



Company Name: _____ **Website:** _____
Office Address: _____ **Home Base Airport:** _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____
Phone: _____ **Fax:** _____
Billing Address: _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____
Phone: _____ **Fax:** _____
Type of Incorporation: _____ **State of Incorporation:** _____ **Years in Business:** _____
Registration #: _____ **Fed ID #:** _____ **VAT/IVA/TVA # ¹:** _____
Principal / Parent Company: _____ **Website:** _____
Primary Business: _____
Ticker Symbol ²: _____ **Annual Revenues (US Dollars):** _____ **Number of Employees:** _____

- 1) Please indicate if the company is subject to any tax exemptions
- 2) If the company is privately held please include interim and last fiscal year's balance sheet and income statement

Primary Flight Department Contact:

Name: _____
Title: _____
e-mail: _____
Phone: _____
Fax: _____

Primary Finance Department Contact:

Name: _____
Title: _____
e-mail: _____
Phone: _____
Fax: _____

Bank Reference:

Bank: _____ **Account #:** _____ **Length of Relationship:** _____
Account Officer: _____ **Phone:** _____ **e-mail:** _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____

Credit Reference:

Company: _____ **Credit Line or Loan Amount (US Dollars):** _____
Contact Name: _____ **Phone:** _____ **e-mail:** _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____

Trade Reference 1:

Company: _____ **Length of Relationship:** _____
Contact Name: _____ **Phone:** _____ **e-mail:** _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____

Trade Reference 2:

Company: _____ **Length of Relationship:** _____
Contact Name: _____ **Phone:** _____ **e-mail:** _____
City: _____ **State:** _____ **Zip / Postal Code:** _____ **Country:** _____



Company Name: _____

Fleet Details:

Aircraft Registration	Type of Aircraft	Year of Manufacture	Registered Owner	Aircraft on AOC Yes/No	Annual Utilization

Continue in a separate sheet if more space is needed

Describe any seasonality in the operation: _____

Are there any recurring or frequent destinations? _____

Charter / Aviation Management Companies:

Does any customer constitute more than 10% of your business (please detail)? _____

What are your normal terms to your customers? _____ What is the ratio of charter hours vs. owner-flown hours? _____

Customer Preferences:

Interest in the following services: AVCARD Yes No Number of Cards per Aircraft: _____

Baseops Trip Planning Yes No

Contract Fuel Yes No

Invoicing Preferences: Currency CAD EUR GBP USD Other: _____ Unit of Measure USG Litres

Credit Line Requested (US Dollars): _____ Web Access Contact Name: _____

Phone: _____ e-mail: _____ Desired Username: _____

SIGNATURE APPROVAL AND ACCEPTANCE OF TERMS AND CONDITIONS:

- The Company warrants that the preceding information is true, correct and complete and agrees to inform World Fuel Services, Inc. in a timely manner of any ownership changes and/or material adverse changes to the Company's financial position.
- The Company authorizes (a) the references listed in this application to release to World Fuel Services, Inc. information related to the Company's accounts and (b) World Fuel Services, Inc. to secure information regarding the Company's credit history from any commercial or consumer reporting agency or trade organization.
- The Company agrees that (a) all transactions for the purchase of products, including fuel or services are subject to World Fuel Services' General Terms and Conditions found at http://www.wfscorp.com/Aviation/Business_Aviation/pdf/wfs-ba-tc.pdf ; and (b) all AVCARD transactions and Customer's use of the AVCARD are subject to the Terms and Conditions for Aircraft Operators Use of the AVCARD Charge Card found at http://www.wfscorp.com/Aviation/Business_Aviation/pdf/wfs-ba-avcard-tc.pdf
- If the customer is an LLC the signatory warrants he/she is a managing member.

Name / Title Signature

Date Contact Phone

Submit this application and supporting documentation by fax to 1-281-556-2586; by e-mail to wfsam@wfscorp.com or contact your local sales representative