

Company Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Fleet Manager: _____

Fleet Manager Email: _____

Accounts Payable Contact: _____

Accounts Payable Email: _____

Send online account access to: ☐ Fleet Manager ☐ Accounts Payable

Tax ID #: _____ Years in Business: _____

Tax Exempt #? ☐ Yes* ☐ No

***If yes, we need to receive a COPY of your tax exemption certificate.**

☐ **BILLED Account** (billed monthly, must fill out trade references)

☐ **CASH Account** (pay at time of service)

TRADE REFERENCES (3 references required for billed accounts, n/a for cash accounts)

Please list vendors who extend open credit to your company. Do not list financial institutions.

Company 1: _____

Company 2: _____

Company 3: _____

Account #: _____

Account #: _____

Account #: _____

Email: _____

Email: _____

Email: _____

Phone: _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Fax: _____

FLEET AGREEMENT

This agreement does not require you to have your vehicles serviced at a Big O Tires Center; however, it does authorize Big O Tires to service your fleets in exchange for timely payments for services rendered. Billing is handled by MyFleetCenter.com. A statement is delivered the first week of every month, and will include all services rendered, including services still outstanding from a previous month. Statements will be delivered via e-mail or fax unless otherwise requested. Payment is expected within thirty (30) days from the statement date and a late charge of four (4) percent or \$50, whichever is higher, can be assessed against any past due amounts shown on the statement. Written notice to MyFleetCenter.com is required upon sale or transfer of any fleet vehicle. Failure to do so will obligate you for any charges after the transaction date. **YOU HAVE THIRTY (30) DAYS FROM THE STATEMENT DATE TO NOTIFY MYFLEETCENTER.COM OF ANY DISPUTED SERVICES.** The customer agrees to pay any and all collection and legal fees incurred by Big O Tires, regardless of whether legal action is taken.

It is agreed and understood that payments shall be remitted to: **MyFleetCenter.com, PO Box 620130, Middleton, WI 53562.** The information provided in this application and any other information provided to Big O Tires/MyFleetCenter by the applicant is assumed to be accurate and complete and shall remain the property of Big O Tires/MyFleetCenter.com. You hereby authorize Big O Tires/MyFleetCenter.com to investigate and confirm your credit experience and send marketing messages via email. Use of your account indicates acceptance of the terms of this agreement.

Send completed app to MyFleetCenter:

Mail: PO Box 620130, Middleton WI 53562

Fax: 608-836-1739

Email: applications@myfleetcenter.com

Phone: 888-999-9497

Website: bigotires.myfleetcenter.com

Referred by Store: _____

Service Area Coverage (i.e., Cities, States): _____

Number of vehicles: _____

of Fleet ID Cards Needed: _____

Information required on invoices:

☐ PO # ☐ VIN # ☐ License Plate

☐ Unit # ☐ Authorizer

☐ Other (specify) _____

Account Restrictions: _____

Authorized Signature

Printed Name

Date