

(Please complete the form)

Company Details

Name of Company:

Address (Postal):

.....

Address (location):

.....

Tel No. 1 (landline): Tel No. 2 (Mobile):

Contact Person: Tel No.:

Corporate Email:

Card Options

Card Restrictions: ☐ Fuel ☐ Lube Services ☐ LPG

Payment Options: ☐ Pre-payment ☐ Post Payment

Notifications: ☐ SMS ☐ Email

Pick-up option: ☐ Self ☐ Delivery

Report Required: ☐ Statement ☐ Web Access

Statements: ☐ Print ☐ Email

Estimated Consumption Per Month: GHS:

I, (name) (signature) hereby apply
for a GOCARD account on behalf of my company and declare that I am authorized to do so; and all the
information contained herein is accurate to the best of my knowledge.

..... (Date of signing)

..... (Signature)

(Managing Director/Authorized Person)

..... (Date of signing)

Company Stamp / Seal*

NB: Ghs5.00 per card for renewal / replacement

