

Card Maintenance Form – Existing cards only

Please fax this form to the Head Office on 9725 6501

Account Number: _____

Account Name: _____

Please read through the options to help complete the form. If you have any queries, please call us on 08 9725 6500. Please allow 7-10 working days minimum for receipt of your cards.

**** Please print clearly – Unclear forms may cause a delay in ordering ****

** For a new fuel card please complete the Card Order Form**		CARD SERVICES REQUIRED – Tick each box as required for each card.										
		If no option is selected 'ALL PRODUCTS & SERVICES' will default										
City & Regional Fuel Card number <i>(Full card number MUST be inserted below or card order may be delayed)</i>		Change of product / services only										
		Re-issue PIN	Damaged (replace)	Lost / Stolen (replace)	Cancel /delete card ONLY	Add Odometer	All fuel / lubes & services (1A)	All fuels & lubes (1E)	All Fuels only (1F)	All Unleaded only (2F)	All Unleaded fuel & lubes (2E)	Diesel & lubes (3E)
1	705											
2	705											
3	705											
4	705											
5	705											
6	705											
7	705											
8	705											
9	705											
10	705											

I/We acknowledge and agree that I/We are bound by the City & Regional Fuels Distributor Card conditions of use.
 Upon my/our first use of the City & Regional Fuels distributor card, I/We accept the conditions of use and agree that they will apply to my/our use of the card.
 I/We acknowledge and agree that the conditions of use of the City & Regional Fuels distributor card may be varied, added or amended by City & Regional Fuels.

Customer Name (please print): _____	Customer Signature: _____
Date: __ / __ / __ 20	

(Cards will not be ordered without signed approval by customer)

Card/s to be collected from (please circle one and also note that card/s are NOT posted out for security purposes)

BP Augusta	BP Bridgetown	BP Busselton	BP Dunsborough	BP Manjimup	BP Parklands	BP South Bunbury
CRF Manjimup	CRF Picton	Pemberton Garage				

Office Use only	
Customer contacted:	Phone <input type="checkbox"/>
	Email <input type="checkbox"/>