

Part 1A ~ Technical Proposal for:
Bulk Fuel Purchase and Delivery Service

RFQ 3064

Suburban Propane, L.P.

1499 SE Tech Center Place Ste 130

Vancouver, WA 98683

Proposal Opening Date: October 9, 2013

Proposal Opening Time: 2:00 PM

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VENDOR INFORMATION SHEET FOR RFQ 3064

Vendor Must:

- A) Provide all requested information in the space provided next to each numbered question. The information provided in Sections V1 through V6 will be used for development of the contract;
- B) Type or print responses; and
- C) Include this Vendor Information Sheet in Tab III of the Technical Proposal.

| | | | |
|----|--------------|------------------------|--|
| V1 | Company Name | Suburban Propane, L.P. | |
|----|--------------|------------------------|--|

| | | | |
|----|----------------|--------------------------------------|--|
| V2 | Street Address | 1499 SE Tech Center Place, Suite 130 | |
|----|----------------|--------------------------------------|--|

| | | | |
|----|------------------|---------------------|--|
| V3 | City, State, ZIP | Vancouver, WA 98683 | |
|----|------------------|---------------------|--|

| | | | |
|----|------------------|------------------|------------|
| V4 | Telephone Number | | |
| | Area Code: 360 | Number: 597-0671 | Extension: |

| | | | |
|----|------------------|------------------|------------|
| V5 | Facsimile Number | | |
| | Area Code: 360 | Number: 253-8199 | Extension: |

| | | | |
|----|------------------|---------|------------|
| V6 | Toll Free Number | | |
| | Area Code: | Number: | Extension: |

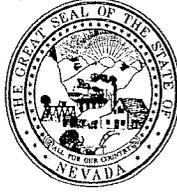
| | | | |
|--|--|--|--|
| V7 | Contact Person for Questions / Contract Negotiations, including address if different than above | | |
| | Name: Jeff Boyd | | |
| | Title: General Manager | | |
| | Address: Same as above | | |
| Email Address: jboyd@suburbanpropane.com | | | |

| | | | |
|----|-------------------------------------|------------------|------------|
| V8 | Telephone Number for Contact Person | | |
| | Area Code: 360 | Number: 597-0671 | Extension: |

| | | | |
|----|-------------------------------------|------------------|------------|
| V9 | Facsimile Number for Contact Person | | |
| | Area Code: 360 | Number: 253-8199 | Extension: |

| | | | |
|-----|---|------------------------|--|
| V10 | Name of Individual Authorized to Bind the Organization | | |
| | Name: Jeff Boyd | Title: General Manager | |

| | | | |
|-----|---|---------------|--|
| V11 | Signature (Individual must be legally authorized to bind the vendor per NRS 333.337) | | |
| | Signature: <i>J.S. Boyd</i> | Date: 10-8-13 | |



SUBJECT: Amendment 1 to Request for Qualification 3064
RFP TITLE: Bulk Fuel Purchase and Delivery Service
DATE OF AMENDMENT: September 19, 2013
DATE OF RFP RELEASE: August 19, 2013
OPENING DATE: October 9, 2013
OPENING TIME: 2:00 PM
CONTACT: Nancy Feser, Procurement Staff Member

The following shall be a part of RFQ **3064**. If a vendor has already returned a proposal and any of the information provided below changes that proposal, please submit the changes along with this amendment. You need not re-submit an entire proposal prior to the opening date and time.

Revisions to RFQ:

Section 1 of the RFQ is being revised to read:

The State does not guarantee any minimum number of bulk fuel purchases under this contract. As these contracts will affect several State agencies, the approximate number of bulk fuel purchases, using agencies, etc. is unavailable.

The State reserves the right to accept vendor proposals for qualification on an ongoing basis. Any future contract awards will be written based upon termination dates concurrent with contracts awarded as a result of the original RFQ.

Questions and Answers to RFQ:

1. Can you do better than 30 days for payment terms, i.e. Net 10 or Net 15?

Payments for invoices will be made within 10-15 days of receipt; refer to Section 8 of the RFQ.

2. Have any addendums been released for this bid?

No, this is the first amendment/addendum to this RFQ.

3. Do you currently receive a discount for prompt payment of invoices?

The State receives prompt payment discounts on various purchases and is willing to consider prompt pay discount offered.

4. Can we please have a list of bidders invited to submit a proposal?

This information is not available.

5. Will a metered bill of lading be acceptable in place of the metered truck requirement?

Yes.

6. Do you consider common carriers to be subcontractors?

Yes.

7. Is this RFQ a pre-qualification of suppliers and no pricing is due by 10/9/2013?

Correct, the purpose of this RFQ is to determine the qualifications of vendors per the Minimum Qualifications in Section 3.2 of the RFQ. As needed, agencies will then make purchases, from the qualified vendors awarded contracts with consideration of lowest cost and availability of fuel delivery, at time of purchase.

If yes to question above, when is the official RFP estimated to release?

Refer to Question 7 above.

8. Who are the current suppliers?

Below is a list of fuel vendors that have been used by individual agencies; however, these vendor's are not under contract.

Suburban Propane, Gale Oil and Tire, Sage Petroleum Products, Western Entergenix, Flyers Energy LLC, Carson Valley Oil, Al Park Petroleum, Thomas Petroleum, Turner Petroleum, Chris's Service, Rebel Oil, and Epic Aviation.

9. Is ACH payment method acceptable?

Yes.

10. What is the pricing index and terminal cities preferred?

The State is not incorporating the pricing index into this RFQ, and there is no preference regarding which terminals are used by the Vendors.

11. Metered tickets on full tanker transports is not commercial standard. Please confirm if the refiners temperature corrected bill of lading will be acceptable?

Yes, the refiners temperature corrected bill of lading is acceptable.

12. During the pre-proposal conference, it was brought to the States attention that the following propane tanks are owned by Suburban Propane:

| | |
|----------------------------------|-------------------------------------|
| <i>Tonopah Conservation Camp</i> | <i>6 – 1,150 gallon tanks</i> |
| <i>Glendale NDOT</i> | <i>1- 500 gallon tank</i> |
| <i>Indian Springs NDOT</i> | <i>1 – size of tank unspecified</i> |
| <i>Mt. Charles NDOT</i> | <i>1 – 1,000 gallon tank</i> |
| <i>Searchlight NDOT</i> | <i>1 – 500 gallon tank</i> |

ALL ELSE REMAINS THE SAME FOR RFQ 3064.

