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**

Department:	Facilities Management
Billing Address:	P.O.Box 1356, Edinburg, Texas 78539
Fuel Card Manager:	Nelda Flores-Rios, Administrative Asst. II
	{This person can not have use of the fuel card}
Phone Number:	**956-289-7850/7854** **County Email:** nelda.rios@co.hidalgo.tx.us
Web user Name:	N/A **Password:** N/A
Hidalgo Co Acct Number:	0-1100-419-40-220-001-0-626
Requested By:	Daniel Flores, Building Maintenance Manager
Original Signature is required:	* {Sign & Print Elected/Official Supervisor/Director} 3/6/2020

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: 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)	*Purchasing Dept. Use Only* Card Number
*Add Vehicle List Below:				
N/A				

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)*	*DBM Use Only* License Verification	*Purchasing Dept. Use Only* Training Date & Signed Fuel Policy
*Driver PIN List Below:				
Oscar R. Villareal	08/23/1967	237540		
Nicolas Rodriguez	02/04/1973	221066		

Form F.1.1 Revised: ***Attach separate list if additional users are required***