

## Change request

Date
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### 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? * <input type="checkbox"/> No <input type="checkbox"/> Yes	
New driver		
Name *	Cost center *	Employee number
Address *	Zip code *	City *
Total annual kilometer	E-mail *	Phone *
Existing fuel card * <input type="checkbox"/> No <input type="checkbox"/> Continue with existing card through Alphabet (specify below) <input type="checkbox"/> Circle K <input type="checkbox"/> Shell <input type="checkbox"/> OKQ8 <input type="checkbox"/> Preem	Order new fuel cards * <input type="checkbox"/> No <input type="checkbox"/> Yes (specify below) <input type="checkbox"/> Circle K <input type="checkbox"/> Shell <input type="checkbox"/> OKQ8 <input type="checkbox"/> Preem	

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

Name *	Vehicle registration number *
New cost center	New employee number

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

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

### Informant

Name	E-mail	Phone
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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](mailto:change.se@alphabet.com)