

Business Application

OFFICE USE ONLY

Channel _____

Repcode: _____

Lead source: internet pdf

1 Personal details

TELL US ABOUT YOURSELF

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Dr
☐ Rev ☐ Pro ☐ Sir ☐ Sister ☐ Mr/Ms

First name _____ Middle name (optional) _____

Surname _____

Your position (person authorised to make this application on behalf of the organisation)

HOW CAN WE CONTACT YOU?

Office number _____

Mobile number _____

Email address _____

LET'S WORK OUT YOUR EXPENDITURE LIMIT

Your expenditure limit determines how much can be charged to your account. Note your expenditure limit will be established based on our assessment process.

☐ Set my limit to \$ _____
☐ Assign me a limit based on my info.

HOW TO CALCULATE YOUR EXPENDITURE LIMIT

Please calculate the **total amount** required for all cards on your account per six week period.

How to work out your **total amount**:

\$ Fuel & oil + \$ Other purchases* = \$ **Total amount**

*Remember to include any additional purchases, such as tyres, service or repairs.

How to work out your **total limit**:

\$ **Total amount** X Number of cards X 6 weeks = \$ **Total limit**

PASSWORD

Please choose a password for telephone verification

2 Business details

NOW TELL US ABOUT YOUR BUSINESS

Registered company name (in full) _____

Company ABN _____ Company ACN _____

Business trading name (will be embossed on the card, must be 26 characters or less)

Trading address

Postal address ☐ As above

IS YOUR BUSINESS A PARTNERSHIP, TRUST OR SOLE TRADER? ☐ Yes ☐ No
 (if applicable please complete, a minimum of two partners must be disclosed)

PARTNER/TRUSTEE ONE DETAILS

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Dr
☐ Rev ☐ Pro ☐ Sir ☐ Sister ☐ Mr/Ms

First name _____ Middle name (optional) _____

Surname _____

Date of birth (day/month/year) _____ Drivers licence number _____

Address (no PO boxes) _____

Company name/trustee details

Company ABN _____ Company ACN _____

PARTNER/TRUSTEE TWO DETAILS

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Dr
☐ Rev ☐ Pro ☐ Sir ☐ Sister ☐ Mr/Ms

First name _____ Middle name (optional) _____

Surname _____

Date of birth (day/month/year) _____ Drivers licence number _____

Address (no PO boxes) _____

Company name/trustee details

Company ABN _____ Company ACN _____




3 Card details

NOW LET'S SET UP YOUR FUEL CARD

A monthly management fee per card will apply.

DEFINITIONS AND CODES

CARD TYPES

| Code | CARD TYPES |
|---|---|
|  | Vehicle Only This card can only be used with the assigned vehicle. |
|  | Driver Only This card can be used with any vehicle but only by the assigned driver. |
|  | Vehicle & Driver This card can only be used with the assigned vehicle and by the assigned driver. |

CARD CONTROLS*

| Code | CARD CONTROLS* |
|------------|----------------------|
| ALL | All products |
| A/V | All vehicle expenses |
| F/O | Fuel & oil only |

*Customised restrictions are available on request.

PIN AUTHORISATION

Must be set prior to use

ODOMETER READING

Is not available with 'Driver Only' cards and this facility may not be available at all fuel sites

CARD DETAILS (Please fill in the relevant fields for each fuel card required)

CARD 1

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 2

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 3

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 4

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 5

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 6

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 7

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 8

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

CARD 9

Driver's name (up to 20 characters)

Vehicle registration (up to 8 characters)

Card type

☐  ☐  ☐ 

Card controls

☐ ALL ☐ A/V ☐ F/O

Pin required

☐ Yes ☐ No ☐ Set later

Odometer reading

☐ Yes ☐ No

If you would like to add more cards this can be done through our online application or after your account has been set up.

4 Billing details & confirmation

WOULD YOU LIKE PAPER STATEMENTS?

☐ Yes ☐ No

Electronic statements will be sent to you free of charge. Paper statements are available and will incur a fee. Please refer to the Fee Schedule at motorpass.com.au/terms-and-conditions

HOW OFTEN WOULD YOU LIKE TO BE INVOICED?

☐ Weekly ☐ Fortnightly ☐ Monthly

If you would like to pay by direct debit or direct credit, you can set this up once you receive your login to our Online Service Centre.

PROMO CODE If applicable

CONFIRMATION

☐ Yes, I accept the WEX Motorpass Terms and Conditions and I am authorised to complete this application on behalf of the organisation, trust and/or partnership, available at wmp.cards/tcs

☐ Yes, I accept the WEX Motorpass Privacy Policy & General Acknowledgements, available at wmp.cards/privacy

Full Name

Position

Signature

Date



Please return completed applications to:

WEX Australia, Reply Paid 5342 Melbourne VIC 8060
or email to sales@wexaustralia.com
Enquiries: 1300 722 525 Fax: (03) 9274 9170

