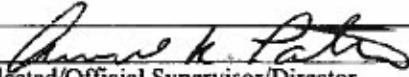


# FUEL CREDIT CARD REQUEST FORM

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

<b>Department:</b>	ADULT PROBATION		
<b>Billing Address:</b>	P O BOX 970 EDINBURG TEXAS 78540		
<b>Fuel Card Manager:</b>	DIANA SOLIS		
	<small>This person can not have use of the fuel card</small>		
<b>Phone Number:</b>	956-587-6008	<b>County Email</b>	
	Diana.solis@hidalgocountycscd.org		
<b>Web user Name:</b>		<b>Password:</b>	
<b>Hidalgo Co Acct Number:</b>	1-1297-423-00-320-002-1-626		
<b>Requested By:</b>	Arnold K Patrick - Director		
	<small>Sign &amp; Print Elected/Official Supervisor/Director</small>		

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.

<i>For Purchasing Department Use Only</i>	
Approved by Commissioners Court On:	_____
Reviewed by Fuel Card Administrator:	_____
Cards Received by Dept on:	_____ Date Returned/Cancelled: _____
Fuel Cards Received by Department:	_____
<small>Sign &amp; Print Authorized Elected Official/Supervisor/Director</small>	

Vehicle Plate No <small>(N/A = Non-vehicle)</small>	Description <small>(Vehicle or Non-vehicle Equip.)</small>	VIN Number <small>(N/A = Non-vehicle)</small>	<i>Purchasing Dept Use Only</i> Card Number

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.

User Name	DOB	User ID <small>(6 digits)</small>	<i>DBM Use Only</i> License Verification	<i>Purchasing Dept Use Only</i> Training Date & Signed Fuel Policy
FELIPA TORRES	8/9/1967	095591	