Vendor must sign and return this amendment with proposal submitted.

Vendor Name: SUBURBAN PROPANE, L.P.
Authorized Signature: J.S. Boyd
Title: GM, REGION 41 Date: 9-23-13

This document must be submitted in the "State Documents" section/tab of vendors' technical proposal.

ATTACHMENT A – CONFIDENTIALITY AND CERTIFICATION OF INDEMNIFICATION

Submitted proposals, which are marked “confidential” in their entirety, or those in which a significant portion of the submitted proposal is marked “confidential” **will not** be accepted by the State of Nevada. Pursuant to NRS 333.333, only specific parts of the proposal may be labeled a “trade secret” as defined in NRS 600A.030(5). All proposals are confidential until the contract is awarded; at which time, both successful and unsuccessful vendors’ technical and cost proposals become public information.

In accordance with the Submittal Instructions of this RFQ, vendors are requested to submit confidential information in separate binders marked “**Part I B Confidential Technical**” and “**Part II Confidential Financial**”.

The State will not be responsible for any information contained within the proposal. Should vendors not comply with the labeling and packing requirements, proposals will be released as submitted. In the event a governing board acts as the final authority, there may be public discussion regarding the submitted proposals that will be in an open meeting format, the proposals will remain confidential.

By signing below, I understand it is my responsibility as the vendor to act in protection of the labeled information and agree to defend and indemnify the State of Nevada for honoring such designation. I duly realize failure to so act will constitute a complete waiver and all submitted information will become public information; additionally, failure to label any information that is released by the State shall constitute a complete waiver of any and all claims for damages caused by the release of the information.

This proposal contains Confidential Information, Trade Secrets and/or Proprietary information as defined in *Section 2 “ACRONYMS/DEFINITIONS.”*

Please initial the appropriate response in the boxes below and provide the justification for confidential status.

| Part I B – Confidential Technical Information | | | |
|---|--|----|-------------------------------------|
| YES | | NO | <input checked="" type="checkbox"/> |
| Justification for Confidential Status | | | |
| | | | |

| A Public Records CD has been included for the Technical and Cost Proposal | | | |
|---|-------------------------------------|----|--|
| YES | <input checked="" type="checkbox"/> | NO | |

| Part II – Confidential Financial Information | | | |
|--|--|----|-------------------------------------|
| YES | | NO | <input checked="" type="checkbox"/> |
| Justification for Confidential Status | | | |
| | | | |

SUBURBAN PROPANE, L.P.
Company Name

J.S. Boyd, GEN. MGR.
Signature

JEFF BOYD
Print Name

10-8-13
Date

This document must be submitted in Tab IV of vendor’s technical proposal

ATTACHMENT C – VENDOR CERTIFICATIONS

Vendor agrees and will comply with the following:

- (1) Any and all prices that may be charged under the terms of the contract do not and will not violate any existing federal, State or municipal laws or regulations concerning discrimination and/or price fixing. The vendor agrees to indemnify, exonerate and hold the State harmless from liability for any such violation now and throughout the term of the contract.
- (2) All proposed capabilities can be demonstrated by the vendor.
- (3) The price(s) and amount of proposal will be arrived independently and without consultation, communication, agreement or disclosure with or to any other contractor, vendor or potential vendor.
- (4) All proposal terms, will remain in effect for a minimum of 180 days after the proposal due date. In the case of the awarded vendor, all proposal terms, will remain in effect throughout the contract negotiation process.
- (5) No attempt has been made at any time to induce any firm or person to refrain from proposing or to submit a proposal higher than this proposal, or to submit any intentionally high or noncompetitive proposal. All proposals must be made in good faith and without collusion.
- (6) All conditions and provisions of this RFQ are deemed to be accepted by the vendor and incorporated by reference in the proposal, except such conditions and provisions that the vendor expressly excludes in the proposal. Any exclusion must be in writing and included in the proposal at the time of submission.
- (7) Each vendor must disclose any existing or potential conflict of interest relative to the performance of the contractual services resulting from this RFQ. Any such relationship that might be perceived or represented as a conflict should be disclosed. By submitting a proposal in response to this RFQ, vendors affirm that they have not given, nor intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant or any employee or representative of same, in connection with this procurement. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of a vendor's proposal. An award will not be made where a conflict of interest exists. The State will determine whether a conflict of interest exists and whether it may reflect negatively on the State's selection of a vendor. The State reserves the right to disqualify any vendor on the grounds of actual or apparent conflict of interest.
- (8) All employees assigned to the project are authorized to work in this country.
- (9) The company has a written equal opportunity policy that does not discriminate in employment practices with regard to race, color, national origin, physical condition, creed, religion, age, sex, marital status, sexual orientation, developmental disability or handicap.
- (10) The company has a written policy regarding compliance for maintaining a drug-free workplace.
- (11) Vendor understands and acknowledges that the representations within their proposal are material and important, and will be relied on by the State in evaluation of the proposal. Any vendor misrepresentations shall be treated as fraudulent concealment from the State of the true facts relating to the proposal.
- (12) Vendor must certify that any and all subcontractors comply with Sections 7, 8, 9, and 10, above.
- (13) The proposal must be signed by the individual(s) legally authorized to bind the vendor per NRS 333.337.

Suburban Propane, L.P.
Vendor Company Name

J. S. Boyd, GEN. MGR.
Vendor Signature

Jeff Boyd
Print Name

10-8-13
Date

This document must be submitted in Tab IV of vendor's technical proposal

ATTACHMENT E – INSURANCE SCHEDULE FOR RFQ 3064

The following Insurance Schedule is provided as a courtesy to vendors interested in responding to this RFQ. Please review the terms and conditions in the Insurance Schedule, as this is the standard insurance schedule used by the State for all services of independent contractors.

If exceptions and/or assumptions require a change to the Insurance Schedule, vendors **must** provide the specific language that is being proposed on **Attachment B, Technical Proposal Certification of Compliance with Terms and Conditions of RFP**.



Insurance Schedule
RFQ 3064.doc

To open the document, double click on the icon.

If you are unable to access the above inserted file once you have doubled clicked on the icon, please contact Nevada State Purchasing at srvpurch@admin.nv.gov for an emailed copy.

