

Sinclair Fleet Track OTR

WHO? Small Fleets. Large Fleets. Owner Operators

WHY? Save Money, Manage Expense at www.efsts.com, Driver Convenience

WHERE? Over 50 Sinclair Gold Truck Stops & over 100 Ambest Locations

WHAT? Total Fleet Card Solutions

START SAVING NOW!
For more information call merchant
services at 866-841-9315

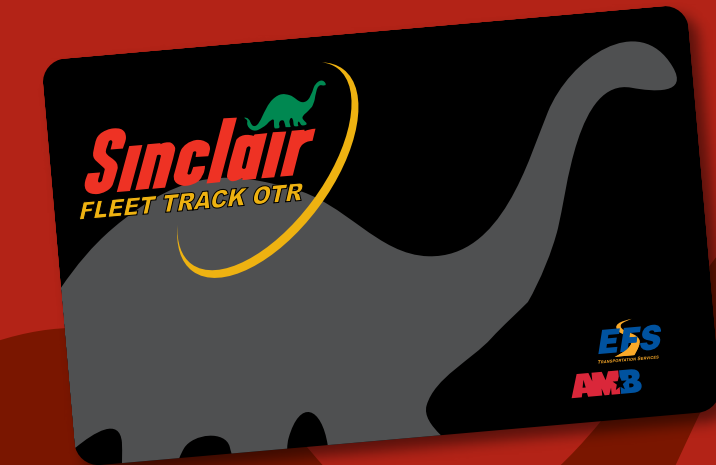


www.sinclairoil.com/goldtruckstop/fleettrackotr

Sinclair

FLEET TRACK "OTR" CARD

COMMERCIAL
APPLICATION



Enrollment Application



EFS TRANSPORTATION SERVICES, INC.

FUEL CARD CUSTOMER AGREEMENT

COMPANY INFORMATION

CORPORATE NAME		NAME	
LOCATION ADDRESS		BILLING ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
WEB URL ADDRESS/DOMAIN NAME		COMPANY EMAIL ADDRESS	
LOCATION TELEPHONE ()	FEDERAL TAX ID#	CORPORATE TELEPHONE ()	FAX NUMBER ()
DUN & BRADSTREET #		YEARS IN BUSINESS	
OWNERSHIP	INDIVIDUAL/SOLE PROPRIETOR PARTNERSHIP	CORPORATION GOVERNMENT	TAX EXEMPT MEMBER SBA
			LLC MEDIAL/LEGAL CORPORATION
NUMBER OF: _____ DRIVERS _____ TRUCKS		AMOUNT OF: _____ FUEL _____ CHECKS _____ OTHER	
DESCRIPTION OF TRANSPORTATION SERVICES PROVIDED TO OUR CUSTOMERS:			

** MANAGEMENT PROFILE - (MINIMUM OF 2 OFFICERS UNLESS SOLE PROPRIETORS HIP)

NAME		TITLE		NAME		TITLE	
SS#	YEARS W/CO	% OWNERSHIP		SS#	YEARS W/CO	% OWNERSHIP	
E-MAIL ADDRESS				E-MAIL ADDRESS			
HOME ADDRESS				HOME ADDRESS			
CITY, STATE, ZIP				CITY, STATE, ZIP			

HAVE COMPANY OR OWNERS/PRINCIPALS EVER FILED: _____ BUSINESS BANKRUPTCY _____ PERSONAL BANKRUPTCY
 IF YES, PLEASE EXPLAIN

BUSINESS REFERENCES

BANK REFERENCE	CONTACT	TELEPHONE NUMBER ()
BANK REFERENCE	CONTACT	TELEPHONE NUMBER ()
BANK REFERENCE	CONTACT	TELEPHONE NUMBER ()

AUTHORIZATION

** the below signatory (hereinafter the "authorized signer") hereby represents and warrants that he/she is either a duly elected corporate officer or the sole owner/proprietor of the above Customer and is duly authorized to execute this Agreement on behalf of the above listed business (the "Customer"). Customer hereby agrees to be bound by all terms, conditions and agreements contained in this application and fuel card agreement, as amended from time to time. The Customer and authorized signer below understand that investigative background inquiries are to be made concerning the Customer, authorized signer and/or any other corporate officer, principal, partner or owner of Customer including some or all of the following: consumer reports, investigative consumer reports, credit, criminal, and other reports, . Further the above Customer and authorized signer understands that EFS and its agents will be requesting information from references and various federal, state and other agencies with maintain records concerning the past activities of Customer, authorized signer and/or any other corporate officer, principal, partner or owner of Customer relating to credit, criminal, civil and other experiences. The Customer and authorized signer authorize without reservation, any party or agency contacted by EFS or its agent to furnish the above mentioned information at any time and from time to time. Customer and authorized signer authorize EFS to process or other wise manage credit transaction information in any manner deemed appropriate by EFS but at all times consistent with applicable law.

Signature of Authorized User

Title

Print Name

Date

** IF THIS APPLICATION IS APPROVED BY EFS, CUSTOMER WILL BE REQUIRED TO COMPLETE AND SIGN THE TERMS AND CONDITIONS PORTION OF THE AGREEMENT.**

You can fax this application to 901-380-8223, Attention: Sinclair/EFS Department