United States Department of State



Office of Foreign Missions Washington, D.C. 20520

NOTICE

Personal Tax-Exempt Accounts Now Available with BP Business Solutions

The Office of Foreign Missions (OFM) recently learned that BP Business Solutions has changed their credit card provider and will now provide both individuallybilled personal gasoline tax-exempt credit cards for diplomatic and consular personnel, and mission gasoline tax-exempt credit cards for foreign missions and international organizations. Attached is a copy of the BP Business Solutions Application that should be used for both types of accounts. These applications can also be found at all the participating BP gasoline stations

The applications must be submitted to OFM. Please do not mail or fax applications directly to the gasoline company. Information concerning the provision of tax-exemption on the purchases of gasoline and diesel fuels is available at OFM's website at <u>www.state.gov/ofm/tax/</u>.

For additional questions or comments concerning this information please contact OFM by telephone at (202)-895-3500 option 2, by email at <u>OFMTaxCustoms@state.gov</u>, or the nearest OFM Regional Office.

Attachment 1: Blank BP Business Solution Application

March 18, 2008

BP Business Solutions Application

FAX Application to: 1-800-348-7960 or Mail to: BP Business Solutions, PO Box 923928, Norcross, GA 30010

Mail	to: BP Business Solutions, PO Box 923928, No	prcross, GA 30010	For more information call: 1-800-348-7959
CAR 1		usiness Solutions	Business Solutions
All fi	elds must be completed to ensure timely processing. P		
_	NESS INFORMATION - PLEASE TELL US ABOUT YOUR Business Legal Name		SSN (Required)
	\$ Credit Limit Requested Fax Number	Business Structur Corporation	re/Type □ Proprietorship □ Non-Profit □ LLC □ LLP □ Partnership avemption certificate (1% service fee) only available on the MatsiCard product
apes	Physical Address Line 1 (No P.O. Boxes)		Years under current ownership
	Physical Address Line 2 (No P.O. Boxes)		Annual Sales Volume (Dollars)
	Physical Address City	State Zip	
	Mailing Address Line 1 (if different from physical address)		
	Mailing Address City	State Zip	
008	TACT INFORMATION - PLEASE TELL US ABOUT YOUR	SELF	
E.	Main Business Phone E-mail Address Fo	or Online Statements and Reports	
	Key Executive First Name	Key l	Executive Last Name
	Billing Contact's First Name Billing Contact's Last Nam	e Billing Contact's Phone Nu	mber
		assword to be used for Account Access (minimur	n of four characters).
	How would you like to receive your statement? (check or *A fee may apply.	ne) 🔲 Online 🛄 Paper*	
fina 4	NCIAL/REFERENCE INFORMATION - PLEASE TELL US		AND REFERENCES
	Trade Reference Name	Trade Reference Phone Number	Trade Reference Fax Number
1	Current Fuel Supplier	Account Number	Fuel Supplier Phone Number
SIGN	ATURE - PLEASE SIGN AND DATE		
5	Customer authorizes FleetCor to check Customer's credit references and the information	ation on this application and to obtain consumer or comm	P Business Solutions card products and this application is made to RestCor. By signing this application, nercial credit reports to check Customer's credit standing, both for this application and for the updates of noval and acceptance of Customer by RestCor in Louisiana. If this application is approved, then Customer
	will be notified of its available credit limit, and Customer will not allow its unpaid account conditions will accompany the card(s) if this application is approved. Customer's acception of the second sec	unt balance to exceed its credit limit. Customer agrees the ting, signing, crusing any BP Business Solutions card(s) w	at Louisiana law governs the terms and conditions of the BP Business Solutions card(s), which terms and ill constitute Customer's acceptance of those terms and conditions including, without limitation, Customer's
	revolving credit account. Customer agrees that any liability arising or resulting from t	he misuse, unauthorized use, loss or theft of any one or i	cycle, as well as all interest, fees and costs associated with such cards and account. The account is not a more of the cards issued or of Customer's account shall be fully borne, assumed and paid by Customer. Isiomer's card(s) may be carceled if Customer uses them for ixon-commercial purposes. In the event that
	Customer's account is turned over to a collection agency or an attorney for collection	n, Customer agrees to pay all such costs, fees and expen rect to the best of Customer's knowledge and that the sign	see of such agency or attorney, including, without limitation, court costs and out-of-pocket expenses. By ing authorized representative is duly authorized to enter this relationship on behalf of Customer. We comply
		Y	///
	Print Name (Authorized Representative)	Signature (Authorized Representative)	Date (MM/DD/YYYY)
a an fa	ONAL GUARANTY BY PRINCIPAL OF APPLICANT MAY BE REQUIRE	ED FOR: CORPORATIONS LESS THAN TWO	YEARS OLD AND ALL SOLE PROPRIETORSHIPS, PARTNERSHIPS AND LLC'S
6	Obligations"). Payment hereunder shall be made without set-off or counterclaim.	Guarantor acknowledges that this is a guaranty of payr	s of the Applicant to FleetCor and its successors and assigns now or hereafter owing ("Guaranteed ment and not of collection and that Guarantor is a primary obligor and not merely a surery, obligated on
	 contrary. Guarantor waives notice of acceptance, diligence, presentment, demand Obligations. Guarantor hereby subordinates in favor of FleetCor any right of subro 	d, notice of dishonor, protest and all other notices. Guara gation and all other obligations of the Applicant to Guara	inst Applicant as a condition to proceeding against Guarantor and waives the provisions of law to the antor agrees that Guarantor's obligations hereunder shall not be affected by changes in the Guaranteed ntor. If any provision of this Guaranty is held to be illegal, invalid or unenforceable it shall not affect any
	other provision hereof. This Guaranty shall be governed by the law of Louisiana. It the Account Agreement (available upon request if you do not already have a copy)	f collection hereunder is by an attorney at law, the Guar are incorporated by reference and Guarantor agrees to	antor shall pay all reasonable costs of collection, including attorney fees. The terms and conditions of be bound thereby. This Guaranty shall be relied upon by FleetCor in making its credit decision and is a tor and to make direct inquiries of employers and businesses where Guarantor has accounts. If this
	Application is denied based on such information, Guarantor authorizes FleetCor to status of the account to creoit bureaus and others who may lawfully receive such	preport the reason for the denial to Applicant. If the Gu	aranteed Obligations are not paid when due, FleetCor may report the Guarantor's liability for and the
2.2	Print Name (Guarantor)	Signature (Guarantor)	Date of Birth (MM/00/YYYY)
	Guarantor Street Address	City	State Zip
	Social Security #	Driver's License # and State	