ATTACHMENT E INSURANCE SCHEDULE

INDEMNIFICATION:

Contractor shall indemnify, hold harmless and, not excluding the State's right to participate, defend the State and its officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all liabilities, claims, actions, damages, losses, or expenses including without limitation reasonable attorneys' fees and costs (hereinafter collectively referred to as "claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Contractor or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by Contractor from and against any and all claims. It is agreed that Contractor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this contract, the Contractor agrees to waive all rights of subrogation against the State, its officers, officials, agents and employees for losses arising from the work performed by the Contractor for the State.

Contractor (as "Indemnitor") shall indemnify, hold harmless and, not excluding the State's right to participate, defend the State and its officers, officials, agents and employees (as "Indemnitee") from and against any and all demands, claims, complaints, losses, damages, actions or causes of action, assessments, liabilities, costs or expenses including, without limitation, interest, penalties and reasonable attorney's fees and reasonable expenses of investigation and remedial work (including investigations and remediation by engineers, environmental consultants and similar technical personnel) asserted against or imposed upon or incurred by Indemnitee arising in connection with, or resulting from, any Environmental Law, including but not limited to, any use, generation, storage, spill, release, discharge or disposal of any hazardous substance that is now or comes to be located on, at, about or under the property or because of, or in connection with, the violation of any Environmental Law (hereinafter collectively referred to as "claims") to the extent that such claims are caused by the fault of the Indemnitor, its officers, officials, agents, employees, contractors, volunteers, tenants, subtenants, invitees or licensees. As used in this section: (a) "hazardous substances" are those substances defined as toxic or hazardous substances, pollutants, or wastes by Environmental Law and the following substances: gasoline, kerosene, or other petroleum products, toxic pesticides and herbicides, volatile solvents, materials containing asbestos or formaldehyde, and radioactive materials; (b) "Environmental Law" means federal, state or local laws and regulations, including common law, that relate to health, safety or environmental protection; and (c) "fault" means those nonculpable acts or omissions giving rise to strict liability under any Environmental Law pertaining to hazardous substances, as well as culpable conduct (negligence or willful misconduct). In consideration of the award of this contract, the Contractor agrees to waive all rights of subrogation against the State, its officers, officials, agents and employees for losses arising from the work performed by the Contractor for the State.

INSURANCE REQUIREMENTS:

Contractor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.

The insurance requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State in no way warrants that the minimum limits

contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this Contract by the Contractor, his agents, representatives, employees or subcontractors and Contractor is free to purchase such additional insurance as may be determined necessary.

A. **MINIMUM SCOPE AND LIMITS OF INSURANCE:** Contractor shall provide coverage with limits of liability not less than those stated below. An excess liability policy or umbrella liability policy may be used to meet the minimum liability requirements provided that the coverage is written on a "following form" basis.

1. **Commercial General Liability – Occurrence Form**

Policy shall include bodily injury, property damage and broad form contractual liability coverage.

- General Aggregate \$2,000,000
- Products – Completed Operations Aggregate \$1,000,000
- Personal and Advertising Injury \$1,000,000
- Each Occurrence \$1,000,000

a. The policy shall be endorsed to include the following additional insured language: "The State of Nevada shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor".

2. **Automobile Liability**

Bodily Injury and Property Damage for any owned, hired, and/or non-owned vehicles used in the performance of this Contract.

Combined Single Limit (CSL) \$1,000,000

a. The policy shall be endorsed to include the following additional insured language: "The State of Nevada shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor, including automobiles owned, leased, hired or borrowed by the Contractor".

3. **Worker's Compensation and Employers' Liability**

| | |
|-------------------------|-----------|
| Workers' Compensation | Statutory |
| Employers' Liability | |
| Each Accident | \$100,000 |
| Disease – Each Employee | \$100,000 |
| Disease – Policy Limit | \$500,000 |

a. Policy shall contain a waiver of subrogation against the State of Nevada.

b. This requirement shall not apply when a contractor or subcontractor is exempt under N.R.S., **AND** when such contractor or subcontractor executes the appropriate sole proprietor waiver form.

4. **Pollution Legal Liability (for transported cargo only)**

If the Scope of Services in this Contract requires the transportation of any hazardous materials, the Contractor shall provide coverage with limits of at least:

| | |
|------------------|-------------|
| Per Occurrence | \$5,000,000 |
| Annual Aggregate | \$5,000,000 |

a. The policy shall be endorsed to include the following additional insured language: "The State of Nevada shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor".

b. If the Scope of Services in the Contract requires the transportation of any hazardous materials or regulated substances, then the policy shall provide coverage for claims resulting in bodily injury, property damage or cleanup costs associated with a pollution condition from transported cargo.

- c. Contractor warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage will be maintained or an extended discovery period will be exercised for a period of two (2) years beginning at the time work under this Contract is completed.
- B. **ADDITIONAL INSURANCE REQUIREMENTS:** The policies are to contain, or be endorsed to contain, the following provisions:
1. On insurance policies where the State of Nevada is named as an additional insured, the State of Nevada shall be an additional insured to the full limits of liability purchased by the Contractor even if those limits of liability are in excess of those required by this Contract.
 2. The Contractor's insurance coverage shall be primary insurance and non-contributory with respect to all other available sources.
- C. **NOTICE OF CANCELLATION:** Each insurance policy required by the insurance provisions of this Contract shall provide the required coverage and shall not be suspended, voided or canceled except after thirty (30) days prior written notice has been given to the State, except when cancellation is for non-payment of premium, then ten (10) days prior notice may be given. Such notice shall be sent directly to **(Department of Administration, Purchasing Division, Nancy Feser, Buyer. 515 E. Musser St., Ste. 300, Carson City, NV. 89701)**.
- D. **ACCEPTABILITY OF INSURERS:** Insurance is to be placed with insurers duly licensed or authorized to do business in the state of Nevada and with an "A.M. Best" rating of not less than A-VII. The State in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.
- E. **VERIFICATION OF COVERAGE:** Contractor shall furnish the State with certificates of insurance (ACORD form or equivalent approved by the State) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.
- All certificates and any required endorsements are to be received and approved by the State before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this Contract or to provide evidence of renewal is a material breach of contract.
- All certificates required by this Contract shall be sent directly to **(Department of Administration, Purchasing Division, Nancy Feser, Buyer. 515 E. Musser St., Ste. 300, Carson City, NV. 89701)**. The State project/contract number and project description are to be noted on the certificate of insurance. The State reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time.
- F. **SUBCONTRACTORS:** Contractors' certificate(s) shall include all subcontractors as additional insureds under its policies **or** Contractor shall furnish to the State separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.
- G. **APPROVAL:** Any modification or variation from the insurance requirements in this Contract must have prior approval from the State of Nevada Attorney General's Office or the Risk Manager, whose decision shall be final. Such action will not require a formal contract amendment, but may be made by administrative action.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/26/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | |
|---|---|------------------------|
| PRODUCER MARSH USA, INC. 445 SOUTH STREET MORRISTOWN, NJ 07962 PHONE: 973-401-5000 | CONTACT NAME: _____ PHONE (A/C, No, Ext): _____ E-MAIL ADDRESS: _____ FAX (A/C, No): _____ | |
| | INSURER(S) AFFORDING COVERAGE | |
| J08990-ALL-GAW-13-14 NJ CLIE | INSURER A: ACE American Insurance Company | NAIC # 22667 |
| INSURED SUBURBAN PROPANE PARTNERS, L.P. 240 ROUTE 10 WEST WHIPPANY, NJ 07981 | INSURER B: Indemnity Ins Co Of North America | NAIC # 43575 |
| | INSURER C: _____ | |
| | INSURER D: _____ | |
| | INSURER E: _____ | |

