

# 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     
  Add Driver Pin     
  Delete/ Cancel Card     
  Delete/Cancel Driver Card

<b>Department:</b>	Hidalgo County Health & Human Services		
<b>Billing Address:</b>	1304 S. 25 <sup>th</sup> Ave		
<b>Fuel Card Manager:</b>	Eduardo Olivarez		
	This person can not have use of the fuel card		
<b>Phone Number:</b>	(956)383-6221		
<b>Web user Name:</b>		<b>Password:</b>	
<b>Hidalgo Co Acct Number:</b>	7-1100-441-00-340-001-0-626		
<b>Requested By:</b>	Eduardo Olivarez		
Original Signature is required		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.			

<i>For Purchasing Department Use Only</i>	
Approved by Commissioners Court On:	Agenda Item No. # _____
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 (N/A = Non-vehicle)	Description (Vehicle or Non-vehicle Equip.)	VIN Number (N/A = Non-vehicle)	Asset Number (N/A = Non-vehicle)	<i>Purchasing Dept. Use Only</i> <b>Card Number</b>

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 (6 digits)	<i>DBM Use Only</i> <b>License Verification</b>	<i>Purchasing Dept. Use Only</i> <b>Training Date &amp; Signed Fuel Policy</b>
David Ruben Leal	11/25/87	221856		
Abby Alvarez	3/29/85	221430		

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Add Vehicle Card     
  Add Driver Pin     
  Delete/ Cancel Card     
  Delete/Cancel Driver

<b>Department:</b>	Constable Precinct 4		
<b>Billing Address:</b>	2814 S. Business Highway 281; Edinburg, Texas 78539		
<b>Fuel Card Manager:</b>	Nayla Muñoz		
	This person can not have use of the fuel card		
<b>Phone Number:</b>	(956) 383-8560		
<b>Web user Name:</b>		<b>Password:</b>	
<b>Hidalgo Co Acct Number:</b>	7-1100-421-00-294-001-0-626		
<b>Requested By:</b>	<b>Horaldo Sanchez, Chief Deputy</b>		
Original Signature is required <span style="float: right;">Sign &amp; Print Elected/Official Supervisor/Director</span>			
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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>	Asset Number <small>(N/A = Non-vehicle)</small>	<i>Purchasing Dept. Use Only</i> <b>Card Number</b>

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User Name	DOB	User ID <small>(6 digits)</small>	<i>DBM Use Only</i> <b>License Verification</b>	<i>Purchasing Dept. Use Only</i> <b>Training Date &amp; Signed Fuel Policy</b>
Noel Cruz	03/07/1992	191051		