



Please ensure the following materials are included and/or completed prior to submitting the Shell Aviation Consumer Card Application.

ENSURE the Application is complete and accurate:

- Complete all parts of the application.
- Read the attached Shell Aviation Card Terms and Conditions and keep it for your records, along with a copy of this Application.
- Is the Application signed and dated?
- Does the Application contain all required information?

Send the completed application and financial statements via fax to Shell Aviation at (866) 977-1310, by email to cpsnewapplications@usbank.com, or by mail to:

**Shell Aviation Processing Center
Attn: Contract Services, U.S. Bank
200 South 6th Street
EP-MN-L28C
Minneapolis, MN 55402**

If you have questions about the Shell Aviation Commercial Card program, please call 888-767-1982.



Shell Aviation Consumer Commercial Card Application

The creditor and issuer of the Shell Aviation Card is U.S. Bank National Association ("U.S. Bank"), dba Multi Service Aviation ("U.S. Bank" or MSA").

1. Complete all parts of the application.
2. Read the attached Shell Aviation Card Terms and Conditions ("**Agreement**") and keep it for your records, along with a copy of this Application.
3. Return completed Application and any additional requested information to Shell Aviation Credit Card Center at the mail, facsimile or email address as shown on page 1 of this Application.

SECTION 1 – APPLICATION (CARDHOLDER) INFORMATION

CARDHOLDER'S LEGAL NAME		DATE OF BIRTH	SOCIAL SECURITY NUMBER
HOME ADDRESS (PO Box not acceptable)			
CITY	STATE		ZIP CODE
PHONE NUMBER		FAX NUMBER	
EMAIL ADDRESS			
EMPLOYER'S NAME	EMPLOYER'S PHONE NUMBER	TIME AT EMPLOYER (YEARS/MONTHS)	
APPLICANT'S ANNUAL INCOME* \$	<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	MONTHLY HOUSING PAYMENT \$	
* Income from alimony, child support, or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.			

SECTION 2 – BANK, BILLING AND CARD INFORMATION

NAME OF BANK	BANK ACCOUNT NUMBER	BANK ABA/ROUTING NUMBER	
FULL ADDRESS OF BANK (PO BOX NOT ACCEPTABLE)			
CITY	STATE		ZIP CODE
IF YOU HAVE AN EXISTING SHELL AVIATION ACCOUNT, PLEASE PROVIDE NUMBER	BILLING CURRENCY		
WHAT NAME SHOULD BE SHOWN ON THE CARD?	PLEASE ADVISE THE CREDIT LIMIT YOU ARE APPLYING FOR?		
CARD DELIVERY ADDRESS, IF DIFFERENT FROM ABOVE			
ANY OTHER INFORMATION			
PREFERRED PAYMENT METHOD: <input checked="" type="checkbox"/> DEBIT <input type="checkbox"/> CHECK <input type="checkbox"/> DIRECT DEBIT			
FULL NAME OF CREDIT REFERENCE 1	PHONE NUMBER (INCLUDE COUNTRY CODE)	FAX NUMBER (INCLUDE COUNTRY CODE)	
FULL ADDRESS OF CREDIT REFERENCE 1 (PO BOX NOT ACCEPTABLE)	CITY	STATE	ZIP CODE
FULL NAME OF CREDIT REFERENCE 2	PHONE NUMBER (INCLUDE COUNTRY CODE)	FAX NUMBER (INCLUDE COUNTRY CODE)	
FULL ADDRESS OF CREDIT REFERENCE 2 (PO BOX NOT ACCEPTABLE)	CITY	STATE	ZIP CODE

FOR SHELL AVIATION USE ONLY

DATE OF OFAC	SEARCHED BY	PROMO CODE
TOA	LOC	RC

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Promise to Pay. In return for extending credit to you on this Account from time to time, you agree to pay for all purchases you charge to this Account, and all other charges mentioned below, according to the terms of this Agreement.

Important Information About Opening An Account. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, street address, PO Boxes are not allowed under Federal law), date of birth and other information (Including Social Security or Tax Payer Identification Number) that allows us to identify you. We may ask to see your driver's license or other identifying documents. SAPC collects and uses personal information about a person to share such information with Shell Aviation so it and its affiliates may identify incidental or related services that may be of interest to the Applicant/Cardholder. However, we do not share account information with any other entity for any purpose.

Payment and Finance Charge. Statements will be sent monthly and your payment is due the 16th of each month. Payments received after the due date on your statement will be considered delinquent. Delinquent accounts will be assessed a late charge at a per billing period rate of **18%** per annum / **1.5%** per month of the amount of past due invoices ("**Late Payment Fee**"). In addition, SAPC may charge an adjustment fee of up to **\$25.00** for any adjustments made to the Account balance resulting from any errors or omissions made by you in connection with your use of the card ("**Account Balance Adjustment Fee**"). You agree to pay any Late Payment Fees and Account Balance Adjustment Fees presented on a monthly statement. If your bank should fail to honor payment to SAPC, you agree to pay our returned funds fee of up to **\$30.00** ("**Returned Payment Fee**"). In addition, if your payment is dishonored or your account becomes delinquent, SAPC may require immediate and full payment of all outstanding amounts, as well as the return of your Shell Aviation cards. SAPC neither sells nor warrants the goods or services obtained from the Shell Aviation card vendors. SAPC is entitled to offset any amounts it may owe you against any claims it has against you.

