



Mercedes-Benz

### Executive Allowance Bonus (EAB) Enrollment Form

All sections of Boxes 1 and 2 of form must be completed

1	Corporate Name	Corporate Account Number (CAN)					
	Corporate Address, City, State, Zip Code	Corporate Web Site Address					

EXECUTIVE RECEIVING COMPANY VEHICLE ALLOWANCE					
Employee Name	Corporate/Business Title	Business Phone (No Cell)	Vehicle Being Replaced		
			Make	Model	Year
Office Address (If different than Corporate Address)		Business Fax Number	Business Email Address (Not personal)		
Human Resources Contact Name		Business Phone (No Cell)	Business Email Address (Not personal)		

#### VEHICLE ALLOWANCE AFFIRMATION CLAUSE:

I, \_\_\_\_\_, (Employee Name) hereby affirm that I currently receive a vehicle allowance (mileage/expense reimbursements DO NOT qualify) from \_\_\_\_\_ (Corporate Name) as part of my compensation package that applies to the individual purchase/lease of a new Mercedes-Benz vehicle.

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 and/or a vehicle allowance 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.

- 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 or Executive Allowance Control Number at any time on a case by case basis. All program transactions are subject to audit and chargeback to the dealer.
- Purchaser hereby agrees that any information provided to or obtained by Dealer or MBUSA in confirmation in the Purchaser's participation in the MBUSA Fleet Program (including any and all personal information), is voluntarily provided by Purchaser and Purchaser hereby consents to MBUSA and Dealer's 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.
- 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.
- 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.

For employment verification, fax completed form along with one of the following to (201) 263-7313:

- Previous Month's Pay Stub or Direct Deposit Slip
- A Corporate Photo ID and ONE (1) example of employment documentation such as a Corporate Resolution, Articles of Incorporation, or Corporate Website Verification

**Note: Social Security and Total Compensation must be deleted or blacked out from any employment documentation.**

Please contact the toll-free hotline at 1-866-628-7232 or visit the program's website at [www.Fleet.mbusa.com](http://www.Fleet.mbusa.com) for additional program information and enrollment forms.

2	Employee Signature	Date
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DEALER CONTACT INFORMATION (OPTIONAL). PLEASE PRINT.					
3	Dealer Name	Dealer Contact	Phone Number	Dealer Code	

**Note: Only ONE (1) Control Number per employee per calendar year and the Control number is valid until one year from issue date.** Vehicles must be retained for a period of 12 months.