



Fuel Card Application Form



Simply complete ALL the details below and return to:
FREEPOST RLXB-KGRT-GCZT, Inter City Fuels, Osbourne House, Sandbeck Way, Wetherby LS22 7DN

1. COMPANY DETAILS

Company/Name to be embossed on all your cards
(Maximum 19 characters INC blank spaces)

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Company Name _____

Telephone: _____

Address 1 _____

Mobile: _____

Address 2 _____

Fax: _____

Address 3 _____

Contact Name: _____

Town/City _____

Job Title: _____

County _____

E-mail: _____

Postcode _____

Company Website: _____

Time at this address _____

We may occasionally send you information by e-mail which you may find useful. We will not pass your details to any third party. Please tick the box if you DO NOT wish to be contacted via e-mail.

Company Reg No. (if applic) _____

If not a limited company, please complete the following:

Proprietor's/ Partner's Name _____ Home Address _____

Postcode _____

2. FUEL REQUIREMENTS

Estimated Monthly Usage (by expenditure or volume)

Do you purchase lubricants? Yes No

How many petrol vehicles do you have?

Do you have bulk fuel delivered to your premises? Yes No

How many diesel vehicles do you have?

3. CARD DETAILS

Please tick type of fuel card you require Shell CRT Shell Fleet Single Shell Fleet Multi

How many cards do you require? _____ Do you want mileage recorded? Yes No

Please list the name of the driver and/or vehicle registration you require on each card, and indicate fuel option requirements, if known. Please continue on a separate sheet if more than 8 cards are required.

	DRIVER NAME / REGISTRATION NUMBER	Petrol	Diesel	Fuel & Lubricants
1.				
2.				
3.				
4.				

	DRIVER NAME / REGISTRATION NUMBER	Petrol	Diesel	Fuel & Lubricants
5.				
6.				
7.				
8.				

4. TERMS AND CONDITIONS

Data Protection Act 1998

The information which you provide may be disclosed to a licensed credit reference agency which will retain a record of the search. It may be used by other lenders in assessing applications from you and other members of your household and for occasional debt tracing and fraud prevention.

I hereby agree to accept the Inter City Fuels terms and conditions of trading, and understand that a copy of these is available upon request

Name _____ Position _____

Signature _____ Date _____



Bank Information



Please complete ALL sections

1. BANK DETAILS

Company Name _____ Account Name _____

Bank Sort Code Account Number

Bank Name & Full Postal Address _____

_____. Postcode _____

How long with Current Bank _____ Years _____ Months

2. CONTINUOUS BANK REFERENCES

I/We _____ Consent to _____ Bank Plc

Providing a reference on me/us to The Fuelcard Company UK Plc on behalf of Inter City Fuels, Osbourne House, Sandbeck Way, Wetherby LS22 7DN
Tel: 0870 160 3150 Fax: 01937 849176

THE ABOVE AUTHORISES THE FUELCARD COMPANY UK PLC TO TAKE BANK REFERENCES UNTIL YOU REVOKE THE INSTRUCTIONS IN WRITING

Signed on Behalf of The Company _____ Name of Signatory _____

Position Held _____ Date _____

3. DIRECT DEBIT INSTRUCTIONS

Please complete if your Direct Debit has not already been arranged over the phone. Please fill in all details using a ball point pen.

Customer Name _____ Customer Reference Number (if known)

Instructions to your Bank or Building Society to pay by Direct Debit

ORIGINATOR'S IDENTIFICATION NUMBER 426536



To the Manager _____ Bank/Building Society _____

Address _____ Postcode _____

Name(s) of Account Holder(s) _____

Bank Account Number

Branch Sort Code:

Please pay The Fuelcard Company UK Plc on behalf of Inter City Fuels Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with The Fuelcard Company UK Plc on behalf of Inter City Fuels and, if so, details will be passed electronically to my bank/Building Society.

Signature (s) _____ Date _____

Banks and Building Societies may refuse to accept Direct Debit instructions for some types of account

To be detached and retained

The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change The Fuelcard Company UK Plc on behalf of Inter City Fuels will notify you 3 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by The Fuelcard Company UK Plc on behalf of Inter City Fuels or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send us a copy of the letter

