Wood County Board of Developmental Disabilities

PROCEDURE

Eff Pe	ocedure #: ective Date: rson Responsible: provals/Date:	02-ALL-ALL-0383 (EFM) 10-15-93 Fuel Representative	2/17/21 Date	Subject: Last Revision:	Fuel Facility 02-01-2021	2/17/21 Date	
The following definitions will apply: <u>Driver ID Number</u> - Number issued to employee by the Fuel Coordinator, which identifies the driver. Fuel Coordinator - The County employee designated to coordinate the fuel facility.							
Fuel Representative – The Board of DD fuel facility representative							
PIN - Personal Identification Number - Confidential number selected by employee to be used to access fuel.							
Vehicle ID Number – Number issued to the vehicle by the Fuel Coordinator, which identifies the vehicle/equipment.							
DRIVER INFORMATION							
1. If the employee is in a driving position, at Conditional Offer or General Orientation, they will receive form 03-ALL-ALL-0180 to complete and obtain their supervisor's approval and signature on the form. The employee will complete the top portion							
	of the form which include		signature on the it	onn. The employee			
	A. Agency – Select Wood County Board of DD						
	B. Date						
C. Driver Name							
	D. Driver's License N						
	E. Driver's License Expiration Date						
	F. Driver ID # - Last 4 Digits of your SS# - (Due to duplications, this number may not be able to be used, if not the Fuel Coordinator will issue a number)						
		sue a number) nployee will select their own PIN	.#				
2.				signature Supervi	sor will complete	and sign the	
 Employee will submit completed form to their supervisor for approval and signature. Supervisor will complete an designated area of the form. Account Number for Billing Purposes selections are: A. 10BS – Business 							
 B. 10CR – Community Resources C. 10HS – Health Supports & Provider Relations 							
	D. 10MC – Maintenance/Custodial						
E. 10SS – Service & Support							
2	F. 10TR – Transport		man Basauraaa				
3. 4.	Supervisor will submit completed and signed form to Human Resources. Human Resources will submit the form to the Fuel Coordinator at BCC via inter-office mail.						
5.					d return a		
Ŭ.		WCBDD Fuel Representative. N					
	signature.	a a construction o sectors o configure respectively. See our			,		
6.	The Fuel Coordinator w	vill forward a memo to the emplo	yee that includes t	heir fuel codes and	I fueling instructio	ns, at which	
l.	time the employee can begin using the fuel facility.						
7.		vill send a copy of the Driver Fue					
8.	When an employee has a name change or has been transferred to another department within the same agency, Human Resources will notify the WCBDD Fuel Representative who will contact the Fuel Coordinator and advise of the change, to						
	ensure correct data is in		WHO WIII COITLACT IN		and advise of the	e change, to	
9.		no longer employed by the agence	cy or no longer nee	eds to obtain fuel a	t the Fuel Facility	Human	
v .		e WCBDD Fuel Representative					
		from the system. If there is an i					
		oyee, the WCBDD Fuel Represen					
	can be made to the Fuel Coordinator.						

VEHICLE INFORMATION

- 1. When a vehicle or equipment needs to be added to the fuel facility, the WCBDD Fuel Representative will complete form 03-ALL-ALL-0179 and submit to the Fuel Coordinator.
- 2. The Fuel Coordinator will issue the Vehicle # and enter the information into the software system and return a copy to the WCBDD Fuel Representative. No information will be entered into the system without an authorized signature.
- When a vehicle or equipment needs to be removed from the system, the WCBDD Fuel Representative will forward a copy of the Vehicle Fuel Form to the Fuel Coordinator, for deletion from the system.

FUEL FACILITY

- The Fuel Facility is open 24-hours a day. Entrance and exit for all vehicles is the rear drive located behind the Wood County Justice Center off Dunbridge Rd.
- 2. Fuel obtained at the fuel site is only to be used in County Owned Vehicles or Equipment ONLY. All vehicles and equipment will have a 7-digit number assigned to it and that number needs to be used when fueling. Any employee using fuel inappropriately will be subject to Corrective Action.
- 3. Employees are REQUIRED to stay with the vehicle AT ALL TIMES while fueling.
- 4. The Fuel Coordinator will be responsible for all original employee and vehicle forms and billing reports.
- 5. The WCBDD Fuel Representative will be responsible for all agency employee and vehicle forms.
- 6. Upon receipt of the monthly fuel reports, the WCBDD Fuel Representative will submit copies to directors, and forward the monthly reports received to the Fiscal Department.

Forms:	03-ALL-ALL-0178
	03-ALL-ALL-0179
	03-ALL-ALL-0180

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