

## Sample Memorandum of Understanding for Generator Fuel Resupply Services

This Memorandum of Understanding (MOU) is entered on \_\_\_\_\_ between \_\_\_\_\_  
(the “**Facility**”) and \_\_\_\_\_ (the “**Provider**”).

### INITIATION:

The existing facility has a \_\_\_\_ gallon tank designed to provide \_\_\_\_ hours of run time. HSC 1418.22 requires 96 hours of operation. The Provider hereby commits to supplying \_\_\_\_ gallons of [diesel or propane] to extend the run time of the sites existing generator to 96 hours. The Provider will meet this requirement by:

- 1- Supply a container with \_\_\_\_ gallons at the site with adequate fuel to continuously supply the existing generator to meet the 96 hour requirement.  
or
- 2- Park a fuel truck at the site for \_\_\_\_ hours to meet the 96 hour requirement.  
or
- 3- Return to the site every \_\_\_\_ hours ( \_\_\_\_ trips), to refill the on-site generator fuel tank to meet the 96 hour requirement.

The lead time to provide fuel delivery to the site is \_\_\_\_ hours after initial contact, the facility will need to provide \_\_\_\_ hours of onsite fuel to meet lead time requirements.

In the event that the **Facility** must refuel their emergency generator, a Facility representative will notify the **Provider** that service is needed by calling:

Daytime Phone: \_\_\_\_\_

After Hours Phone: \_\_\_\_\_

The **Provider** will supply:

- \_\_\_\_ gallons of diesel fuel for the facilities generator within \_\_\_\_ hours of being contacted (see method of delivery above)
- Manage the fuel transfer
- Top off the on site facilities generator tank at the end of outage

The **Facility** will make payment to the **Provider** within \_\_\_\_\_ days for fuel resupply services, at the current retail price at the time of service.

This understanding will be considered in effect until such time as either party provides notification in writing and not less than 30 days prior to the need to cancel the understanding. The **Facility** and **Provider** agree to review and update, if needed, this understanding annually.

**Facility**

**Provider**

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(Facility Name)

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(Company Name)

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(Name of Facility Representative)

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(Name of Company Representative)

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(Title of Facility Representative)

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(Title of Company Representative)

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(Signature of Representative)

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(Signature of Representative)

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(Signature Date)

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(Signature Date)