



Pakistan State Oil

Registration Form (For Company)

Name of the Organization: _____

Customer Account Number: _____

E-Mail of Fleet Manager / Admin Manager: _____

Mobile Phone of Fleet Manager / Admin Manager: _____

All vehicle installed with C-Trakker (Assist): Yes No

OR

Following vehicles are installed with Traker Assist:

S. No.	Registration No	Card No	S. No.	Registration No	Card No
1	-	-	16	-	-
2	-	-	17	-	-
3	-	-	18	-	-
4	-	-	19	-	-
5	-	-	20	-	-
6	-	-	21	-	-
7	-	-	22	-	-
8	-	-	23	-	-
9	-	-	24	-	-
10	-	-	25	-	-
11	-	-	26	-	-
12	-	-	27	-	-
13	-	-	28	-	-
14	-	-	29	-	-
15	-	-	30	-	-

Name of the Authorized Signatory: _____

Designation: _____

Signature: _____ Date: _____

For PSO Use Only (Individuals):

Received By: _____

Date & Time: _____

Registered By: _____

Date & Time: _____

User ID: _____

Password: _____