Fleet Services Card Application

Applicant – please read the following before completing this form: 1) The undersigned applicant/buyer ("Applicant") represents that the information given in this application is complete and accurate and authorizes Card Issuer to check reporting agencies, credit references and other sources disclosed to confirm information given; 2) Applicant requests a business charge account, if approved for credit, and one or more business charge cards from the card issuer, which is Wright Express® Financial Services Corporation ("Card Issuer"); 3) Applicant agrees to the terms and conditions set forth in the Business Charge Account Agreement provided with this application and/or provided with the business charge card(s). Use of any card issued pursuant to this application confirms Applicant's agreement to said terms and conditions; 4) If this Account is for a partnership or a proprietorship, a partner or principal must sign this application and the undersigned's personal credit will be used in making a credit decision and they hereby authorize Card Issuer to obtain customer report. In the event that this application is denied based upon information contained in a consumer credit report of the undersigned, they authorize the Card Issuer to report the reason for the denial to the Applicant. Direct inquires of businesses where the undersigned maintains accounts may also be made; 5) Applicant agrees that in the event the account is not paid as agreed, Card Issuer may report the undersigned's liability for and the status of the account to credit bureaus and others who may lawfully receive such information. If you have any questions regarding this application, please call 1-888-387-5680.

Business Credit Information

Full Legal Company Name of Applicant / Buyer | Phone # ( ) | Fax # ( )

COMPANY NAME TO APPEAR ON CARDS: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Write company name in the boxes above as you wish it to appear on your cards. No company name will appear on your cards unless specified in the boxes. Leave blanks for spaces.

DBA or AKA | Subsidiary of | Applicant's Taxpayer ID# (TIN, FEIN, or SSN)

Headquarters Name, Physical Address, and Phone # (Do not include PO Box) | SIC Code or Type of Business

Billing Contact

Billing Address | City | State | Zip + 4

Does an executive officer, director or holder of more than 10% of the voting securities of Cendant Corporation or any of its subsidiaries control* your business? ☐YES ☐NO

*Any individual "controls" your business if they: a) serve as the majority share holder or sole proprietor; b) have the power to vote 25% or more of any class of the business' voting securities; c) have the ability to control the election of a majority of the business' directors; or d) have the power to exercise a controlling influence over the business' management policies.

If YES, please identify the executive officer, director or 10% shareholder and the Cendant Corporation companies for which they serve:

Principal(s)/Authorized Officer(s) | Title(s)

In Business Since | Year of Incorporation | Fiscal Year Start Month | Number of Vehicles for this Program

Monthly Fuel Expenditures $ — If your estimated monthly fuel expenditures equal $6,600 or more, please attach your most recent annual and current financial statements.

Important: Complete This section Accurately. Check One: ☐ Corporation ☐ Proprietorship ☐ Partnership ☐ PC or PA ☐ LLC

Complete the Personal Guaranty below if this account is for: a business incorporated less than three years, a partnership, a proprietorship, a professional corporation or association, or limited liability company.

Personal Guaranty (see above)

In consideration of Card Issuer financing purchases under the Business Charge Account Agreement (as the same may hereafter be modified, extended or amended, "the Agreement"), the undersigned guarantor ("Guarantor") hereby agrees to unconditionally personally guarantee payment and performance under any account established pursuant to this application, of any obligation of Applicant to Card Issuer or any assignee of Card Issuer, in the event the above Applicant fails to do so. This is a guaranty of payment and not merely of collection. Guarantor agrees to pay, upon demand, any amount owed by Applicant to Card Issuer and due under the Agreement. Card Issuer shall not be required to initiate any action against, nor exhaust any remedies with respect to Applicant or any other guarantor prior to making demand upon guarantor. Guarantor hereby waives any notices regarding Applicant's account or this guaranty and agrees that this guaranty shall be applicable until the Agreement has terminated and all amounts due have been paid in full. Guarantor agrees that in the event the account is not paid as agreed, Card Issuer may report Guarantor's liability for and the status of the account to credit bureaus and others who may lawfully receive such information. Guarantor hereby agrees that Card Issuer may extend the time for payment and release any other security for the agreement without affecting in any way the obligations of Guarantor. Guarantor waives any and all suretyship defenses. Personal credit of Guarantor will be used in making a credit decision and Guarantor hereby authorizes Card Issuer to obtain a consumer credit report of Guarantor. Direct inquiries of businesses where the undersigned maintains accounts may also be made. In the event this application is denied based upon information in a consumer credit report of Guarantor, Guarantor authorizes the Card Issuer to report the reason for the denial to Applicant.

Guarantor's Signature | Print Name | Date of Birth | Social Security No.

X

Address (street, city, state, zip) | Phone Number ( ) | Date

Business Bank

Primary Bank | Address | City | State | Zip

Bank Contact Person | Phone ( ) | Commercial Checking Account #

Designation of Fleet Contact Person / Recipient of Reports

The fleet contact person is the individual designated by your company to receive all Fleet Services Charge Cards, Vehicle Analysis Reports, and other such information we provide from time to time, and to take other actions with respect to your account or account access. This is also the person designated by your company to provide all fleet, vehicle, driver and other information we may request.

Contact Name | Title | Phone # ( ) | Date

Mailing Address (if different from billing address) | City | State | Zip + 4

Email Address

Tax Exempt Eligibility

☐ Check here if business is exempt from motor fuels tax. Additional fee may apply (Sales representative will provide further details)

Authorized Signature Required

Information Sharing Clause: Wright Express LLC or Card Issuer may disclose to the other party and to merchants who honor the Card, all information disclosed or generated pursuant to this application.

Any person signing on behalf of a business attests that the Buyer is a valid business entity and that said person is authorized to make this application on the Buyer's behalf.

Signature | Date | Print Name | Title

X

For Office Use Only

Opportunity Number	Sales Code	Plastic Type	Coupon Code	Account Number
	10200025	AF2J	XMX	0453

Our bank complies with Section 326 of the USA PATRIOT Act. This law mandates that we verify certain information about you while processing your account application.

Fleet Services Card
Vehicle & Driver Data

To set up your account we need the vehicle and driver information completed below. If you have any questions, please call 1-888-387-5680.

Vehicle Descriptions

If you have more than 12 vehicles or drivers, please provide the additional descriptions and names on a separate sheet of paper and enclose it with this application.

Year Make Model

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

Drivers' Names

Drivers may choose their own 4-digit Driver ID#. Please assign # beside name or leave blank if you wish our computer to assign.

1. _____ ☐☐☐☐
2. _____ ☐☐☐☐
3. _____ ☐☐☐☐
4. _____ ☐☐☐☐
5. _____ ☐☐☐☐
6. _____ ☐☐☐☐
7. _____ ☐☐☐☐
8. _____ ☐☐☐☐
9. _____ ☐☐☐☐
10. _____ ☐☐☐☐
11. _____ ☐☐☐☐
12. _____ ☐☐☐☐

☐ **Check here if you wish cards to be valid for fuel purchases only.**

(Please note that purchase authority restriction may not be enforced if electronic authorization is inoperative…e.g., during system outage.)