

# BP Business Solutions Application



FAX Application to: 1-800-348-7960 or

Mail to: BP Business Solutions, PO Box 923928, Norcross, GA 30010

## CARD PRODUCT SECTION - PLEASE SELECT A CARD PRODUCT

Please select your card choice by checking one of the boxes:

BP Business Solutions  
MasterCard® Card

BP Business Solutions  
Fuel Card Plus

BP Business Solutions  
Fuel Card

All fields must be completed to ensure timely processing. Altering the language on this document makes it null and void.

## BUSINESS INFORMATION - PLEASE TELL US ABOUT YOUR BUSINESS

Business Legal Name

Federal Tax ID (required) or SSN

\$  / Month  
Estimated Monthly Fuel Usage (Dollars)

Fax Number

Years under current ownership

Street Address Line 1 (No P.O. Boxes)

Type of Organization (mark with x)

Corporation	Proprietorship	Non-Profit*
Government	Partnership	LLC
LLP	*Please attach state tax exemption certificate (1% service fee). Tax exempt processing only available on the MasterCard and Fuel Card Plus products.	

Street Address Line 2 (No P.O. Boxes)

Number of Current Employees

State  Zip

Street Address City

Billing Address (if different from Street Address)

State  Zip

Billing Address City

## CONTACT INFORMATION - PLEASE TELL US ABOUT YOURSELF

Main Business Phone

E-mail Address for Online Statements, Reports and Advanced Card Controls

Billing Contact's First Name

Billing Contact's Last Name

Billing Contact's Phone Number

Cell Phone/Secondary Number

Choose security password to be used for Account Access  
(five numeric characters)

Type of Business

How would you like to receive your statement? (check one)

Online

Paper\*  
\*A fee may apply

## AUTHORIZED SIGNATURE - REQUIRED

Please Read Carefully: FleetCor Technologies Operating Company, LLC. ("FleetCor") and Comdata Network, Inc. ("Comdata") operate the BP Business Solutions MasterCard card product and FleetCor Technologies Operating Company LLC operates the BP Business Solutions Fuel Card and Fuel Card Plus products. This application is made to FleetCor. By signing this application, Customer authorizes FleetCor to check Customer's credit references and the information on this application and to obtain consumer or commercial credit reports to check Customer's credit standing, both for this application and for the updates of Customer's credit file and renewals of Customer's BP Business Solutions card(s). Customer acknowledges that this application is subject to approval and acceptance of Customer by FleetCor in Louisiana. If this application is approved, then Customer will be notified of its available credit limit, and Customer will not allow its unpaid account balance to exceed its credit limit. Customer agrees that Louisiana law governs the terms and conditions of the BP Business Solutions card(s), which terms and conditions will accompany the card(s) if this application is approved. Customer's accepting, signing, or using any BP Business Solutions card(s) will constitute Customer's acceptance of those terms and conditions including, without limitation, Customer's unconditional obligation to pay for all use of BP Business Solutions' cards provided to Customer and all use of Customer's account each billing cycle, as well as all interest, fees and costs associated with such cards and account. The account is not a revolving credit account. Customer agrees that any liability arising or resulting from the misuse, unauthorized use, loss or theft of any one or more of the cards issued or of Customer's account shall be fully borne, assumed and paid by Customer. Customer also agrees that Customer will exclusively use the BP Business Solutions card(s) for commercial purposes and understands that Customer's card(s) may be canceled if Customer uses them for non-commercial purposes. In the event that Customer's account is turned over to a collection agency or an attorney for collection, Customer agrees to pay all such costs, fees and expenses of such agency or attorney, including, without limitation, court costs and out-of-pocket expenses. By signing below, Customer confirms that everything it has stated in this application is correct to the best of Customer's knowledge and that the signing authorized representative is duly authorized to enter this relationship on behalf of Customer. We comply with Section 326 of the USA Patriot Act. This law mandates that we verify certain information about you while processing your account application.

Print Name (Authorized Representative)

Signature (Authorized Representative)

Date (MM/DD/YYYY)

Sales Rep Name/ ID

Merchant ID

Employee ID

Internal Use

**BUSINESS OWNER/ACCOUNT PRINCIPAL – Required for All Proprietorships, Partnerships or any other business/organization less than two years old or having fewer than 5 employees.**

Each principal ("Principal") for this Account, if any is personally and unconditionally, jointly and severally liable with Applicant, as principal and not as surety or guarantor, for the payment and performance when due of all obligations owed on the Account, regardless of who made purchases using the Cards, and the Principal agrees to pay such amounts according to the terms of this Agreement. Principal is responsible under this Agreement for all use of all the Cards issued on the Account to the fullest extent permitted by law. This constitutes Principal's agreement, individually, regarding the provisions under "AUTHORIZED SIGNATORY" on reverse side, including without limitation checking and reporting your credit and confirming your identity.

**All fields below required.**

Print Name (Principal)	Signature (Principal)	Date of Birth (MM/DD/YYYY)
Principal Street Address	City	State      Zip
Social Security #	Home Phone	Cell Phone

**CARD SET UP INFORMATION - PLEASE TELL US HOW YOU WOULD LIKE YOUR CARDS SET UP**

(In station cards only available on MasterCard and Fuel Card Plus products.)

<input type="text"/>	Number of Driver Cards	<input type="text"/>	Number of In Station Cards
<input type="text"/>	Number of Vehicle Cards	<input type="text"/>	Station Number (see station manager)

2. If you choose to have Driver Cards, please fill out this section:

\*Purchasing Ability: 1- Fuel Only, 2-Fuel and Maintenance Only, 3-Maintenance Only

Driver Name (First)	Driver Name (Last)	*Purchasing Ability (enter 1-3 below)

3. If you choose to have Vehicle Cards, please fill out this section:

\*Purchasing Ability: 1- Fuel Only, 2-Fuel and Maintenance Only, 3-Maintenance Only

Vehicle ID #	Vehicle Name	*Purchasing Ability (enter 1-3 below)