



# Fleet Data Release Authorization

Allows WEX to provide account or transaction data  
to a third party vendor.

FAX to: CS WEXLink

FAX #: 800-395-0809

1. Complete parts A and B.
2. Be sure to sign and date the form at the bottom.
3. Fax to: 1-800-395-0809.

## A. ACCOUNT INFORMATION

Account Name:	Account Number:
Authorized Fleet Contact Name:	
Fleet Contact Phone Number:	Fleet Contact Fax Number:
Authorized Fleet Contact email:	

## B. VENDOR INFORMATION

Name of the vendor with whom you would like WEX to share your transaction or account information:

Vendor: \_\_\_\_\_

By signing this form, you hereby authorize WEX to provide the vendor indicated above with your transaction information and release WEX from any and all liability concerning the use and security of this information provided to the vendor set forth above.

If at any time you would like to request that WEX discontinue the sharing of information with the indicated above, you must notify us in writing at: Customer Service, 97 Darling Avenue, South Portland, ME 04106.

**X** Authorized Fleet Contact Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

### VENDOR USE ONLY

Internal Reference Number: \_\_\_\_\_ Date Authorized: \_\_\_\_\_ Authorized by: \_\_\_\_\_

### WEX INTERNAL USE ONLY

Set up Request Date: \_\_\_\_\_ Set up By: \_\_\_\_\_ Set up Date: \_\_\_\_\_

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