

## **FUEL FOCUS USER REGISTRATION FORM**

**AUTOMATED FLEET MANAGEMENT INFORMATION SYSTEM (AFMIS)** 

Please mark below:		
Add New User	☐ Edit User Information	☐ Delete User
Department Name:		Fund/Org #:
Employee Name:		Employee #:
Job Title:		
Work Location:		
Phone Number:	E-mail Address:	
Employee's Signature  Requesting Department's Ma	Date  nagement Approval:	
Manager's Name (Please Print)	Signature	 Date

PLEASE RETURN OR FAX (WITH A COPY OF COUNTY IDENTIFICATION BADGE) TO:

ISD/Fleet Services 1104 N. Eastern Avenue, Door 45, Los Angeles, CA 90063 Phone: (323) 881-3919 FAX: (323) 262-4941 Email: ISDFleetSupport@isd.lacounty.gov