

APPLICATION FOR SHELL CARNET CARD

Please complete this Application Form and return it via email or fax using the following details:

FAX: +30 210 60 83 820

email: info@shell-moh.com



Shell & MOH Aviation

(Items with an asterisk * are mandatory)

COMPANY DETAILS:

* Company Name	
* Street / No.	
* Postcode / Place	
* Country	
* Telephone no. (including international code)	
Fax no. (including international code)	
* Email Address 1	
Email Address 2	
* Commercial register company is entered into	
* Commercial Register No.	
* VAT Identification No.	
* Established Date	
Nature of company' s business	

CONTACT PERSON:

* Name	
* Email address	
* Telephone number	
Position in company	

BILLING DETAIL:

* Accountign Department Contact	
* Stree/No	
* Postcode/Place	
* Country	
* Telephone no. (including international code)	
Fax no. (including international code)	

BANK DETAILS:

Bank Name	
Stree/No	
Postcode/Place	
Account holder	
Account No	
IBAN	

Notes :

The applicant consents to and provides authorization for handling, storage and use of Personal Data made available through his application for the purposes of his business relationship with Shell & MOH Aviation.

With regard to Personal Data made to it available by the application, Shell & MOH Aviation Fuels A.E. shall comply with the Greek Data Protection Laws and shall not, by any act or omission, knowingly place itself or any Shell and MOH Affiliates in breach of the same.

Shell & MOH Aviation Fuels A.E. and the applicant agree to be bound in relation to the processing, use, transfer and movement of information and data (as appropriate) by Shell in accordance with the relevant obligations under applicable Data Protection Laws.

Without prejudice to the above, Shell shall use all reasonable endeavours to restrict to the extent lawfully practicable any barriers to data and information flow between any member of the Shell Group (in any jurisdiction) in respect of the transfer or use of as much of the relevant data contained in the application for the purposes of issuing the Shell Carnet card and its subsequent use thereof.

PARENT COMPANY:

Name of Parent Compray	
Stree/No	
Postcode/Place	
Country	
Telephone no. (including international code)	
Fax no. (including international code)	

* AIRCRAFT/FLEET:

Type of Aircraft	Registration Number

* Annual Volume (approx) per airport	UNIT

* Please send us your latest Financials with this Application Form.

Name of person to sign the contract:

SIGNATURE :

(Applicant)

DATE :
