signed copy to: info@fuelogic.co.uk

Name	Position
Signature	Date