

FUEL MANAGEMENT SYSTEM ACCESS APPLICATION

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| F R O M | Name: | T O | GALANA OIL KENYA LIMITED |
| | Address: | | 2ND FLOOR, DELTA OFFICE SUITES, BLOCK B, |
| | City: | | OFF WAIYAKI WAY & MANYANI WEST ROAD, |
| | E-Mail: | | MUTHANGARI |
| | Phone: | | P.O BOX 11672 00100 GPO |
| | Phone: | | NAIROBI KENYA |

Applicants Business Information

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|--|--------------|--|---------|
| Registered company address: | | Nature of Business: | |
| Street / Road: | | Building & Floor | |
| How long at current address? | | Are the business premises owned or Rented? | |
| Type of Business (please tick one) | | | |
| Sole Proprietorship: | Partnership: | Corporation: | Other: |
| Certificate of Reg./ Incorporation No: | | Pin No: | VAT No: |

(Please attach copies of Registration Certificates, PIN, VAT, & Company Profile- where applicable)

Contact Persons Details

| Name | Designation | Phone | Email |
|------|-------------|-------|-------|
| 1 | | | |
| 2 | | | |

Agreement Terms & Conditions

In confirming the above particulars I/WE apply for access to Fuel Management System from Galana Oil Kenya Limited (the Company) and agree to terms and conditions as they appear on www.galanaoil.com

DECLARATION

We, the undersigned, do hereby confirm that we are duly authorized to sign this application and that all the information given above is correct. We authorize the Company Limited to contact our bank and any of the referees as provided.

Signatures (AT LEAST TWO DIRECTORS)

| | | |
|---|--|--|
| 1 | | |
| 2 | | |
| 3 | | |

STAMP OR COMPANY SEAL