

StarCard, StarFleet and StarFleetPlus Application



Thanks for choosing to apply for a Caltex Card. To apply simply complete all the required information for a StarCard, StarFleet or StarFleetPlus card. Send your completed form to Caltex StarCard, Credit Department, Reply Paid 3998, Sydney, NSW 2001.

Please note this application is wholly or predominantly for business purposes.

Membership number

* denotes mandatory field (must be completed)

	I'm applying as an	individual / sole trader	partner	ship o	company	trust (please ticl	c appropriate box)
	I'm applying for a		arFleet (_	_	etPlus Card	
REGISTERED	NAME *	ACN*	A		TS TO PROVIDE A	BN ARBN	
TRADING NA	ME ★	AUN A		NAME (where	applicable)	ARDIN	
BUSINESS AD	DDRESS (PO Box not accepta	able) 🛨					
UNIT No.	STREET No. * STREE	T NAME *					
SUBURB/TOW	/N *					STATE ★	POSTCODE ★
POSTAL ADD	RESS (if different)						
UNIT No.	STREET No. STREET N	NAME					
SUBURB/TOW	/N					STATE	POSTCODE
PHONE *				FAX			
MOBILE				EMAIL			
NATURE OF BUSINESS No. OF EMPLOYEES BUSINESS TRADE REFERENCES (trading over 12 months) *							
1.							
NAME 2.					PHONE		FAX
NAME					PHONE		FAX
NAME					PHONE		FAX
DETAILS OF I	NDIVIDUAL/SOLE TRADER/	PARTNER/DIRECTOR/TRUSTEE No.1					
TITLE *	SURNAME *		FI	RST AND MID	DLE NAMES 🛨		
HOME PHON	E *	DATE OF BIRTH *	D	RIVERS LICEN	CE*		
CURRENT RE	SIDENTIAL ADDRESS (PO B	ox not acceptable)					
UNIT No.	STREET No. * STREET N	NAME *					
SUBURB/TOW	/N ★				STATE *	POSTCODE *	YEARS AT ADDRESS *
	ase tick appropriate box) 🛨						
OWN BU	Y RENT BOARD	\$ MORTGAGE VALUE	#C	OUSE VALUE		\$ MONTHL	Y PAYMENTS
PREVIOUS RE	SIDENTIAL ADDRESS (comp	plete if less than 5 years at current ad	ldress)				
UNIT No.	STREET No. STREET	T NAME					
SUBURB/TOW	/N			9	STATE	POSTCODE	YEARS AT ADDRESS
SPOUSE NAME							
		IA BUT NOT LIVING WITH YOU *					
NAME *		ADDRESS ★				PHONE ★	RELATIONSHIP *

StarCard, StarFleet and StarFleetPlus Application DETAILS OF PARTNER/DIRECTOR/TRUSTEE NO.2 FIRST AND MIDDLE NAMES * TITLE * SURNAME * HOME PHONE * DATE OF BIRTH * DRIVERS LICENCE * CURRENT RESIDENTIAL ADDRESS (PO Box not acceptable) UNIT No. STREET No. * STREET NAME * SUBURB/TOWN * STATE * POSTCODE * YEARS AT ADDRESS * DO YOU (please tick appropriate box) * \$ \$ \$ RENT BOARD MORTGAGE VALUE HOUSE VALUE MONTHLY PAYMENTS PREVIOUS RESIDENTIAL ADDRESS (Complete if less than 5 years at current address) UNIT No. STREET No. STREET NAME SUBURB/TOWN STATE POSTCODE YEARS AT ADDRESS SPOUSE NAME NEAREST RELATIVE LIVING IN AUSTRALIA BUT NOT LIVING WITH YOU★ NAME * ADDRESS * PHONE * RELATIONSHIP * PLEASE ISSUE CARDS IN THE FOLLOWING NAMES (please tick appropriate boxes) FOR ADDITIONAL CARDS PLEASE MAKE EXTRA COPIES OF THIS FORM AND ATTACH CARD ONE * STARFLEET CARD STARFLEETPLUS CARD STARCARD ROADSIDE ASSIST DRIVER NAME REGO No * CARD DAILY LIMIT * CONTROLS * \$ CARD MONTHLY LIMIT * ODOMETER PINI SIGNATURE PRODUCTS * ULP VORTEX 95 WORKSHOP CAR WASH ALL PRODUCTS VORTEX 98 PULP DIESEL LPG GOODS CARD TWO * STARFLEETPLUS CARD ROADSIDE ASSIST STARCARD STARFLEET CARD \$ DRIVER NAME REGO No * CARD DAILY LIMIT * CONTROLS * \$ CARD MONTHLY LIMIT * PIN ODOMETER SIGNATURE PRODUCTS * ULP PULP DIESEL WORKSHOP CAR WASH ALL PRODUCTS VORTEX 98 CARD THREE STARCARD STARFLEETPLUS CARD ROADSIDE ASSIST \$ DRIVER NAME REGO No * CARD DAILY LIMIT * CONTROLS * CARD MONTHLY LIMIT * PIN ODOMETER SIGNATURE PRODUCTS * CAR WASH VORTEX 95 VORTEX 98 LPG OIL WORKSHOP GOODS ALL PRODUCTS 060 If you have an existing StarCard account, please fill in your account number: CONTACT FOR ACCOUNT CORRESPONDENCE ★ FULL NAME * TITLE * PHONE * FΔX FMAII 🛨