COVERAGES **CERTIFICATE NUMBER:** NYC-006226610-06 **REVISION NUMBER:** 2

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|-------------|---|-----------|----------|---|--|--|---|
| A | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | HDO G27017940 | 03/01/2013 | 03/01/2014 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS | | | ISA H0871857A | 03/01/2013 | 03/01/2014 | COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ |
| B A A | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | WLR C47317009 (AOS) WLR C47317010 (AZ) SCF C47317022 (WI) | 03/01/2013 03/01/2013 03/01/2013 | 03/01/2014 03/01/2014 03/01/2014 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 RE: EVIDENCE OF COVERAGE ONLY

| | |
|---|---|
| CERTIFICATE HOLDER SUBURBAN PROPANE 1 SUBURBAN PLAZA PO BOX 206 WHIPPANY, NJ 07981 | CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i> |
|---|---|

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ACORD 25 (2010/05)

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**ATTACHMENT B – TECHNICAL PROPOSAL CERTIFICATION OF COMPLIANCE
WITH TERMS AND CONDITIONS OF RFQ**

I have read, understand and agree to comply with the terms and conditions specified in this Request for Qualifications.

YES ✓ I agree to comply with the terms and conditions specified in this RFQ.

NO _____ I do not agree to comply with the terms and conditions specified in this RFQ.

In order for any exceptions and/or assumptions to be considered they **MUST** be documented in detail in the tables below. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission deadline. Vendors must be specific. Nonspecific exceptions or assumptions may not be considered. If the exception or assumption requires a change in the terms or wording of the contract, the scope of work, or any incorporated documents, vendors must provide the specific language that is being proposed in the tables below.

 SUBURBAN PROPANE, L.P.
Company Name

 J.S. BOYD, GEN. MGR.
Signature

 JEFF BOYD 10-8-13
Print Name Date

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

| RFQ SECTION NUMBER | RFQ PAGE NUMBER | EXCEPTION (Complete detail regarding exceptions must be identified) |
|--------------------|-----------------|--|
| | | |
| | | |

ASSUMPTION SUMMARY FORM

| RFQ SECTION NUMBER | RFQ PAGE NUMBER | ASSUMPTION (Complete detail regarding assumptions must be identified) |
|--------------------|-----------------|--|
| | | |
| | | |

This document must be submitted in Tab V of vendor's technical proposal

3. REQUEST FOR QUALIFICATIONS

3.1 RFQ PROCESS

The process by which proposals will be considered for a contract under this RFQ is to determine whether or not the vendor qualifies under the set of Minimum Qualifications (*refer to Section 3.2*). If a vendor is determined to not meet any one of the Minimum Qualifications, the proposal in its entirety will not be considered for contract. Each proposal will be reviewed independently in the Minimum Qualification section. All vendors that qualify will receive a contract.

3.2 MINIMUM QUALIFICATIONS

It is **mandatory** that each component listed below in the Minimum Qualifications be addressed. Failure to address each component will result in disqualification of the proposal. Vendors proposing to receive a contract through this RFQ must provide a detailed description of their proposal service plan, which must include, at a minimum, the following information for which information is requested.

- 3.2.1 All fuel supplied through this contract must comply with applicable governmental and industry standards and specifications in accordance with NRS and NAC Chapter 590.
Suburban Propane will supply propane to the State of Nevada that is procured from refiners and suppliers. This is generally regarded as "commercial grade" and will be the highest quality readily available and provided by those suppliers
- 3.2.2 Vendor must be a Certified Carrier in full compliance with the Nevada Transportation Authority per NAC 706, and be able to provide a copy of Certification along with other appropriate licenses and documentation required when transporting certain fuels under NRS 365.530. Use of common carriers will be allowed as long as they are in full compliance as stated above.
Suburban Propane's Special Fuel Dealer License and appropriate documents is supplied with this RFQ
- 3.2.3 Vendors must submit a Bill of Lading and Material Safety Data Sheets (MSDS), as defined and prescribed in 29 C.F.R., Section 1910.1200 to each using agency. MSDS sheets are to accompany the hazardous material and be provided to agency personnel at the time of delivery.
Suburban Propane's MSDS for propane is supplied with this RFQ. MSDS sheets are available at any time on the Suburban Propane website (www.suburbanpropane.com) under the Safety heading
- 3.2.4 Vendor must specify the region services will be provided, per ***Attachment H, Bulk Fuel Tank Delivery Locations***.
- 3.2.5 Vendor must specify types of fuel(s) to be provided. Aviation fuel supplied must meet ASTM-D1655 standards for Jet Fuel.
Suburban will supply and deliver propane

Motor Carrier Division
555 Wright Way
Carson City, Nevada 89711-0600
Phone (775) 684-4711
Fax (775) 684-4619
www.dmvnv.com

Pursuant to the application filed, the below named is hereby licensed subject to the provision of the laws of the State of Nevada, to engage in business as a Special Fuel Dealer in the distribution of Compressed Natural Gas and Liquefied Petroleum Gas. This license is valid until 12-31-2013 unless revoked, suspended or canceled.

