

# Procurement Services PCard Permissions Request Form PC-202 (page 1 of 1)

## Account Holder Information:

**Account Holder Name:** \_\_\_\_\_  
(Name on card, 21 character limit.)

First Name

Middle Name/Initial (optional)

Last Name

**Banner ID:**

**Division:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**NCAT eMail Address:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**Campus Mailing Address:** \_\_\_\_\_  
Street Address City State Zip Code

I agree to use this card for approved purchases only. I further understand that I may be personally liable for any funds misused with this card.

\_\_\_\_\_  
Account Holder Signature Date

**Instructions:** If you need your PCard opened for a purchase, answer the questions below.

(Provide at least a 24 hour notice to allow time to process the request and to adjust your profile. Providing insufficient or incorrect information will delay your request. If you have multiple requests please submit them all at one time.)

1. What do you want to purchase?
2. What is the FOAP (full funding source fund/organization/account/program)?
3. What is the cost (estimate if you do not have an exact amount)?
4. Who is the vendor (where you will spend the money)?
5. Why must you use your PCard instead of another procurement method, such as a PO?
6. When do you intend to make the purchase?