

Vehicle Fleet Card – Driver Enrollment Form

**University of Houston
Accounts Payable**

Date: _____

Department: _____ College/Division: _____

Authorized Drivers:

<u>Driver Name</u>	<u>EmplID</u>	<u>Email Address</u>	<u>Signature**</u>

** By signing here, the driver acknowledges that he/she has read the Fleet Card Guidelines and understands the requirements and the driver's responsibilities.

All drivers must have authorization to drive vehicles for UH business per MAPP 06.05.03, Motor Vehicle Record Evaluation. The College/Division Administrator is responsible for verifying that the above drivers are authorized to drive vehicles for UH business per MAPP.

Approved by: _____
College/Division Administrator's Signature Date

Form004

Please email completed forms to Danny Nguyen at ddnguy42@central.uh.edu, or you can fax completed forms to A/P at (713) 743-8709