



Customer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Authorized Contacts: \_\_\_\_\_

Poole Sales Representative \_\_\_\_\_

***Please complete the following:***

1) How many cards are needed? \_\_\_\_\_

2) Type of cards needed?

Single Cards

Vehicle Cards Only

Dual Cards

3) How would you like your invoice sorted?

Card #

Vehicle #

Department #

Manual Entry

4) Do you need your invoice grouped by department?  Yes  No

Department Names? \_\_\_\_\_

***Please complete Items 5 - 7 if ALL cards will have identical restrictions. Otherwise, use the other side to identify parameters for each individual card.***

5) What product combination should this card be authorized to purchase? ( check ONE)

All Fuels

Dyed Diesel

Diesel Only

*Please note: Product restrictions are not guaranteed.*

Gasoline Only

6) Do you want the driver to enter any of the following information?

4 - PIN Only

6 - PIN & Manual Entry

5 - PIN & Odometer Reading

7 - PIN, Odometer Reading & Manual Entry

7) What gallon limit would you like to apply PER FILL UP?

10 Gallons

50 Gallons

*Note: Gallon fill up codes at retail locations*

20 Gallons

75 Gallons

*may be controlled by the brand equipment*

30 Gallons

150 Gallons

*and NOT your fueling card.*

40 Gallons

250 Gallons



# Poole Commercial Fuels

## ***Card Order Form***