



# SHELL FLEET SOLUTIONS CARD APPLICATION

Select a Card Program:

- Shell Small Business™ Card
- Shell Fleet Plus® Card
- Shell Fleet Navigator® Card

## Tell us about your business

Legal Name of Business

Business Physical Address

City

State

Zip

Tax Payer Identification #

Company Phone #

Company Fax #

Legal Structure(Corp, Partnership, LLC, Proprietorship, Gov, PC or PA)

# of vehicles

\$

Years in Business

Average Monthly Fuel Exp.

## Billing Contact Information

Billing Contact First Name

Billing Contact Last Name

Billing Contact Phone #

Billing Address

City

State

Zip

INFORMATION SHARING DISCLOSURE: Card Issuer or its affiliates may, to the extent allowed by law, share information disclosed by or generated as a result of this application with each other, as well as the card program Sponsor and their affiliates, and with merchants accepting the card. In addition, information regarding your transactions may be provided to accepting merchants or their service providers to facilitate discounts or other promotional campaigns of interest to you.

## Authorization

By signing below, I represent and warrant that I am authorized to bind the Company to the terms & conditions of this offer and the Business Card Agreement, which is available upon request. I further acknowledge that I have read and agree to the Summary of Key Terms enclosed.

**X**

Authorized Officer Signature

Date

Print Name

Email Address

## Title of Applicant:

- President
- Vice President
- Treasurer
- Owner
- Partner

## Tell us about yourself

Required if this account is for a business incorporated less than one year, a proprietorship, a professional corporation, or a limited liability company.

First Name

Last Name

Residential Address

City

State

Zip

Social Security #

Date of Birth

Home Phone #

Email Address

I understand and acknowledge that by signing below, both the Company and I will be jointly and severally liable for all amounts owing on this account.

**X**

Signature

Print Name

Date

Card Issuer is WEX Bank, member FDIC.

SHL\_68336\_FM 09/18

Sales Rep Name  
Title  
Email Address  
Call

Opportunity #

### FOR OFFICE ONLY:

Sales Code	Plastic	Coupon Code	Acct. #
	SHL1		
	SHL2		
	SHL3		
	SHL4		

Facility/Station #

Employee ID #

Shell®, Shell Fleet Navigator®, Shell Fleet Plus® and Shell Small Business™ are trademarks of Shell Trademark Management B.V.

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The Shell Fleet Solutions Card Program is issued and administered by WEX Bank and is not an obligation of Shell Oil Company, Equilon Enterprises LLC DBA Shell Oil Products US, or any Shell affiliate.

## SUMMARY OF KEY TERMS

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**Credit Disclosure:** By submitting this application, Company requests a business charge account and if approved for credit, one or more business charge cards for use by Company and its employees. The Card Issuer is WEX BANK. Company agrees to the terms and conditions set forth in the Business Charge Account Agreement provided with this application and/or provided with the card(s). Use of any card issued pursuant to this application confirms Company agreement to said terms and conditions. In the event that this application is denied based upon information contained in a consumer credit report used to evaluate credit, Issuer is authorized to report the reason for the denial to the Company. Direct inquiries of businesses where the undersigned maintains accounts may also be made. If requested, Company agrees to provide company financial statements, including at minimum, a Balance Sheet and Income Statement for the last two years upon request.

**Joint and Several Liability:** If required, and if Bank issues card(s) to Company, both the Company and I am jointly and severally liable with the Company for all charges to the account established pursuant to this application. This is a guaranty of payment and not merely of collection. You agree to pay upon demand any amount owed by Company due under the Business Charge Account Agreement.

I understand that I am applying for commercial credit on behalf of the business. I authorize Issuer to obtain credit bureau reports, both personal (if required) and in the name of the Company, that may be used when considering this application for credit and any other information about me in connection with: 1) extensions of credit on this account; 2) the administration, review or collection of this account. I agree that I may be contacted at any of the numbers that I have provided. In the event that the account is not paid as agreed, Issuer may report my liability (both personally and for the Company) to credit bureaus or others that may lawfully receive such information.

**Federal Compliance:** Issuer complies with Federal Law which requires all financial institutions to obtain, verify and record information that identifies each company or person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents for your business.

**Fee Disclosure:** The Shell Fleet Navigator Card Program will incur the following fees unless otherwise noted in a Financial Offer provided by Sponsor: \$2 Card Fee, \$40 Set Up Fee, and \$1 Out-Of-Network Transaction Fee (Fee only applies when fueling outside of the Shell network)