

Request For Commercial Fuel Credit Card

Form FMS-cfc 01
Revised 4/17/2020

2020-2021

PURPOSE: This form will be used by The University of Texas at Austin departments to request a commercial fuel credit card for university business use. The Requestor must be authorized to sign for the billing account number provided by the department.

To: **Fleet Operations**
FC6 Room 1.100 Mail Code: E6000
Phone: 512-471-4668 Fax: 512-471-3629

From: Department _____
Requestor Name / Phone _____
Requestor Email _____
Accounts Payable Contact Name / Phone _____
Accts. Payable Email _____
UT Billing Account Number _____

Approved: Dean/Director Signature _____

On behalf of my department, I hereby request commercial fuel credit cards for the following department vehicles. I understand that there will be one commercial fuel card per requested vehicle. I understand that each card is to be used solely for the purpose of obtaining fuel and or vehicle services for the designated UT vehicle for which the card is issued.

License#	Year	Manufacturer	Model	Door #

Number of General Purpose cards requested (for equipment only.) _____ PIN# assigned _____

Billing Address: _____

By signing for and taking receipt of these commercial fuel cards, the user acknowledges that he/she has signature authority over the billing account listed above (or is on the Authorized Personnel List, form FMS-cfc2, for this department) and that the requesting department has internal controls in place to ensure the cards are used for official purposes only.

Signature _____ Print Name _____ Date _____

