

Fleet Employee Program (FEP) Enrollment Form

All information in section 1 and 2 of form must be completed

	Corporate Name			Corporate Account Number (CAN)								
1	Corporate Address, City, State, Zip Code		Corpora	Corporate Web Site Address								
	,		EE/MEMBER INF	ORMATION hone (No Cell)	Vehicle Being Replaced							
	Employee/ Member Name	Corporate/ business Title	Dusilless F	business r none (No och)		Make Model Year						
	Office Address (If different these	O company Address \	D	Business Fax Number		F	1	(N) - 1		1\		
	Office Address (If different than Corporate Address)		Business	Dusiliess I ax Nullibel		Business Email Address (Not personal)						
	Human Resources Contact Name		Di	Duration and Discours (NI - O-III)		Rucinoss Email Address (Not personal)						
	Tiulian resources contact Name		Business F	Business Phone (No Cell)		Business Email Address (Not personal)						
	EMPLOYEE/MEMBER AFFIRMATION CLAUSE											
	I,, (Individual's Name) hereby affirm that I am currently employed											
	, 	•	(Corporate Name).									
	by (Corporate Name). In addition, by signing this document, I consent to Mercedes-Benz USA, LLC. seeking verification of my employment with the above mentioned											
	company. Lack of proof of employment will prohibit the issuance of a program control number. I fully understand that any false information will be considered fraudulent and could result in my company's expulsion from the Mercedes-Benz Fleet											
	Program, chargebacks of any/all fleet incentives or other actions outlined in the Official Program Rules.											
	1. Mercedes-Benz USA, LLC reserves the right at its sole discretion to change program rules and guidelines and fleet incentives without notice, to verify											
accuracy of account data, to decline an application or to terminate a Corporate Account Number and a Fleet Employee Program Control N time on a case-by-case basis. All program transactions are subject to audit and chargeback to the dealer.									Numb			
	2. Purchaser hereby agrees that any information provided to or obtained by Dealer or MBUSA in confirmation of the Purchaser's participation in t											
	MBUSA Fleet Program (including any and all personal information), is voluntarily provided by Purchaser and Purchaser hereby consents to MBUSA and Dealers retaining said information for record and audit purposes, and to the sharing of said information to affiliates and agencies for purposes of marketing Mercedes-Benz products and services. 3. Dealer and customer acknowledge and agree that MBUSA's issuance of a CAN or control number or approval under the MBUSA Fleet Program does not constitute an approval of or review by MBUSA of any transaction effected through the Program. It remains the Dealer's and Purchaser's responsibility to determine and comply with all Program qualifications of any transaction including compliance with use, export and resale restrictions. 4. Sale subject to any new car sales DDR Policy and Export Policy. Vehicles are intended for use in the USA and are subject to the limitations of the Export Policy. Fleet programs are not eligible for use with Brokers. 5. Incentive must be used at time of purchase/lease. Purchaser granted control number must be the buyer/co-buyer or lessee/co-lessee. Fleet incentives cannot be used in conjunction with Diplomat, European Delivery, Courtesy Vehicle Program (CVP) vehicle that has not met the minimum service requirement, Special Demos, certificate programs, control number programs, other Fleet Programs (Corporate Sales or Executive Allowance Bonus (EAB)), or non-U.S. specification vehicles. To enroll, scan/fax this completed form and a photo Driver's License to FleetOperations@mbusa.com or (201) 263-7313.											
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	Please contact the toll-free hotline at 1-866-628-7232 or visit the program's website at www.Fleet.mbusa.com/fep for additional program information. Note: Information provided is subject to third party verification and Mercedes-Benz USA LLC, Fleet Operations reserves the right to request additional information for employment verification.											
	Employee/Member Signature	oloyee/Member Signature Date										
DEALER CONTACT INFORMATION (OPTIONAL). PLEASE PRINT.												
	Dealer Name	Dealer Contact		ail Address and Phone Number			Dealer Code					
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Note: Only ONE (1) Control Number per employee per calendar year and the Control Number is valid until one year from issue date.