



SET UP REQUEST FORM

Requestor Name: _____

Date: _____

Phone Number: _____

Request Type: _____

Email Address: _____

**Required*

Account Type: _____

**Required*

For Existing Ship-To(s)

For New Ship-To(s)

Customer # (Sold to #): _____

Ship to Name: _____

Ship To / Consignee #: _____

State Destination: _____

Ship To / Consignee #: _____

Address: _____

Ship To / Consignee #: _____

City: _____

Ship To / Consignee #: _____

State: _____

Ship To / Consignee #: _____

Valero STN: _____

PetroexN: _____

Products: _____

List Product if needed: _____

Please list terminal if not listed on drop down

Terminals: _____

Terminals: _____

Terminals: _____

Terminals: _____

CARRIER NAME	SCAC CODE	FEIN #

Notes:

* Expected processing time for the truck rack accounts is between 1 to 2 business days
If you have any questions regarding this form, please contact Valero Wholesale Customer Service at 1-877-825-7225 or email WholesaleCSU@valero.com