SPECIAL FUEL BOND (DISTILLATE/LP GAS)

STATE OF DELAWARE MOTOR FUEL TAX ADMINISTRATION P.O. DRAWER E DOVER, DELAWARE 19903-1565 (302) 744-2715

| | | | | (Provided by Surety) |
|---|--|--|---|---|
| | Known A | ll Men By These Present, t | hat | |
| | (Name of Spe | cial Fuel User, Dealer or St | applier) | |
| | with his (| (their)(its) place of business | at | |
| (P.O. BOX # / Street | and Number) | (City or Town, State) | | (Zip) |
| and | | | , a cor | poration organized under the laws of |
| | and duly author | rized to engage in business | in the State | of Delaware, with its principal office |
| located at(P | O. box # / Street and Number) | (City or Town | State) | (Zip) |
| | d firmly bound unto the State of Do | • | | |
| (Not less than \$5,000 or its certain attorne executors, administra WHEREAS , the abo | o nor more than \$200,000) lawful may, to which payment well and trulators, successors, and assigns, jointly ove bounded principal has applied f | oney of the United States on by be made we bind ourse and severally, firmly by the for a license to engage in both | f America to lves, and endose present | o be paid to the said State of Delaware ach of us, our and each of our heirs |
| - | of the State of Delaware, imposing a | - | | |
| | nd is filed with the Motor Fuel Tax a otor Fuel Tax Administration or its s | | | essor, to enable said principal to obtain oresaid laws; |
| Motor Fuel Tax Adm all special fuel taxes penalties and/ or inte be and remain in full This bond to be effe | unistration or its successor, and shal which are now or which may herea rest thereon and shall faithfully com force and virtue until canceled or re | I pay promptly to the Moto fter be levied or imposed buply with the provisions of sevoked by either party. day of | r Fuel Tax Ary the State said laws, the | rincipal shall file true reports with the Administration or its successor any and of Delaware, together with any and all then this obligation to be void, or else to and ending sixty (60) days d and discharged. |
| Trom the date upon w | | | | a una disennagea. |
| | (Name of User/Dealer/Supplier |) | | (Name of Surety) |
| By | | OTAL O | В у | (2) |
| SEAL Title | (Name) | SEAL | Title | (Name) |
| Title | | | - Title | Attorney-in-Fact |
| Date | | | Telepho | one |
| | | | Date | |