SPECIAL FUEL DEALER LICENSE
(AS DEFINED BY NRS 366)

FEIN: 223410352

NV Account #: MCDR00013514
Expiration Date: 12/31/2013

Issued to: **SUBURBAN PROPANE LP**
240 STATE ROUTE 10
WHIPPANY NJ 079812105

DEPARTMENT OF MOTOR VEHICLES

By: Carmen Whippman

Title: Tax Program Supervisor II

Date: January 1, 2013

THIS LICENSE IS NOT TRANSFERABLE

Suburban Propane, L.P.

HAZARDOUS MATERIAL SHIPPING PAPER

Liquefied Petroleum Gas
2.1, UN 1075, Flash Point (-156°F)
Volume: One Truckload
Product: Propane, Non-Corrosive



THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

EMERGENCY CONTACT - CHEMTREC - 1-800-424-9300

Guide 115 Gases-Flammable (Including Refrigerated Liquids)

POTENTIAL HAZARDS

FIRE OR EXPLOSION

• EXTREMELY FLAMMABLE

- Will be easily ignited by heat, sparks or flames.
- Will form explosive mixtures with air.
- Vapors from liquefied gas are initially heavier than air and spread along ground.
- Vapors may travel to source of ignition and flash back.
- Containers may explode when heated.
- Ruptured cylinders may rocket.

HEALTH

- Vapors may cause dizziness or asphyxiation without warning.
- Some may be irritating if inhaled at high concentrations.
- Contact with gas or liquefied gas may cause burns, severe injury and/or frostbite.
- Fire may produce irritating and/or toxic gases.

PUBLIC SAFETY

- CALL Emergency Response Telephone Number on Shipping Paper first.
- Isolate spill or leak area immediately for at least 50 to 100 meters (160 to 330 feet) in all directions.
- Keep unauthorized personnel away.
- Stay upwind.
- Many gases are heavier than air and will spread along ground and collect in low or confined areas (sewers, basements, tanks).
- Keep out of low areas.

PROTECTIVE CLOTHING

- Wear positive pressure self-contained breathing apparatus (SCBA).
- Structural firefighters' protective clothing will only provide limited protection.
- Always wear thermal protective clothing when handling refrigerated/cryogenic liquids.

EVACUATION

Large Spill

- Consider initial downwind evacuation for at least 800 meters (1/2 mile).

Fire

- If tank, rail car or tank truck is involved in a fire, ISOLATE for 1600 meters (1 mile) in all directions; also, consider initial evacuation for 1600 meters (1 mile) in all directions.

EMERGENCY RESPONSE

FIRE

- DO NOT EXTINGUISH A LEAKING GAS FIRE UNLESS LEAK CAN BE STOPPED.

Small Fires

- Dry chemical or CO₂.

Large Fires

- Water spray or fog.
- Move containers from fire area if you can do it without risk.

Fire Involving Tanks

- Fight fire from maximum distance or use unmanned hose holders or monitor nozzles.
- Cool containers with flooding quantities of water until well after fire is out.
- Do not direct water at source of leak or safety devices; icing may occur.
- Withdraw immediately in case of rising sound from venting safety devices or discoloration of tank.
- ALWAYS stay away from tanks engulfed in fire.
- For massive fire, use unmanned hose holders or monitor nozzles; if this is impossible, withdraw from area and let fire burn.

SPILL OR LEAK

- ELIMINATE all ignition sources (no smoking, flares, sparks or flames in immediate area).
- All equipment used when handling the product must be grounded.
- Do not touch or walk through spilled material.
- Stop leak if you can do it without risk.
- If possible, turn leaking containers so that gas escapes rather than liquid.
- Use water spray to reduce vapors or divert vapor cloud drift. Avoid allowing water runoff to contact spilled material.
- Do not direct water at spill or source of leak.
- Prevent spreading of vapors through sewers, ventilation systems and confined areas.
- Isolate area until gas has dispersed.

CAUTION: When in contact with refrigerated/cryogenic liquids, many materials become brittle and are likely to break without warning.

FIRST AID

- Move victim to fresh air.
- Call 911 or emergency medical service.
- Apply artificial respiration if victim is not breathing.
- Administer oxygen if breathing is difficult.
- Remove and isolate contaminated clothing and shoes.
- Clothing frozen to the skin should be thawed before being removed.
- In case of contact with liquefied gas, thaw frosted parts with lukewarm water.
- Keep victim warm and quiet.
- Ensure that medical personnel are aware of the material(s) involved, and take precautions to protect themselves.

SCS-840 3/03

OPERATING / EMERGENCY PROCEDURES

Operating Procedure:

Off-truck remote shutdown systems installed on Cargo Tank Motor Vehicles with cargo tanks under 3500 GWC transporting LP-Gas must carry on the vehicle written emergency discharge control procedures for the vehicle's emergency discharge control equipment.

On-truck Emergency Shutdown Operating Procedures must be written and in the vehicle at all times.

Off-truck remote shutdown system with 5-minute query installed on Cargo Tank Motor Vehicles with cargo tanks equal to or over 3500 GWC transporting LP-Gas, the operating procedure must also identify the parameters within which the system is designed to function.

Emergency Procedures (Item No. 1519850, SAF 5301) are to be kept in the red door pouch with the shipping papers. The red door pouch (Item No. 1519683, REG 5115) should be attached to the driver's door for easy access.

Operating Parameters:

- Temperature: -40 to +160 degrees Fahrenheit.
- Air pressure: +60 psig to +120 psig taken from vehicle air tank.
- Environment Exposure: All equipment NEMA 4 weatherproof with Buna-N oil resistant seals and gaskets.
- CFR 49 §173.315(n)(3) Range: Transmitter to Receiver separation distance 300 feet @ initial installation - 150 feet @ daily, monthly, annual test.
- Product: No limitations on product type.

Emergency Procedures:

On Truck

Upon identification of an unintentional release of LP-Gas or fire, the following is to be performed in the order indicated:

- Immediately close the internal self-closing stop valve (pump suction belly valve) using the on-truck remote shutdown or off-truck remote shutdown.
- Immediately shutdown all motive and auxiliary power equipment by turning the ignition key to the off position or using the off-truck remote shutdown.
- Observe actuating rod on (Fisher Internal) or indicating screw on (Rego Flowmatic) to insure that the internal valve has "closed".

At Plant Location - Unable to Stop Discharge:

- Activate Emergency Alarm system (OSHA 1910.164(b) and notify plant personnel to activate Emergency Action Plan (EAP).
- Notify local Emergency Response.

