

# 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:** Elections Dept  
**Billing Address:** 213 So. Closer Blvd El Paso TX  
**Fuel Card Manager:** Belinda Sagredo  
This person can not have use of the fuel card  
**Phone Number:** 956-318-2570  
**Web user Name:** \_\_\_\_\_ **Password:** \_\_\_\_\_  
**Hidalgo Co Acct Number:** 0-1100-1114-00-130-001-0-426  
**Requested By:** Hilda Salazar Assistant Director  
Sign & Print Elected/Official Supervisor/Director

**Original Signature is required**

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:	<u>Agenda Item No. #</u>
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>	Asset Number <small>(N/A = Non-vehicle)</small>	Purchasing Dept. Use Only 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>	DBM Use Only License Verification	Purchasing Dept. Use Only Training Date & Signed Fuel Policy
<u>Timoteo Steve Sena</u>	<u>12-15-1977</u>	<u>241210</u>	<u>03026396</u>	

**Form F.1.1 Revised:**

**Attach separate list if additional users are required**