

**AUTHORIZED PERSONNEL LIST TO SIGN FOR THE RECEIPT OF
COMMERCIAL FUEL CREDIT CARD**

PURPOSE: This form will be used by The University of Texas at Austin departments to authorize specific personnel to sign for the receipt of commercial fuel credit card(s) requested by the department and issued by Fleet Management Services.

TO: Fleet Management Services
PP6 Room 1.100 Mail Code: D3000
Phone: 512-471-4668 Fax: 512-471-3629

FROM: _____ Department

I. The above department will be billing commercial fuel purchases to the following account(s):

II. I certify that I am listed in the GBS screen of *DEFINE as a signature authority for the above account(s) and I am authorizing the people listed below to sign for receipt of commercial fuel credit cards on my behalf.

Name: _____

Phone: _____

Campus Mail Code: _____

Signature

III. These people are authorized to sign for the receipt of commercial fuel cards for the above department.

Name

Phone

UT ID #

