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.

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<th>License#</th>
<th>Year</th>
<th>Manufacturer</th>
<th>Model</th>
<th>Door #</th>
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Number of General Purpose cards requested (for equipment only.)  

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

Parking and Transportation Services | Phone: 512-471-PARK  
Email: parking@utexas.edu | Web: parking.utexas.edu