

DELIVERY SITE INFORMATION



CUSTOMER: _____

ADDRESS (STREET/CITY/ZIP): _____

PHONE: _____ CONTACT: _____

NAME OF PROPERTY OWNER: _____

ADDRESS OF PROPERTY OWNER: _____

PROPERTY OWNER PHONE: BUS# _____ CELL# _____

PRIME CONTRACTOR: _____

CONTRACTOR ADDRESS: _____

CONTRACTOR OWNER PHONE: BUS# _____ CELL# _____

BOND COMPANY: _____

BOND COMPANY ADDRESS: _____

BOND COMPANY PHONE: BUS# _____ BOND# _____

SITE/PROJECT NAME: _____

SITE/PROJECT ADDRESS: _____

SITE COUNTY: _____

SITE/PROJECT INFORMATION & DIRECTIONS (FROM CHAGRIN FALLS, OHIO)

TANK SIZE: _____ TANK LOCATION: _____

PROJECTED FUEL CONSUMPTION: _____

PRODUCT: GAS: 87 OCT. _____ 89 OCT. _____ 93 OCT. _____

DIESEL: ON-ROAD _____ OFF-ROAD _____ KEROSENE _____

INITIAL DELIVERY DATE: ___/___/___ FINAL DELIVERY DATE: ___/___/___

TICKETS LEFT ON SITE? Y/N _____ TICKETS MAILED TO OFFICE? Y/N _____

SIGNATURE OF PRINCIPAL: _____

JOB SITE SUPERVISOR OR CONTACT: _____

JOB SITE PHONE# _____ JOB SITE FAX# _____

PLEASE NOTIFY ULLMAN OIL WHEN JOB IS COMPLETED AT THE SITE