- Activate plant emergency shutdown system.
- Shutdown electric equipment.
- Shutdown ignition sources.
- Evacuate plant area.
- Meet at Assembly Point for employee head count.
- Evacuate neighbors if necessary.
- Communicate to Commander of Emergency Responders.

At Plant Location - Able to Stop Discharge:

- Notify plant personnel to activate Emergency Action Plan (EAP) (if needed)
- Activate plant emergency shutdown system (if needed).
- Shutdown electric equipment (if needed).
- After dissipation of discharge, determine the cause of the discharge and secure equipment as necessary.

At Customer Location - Unable to Stop Discharge:

- 49 CFR §177.840 (n) Activate on-truck or off-truck remote shutdown system.
- Shutdown all Cargo Tank Truck motive and auxiliary power equipment by turning the ignition key to the off position or using the off-truck remote shutdown.
- Evacuate all persons in the area that could be injured by the discharge.
- Do not attempt to activate equipment that utilizes electrical circuitry such as break lights, light switches, and two-way radio or start motor vehicle.

- Notify local Emergency Responders.

- Notify Company operations Management.

- Remain at a safe location and maintain a secure area until Emergency Responders arrive.

At Customer Location - Able to Stop Discharge:

- Activate on-truck or off-truck remote shutdown system (if needed).
- Shutdown all Cargo Tank Truck motive and auxiliary power equipment by turning the ignition key to the off position or using the off-truck remote shutdown (if needed).
- Do not attempt to activate equipment that utilizes electrical circuitry such as break lights, light switches, two-way radio or start motor vehicle until release has dissipated (if needed).
- After dissipation of discharge, determine the cause of the discharge and secure equipment as necessary.
- Notify Company operations Management.

MATERIAL SAFETY DATA SHEET

EFFECTIVE JANUARY 2009

Llame 1-888-223-0029 para la informaaicon de la seguridad en el espanol

Suburban Propane, L.P. P.O. Box 206 Whippany, NJ 07981-0206

TRANSPORTATION EMERGENCY
RESPONSE : CHEMTREC (800) 424-9300

GENERAL ADDITIONAL INFORMATION:
SAFETY SERVICES (973) 887-5300

SECTION 1 –PRODUCT IDENTIFICATION

Product Name: Commercial Odorized Propane
 Chemical Name: Propane
 Chemical Family: Petroleum Hydrocarbon
 Common Names: Liquefied Petroleum Gas, LP-Gas, LPG, Bottle Gas

SECTION 2 – PHYSICAL AND CHEMICAL CHARACTERISTICS

| | | |
|--|----------------------|-------------------------------|
| BOILING POINT: - 44° F | FLASH POINT: -156° F | BULK DENSITY: 4.20 lbs. /gal. |
| SPECIFIC GRAVITY: | LIQUID: 0.504 | VAPOR: 1.50 |
| GAS VOLUME @ ATM. PRESSURE & 60° F (Cu. Ft. gas/gal. Liquid): 36.38 | | |
| VAPOR PRESSURE: 208 psig @ 100° F (ASTM) SPECIFIC HEAT of LIQUID: .630 BTU/LB. & 60° F | | |
| FLAMMABILITY LIMITS (% BY VOLUME IN AIR): L.E.L.: 2.1 U.E.L.: 9.5 | | |
| EXPANSION RATIO OF LIQUID TO GAS @ 14.7psia : 1 to 270 | | |
| LIQUID BOIL-OFF TO PROPANE VAPOR ABOVE - 44 F°: 100% | | |

| COMPONENTS | CAS NO. | |
|-----------------|-----------|--|
| PROPANE | 74-98-6 | * |
| PROPYLENE | 115-07-1 | * |
| BUTANES | 106-97-8 | 2.5% |
| SULPHUR | 7704-34-9 | 185 ppmw with no discoloration of Lead Acetate paper** |
| RESIDUAL MATTER | | 0.05 ml after boil off of 100 ml liquid sample ** |
| ODORANT(S) | Various | Odor concentration detectable in air of not over one-fifth of the lower limit of flammability per NFPA 58. |
| CORROSIVES | | Not to exceed #1 grade copper strip test** |

PROPANE IS COLORLESS AND ODORLESS.

PROPANE IS VERY STABLE.

POLYMERIZATION WILL NOT OCCUR.

AN ADDED ODORANT GIVES PROPANE A STRONG UNPLEASANT SMELL. Information regarding the effectiveness or intensity of odorants, is set forth in Section 9 below.

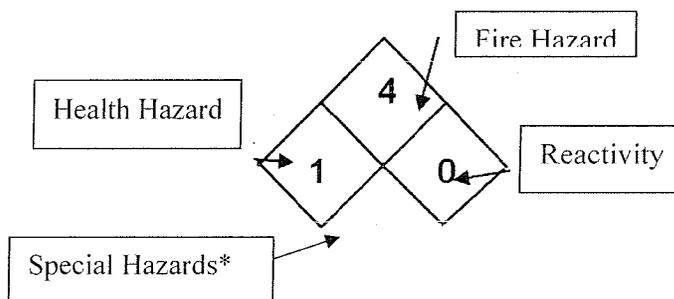
* Combined constituents comprise a minimum 97.45 % of the total weight under Gas Processors Association (GPA) Standard 2140-97.

** Based on American Society of Testing and Materials (ASTM) Standard D1835-91.

SECTION 3 –PHYSICAL HAZARD DATA

NFPA CLASSES:

- 4 - Severe
- 3 – Serious
- 2 – Moderate
- 1 – Slight
- 0 – Minimal
- *Ref. NFPA 704



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PROPANE IS FLAMMABLE. PROPANE IS A SIMPLE ASPHYXIANT.

Flammable Gas under pressure – Keep away from sources of ignition such as heat, sparks or flame. Vapor is heavier than air and may collect in low-lying areas.

WHAT IS PROPANE?

Propane (also called LPG-Liquefied Petroleum Gas or LP-Gas) is a liquid fuel stored under pressure. In most systems, propane is vaporized to a gas before it leaves the tank. Propane is highly flammable when mixed with air (oxygen) and can be ignited by many sources, including open flames, smoking materials, electrical sparks, and static electricity. Severe “freeze burn” or frostbite can result if propane liquid comes in contact with your skin.

