



## Gas Cardholder Agreement

I, the undersigned, as a Cardholder, agree to comply with the terms and conditions of this Agreement and all applicable NMIMT Policies and Procedures including but not limited to:

- Approved and Prohibited Use of the Card
- Gas Card Record Keeping
- Making a Purchase
- Reporting Lost and Stolen Cards
- Reconciling of Monthly Statements
- Change in Employment Status

I acknowledge that I have been trained in the use of the Gas Card and understand the above referenced Policies and Procedures, located at <http://www.nmt.edu/purchasing-policies>.

I understand that I cannot use the Gas Card for personal items and that the Gas Card may only be used to purchase gas for NMIMT business purposes and only on NMIMT vehicles.

I understand that I am responsible for the security of the Gas Card and I agree that I will not allow others to use my Gas Card or database password. I agree that I will approve all of my transactions, reconcile and turn in the monthly Statement with all proper documentation by the end of each cycle (dates will be provided by the Purchasing Card Administrator).

I further understand that improper use of the Gas Card may result in disciplinary action, up to and including termination of employment. Should I use the Gas Card for personal items, I authorize NMIMT to deduct from my salary or from other monies owed me, an amount equal to the total of the personal purchases. I also agree to allow NMIMT to collect any amounts

I understand NMIMT may terminate my Gas Card privileges at any time and for any reason without giving me notice of such termination.

I agree to return the Gas Card immediately upon request / change in employment status. As stated above, I agree I have attended training set-up through the Purchasing Card Administrator. At this time I reviewed the Purchasing Card Procedures Manual, including: the Purchasing Card Uses - Restricted and Purchasing Card Uses - Prohibited lists, and the Purchasing Card Waiver Form. I have also been trained in the Bank of America Payment2 Works Program. I have been offered a hard copy of each form and have been trained in how to access these items online. I have also read and understand all of the above.

Applicant:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Department \_\_\_\_\_ Email \_\_\_\_\_

Campus  
Address \_\_\_\_\_

We, the undersigned, request that the above individual be issued a Gas Card based on the above information. We have read the Cardholder Agreement and agree to all the terms and conditions stated herein. All individuals below agree and are aware that the requesting department will be held responsible for accounting accuracy and following all Gas Card Policies and Procedures, as well as all other applicable NMIMT Policies and Procedures.

	Signature	Printed/Typed Name	Date
Director/Dept Head	_____	_____	_____
Approver /Sign-off Mgr	_____	_____	_____
Purchasing Card Administrator	_____	_____	_____