



Shell Oman Marketing Co. SAOG

P.O.Box 38, Mina Al Fahal, Postal Code 116, Sultanate of Oman
Tel: 24570289, Fax: 24570444

Shell Card Account Application Form

Organisation (Not to exceed 27 char.)

Short Name (Not to exceed 20 char.)

Address * P.O. Box Postal Code

Town Email Address

Street Name * Way No House No

Building No Flat No

Telephone Fax

Key Personnel Name 1 Position

Name 2 Position

Contact Person * Name 1 GSM

(Please note that the above GSM number will be used to communicate all related services from Shell Oman)

Nature of Organisation (Please Tick One) Government Commercial / Industrial

Nature of Business

Approx. Monthly Consumption (In Liters) Petrol Diesel Lubricants

No. of Cards Required Fleet Fuel Gold

Shell cards website access

User A/C :

Password:

For Commercial / Industrial Organisations Only

Name & Address of Banker

Branch

A/C Number

Security Bank Guarantee Amount (RO) DDA
(Approx. 3 times Monthly Consumption)

(Please provide a copy of Commercial Registration, Computer Print-out and specimen signature from issued by MCI)

We hereby apply to have credit facility extended to us through Shell Oman Marketing Co. SAOG "Shell Card(s)". please issue us your company's Shell Card(s) as per details given in the attachment.

Signature _____

Name _____

Designation _____

Official Stamp