SECTION 4 – HEALTH HAZARD DATA

Propane is a simple asphyxiant and care must be taken to provide adequate ventilation. Vapors can displace available oxygen for breathing in confined spaces. Odor may not provide adequate warning of potentially hazardous concentrations. Propane is heavier than air and may collect in low-lying areas in the absence of wind or ventilation. Liquid propane can cause freeze burns when brought into direct contact with body parts.

SECTION 5 – PRIMARY ROUTES OF ENTRY

Eye: Although propane vapor is generally non-irritating, pressurized gas may inflict mechanical injury to the eye. Direct contact with liquid propane can cause freeze burns and resultant swelling of the eye.

Skin: Contact with liquid propane can cause freeze burns similar to frostbite.

Ingestion: Deemed unlikely.

Inhalation: Simple asphyxiant. Extreme over exposure may cause dizziness, headache, disorientation, excitability, fatigue, coughing, vomiting, anesthesia, unconsciousness and death.

SECTION 6 – EXPOSURE LIMITS

| COMPONENT | THRESHOLD LIMIT VALUE (TLV) | PERMISSABLE EXPOSURE LIMIT (PEL) |
|-----------|--------------------------------|-------------------------------------|
| PROPANE | NE | 1000 ppm |
| PROPYLENE | NE | NE |
| BUTANES | NE | 800 ppm |

PROPANE CAN DISPLACE OXYGEN REQUIRED FOR NORMAL RESPIRATION AND CARE SHOULD BE TAKEN TO PROVIDE ADEQUATE VENTILATION, ESPECIALLY IN CONFINED SPACES AND IN THE ABSENCE OF WIND.

SECTION 7 – TOXICOLOGICAL INFORMATION

Propane is not listed in the latest edition of the National Toxicology Program Annual Report on Carcinogens, has not been found to be a potential carcinogen in the latest edition of the International Agency for Research on Cancer Monographs, and has not been identified as a carcinogen by OSHA.

Upon review of USC Title 15 Chapter 23 Section 2601 commonly known as Toxic Substance Control Act (TSCA), Propane has not been found to be a chemical whose manufacture, processing, distribution in commerce, use, or disposal to present an unreasonable risk of injury to health or the environment.

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Propane does not contain any Class 1 or Class 2 ozone-depleting chemicals. Propane is not a listed marine pollutant.

The Food and Drug Administration (FDA) has said propane is GRAS (generally recognized as safe) as a direct human food ingredient when used as a propellant, aerating agent and gas.

Normal combustion products of propane are carbon dioxide, nitrogen and water vapor. Incomplete combustion of propane can produce carbon monoxide (CO), a toxic gas, and various aldehydes; an eye and nose irritant. These can be produced both by gas appliances and internal combustion engines.

SECTION 8 – SAFE HANDLING AND USE

Propane systems must be tested and proven leak free prior to use. Refer to National Fire Protection Association (NFPA) 54 National Fuel Gas Code for further instructions.

Keep away from all sources of ignition, including heat, sparks and open flames. Never check for leaks with a lit match or flame. Use an approved leak detector solution or electronic leak detector.

All piping and equipment used for the handling, storage and use of propane must be specifically designed for that purpose. Refer to NFPA 54 National Fuel Gas Code and NFPA 58 Liquefied Petroleum Gas Code.

OSHA 29 CFR 1910.110, DOT 49 CFR 172.700 and NFPA 58 all require that persons handling LP gases be specially trained in proper handling and operating procedures, which must be documented by the employer. Only qualified persons should transport, operate, service and/or install propane systems and containers.

Propane vapor is heavier than air and can collect in low-lying areas, especially in the absence of wind or ventilation. Propane is a simple asphyxiant.

Liquid propane can cause freeze burns, and appropriate personal protective equipment should be used whenever handling this product.

Propane cylinders should always be stored in an approved location with relief valves in direct communication with the vapor space, and with service valves closed and plugged when not in use. Refer to NFPA 58 for details of specific storage requirements.

Empty propane containers retain residue and should be treated as if full. Never drop or damage containers. Damaged or corroded and leaking containers should not be utilized. Contact your local Suburban Propane supplier immediately to report any problems. If container service valve fails to operate properly, discontinue use. Never insert any object into the pressure relief valve. Return unused propane to supplier for proper disposal.

SECTION 9 – EXPOSURE CONTROLS

Propane is Odorized: Propane smells like rotten eggs, a skunk's spray, or a dead animal. Some people may have difficulty smelling propane due to their age (older people have a less sensitive sense of smell); a medical condition; or the effects of medication, alcohol, tobacco, or drugs. Consider purchasing a propane gas detector as an additional measure of security.

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Odor Fade: Odor fade is an unintended reduction in the concentration of the odor of propane, making it more difficult to smell. Although rare, several situations can cause odor fade:

- The presence of air, water, or rust in a propane tank or cylinder
- The passage of leaking propane through soil
- The exposure to building materials, masonry or fabrics

Since there is a possibility of odor fade or problems with your sense of smell, you should respond immediately to even a faint odor of gas.

To learn what propane smells like, Customers unfamiliar with that smell should call Suburban's Safety Information Request Center at 1-888-223-0029 and order the pamphlets called "Important Propane Safety Information for You and Your Family" and/or an expansive "Propane Safety" booklet to obtain a Scratch and Sniff Test, free of charge. Pamphlets can also be purchased through Propane Education & Research Council (PERC) at 1-866-905-1075 or www.propanecatalog.com.

Propane Gas Detectors: Propane gas detectors sound an alarm if they sense propane in the air. They can provide an additional measure of security in homes with little-used areas or with occupants who have difficulty smelling propane.

Guidelines regarding propane gas detectors:

- Buy only units that are listed by Underwriters Laboratories (UL).
- Follow the manufacturer's instructions regarding installation and maintenance.
- Never ignore the smell of propane, even if no detector is sounding an alarm.

Engineering Controls: Provide ventilation in enclosed areas where accumulation of vapors may provide a flammable mixture. Where flammable mixtures may be present, specially designed electrical systems must be used in accordance with NFPA 70 National Electric Code.

Respiratory Protection: For general use no protection is required. Under emergency conditions, concentrations may be high enough to warrant supplied-air or self-contained breathing apparatus. Under these conditions, a flammable atmosphere is likely and precautions should be taken to avoid ignition.

Eye Protection: Approved safety glasses should be used whenever filling and handling propane containers.

Protective Clothing: To avoid skin contact with liquid propane, approved gloves that are impervious to propane should be worn along with clothing that will provide protection from liquid propane for the expected duration- of exposure.

