

# Application

## Petro-Canada™ SuperPass™ Cards provided by Girard Bulk Service Ltd

**Please complete all highlighted areas on both sides.**

**Please tell us about your business...**

Company name / Registered business name				How long established		years	months
Suite / Unit no.	Street address	City	Province	Postal code			
Subsidiary of	Doing business as	Business telephone number ( )	Cellular telephone number ( )	Fax number ( )			
Type of business	Legal status	<input type="checkbox"/> corporation <input type="checkbox"/> individual proprietorship (owner operator) <i>please provide below owner(s) name and SIN</i>		<input type="checkbox"/> partnership <i>please provide below owner(s) name and SIN</i>			
Owner(s) / Partners(s) Name and Residential Address				Social Insurance Number <i>optional</i>			
Occupation <i>Owner operator / individuals only</i>				Employer name <i>Owner operator / individuals only</i>			

**Please give us some references...**

Bank / Trust company / Credit union name and branch address	Account number	
Other Suncor/Petro-Canada account names	Account number	
Current fuel supplier	Account number	Financial statement available <input type="checkbox"/> yes <input type="checkbox"/> no

**Credit References / Suppliers *Please attach separate list if required***

Name	Address	Telephone Number	Account Number

**Please tell us about your fleet...**

Estimated monthly fuel purchases at Petro-Canada service stations in Canada	\$	Estimated monthly fuel purchases at Petro-Cardlocks in Canada	\$	Colours of fuel required <input type="checkbox"/> yes <input type="checkbox"/> no
Number of vehicles	Type of vehicles	Cards used by brokers		
	<input type="checkbox"/> cars / light trucks <input type="checkbox"/> medium duty trucks <input type="checkbox"/> heavy duty trucks	<input type="checkbox"/> yes <input type="checkbox"/> no		
Fleet / Operations Manager name			Accounts Payable contact name	

**Please sign below...**

The undersigned request(s) a SuperPass Card(s) and renewal(s) or replacements thereof from time to time. Use of the SuperPass Card(s) will constitute acceptance of the Agreement which will accompany the card(s) when issued. The undersigned hereby certifies this information to be true and complete. **The undersigned consent(s) to Girard Bulk Service Ltd obtaining from, exchanging with or disclosing to other credit grantors and recognized credit bureaus any and all information concerning the undersigned for the purposes of ensuring the accuracy of this information, conducting ongoing credit investigations, monitoring credit status and entering into and performing the Agreement.** The undersigned is authorized to make this application.

Applicant name <i>Please PRINT</i>	Applicant position / Title	E-mail address
Applicant signature	Date	Language preference <input type="checkbox"/> English <input type="checkbox"/> French

**Please complete highlighted areas on both sides and fax both sides to: 306-634-5905**

**Business Account and Card Customization**  
**Petro-Canada™ SuperPass™ Cards provided by Girard Bulk Service Ltd**

**Please complete the following in full to tailor your SuperPass account and cards to your specific needs.**  
**Call 306-637-4370 if you have any questions or special requirements.**

Company name/Registered business name \_\_\_\_\_

**Please choose your card options...**

<input type="checkbox"/> driver assigned card <i>each driver keeps own card</i>	number of cards  _ _ _ _	<input type="checkbox"/> vehicle assigned card <i>card is kept in vehicle</i>	number of cards  _ _ _ _	<b>Note :</b> For added security, all cards/drivers have a Personal Identification Number (PIN). <i>Please list driver names/vehicle numbers below.</i>
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**Please complete below the information to be embossed on the second and third lines of your cards. Please attach a separate list if more than 4 cards are required. Note: maximum 21 characters per line. This information will be used for assigning the PIN.**

Card no.	Embossing Line 2 (e.g. Company Name / Driver Name)	Embossing Line 3 (e.g. Driver Name / Vehicle Number)
001		
002		
003		
004		

**Please complete the following if you qualify for tax exempt coloured fuel†** Available at Petro-Pass™ cardlocks only.

<input type="checkbox"/> Saskatchewan <i>Please provide a</i>	TEFU / AFFB number <input type="checkbox"/> Alberta	<input type="checkbox"/> British Columbia <i>Please provide a copy of your FIN 438 Coloured Fuel Account Certification.</i>
<input type="checkbox"/> Ontario <i>We will contact you.</i>	<input type="checkbox"/> Manitoba <i>We will contact you.</i>	

**Please choose your additional card and service options...**

- record odometer reading at time of purchase
- record other information at time of purchase (e.g. unit number) *Available at Petro-Pass sites only.*
- Yes! Please call me to customize my cards for location and product access:**

reverse † Contact your provincial taxation office to confirm. ™ Trademark of Suncor Energy Inc. Used under license

**Please complete both sides and fax both sides to: 306-634-5905**

**How many cards? \_\_\_\_\_**

**Do you want just gas, just diesel, or gas&diesel, dyed diesel? \_\_\_\_\_**

**(If you are a farmer and have a PFT# you can only get dyed in SK, so if you want a card with dyed you have to order a separate card, if you want all your cards with dyed they will be restricted to SASKATCHEWAN only)**

**Do you want certain pins?\_\_ If yes please list the pins you want!**

**Did you want cards mailed out or picked up? \_\_\_\_\_**

**Phone number for pick up \_\_\_\_\_**