

Chevron and Texaco Business Card Program ON-SITE STATION CARD AGREEMENT

- 1. Complete sections A, B, and C as required to request an On-Site Station Card.
- 2. Be sure to sign the form.
- 3. Send completed form to Email: ChevronTexacoMA@wexinc.com OR Fax: 207-791-1627

A. BUSINE	SS INFO	RMATION					
Business Name:						Account Number (If available):	
Contact: Phone:						Title:	
						Chahai	7:
Mail Address:				City:		State:	Zip:
B. STATIO	N INFOR	MATION					
that you are res practice of leav send Driver Ide	sponsible for ing cards wit ntification N	any losses that occ h a station is not re	cur on a card the ecommended b ne business add	at you leave with a s y WEX or Chevron U Iress provided in you	station or for which you I.S.A. Inc., due to the inc	have shared Driver Ide reased risk that fraudu	greement with WEX, you agree ntification Numbers, as the lent activity may occur. WEX will on directly. Please provide the
Facility / Station ID #:					Station Phone #:		
					Contact Name:		
Station Physical Address:							
City:				State:			Zip:
sufficient facts borne by WEX	to support a or Chevron U	claim that the frau I.S.A. Inc.	, ,	•	•		these cards. Unless there are remain with you and will not be
C. AUTHORIZATION By signing below, I represent and warrant that I am authorized to execute this agreement on behalf of the business named above and that I have read and understand the additional terms provided herein.							
Authorized Account Holder Signature:							
Account Holder Printed Name:				Account Holder Title:		Date:	
Authorized Retailer Signature: Authorized Marketer Signature and Printed Name: X							
Retailer Printed Name:				Retailer Title:		Date:	
FOR OFFICE U	1	r: Coupon	Acct #				
Code Plastic Code Acct. # CH4 0466							
	UΠ4		0400				

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