

# CITY OF ALBUQUERQUE

## FUEL/MOTOR POOL AUTHORIZATION

FLEET MANAGEMENT PHONE# 857-8077 OR 857-8080 FAX# 857-8081

### *Fuel Access Authorization*

- 1) Date \_\_\_\_\_
- 2) Last Name \_\_\_\_\_ 3) First Name \_\_\_\_\_
- 4) Department \_\_\_\_\_ 5) Division \_\_\_\_\_

- 6)  City Employee: Employee # \_\_\_\_\_ Year of birth \_\_\_\_\_
- OR
- Temp Employee: Driver's License # \_\_\_\_\_
- OR (Transit Vehicle Servicers only) \*\* Please enter City Emp# & YOB or DL# above  
HID Card Number: \_\_\_\_\_

- 7) Work # \_\_\_\_\_ 8) city e-mail \_\_\_\_\_

- 9) COP Exp. Date \_\_\_\_\_ 10) Will Use WEX card  yes  no

- 11) Approved By \_\_\_\_\_  
Signature \_\_\_\_\_  
Print Name \_\_\_\_\_ Title \_\_\_\_\_

#1, #2 and #4 must be completed. #3 is optional

### **For motor pool requests (top portion must be complete also)**

- 1) **MOTOR POOL FUND/ACTIVITY** \_\_\_\_\_
- 2) **AUTHORIZED TO USE** \_\_\_ Car \_\_\_ Truck \_\_\_ SUV \_\_\_ 4x4 \_\_\_ Van
- 3) **\*\*HID CARD NUM (optional)** \_\_\_\_\_
- 4) **APPROVED BY:** \_\_\_\_\_  
Signature \_\_\_\_\_  
Print Name \_\_\_\_\_ Title \_\_\_\_\_

**\*\*All fields must be complete unless no HID card**

### **For Fleet Management Use Only:**

Date Entered: \_\_\_\_\_

Entered By: \_\_\_\_\_