



Universal Fuel Card MasterCard BusinessCard®
Fax completed application to 800-713-8312



***Please Note: All fields are required for account setup.**

Legal Company Name (limit to 24 characters)*			Subsidiary or DBA (limit to 24 characters)			
Primary Fleet Contact First Name*		Last Name*	Title*	Account Security Code (For Card Activation & Customer Service) – 4 NUMBERS* _ _ _ _		
Card Delivery Street Address 1 (No PO Boxes)*			Business Phone #*	Cell Phone #	Fax #	
Card Delivery Street Address 2			Type of Business*	Years in Business*	Full Time Employees*	
City*	State*	ZIP*	Estimated Monthly Charges/Spending (\$)*		Estimated Monthly Gallons*	
Company Billing Street Address 1 (If Different Than Card Delivery Address)			# of Vehicles*	# of Drivers	# of Cards Needed	
Company Billing Street Address 2			Federal Tax ID #*			
City	State	ZIP	Statement Delivery Method is Electronic			
Email Address*:						
Type of Organization*: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government <input type="checkbox"/> LLC <input type="checkbox"/> LLP						

NOTE – At FleetCor's discretion, we may require CPA Reviewed or Audited Financial Statements during the Credit review.

AUTHORIZED SIGNATURE - Required

FleetCor Technologies Operating Company, LLC ("FleetCor") operates the fleet card program that is issued by CIT Bank ("CIT"). As used in this application, "FleetCor" may refer to FleetCor acting for itself or on behalf of CIT Bank. By signing this application, I represent and warrant that I am duly authorized to request that a Universal Fleet account be created on behalf of my company identified above ("Applicant"). FleetCor is hereby authorized to check Applicant's credit worthiness, initially as well as from time to time, including but not limited to obtaining credit report(s), contacting the Applicant's bank, and obtaining trade references. Applicant acknowledges that this application is subject to approval and acceptance by FleetCor. If this application is approved, then the Applicant's Authorized Representative listed above will be notified of the account's available credit limit, the acceptable payment terms & method, and any applicable program fees. Program details will be provided in the account agreement that will be delivered along with the cards to the Authorized Representative. Applicant acknowledges that the fleet card program is not a revolving credit account and that any purchases made during the billing cycle are due and payable in full, including any applicable fees, upon receipt of the billing statement. If the Applicant's unpaid balance ever exceeds the established credit line, the account will incur a fee and may be suspended and the Applicant's credit history may be reported to credit reporting agencies. Applicant's acceptance, signing, in whatever form, or use of any of the cards provided to the Applicant will constitute acceptance of the terms and conditions contained in this application and the account agreement. Applicant agrees that any liability arising or resulting from the misuse, unauthorized or fraudulent use, loss or theft of any of the cards issued to the company's account shall be fully borne, assumed and paid by the Applicant. If FleetCor uses an attorney or collection agency to collect an unpaid overdue amount, the Applicant agrees to pay reasonable attorney and/or collection fees. Applicant agrees that the account will be governed by Utah law and that the cards are for business/commercial use only and never used for personal or household purposes and agrees that use of the cards for consumer or household purposes shall be grounds for immediate termination of the Applicant's account. We comply with Section 326 of the USA PATRIOT Act. This law mandates that FleetCor verify certain information about you while processing your account application.

Universal Fuel Card MasterCard BusinessCard® Program Terms & Fees:			Account Type: Non-Revolving. Paid in Full.		
	<u>Billing Cycle</u>	<u>Days to Pay</u>	<u>Payment Method</u>	<u>Fees</u>	
<input type="checkbox"/>	Traditional Monthly	14	Electronic Payment	\$1.00 per card	
<input type="checkbox"/>	Flex-Serve Semi-Monthly	12	Electronic Payment	None	
If you do not qualify for the Flex-Serve products after a Credit review, you may be offered:					
<input type="checkbox"/>	eServe ¹ Weekly	4	Electronic Payment	None	
Print Name* (Authorized Representative)			Signature* (Authorized Representative)		
Telephone #:			Date*:		

BUSINESS OWNER/ACCOUNT PRINCIPAL – Required for All Proprietorships, Partnerships or any other business/organization less than two years old or having fewer than 5 employees.

