



# MasterCard Fleet Card Driver Set Up

**Note:** This form should be completed by the Agency/Organization Program Coordinator or Program Administrator with the required information input from the Applicant. Please complete the application by typing in the data and printing to sign and fax. Please see page 3 for instructions. ONLY FAX to (605)-357-2092. Required fields denoted by an asterisk "\*". Form will be returned if required fields are not completed.

Fax: 605-357-2092

## Section I: Reporting Parameters (to be completed by PA or A/OPC)

1. Plastic Type*											2. Processing Unit ID/Corp ID* (Maximum 5 characters)																	
3. Reporting Hierarchy*	Specify the complete 5-digit account Hierarchy Level (HL) numbers that pertain to your organization.																											
	HL1				HL2				HL3				HL4				HL5				HL6				HL7			

## Section II: Applicant Information (to be completed by Applicant)

4. Applicant Name* (Provide full name as it should appear on the card)																													
5. 4th Line Embossing (This will be embossed on card under your name. Maximum 24 characters.)																													
6. Driver # to Appear on the Card* (6 characters)																													
7. Emboss "Fuel Only" Code Y or N*	<input type="checkbox"/> Y <input type="checkbox"/> N																												
8. Card Activation Number (4 digits)*																													
9. Business Mailing Address Line 1* – Address must be U.S. or U.S. territory																													
9A. Business Mailing Address Line 2 (mail to attn)																													
City*																													
State*			Zip Code*																										
10. Business Phone*			-				-																						
11. Cell Phone																													
12. Business e-mail address																													
13. Secondary Verification Information* For call in verification please select verification type and provide information																													
13A Make drop down in PDF												13B This space needs text field for info																	
14. Agency/Organization*																													

## Section III: Applicant Consents and Agreements (to be completed by Applicant)

15. Cell Phone Consent	As a service and upon activation of your card, we may notify you about important updates on your account via SMS text message to, or by calling, your wireless device. Please be advised that normal cell phone charges may apply. Should you prefer to not receive these notifications on your wireless device, you may choose to opt out by emailing us at <a href="mailto:optoutcellconsent@citi.com">optoutcellconsent@citi.com</a> .																				
16. Paper-Free Policy	You must register for CitiManager at <a href="http://www.citimanager.com/login">www.citimanager.com/login</a> in order to view your card account billing statement ("statement") and certain notices, including legal notices, for your card account ("notices") electronically. Once you register your account and ensure that the "Go Paperless" box is selected, you will receive your statements and notices electronically. Your statement as well as any notices that Citi makes available electronically now or in the future will be available to you for viewing on the CitiManager web site and will not be mailed to you, and Citi will send you an e-mail alert to the e-mail address(es) on file with Citi when your statement or a notice is ready for viewing.																				
Signature	I, the applicant, understand that the card is to be used for official purchases only. I understand it is my responsibility to notify Citibank at 1-800-790-7206 (overseas call collect 904-954-7850) immediately if my card is lost or stolen. IMPORTANT INFORMATION about opening a Citibank® Commercial Card account: To help the United States Government fight terrorism and money laundering, Federal law requires Citi or my employer to obtain, verify, and record information that identifies each person that opens an account. What this means for me: when I open an account, Citi or my employer will ask for my name, a street address, date of birth, and an identification number, such as a Social Security number, that Federal law requires Citi or my employer to obtain. Citi or my employer may also ask to see my driver's license or other identifying documents that will allow Citi or my employer to identify me.																				
	17. Applicant Signature*																				18. Date
	19. Approving Supervisor's Signature																				20. Date

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## Section IV: Account Specification (to be completed by PA or A/OPC)

21. Master Accounting Code/GL Code <i>Maximum 75 characters</i>																																							
22. Discretionary Code 1 <i>Maximum 12 characters</i>															23. Discretionary Code 2 <i>Maximum 20 characters</i>															24. Site ID									
25. Discretionary Code 3 <i>Maximum 15 characters</i>																																							
26. MCC Template																																							
27. Monthly Limit*										28. Cash Percentage										29. Single Dollar Trans Limit																			
30. ACR Key (If ACR key is used, MCC groups, line 27 is not required.)																																							
31. Cycle # Transaction limit										32. Daily # Transactions Limit																													
33. Assigned Vehicle # or Driver Table Name*																																							
34. Product Type										Make drop down in PDF										35. Product Restriction Code*										Make drop down in PDF									

## Section V: Authorization (to be completed by PA or A/OPC)

36. Approving Agency/Organization Program Coordinator/ Administrator's Name* (printed)															37. Approving Agency/Organization Program Coordinator/ Administrator's Signature*															38. Date				
																														/ /				
39. Approving Agency/Organization Program Coordinator/Administrator's Phone Number*																				-										-				
40. Approving Agency/Organization Program Coordinator/Administrator's Fax Number																				-										-				

