

**DVES FUEL TAG REQUEST FORM
(NEW DRIVER TAG ISSUE)**

I, _____ (H.O.D. / FLEET MANAGER), REQUEST A NEW DRIVER TAG FOR:

TAG USERS, FIRST, MIDDLE INITIAL & LAST NAME (PRINT ONLY):

(DRIVER'S NAME)

H.O.D / FLEET MANAGER SIGNATURE

DEPT: _____

OPERATING HOURS OF FUELING

8:00 AM – 4:30 PM (MON-FRI) OR 24 HRS. (SUN-SAT)

FUEL TAG COLLECTION REQUIREMENTS:

EMPLOYEE SIGNATURE: _____ I.D. NO: _____

DVES SIGNATURE

DATE: _____

*ALL FUEL TAGS ARE TO BE COLLECTED & SIGNED FOR AT DVES REFUELING FACILITY.

DVES HAS AN ELECTRONICALLY CONTROLLED FUEL DISPENSING SYSTEM THAT REQUIRES THE USE OF TWO (2) FUEL TAGS FOR ONE (1) TRANSACTION.

DRIVERS FUEL TAG:

THIS TAG IDENTIFIES THE USER, AND REQUIRES PERSONALIZED PIN # ONLY PROVIDED TO THE PERSON TO WHOM IT'S ASSIGNED. THE TAG & PIN # MUST BE SECURED AND NOT TO BE SHARED WITH ANYONE.