



To : Shell Card Customer Service (Monday to Friday, 8.30am to 6.00pm)
 Email Add : generalcardrequests-sg@shell.com
 Helpline No. : 1800-261-5322
 Fax No. : 6263-2855

Please make copies for future use

SHELL CARD REQUEST FORM

CUSTOMER ACCOUNT NO : S G

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A. REQUEST FOR ADDITIONAL CARD(S)

**Disclaimer: If Purchase Limit left blank, a default setting (\$500 with max 3 transaction per day) will be applied.

Cardholder's Name (20 characters maximum)	Vehicle Registration No.	Card Group (If Any)	Please ✓ required product (compulsory)					Odometer (Please ✓) Optional	**Purchase Limit			
			Diesel (D)	FuelSave 95 (F95)	FuelSave 98 (F98)	V-Power Nitro+ (VP)	Lubricants (L)		No of transaction		Amount in \$	
									Day	Month	Day	Month

B. REQUEST FOR CHANGE OF (I) CARDHOLDER'S PARTICULARS (II) VEHICLE NO (III) PRODUCT (IV) PURCHASE LIMIT

Card Number (Last 6 digits)	(I) Cardholder's Particulars		(II) Vehicle Registration No.		(III) Product		(IV) Purchase Limit					
	Existing Name	New Name	Existing	New	Existing	New	No of transaction		Amount in \$			
							Day	Month	Day	Month		

C. CANCELLATION OF CARD (S) / REPLACEMENT OF CARD (S) / REISSUE OF PIN (S)

**Disclaimer: Card replace due to lost will receive NEW card & NEW Pin.

Card Number (Last 6 digits)	Cardholder's Name	Vehicle Registration No.	Replacement Card (✓)		Reissue of Pin (✓)	Cancellation (✓)	
			Damaged	**Lost		Not In Use	Reason

Other Remarks: _____

*COMPULSORY FIELDS (Managerial level OR Person in Charge)	*SIGNATURE	*COMPANY STAMP	If you have changed any details of below, please fill up accordingly.
*NAME _____ *POSITION _____ *TELEPHONE _____			ADDRESS : _____ _____ _____ CONTACT PERSON : _____ CONTACT NUMBER : _____ COMPANY EMAIL : _____