Disputed Billings. Cardholder may notify SAPC of any disputes regarding charges or billings hereunder in writing, by telephone or by electronic means. Written communications relating to billing disputes must be sent to Multi Service Aviation at PO Box 13050, Overland Park, Kansas 66282-9900, by phone to 888-767-1982, or by e-mail to customer.service@shellaviationcards.com. Communications should include the Cardholder's and, if applicable, the Participant's name(s) and Account number(s), the dollar amount of any dispute or suspected error and a description of the dispute or error. Any communication regarding a dispute or suspected error must be received in written form by SAPC within sixty (60) days from the last day of the billing cycle in which the disputed invoice was posted to the Account.

Your Rights and Our Responsibilities After We Receive Your Written Notice. We must acknowledge your letter within 30 days, unless we have corrected the error by then. Within 90 days, we must either correct the error or explain why we believe the bill was correct. After we receive your letter, we cannot try to collect any amount you question or report you as delinquent. We can continue to bill you for the amount you question, including late charges, and we can apply any unpaid amount against your credit limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. If we find that we made a mistake on your bill, you will not have to pay any late charges related to any questioned amount. If the disputed invoice is found to be an accurate billing transaction, then payment will be due as set forth in this agreement. In addition, you may have to pay finance charges and you will have to make up the questioned amount. In either case, we will send you a statement of the amount you owe and the date that it is due. If you fail to pay the amount that we think you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within ten days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your bill. And, we must tell you the name of anyone to whom we have reported you. And, we must tell anyone we report you to that the matter has been settled between us when it finally is. If we don't follow these rules, we can't collect the first **\$50** of the questioned amount, even if your bill was correct.

Change in Terms of Agreement. U.S. Bank may change the terms of this Agreement at any time by giving Cardholder notice. If permitted by applicable law, such changes will apply to existing Account balances as well as future purchases. If Cardholder does not accept the changes, Cardholder must notify U.S. Bank in writing within twenty-five (25) days after the date of the notice that Cardholder refuses to accept the changes and elects to terminate this Agreement. Should Cardholder elect to terminate this Agreement pursuant to this Section, all outstanding Debt shall become due and payable by Cardholder to U.S. Bank and/or Multi Service Aviation, according to the terms of the existing Agreement. Cardholder will also be responsible for ensuring the destruction of all Cards.

Notices. Except with respect to notices relating to the status of individual Cards which may be established in writing between U.S. Bank and Cardholder or a Participant, all notices, requests and other communication provided for hereunder must be directed to Cardholder at the address on the Application and to Multi Service Aviation at PO Box 13050, Overland Park, KS 66282-9900. Unless otherwise specified herein, requests and other communication provided for hereunder must be in writing, postage prepaid, hand delivered or by any means approved by U.S. Bank. Either party may, by written notice to the other, change its notification address.

Lost or Stolen Card(s) or Compromised Account(s). Cardholder shall immediately, upon receipt of such information, notify SAPC by either: 1) telephone at 888-767-1982; 2) in writing addressed to SAPC at PO Box 13050 Overland Park, KS 66282-9900; 3) via facsimile at 866-977-1310; or 4) by an agreed upon electronic means as to any lost or stolen Card(s) or information associated with the Account. Cardholder shall also immediately notify SAPC by either: 1) telephone at 888-767-1982; 2) in writing addressed to SAPC at PO Box 13050 Overland Park, KS 66282-9900; 3) via facsimile at 866-977-1310; or 4) by an agreed upon electronic means to cancel a Card or other Account access. After notification has been made to SAPC to cancel such Card(s) and/or Account access, use of such Card(s) and/or Account access are expressly prohibited, and the cancelled Card(s) must be immediately destroyed. Cardholder is liable for the unauthorized use of the Card until SAPC receives notification of the lost or stolen Card or to cancel the Account access. Cardholder shall be liable for any Debt incurred or arising by virtue of the use of a Card following receipt by SAPC of notice of such loss, theft, or request to cancel Account access. Cardholder liability will not exceed **fifty U.S. Dollars (\$50.00)** per Card once SAPC has been notified of the lost or stolen Card(s) and confirms that such transactions were, in fact, unauthorized. Cardholder agrees to assist SAPC in determining the facts, circumstances, and other pertinent information related to any loss, theft, or possible unauthorized use of the Card and/or Account and to comply with such procedures as may be required by SAPC in connection with SAPC's investigation. SAPC is not responsible for controlling the use of any Card(s), other than as specifically provided herein.

Special Rules for Credit Card Purchases. If you have a problem with the quality of property or services that you purchased with the Shell Aviation Card, and you have tried in good faith to correct the problem with the merchant, you may have the right to not pay the remaining amount due on the property or services. There are two limitations on this right: a) you must have made the purchase in your home state or, if not within your home state, then within 100 miles of your current mailing address and b) the purchase price must have been more than **\$50**. These limitations do not apply if we own or operate the merchant or if we mailed you the advertisement for the property or services.

Agreement Term and Termination. The validity, interpretation and performance of this Agreement will be controlled by and construed under the laws of the State of Minnesota (without giving effect to the conflict of law principles thereof) and applicable federal laws. SAPC may choose to pursue legal action against the cardholder in any state in which the cardholder does business or where jurisdiction may otherwise be proper. In the event of the current holder's breach or default under the terms of this Agreement, the cardholder acknowledges and agrees that SAPC may, in addition to all other rights, invoke any and all statutory or equitable lien rights or those of any participating merchants in connection with the enforcement of SAPC's right to payment under this Agreement. The cardholder will be liable to SAPC for all costs and expenses, including late charges, and reasonable attorneys' fees or other costs incurred by SAPC in enforcing its rights hereunder. Either you or SAPC may terminate this Agreement at any time. Once the Agreement is terminated, you must return to SAPC all cards in your possession or control. Payment in full of all outstanding amounts must be made upon termination.