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## Instructions Page

1. Plastic Type	Select card type: 1) Standard 2) Quasi: Plain silver plastic embossed with Government assigned account number 3) Generic: Plain silver plastic embossed with NON-Government assigned account number.
2. Processing Unit/Corp ID	Five-digit ID code used if card(s) will be shipped to central address(es). Contact your Client Account Manager for your Agency's specific codes.
3. Reporting Hierarchy	The five-digit reporting code assigned to each level within the organizational hierarchy that defines the Applicant's relationship within your Agency's reporting structure. Up to seven five-digit codes may be assigned to your Agency. Contact your Client Account Specialist for your Agency's specific codes.
4. Applicant	Full name of Applicant – First, Middle Initial and Last. Maximum 24 characters including spaces.
5. 4th Line Embossing	Agency, Bureau or Operating Administration name (maximum 24 characters including spaces, i.e., GSA). This appears on the card under the location or department name. This will be embossed on card beneath name.
6. Driver # to Appear on the Card	Enter Agency-assigned six-digit number as it will appear on the card.
7. Emboss "Fuel Only" Code	Indicate "Y" or "N" whether "Fuel Only" is embossed on the card. This will restrict purchase to fuel only.
8. Card Activation Number	Used for card activation and account identification. Enter 4 digit value.
9. Business Mailing Address	Address where cards and statements will be mailed. Address must be U.S. or U.S. territory. Application will be rejected if the address is outside of the card issuing country.
10. Business Phone	Indicate the business phone number (including area code) of the individual applying for the card. For locations outside of the U.S., include the applicable two-to-three digit country code. Note: an international access code, such as "011" is not required.
11. Cell Phone	Indicate the cell phone number (including area code) of the individual applying for the card. If you want to receive SMS/text messages regarding your new account, please visit <a href="http://www.citimanager.com/login">www.citimanager.com/login</a> and register for SMS alerts.
12. Business E-mail Address	Business e-mail address (maximum 60 characters).
13. Secondary Verification	Identification requested from the Applicant when he/she contacts Citi for servicing of their account. Section A – Select question for security verification from drop down menu: (LM DOH)-Date of Hire (MMYY); (LM BCD/SCD)-Benefit Comp Date/Service Computation Date (MMYY); (LM-EIN)-Employee EIN# (Last Four); (LM-EMPBADGE#)-Employee Badge# (Last Four); (LM-MMN)-Mother's Maiden Name; (LM-PSWD)-Password; (LM-FF)-Favorite Food. Section B – Answer to security verification question.
14. Agency/Organization	Name of Agency/Organization. Maximum 24 characters including spaces.
15. Cell Phone Consent	Cell Phone Consent statement.
16. Paper Free Policy	In support of the Paper-Free policy you will receive an e-mail alert when your statement and other notices are available for viewing on CitiManager upon registration at <a href="http://www.citimanager.com/login">www.citimanager.com/login</a> .
17. Applicant Signature	The applicant's signature.
18. Date	
19. Approving Supervisor Signature	The applicant's direct manager signature.
20. Date	
21. Master Accounting Code/GL Code	Default accounting code (i.e., general ledger code) for this card's transactions.
22. Discretionary Code 1	Alpha and/or Numeric Agency-assigned code, individualized to each card/applicant. This information appears on the card/applicant's profile of information. Note: The Agency may have up to three different discretionary codes for each card/applicant.
23. Discretionary Code 2	
25. Discretionary Code 3	
24. Site ID	For shipping to central address(es) as bulk shipment. Contact your Account Manager for your Agency's specific codes.
26. MCC Template	Merchant blocking schemes. For example, A/OPC may want to block certain types of merchants from being accessed by applicant. Contact your Client Account Specialist for your Agency's MCC template.
27. Monthly Limit	Monthly spending limit.
28. Cash Percentage	Indicate the percentage of the total Monthly Limit (from line 27) that can be used for cash advances. Must be entered as a whole number.
29. Single Dollar Trans Limit	Single transaction limit, i.e. \$500; this would restrict the applicant from using more than \$500 for a single transaction.
30. ACR Key	Indicate ACR Key.
31. Cycle # Transaction Limit	Maximum # of transactions per cycle.
32. Daily # Transactions Limit	Maximum # of transactions per day.
33. Assigned Vehicle # or Driver Table Name	Enter Agency-assigned six-digit ID number.
34. Product Type	Select the product options that best suit needs: 1) ID # and odometer; 2) Vehicle # and odometer; 3) driver # and odometer; 4) odometer only; or 5) None.
35. Product Restriction Code	Code that restricts use of specific products/services. Select one: 1) Good for fuel and other products; or 2) Good for fuel only.
36. Approving Agency/Organization Program Coordinator/Administrator's Name (printed)	Print Program Coordinator/Administrator's name.
37. Approving Agency/Organization Program Coordinator/Administrator's Signature	Program Coordinator/Administrator's signature.
38. Date	
39. Approving Agency/Organization Program Coordinator/Administrator's Phone Number	Indicate Program Coordinator/Administrator's business phone number (including area code).
40. Approving Agency/Organization Program Coordinator/Administrator's Fax Number	Indicate Program Coordinator/Administrator's fax number.