Petro-Canada SuperPass[™] Business Credit Card Application

Please note that all fields must be filled out unless otherwise noted. Application processing can take up to 5 business days.

											ro-Canada let Number					
							esignated		umber							
Suite / Unit No. Street Address				City				F	rovince		Post	al Code				
Subsidiary of Doing Business as								Number of years /months in business Years Months								
Type of Business	I	Legal Status	<u> </u>	Individu	ıal Proprieto	rship (o	wner ope	erator)		tnership						
			Corporation	piease i	fill out Owne	· ·			w Plea	ase fill out	Owner(s	<u> </u>				
Name of Person to Receive Product U	Jpdates / Fleet	Manager	Position / T	itle			E-mail Ad	ldress				Lan	guage Pr	eference		
													English			
Name of Person to Receive Statemen	nts		Position / T	ïtle		E	E-mail Ad	Idress					French			
				_												
Owner(s) / Partner(s) Name and Residential Address										Social	Social Insurance Number (optional)					
PLEASE PROVIDE SOME F										1.						
Bank / Trust Company / Credit Union	Name and Bra	nch Address								Accou	nt Num	ıber				
Other Petro-Canada Account Names										Accou	nt Num	ber				
Current Fuel Supplier										Accou	Account Number					
Credit References / Suppliers Ple	ease attach se	parate list if re	equired.													
Name	Addres	S			Telep	hone Nu	umber			Accou	nt Num	ber/Re	ference			
Nama	Addres				Tolon	hono Ni	ımbar			1	nt Nium	hor/Do	foronoo			
Name	5	leleph				ne Number				Account Number/Reference						
In some cases, financial statements n	nay be required	d for our confide	ential review,	in order to app	rove your ar	plicatio	n.									
If additional information is required, w																
PLEASE TELL US ABOUT			<u>.</u>	1												
Estimated Monthly Fuel Purchases at retail gas stations in Canada Estimated Monthly Fuel Purchases at Truck Stops / Cardlocks in Canada I have a heavy duty truck and require access to U.S. truck stops. Fees may apply.						Yes I	- 1	ımber c hicles	Ť							
\$	\$			Trace may appropri							.					
PLEASE CHOOSE YOUR B	BILLING AN	ID PAYMEN	NT OPTIO	NS												
Statement Delivery Lelectronic	via SuperPass	Online Service	s website (con	venient - <u>no</u> charge)	We will	contact	you to s	et up. L	_ Fax*	L e-st	atemer	nt* *fees i	nay apply			
Secure & Efficient Electronic Payme	ent Ontions															
	•	Bank Withdrawa	\	ectronic Funds	Transfer) via	OUR SO	cura Suna	arPace ∩r	alina San <i>ii</i>	oe Waheit	Δ.					
We will contact you to set up.	W (Automatic E	ank withdrawa	ı) — Lı ı (Lı	ectionic i unus	nansier) vie	a our sec	Jule Oupe	511 a33 OI	illi le Gervic	es vvebsit	С.					
Please sign below. The undersigned re the card(s) will constitute acceptance of	equest(s) a Petro	-Canada credit o	card(s) and ren	ewal(s) or replac	ements there	eof from ment'), a	time to tir	ne, issued	l by Suncor	Energy Property	oducts I	artners	hip ("Sun	cor"). Use o		
of this Application. The Customer may oundersigned hereby certifies this inform	charge fuel, goo	ds and services	to the credit ca	ard(s). Payment	of the accou	nt must l	be made a	according	to the gen	eral terms a	and con	ditions	of the Agr	eement. Th		
bureaus any and all information concer	ning the unders	igned, which ma	ay include a pe	ersonal consume	er report, for	the purp	oses of e	ensuring th	ne accurac	y of this int	formatio	n, appr	oving this	application		
conducting ongoing credit investigation may report the undersigned's liability fo																
Applicant Name Please print/type		Appl	icant Position	/ Title	1	icant Si	gnature F	Please pri	nt & sign			Date	Leli			
					X							VI M		Y		
OFFICE USE ONLY Reg. Distr. 1	TM No.	Application N	umber	Credit Line				Adj.					RS	RV		
116 8	72	Application N		Ordan Line				Auj.					110	110		
Main Link Account Number	Date Appr. / D	Date Appr. / Decl. Canadian Accoun				Number U.S. Account No							Code			
9933082050		M M D D Y Y											12	<u> </u>		

Petro-Canada SuperPass^{**} Business Credit Card Application



Please provide your full company name/registered business name from page one													
PLEASE CHOOSE YOUR BASIC CARD OPTIONS													
Card Type		Driver-assigned Card card assigned to each driver individually Number of Cards Card assigned to vehic may be shared by multiple drive Please provide the Retail Station Address											
Single Station Card kept at retail station only													
Complete the section below with information to be embossed on the second and third lines of your cards. Please attach a separate list if more than 5 cards are required.													
Card No. Embossing Line 2 (e.g., Driver Name) max. 27 characters Embossing Line 3 (e.g., Vehicle Number) max. 21 characters										Number) max. 21 characters			
001													
002													
003													
004													
005													
PLEASE COMPLETE THE FOLLOWING REGARDING YOUR COLOURED FUEL REQUIREMENTS													
TEFU / AFFB Number Alberta								Saskatchewan		Please provide a copy of your Fuel Tax Exemption Permit			
Manitoba We will send you our form to complete Ontario We will send you our form to complete British Columbia Please provide a copy of your Coloured Fuel Account Certification								Please provide a copy of your Coloured Fuel Account Certification					
PLEASE CHOOSE YOUR ADDITIONAL CARD AND SERVICES OPTIONS													
I would like to customize my cards and account with one or more of the following free custom options. Please contact me. • variable access to retail stations (e.g., by province/network of sites, etc) • purchase restrictions on card(s) • product purchase access/limits • fuel purchase volume limits by day/week/month I would like to enable the feature to record odometer reading at time of purchase (Note: odometer can only be added at the time of card creation)													
I would like to have my SuperPass cards customized with my company logo Note: Fees will apply. We will contact you to arrange. We will require a PC compatible file of your company logo. i.e. jpeg, eps, vector													
We will contact you with more information about one or more of the following SuperPass Online Services options:													
 Statement delivery Internet card maintenance Electronic Funds Transfer/PC banking Internet report generating 													
OFFIC Account		JSE ONLY Imber	A/R Number										

Completed applications should be emailed to: spapps@suncor.com or faxed to: 1-800-268-4415

Need help with this application? Call: 1-866-644-1707

Application processing can take up to 5 business days.

Upon receipt of your application you will receive a confirmation email with your application reference number.

Print Form

Thank you for your interest in Petro-Canada & the SuperPass Commercial Fleet Program.