DIRECT DEBIT DETAILS							
_							
A CCCUINE	T NAME *						
ACCOUN	I NAME *		ACCOUNT No.*				
BANK *		BSB *		BRANCH NAME *			
	ser identification number – 001518	202					
The amo at the tin the term	Please note direct debit is the only payment method accepted by Caltex StarCard, StarFleet & StarFleetPlus Cards. The amount debited will vary according to your usage of the StarCard. It will include any fees or charges agreed between us. You will be able to access billing advices at the times you request summarising your transactions and charges for the billing period. The full details of the Direct Debit Request Service Agreement which outlines the terms and conditions of the Direct Debit arrangements between you and us ("Direct Debit Arrangements") will be sent to you, or is available by calling StarCard Customer Service on 1300 365 096 or www.caltex.com.au						
Agreement to Terms & Conditions, Guarantee & Indemnity, Privacy Agreement Terms & Conditions, Guarantee & Indemnity. Please read carefully and sign this Declaration. I/we apply to Caltex Australia Petroleum Pty Ltd (CAPPL) to open a StarCard Account in my/our name (or in the name of the entity nominated) and to issue a StarCard to each person nominated on the StarCard Order Section. I declare that: 1. The information I/we have given on my/our application is true and complete and I/we authorise CAPPL to check that information. I/we acknowledge that CAPPL relies on this information to consider my/our application; 2. I/we acknowledge CAPPL may require further information about me/us to assess my/our application. 3. I/we have full authority to sign this application on behalf of the Applicant; 4. If my/our application is approved, I/we will comply with the Card Terms and Conditions that CAPPL will send to me, prior to sending me the Card. (Terms and Conditions are also available on www.caltex.com.au); 5. I/we authorise CAPPL to bill the Account for Monthly Fees (set out in the Terms and Conditions). I/we acknowledge that CAPPL may vary the Monthly Fee from time to time by notice in writing. (For current Monthly Fees call 1300 365 096); 6. In consideration of the acceptance of this application, I/we hereby personally guarantee to CAPPL the due and punctual payment of sums of money due and payable by the Applicant in relation to any card issued pursuant to this application. I/we personally indemnify CAPPL against any loss, cost or expense caused by failure of the Applicant to make any payment due and payable; 7. The credit to be provided to me/us by CAPPL is to be applied wholly or predominantly for business purposes.							
Privacy Agreement. Caltex needs to collect Personal Information about the Applicant ("you"), for the purposes of your credit application. If Caltex cannot collect this information, it may be unable to process your application. Caltex respects your privacy and will only use or disclose personal information in accordance with the Privacy Act 1988. To request access, ask a privacy-related question or get a copy of Caltex's Privacy Policy, please write to: The Privacy Compliance Officer, Caltex Australia Petroleum Pty Ltd, Level 24, 2 Market Street SYDNEY, NSW 2000. "Personal information" means information about you collected by Caltex in this Application form and from other sources, including information about you cyour financial circumstances, credit worthiness, credit history, credit standing and credit capacity. By submitting this Application, you agree that, subject to the Privacy Act 1988, Caltex may: (1) disclose Personal Information to Caltex's associated entities or third parties engaged to provide services to Caltex; (2) obtain credit reports about you from credit reporting agencies to assess your application for commercial credit or to collect overdue payments from you, (3) obtain and verify Personal Information about you from a motor vehicle or land title registry or from a business that provides commercial credit worthiness information; (4) provide to and exchange your Personal Information with any person whose name you give to Caltex in connection with your credit Application or facility; (5) provide to and exchange your Personal Information with any person whose name you give to Caltex in connection with your credit Application or facility; (5) provide to and exchange your Personal Information with any person whose name you give to Caltex in connection with your credit Application or facility; (6) provide to and exchange your Personal Information with any person whose name you give to Caltex in connection with your credit Application or facility; (5) provide to and exchange your Personal Information							
PLEASE ENSURE PRINCIPALS SIGN THIS SECTION (INCLUDING ALL PARTNERS AND ALL DIRECTORS)							
INDIVIDUAL/SOLE TRADER/PARTNER/DIRECTOR/TRUSTEE NO.1*							
		/	/ SIG	GNATURE			
TITLE	NAME	DATE	X	,			

PLEASE ENSURE PRINCIPALS SIGN THIS SECTION (INCLUDING ALL PARTNERS AND ALL DIRECTORS)							
INDIVIDUAL/SOLE TRADER/PARTNER/DIRECTOR/TRUSTEE NO.1*							
			/	/	SIGNATURE		
TITLE	NAME	DATE			X		
			/	/	SIGNATURE		
WITNESS NAME		DATE			X		
PARTNER/DIRECTOR/TRUSTEE NO.2 *							
			/	/	SIGNATURE		
TITLE	NAME	DATE			X		
			/	/	SIGNATURE		
WITNESS NAME		DATE			X		
PARTNER/	PARTNER/DIRECTOR/TRUSTEE NO.3 *						
			/	/	SIGNATURE		
TITLE	NAME	DATE			X		
			/	/	SIGNATURE		
WITNESS	NAME	DATE			X		
PARTNER/DIRECTOR/TRUSTEE NO.4 *							
			/	/	SIGNATURE		
TITLE	NAME	DATE			X		
			/	/	SIGNATURE		
WITNESS NAME		DATE			X		
OFFICE USE ONLY							
SITE NUMBER		SPECIAL OFFER CODE					