

PALM BEACH COUNTY
FD&O, Fleet Management
Request for Issuance of NEW/LOST/BROKEN Fuel Card(s)



To: Doug Weichman, Director
 % Sursatee Maraj
 Fleet Mangement
 Phone 233-4550, Fax 233-0896

Date: _____

From: _____
 Dept/Division

.....
Please issue fuel card (s) as noted below:

Employee Name/Vehicle Asset# _____

Fund/Agency/Org. to be Charged: _____

Please check the appropriate box(es):

Please complete the following:
 * (If New Small Eqpt)

- New Employee
- Employee card is Lost
- Terminated Employee
- New Small Eqpt. Card*
- Vehicle Card is Lost

Fuel Type (UN or DS) _____

Tank Capacity (Gallons) _____

Dept/Division Authorized Signor

Telephone #

FLEET MANAGEMENT USE ONLY

Fleet Management Dept/Division #: _____

	<u>LOST CARD</u>	<u>NEW CARD</u>
Employee Card #	_____	_____
Employee ID #	_____	_____
Vehicle Card #	_____	_____

Card Pickup by: _____
 Recipient Signature

 Date