

Blarney Castle Fleet Card Application



Fax: 231-864-2303

Mail to: Blarney Castle Oil Co., Attn: Fleet Services, PO Box 246, Bear Lake, MI 49614

If you would like this application emailed to you or for more information call: 231-740-3283

Please process this application for the BLARNEY CASTLE FLEET CARD.

Legal Company Name (limit to 28 characters)*			Subsidiary or DBA (limit to 20 characters)		
Primary Fleet Contact First Name*	Last Name*	Title*	Account Security Code (For Card Activation & Customer Service) – 5 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: <input type="checkbox"/> Electronic <input type="checkbox"/> Paper		
Email Address*:					
Type of Organization*: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Public Corporation <input type="checkbox"/> Private Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government & Education <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 REPRESENTATIVE – Required.

Application Terms: By signing this Application, the Authorized Representative represents, warrants, and agrees that: (a) he or she is authorized to apply to FLEETCOR Technologies Operating Company, LLC ("FLEETCOR"), a Louisiana limited liability company, for an unsecured, partially secured, or fully secured line of credit ("Account") on behalf of the company identified above ("Client"); (b) FLEETCOR may obtain Client's credit report and check Client's credit standing when processing this Application or periodically evaluating any resulting Account's creditworthiness; (c) this Application is subject to approval and acceptance by FLEETCOR; (d) if the Application is approved by FLEETCOR in Louisiana, the resulting Account: (i) will be governed by Louisiana law; (ii) will not be a revolving credit account and the Amount Due/Total Amount Due shown on each Account Statement will be due and payable on the Due Date shown on the Statement; (iii) will be used solely for commercial purposes and not for personal or household purposes; (iv) will be suspended, and the Client's credit history may be reported to credit reporting agencies, if the Client's unpaid balance ever meets the Account's Credit/Spend Limit; and (e) acceptance, signing (in whatever form), or use of any of the Cards issued to Client will constitute Client's acceptance of the Client Agreement available at www.fleetcor.com/terms/branded-marketer

Patriot Act Notice. Section 326 of the USA PATRIOT Act mandates that FLEETCOR verify and record certain information about you (the Client, Authorized Representative, or any co-maker or guarantor) while processing this Application.

Equal Credit Opportunity Act Notice. 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 Act, Washington, D.C. 20580.

I agree to the Application Terms and the Client Agreement (Please check box)

BUSINESS OWNERS / ACCOUNT PRINCIPALS – Required for each person owning 25% or more of a for-profit business.

Principal Terms: By signing this Application, each Principal agrees that: (a) FLEETCOR may confirm Principal's identity, obtain Principal's credit report, and check Principal's credit standing both for this Application and for the purpose of periodically evaluating any resulting Account's creditworthiness and (b) if the Application is approved by FLEETCOR in Louisiana, Principal will be (i) bound by the Application Terms above and by the Client Agreement for this Account and (ii) personally and unconditionally, and jointly and severally, liable with Client, as principal and not as surety or guarantor, for the payment and performance when due of all obligations owed on the Account.

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 #	

Does this person have significant responsibility for managing the legal entity listed above? Yes No

OFFICE USE ONLY

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

Branded Marketer Fuel Cards are issued by Regions® Bank, pursuant to license by Mastercard® International Incorporated.

FLEETCOR considers your privacy important. We are committed to protecting the privacy of those who provide us with their contact and personal information. View our privacy policy available at www.fleetcor.com/en/privacy-policy to find out more.

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COMPANY NAME: _____

FLEET CONTACT: _____

For Driver Cards, please fill out this section. (We recommend vehicle cards as vehicles turn over much less than drivers.)

1. DRIVER/VEHICLE CARD SETUP		Card Access (Select One)		
		Fuel Only	Maintenance Only	Fuel and Maintenance Only
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".				
Description (limit to 24 characters for Driver Cards; 15 characters for Vehicle Cards)	Vehicle/Employee Number			
Ex: <u>VEHICLE</u> <u>FORD</u> <u>F150</u> <u>143</u> _____	<u>578400</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. ID/PIN SETUP	Fueling POS ID/PIN					
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.	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 - 6 digits, cannot begin with "0")					
Description (limit to 24 characters)						
Ex: <u>ROBERT</u> <u>BRANDES</u> _____	8	7	6	5	4	4
1. _____						
2. _____						
3. _____						
4. _____						
5. _____						
6. _____						
7. _____						
8. _____						

Appendix to Application for Credit

ATS ID:	Business Name: Pells LLC
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Complete for each individual who owns, directly or indirectly, 25% or more of the equity interests.

Name:
Date of Birth:
Address (Residential or Business):
For U.S. Persons
Social Security Number:
For Foreign Persons
Passport Number ¹ :
Country of Issuance:

Does this person have significant responsibility for managing the legal entity listed above? Yes No

Name:
Date of Birth:
Address (Residential or Business):
For U.S. Persons
Social Security Number:
For Foreign Persons
Passport Number ¹ :
Country of Issuance:

Does this person have significant responsibility for managing the legal entity listed above? Yes No

Name:
Date of Birth:
Address (Residential or Business):
For U.S. Persons
Social Security Number:
For Foreign Persons
Passport Number ¹ :
Country of Issuance:

Does this person have significant responsibility for managing the legal entity listed above? Yes No

If none of the owners listed on the credit application or application appendix have significant management responsibility for the business, please complete the following section for an individual who does

Name:
Date of Birth:
Address (Residential or Business):
For U.S. Persons
Social Security Number:
For Foreign Persons
Passport Number ¹ :
Country of Issuance:

¹ In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.