**Change request**

|  |
| --- |
| Date      |

**Adjustment of driver (\* mandatory information)**

|  |
| --- |
| Current driver |
| Name \*       | Vehicle registration number \*      |
| Cause of change of driver      | Should the current driver´s fuel card be blocked? \*[ ]  No [ ]  Yes |
| New driver |
| Name \*       | Cost center \*      | Employee number      |
| Address \*      | Zip code \*      | City \*      |
| Total annual kilometer           | E-mail \*      | Phone \*      |
| Existing fuel card \*[ ]  No [ ]  Continue with existing card through Alphabet (specify below) [ ]  Circle K [ ]  Shell [ ]  OKQ8 [ ]  Preem | Order new fuel cards \*[ ]  No [ ]  Yes (specify below) [ ]  Circle K [ ]  Shell [ ]  OKQ8 [ ]  Preem |

**Adjustment of cost center/employee number for current driver (\* mandatory information)**

|  |  |
| --- | --- |
| Name \*      | Vehicle registration number \*      |
| New cost center      | New employee nubmer       |

**The adjustment applies no earlier than the first of the month ahead (\*mandatory information)**

|  |
| --- |
| Date \*      |

**Other (desire for driver category etc.)**

|  |
| --- |
|       |

**Informant**

|  |  |  |
| --- | --- | --- |
| Name      | E-mail      | Phone      |

We ask you to fill out the form digitally and let an authorized person send the change request to Alphabets support to below E-mail. We ask for change details at least three weeks in advance to be able to order new fuel cards. The adjustment applies no earlier than the first of the month ahead. The adjustments who comes to us closer than 3 weeks will apply no earlier than the first of the months two month ahead. We will send a confirmation of when the change has been completed.

E-mail change.se@alphabet.com