Each principal ("Principal") for this Account, if any, is personally and unconditionally, jointly and severally liable with Customer, as principal and not as surety or guarantor, for the payment and performance when due of all obligations owed on the Account, regardless of who made purchases using the Cards, and the Principal agrees to pay such amounts according to the terms of this Agreement. Principal is responsible under this Agreement for all use of all of the Cards issued on the Account to the fullest extent permitted by law. This constitutes Principal's agreement, individually, regarding the provisions under "AUTHORIZED SIGNATORY" above, including without limitation checking and reporting your credit and confirming your identity.

Principal First Name		Middle Initial	Last Name	Signature (Principal)		
Guarantor Street Address(No PO Boxes)			Social Security #		Date of Birth	
City	State	Zip	Home Phone #		Cell Phone #	

****OFFICE USE ONLY****

Market:	Rep ID:	Rep Name:	Source Code:	ATS Code (last 4 digits):
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* REQUIRED FIELD

1) DRIVER/VEHICLE CARD SETUP

- a) List each driver/vehicle requiring a fleet card. Enter each Driver's name (first and last name) not to exceed 24 characters. For vehicles, the number of characters must not exceed 24; however, the first word in the description must be "VEHICLE". Accordingly, fleet cards for vehicles will have "VEHICLE" as the first word embossed on the fleet card. Use additional forms for nine (9) or more drivers or vehicles.
- b) Select one of the five options under the heading of "Card Access". The Fuel Only options restrict transactions to gasoline/diesel transactions and will prohibit car washes, in-store purchases, and other non-fuel spending.
- c) Select one of the five options listed under the heading of "Fueling Limit". This option limits the number of gallons a driver or vehicle may purchase at one time. This number will be set up as a dollar limit based on the number of gallons purchased multiplied by an average fuel cost per gallon.

2) ID/PIN SETUP

- a) ID prompting is required for all cards. IDs are good preventive measures against fraud and provide better data and overall tracking. Each ID/PIN must have a unique 4 – 5 digit numeric code and cannot start with a zero ("0").
- b) ID/PINs may be limited to weekday usage only and/or the time of days transactions are permitted.

Congratulations! You have completed the Fleet Card setup process. Fax completed application and/or setup form to 800-713-8312 .

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington D.C. 20580.



COMPANY NAME: _____

FLEET CONTACT: _____

1. DRIVER/VEHICLE CARD SETUP

Description (limit to 24 characters for Driver Cards; 16 characters for Vehicle Cards)	Card Access (Select One)					Fueling Limit (Select One) ¹				
	Pay at Pump	Pay at Pump – Fuel Only	All Fuel Locations	All Fuel Locations – Fuel Only	Fuel & Maintenance Locations	25 gallons	50 gallons	75 gallons	100 gallons	300 gallons
Required for each card requested. Cards may be assigned to a person or a vehicle. Enter an employee's name or a vehicle description. The first word in a Vehicle Description must be "VEHICLE".										
Ex: <u>VEHICLE</u> <u>FORD</u> <u>F150</u> <u>143</u> _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _ _ _ _ _	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹Transaction value will be the number of gallons times an average per gallon cost.

2. ID/PIN SETUP

Description (limit to 24 characters)	Fueling POS ID/PIN					Restrictions	
	User must enter the ID/PIN and odometer reading at time of purchase. Vehicle IDs are entered with Driver Cards. Driver IDs with Vehicle Cards. (4-5 digits, cannot begin with "0")					Day of Week	Time of Day (CST)
Enter the Driver name or Vehicle description which will appear in reporting. ID/PINs are required for all cards. IDs are POOLED to use with multiple cards. Vehicle Cards prompt for Driver IDs and Driver Cards prompt for Vehicle IDs.							
Ex: <u>ROBERT</u> <u>BRANDES</u> _ _ _ _ _	8	7	6	5	4	<input checked="" type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input checked="" type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
1. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
2. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
3. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
4. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
5. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
6. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
7. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am
8. _ _ _ _ _						<input type="checkbox"/> M-F <input type="checkbox"/> M-Sat <input type="checkbox"/> None	<input type="checkbox"/> None <input type="checkbox"/> 5am-5pm <input type="checkbox"/> 8am-8pm <input type="checkbox"/> 10am-10pm <input type="checkbox"/> 12pm-12am