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Participation in the Fixed Price Fuel Program requires the State agency or CPV Member located in the nine (9) county metropolitan area to take 100% of the quantity pledged on the Fuel Order Form. Participants must have a capacity for taking at least 500 gallons per delivery. PLEASE NOTE: Agencies should consider the amount of its annual usage it wants to commit to this program. It is not recommended that you commit all of your fuel needs to the Fixed Price Program. The Spot Price Program may be

Put "0" if product is not required for a specific month.

FIXED PRICE PROGRAM COMMITMENT QUANTITIES

		Gallor	1S - 500 C	Gallons - 500 Gallon Minimum Delivery	imum Del	ivery		
oznakomi (vo)	2017-2018 MONTHLY REQUIREMENTS	GASOLINE	E-85	* B10	B15	B20	₩inter	Premium Diesel
	February (2017)	7,000		0			3,000	
_	March	9,000		0			3,000	
	April	12,000		3,000				
	May	12,000		4,000				
	June	15,000		4,000				
	July	13,000		5,000				
<u> </u>	August	14,000		3,000				
	September	10,000		4,000				
	October	11,000		0			4,000	
	November	8,000		0			3,000	
	December	8,000		0			4,000	
	January (2018)	9,000		0			4,000	
	TOTALS:	128,000		23,000			21,000	

* NOTE: 10% biodiesel mandated April through September, otherwise 5% biodiesel.

SPOT PRICE PROGRAM - FOR INFORMATION PURPOSES ONLY

used for additional fuel requirements.

might purchase from the Contract using the Spot
Price Program. There is no commitment implied by providing

he estimated usage -- this is for information purposes only.

Est. Annual Usage

Number of Gallons/500 minimum delivery.

Gasoline

E-85 Diesel Provide an estimate of the number of gallons of fuel you

Submission of this form certifies that your Entity agrees to all terms conditions and prices of any Contract agreement entered into on its behalf by the State of Minnesota which includes, but is not limited to, taking 100% of the monthly fuel quantities submitted for the Fixed Price Program on the Fuel Order Form. There is no requirement to take any product using the Spot Price Program.

Robert Therres Local Linear

Name

Agency

Date 21-Oct-16

RETURN EXCEL VERSION OF ORDER FORM TO CHRIS MARQUETTE AT chris.marquette@state.mn.us NO LATER THAN OCTOBER 25, 2016.

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North Tank -South Tank	GAS	GASC	Tank 20	Tank 19	Tank 18	Tank 17	Tank 16	Tank 15	Tank 14	Tank 13	Tank 12	Tank 11	Tank 10	Tank 9	Tank 8	Tank 7	Tank 6	Tank 5	Tank 4	Tank 3	Tank 2	Tank 1	TANK SIZE
	GASOLINE 10,000	GASOLINE E-85 10,000																			1801 101st Ave. NE Blaine MN 55449 - South Tank	1801 101st Ave. NE Blaine MN 55449 - North Tank	ADDRESS
	10,000	10,000 E-85 10,000																					

10,000		10,000
DIESEL	H-85	GASOLINE

NAME OF AGENCY