COMDATA FUEL CARD REQUEST FORM

Purpose: This form will be used by Hidalgo County Purchasing Department to request a fuel card for County business use only. The Requestor must be authorized to sign for the billing account number provided by the department.

☐ **Add Vehicle Card** ☒ **Add Driver Pin** ☐ **Delete Cancel Card** ☐ **Delete/Cancel Driver**

Department:	Hidalgo County Head Start Program
Billing Address:	P.O. Box 0117
Fuel Card Manager:	Elma Keller
	This person can not have use of the fuel card
Phone Number:	(956) 383-0706
County Email:	epkeller@hchsp.org
Web user Name:	EKeller **Password:**
Hidalgo Co Acct Number:	
Requested By:	Elma P. Keller
	Sign & Print Elected/Official Supervisor/Director

On behalf of my department, I hereby request fuel cards for the following department vehicles. I understand that there will be one fuel card per requested vehicle. I understand that each card is to be used for the purpose of obtaining fuel for the designated Hidalgo County vehicle for which the card is issued.

For Purchasing Department Use Only

Approved by Commissioners Court On: _____

Reviewed by Fuel Card Administrator: _____

Cards Received by Dept on: _____ Date Returned/Cancelled: _____

Fuel Cards Received by Department: _____

Sign & Print Authorized Elected Official/Supervisor/Director

Vehicle Plate No	Vehicle Description	VIN Number	*Purchasing Dept Only* *Card Number*

Driver ID/Pin List

List all names of drivers who will fuel a Hidalgo County vehicle. Drivers who have not submitted their driver's information to Department of Budget Management Safety Division (DBM) will not be allowed a Pin number to fuel up. All Drivers must submit all proper documentation requested by DBM before driving a Hidalgo County vehicle.

	First Name	Last Name	Employee I.D. Number (Valero)	*DBM Use Only verification*	*Purchasing Dept Use Only Date of Signed Fuel Policy & training*
	Hiram	Guajardo	003992		
	Jose Isabel	Gaitan	004007		
	Mark	Galvez	002763		
	Guillermo	Ornelas	004024		
	Antonio	Chavez	004025		