



Note: This form should be completed by the A/OPC with input from the Cardholder for driver or vehicle cards.

1.	Fill in the individual Government Card number here:	<div style="display: flex; justify-content: space-between;"> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> <div style="width: 100px; height: 20px; border: 1px solid black;"></div> </div>
2.	Fill in the Cardholder's name as it appears on his/her Government Card (maximum 25 characters): _____	
3.	Maintain a copy in the Cardholder and Agency/Organization Program Coordinator's files. Fax completed form to 605-357-2092	
4.	<p>Mark all the changes that apply:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Hierarchy Change </div> <div style="width: 30%;"> <input type="checkbox"/> Dollar Limit per Cycle Change <input type="checkbox"/> Dollar Limit per Transaction Change <input type="checkbox"/> Transaction Limit per Day Change </div> <div style="width: 30%;"> <input type="checkbox"/> Cancel Acct. <input type="checkbox"/> Other (please specify): _____ _____ </div> </div>	

(1)			
*Agency/Organization Name to Appear on the Card (maximum 25 characters)			
(2)			
Second Line Embossing			
(3)		()	
*Business Mailing Street Address Line 1 (include Billing Recipient Name – maximum 40 characters)		*Business Phone of Billing Recipient	
Business Mailing Street Address Line 2 (maximum 40 characters)			
Business Mailing Street Address Line 3 (maximum 40 characters)			
*City	*State	*Zip Code	Country
(4)			
Master Accounting Code (maximum 150 characters)			

Citibank® Government Fleet Card

Maintenance Form for Plastics

Section III: Reporting Parameters

(5) *Current Reporting Hierarchy:

Specify the complete 7-digit account Hierarchy Level (HL) numbers that pertain to your organization.

HL1							HL2							HL3							HL4						
HL5							HL6							HL7							HL8						

(6) *Company ID Number: _____ (maximum 7 characters)

Section IV: Authorization Parameters

(7) *Dollar Limit per Cycle \$: _____ (8) Transaction \$: _____ (9) Transaction Limit per Day: _____

(10) *Assigned Driver # or Vehicle Table Name: _____

(11) MCC Templates:

MCC Template 1: _____ MCC Template 2: _____

MCC Template 3: _____ MCC Template 4: _____

MCC Template 5: _____ MCC Template 6: _____

MCC Template 7: _____ MCC Template 8: _____

MCC Template 9: _____ MCC Template 10: _____

MCC Template 11: _____

(12) Product Type: _____

Vehicle or Driver Indicator: _____ (13) Authorize: _____

(14) Product Restriction Code: _____

Section V: (15) Agency/Organization Program Coordinator Signature

*Approving Agency/Organization Program Coordinator's Signature: _____ Date: _____

*Approving Agency/Organization Program Coordinator's Name (printed): _____ Date: _____

*Asterisked fields must be completed prior to submission.

Numbers in parentheses correspond to numbers on guide sheet on next page.

Guide to Government Fleet Card

Maintenance Form for Plastics

Form used to maintain an existing Fleet card account.

Section I: Instructions

Mark the appropriate type of maintenance request.

Section II: Card Information

1.	Agency/Organization Name: Please list the name that appears on the card.
2.	Second Line Embossing: This appears on the card under the Name on Card (maximum 25 characters).
3.	Business Mailing Street Address: Address where the card and statements will be mailed.
4.	Master Accounting Code: Default accounting code (i.e., general ledger code) for this card's transactions.

Section III: Reporting Parameters

5.	Reporting Hierarchy: The seven-digit reporting code assigned to each level within the organizational hierarchy that defines the card/Cardholder's relationship within your Agency's reporting structure. Up to eight seven-digit codes may be assigned to your Agency. Contact your Client Account Specialist for your Agency's specific codes.
6.	Company ID Number: Seven-digit ID code used to identify your agency/organization. Contact your Client Account Manager for your Agency's specific codes.

Section IV: Authorization Parameters

7.	Dollar Limit per Cycle \$: Monthly spending limit.
8.	Dollar Limit per Transaction \$: Dollar limit on a single transaction.
9.	Transaction Limit per Day: Number of transactions a Cardholder can perform per day.
10.	Assigned Driver # or Vehicle Table Name: Enter Agency-assigned six-digit ID number.
11.	MCC Template 1-11: Merchant blocking schemes. For example, Agency/Organization Program Coordinator may want to block certain types of merchants from being accessed by the Cardholder. Contact your Client Account Specialist for your Agency's MCC template names.
12.	Product Type: 1 = ID & Odometer Reading; 2 = Vehicle & Odometer Reading (Do not use if Vehicle Card); 3 = Driver & Odometer Reading (Do not use if Driver Card); 4 = Odometer Reading; 5 = No Prompt
13.	Authorize: Indicates if prompting information is required to be validated to authorize the authorization. Y = Yes, always require and verify; N = No, do not require or verify information; O = Verify information if received
14.	Product Restriction Code: Code that restricts use of specific products/services. Check one: 0 = No restriction (VISA use only); 1 = Fuel and other products; 2 = Fuel only

Section V: A/OPC Signature

15.	Approving Agency/Organization Program Coordinator's Signature: Program Coordinator must sign for approval. The A/OPC must also print his or her name.
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