

Consolidated Fuel Network & Site Management Agreement



1. **PARTIES TO THE AGREEMENT:** The State of Utah, Department of Administrative Services, Division of Fleet Operations, referred to as State and the following OWNER:

OWNER Name: _____
OWNER Address: _____
Contact Person: _____ Phone _____

2. **PURPOSE OF AGREEMENT:** Provide management services of OWNER(s) Consolidated Network System. OWNER is an authorized User of the Network. See Attachment B.

3. **TERM OF AGREEMENT:** Agreement begins on _____ and continues until _____ unless terminated in accordance with Attachment A paragraph 9. This agreement may be renewed for two additional one (1) year periods if agreed to in writing by the state and OWNER.

4. **NETWORK LOCATION:** Network location is _____. (See Attachment C location list). OWNER certifies that the equipment and site at this address comply with current EPA/DOH regulations. OWNER had the Certificate of Compliance and other documentation to verify this. Further, OWNER has the documentation from a state authorized Tank Tightness Tester that the tanks at this location have been tested and show no inherent defects or leakage into the environment

5. **ATTACHMENTS INCLUDED AS PART OF THIS AGREEMENT:**
Attachment A – Network Agreement Provisions
Attachment B – Network Users Agreement
Attachment C – Network Site list
Attachment D – Signature Authorization Card

6. **DOCUMENTS NOT ATTACHED HERETO BUT INCORPORATED BY REFERENCE:**
a. All documentation referred to in this agreement that is not attached.
b. Governmental laws and regulations, and FLEETCOR requirements applicable to this agreement.

IN WITNESS WHEREOF, the parties sign and cause this agreement to be executed between the OWNER and the State on this date _____.

OWNER

STATE

Signature of OWNER

Division of Fleet Operations

Type Name and Title of Signer

Division of Purchasing

Division of Finance