Other Protective Equipment: Safety shoes are recommended when handling cylinders.

SECTION 10 – EMERGENCY AND FIRST AID PROCEDURES

Contact with liquid propane can cause freeze burns similar to frostbite. Remove saturated clothing, shoes and jewelry immediately. Affected body parts should be gently flushed with or immersed in lukewarm water for 15 minutes. Seek medical attention.

If respiratory symptoms occur, get victim away from source and into fresh air. If breathing difficulties develop, qualified personnel may administer oxygen. If breathing or heartbeat cease, artificial respiration or cardiopulmonary resuscitation should be started immediately. Contact emergency medical responders at once.

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IF YOU SMELL, HEAR OR SEE GAS

1. **NO FLAMES OR SPARKS!** Immediately put out all smoking materials and other open flames. Do not operate lights, appliances, telephones, or cell phones. Flames or sparks from these sources can trigger an explosion or fire.
2. **LEAVE THE AREA IMMEDIATELY!** Get everyone out of the building or area where you suspect gas is leaking.
3. **SHUT OFF THE GAS.** Turn off the main gas supply valve on your propane tank if it is safe to do so. To close the valve, turn it to the right (clockwise).
4. **REPORT THE LEAK.** From a neighbor's home or other nearby building away from the gas leak, call your propane retailer right away. If you can't reach your propane retailer, call 911 or your local fire department.
5. **DO NOT RETURN TO THE BUILDING OR AREA** until your propane retailer determines that it is safe to do so.
6. **GET YOUR SYSTEM CHECKED.** Before you attempt to use any of your propane appliances, your propane retailer or a qualified service technician must check your entire system to ensure it is leak-free.

LIGHTING PILOT LIGHTS

IF A PILOT LIGHT REPEATEDLY GOES OUT or is very difficult to light, there may be a safety problem. DO NOT try to fix the problem yourself. It is strongly recommended that only a QUALIFIED SERVICE TECHNICIAN light any pilot light that has gone out.

YOU ARE TAKING THE RISK of starting a fire or an explosion if you light a pilot light yourself. Carefully follow all of the manufacturer's instructions and warnings concerning the appliance before attempting to light the pilot.

APPLIANCE MAINTENANCE

LEAVE IT TO THE EXPERTS. Only a qualified service technician has the training to install, inspect, service, maintain, and repair your appliances. Have your appliances and propane system inspected just before the start of each heating season.

HELP YOUR APPLIANCES "BREATHE" Check the vents of your appliances to be sure that flue gases can flow easily to the outdoors; clear away any insect or bird nests or other debris. Also, clear the area around your appliances so plenty of air can reach the burner for proper combustion.

DO NOT TRY TO MODIFY OR REPAIR valves, regulators, connectors, controls, or other appliance and cylinder/tank parts. Doing so creates the risk of a gas leak that can result in property damage, serious injury, or death.

HAVE OLDER APPLIANCE CONNECTORS INSPECTED. Certain older appliance connectors may crack or break, causing a gas leak. If you have an appliance that is more than 20 years old, have a qualified service technician inspect the connector. Do not do this yourself, as movement of the appliance might damage the connector and cause a leak.

FLAMMABLE VAPORS ARE A SAFETY HAZARD. The pilot light on your propane appliance can ignite vapors from gasoline, paint thinners, and other flammable liquids. Be sure to store flammable liquids outdoors or in an area of the building containing no propane appliances.

DON'T RISK IT! If you cannot operate any part of your propane system, or if you think an appliance or other device is not working right, call your propane retailer or qualified service technician for assistance.

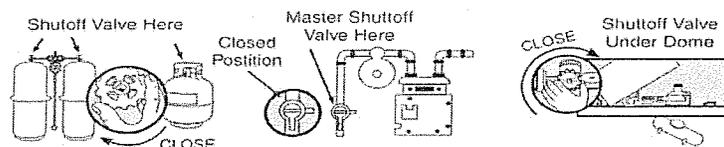
RUNNING OUT OF GAS

DON'T RUN OUT OF GAS. SERIOUS SAFETY HAZARDS, INCLUDING FIRE OR EXPLOSION, CAN RESULT.

- If an appliance valve or gas line is left open, a leak could occur when the system is recharged with propane.
- If your propane tank runs out of gas, any pilot lights on your appliances will go out. This can be extremely dangerous.
- A LEAK CHECK IS REQUIRED. In many states, a propane retailer or a qualified service technician must perform a leak check of your system before turning on the gas.

EQUIPMENT AWARENESS

KNOW HOW TO SHUT OFF YOUR GAS SUPPLY. Know where the gas supply shutoff valve to your premises valve is located. Tank and cylinder valves must be turned to the right (in a clockwise direction) to stop the flow of gas.



MANUFACTURER'S INSTRUCTIONS. All new appliances will come with an owner's manual and manufacturer's instructions. Keep and consult them for correct operating and maintenance procedures. Contact the appliance manufacturer for replacement instructions, if needed.

KNOW WHERE UNDERGROUND GAS LINES AND TANKS ARE LOCATED to avoid damaging them when digging or working on your premises.

DO NOT STORE PROPANE CYLINDERS OR CONTAINERS INSIDE BUILDINGS. Customer to make sure regulator remains protected so operation will not be affected by the elements (rain, sleet, snow, ice, mud, debris). Regulator vent should be pointed down and be checked regularly. Customer to make sure building openings are not created and sources of ignition are not installed within the area of propane tanks, regulators, meters or propane equipment.

BE PREPARED FOR WEATHER-RELATED EMERGENCIES

FLOODING – If a flood is predicted for your area or your gas-fired appliance(s) or equipment has been submerged due to flooding:

- Turn off the gas valve at the container or cylinder.
- DO NOT turn the gas back on until a qualified service technician has checked the system.

HEAVY SNOW OR ICE – Heavy accumulations of snow, ice or icicles falling from roof eaves on regulators, piping, tubing and valves may cause damage that could result in a gas leak. Regulator vents must remain clear of snow and ice to operate properly. Check the regulator vents on the propane system to be sure they are free of condensation, which if frozen, could cause a malfunction. If a regulator vent is clogged with ice or snow, contact Suburban Propane immediately. Appliance vents, chimneys and flues must be kept clear of snow and ice so appliances may vent properly, especially on roofs of mobile homes. Customer shall arrange for protection of regulators from the elements and, where applicable, for protection of piping, regulators, meters, etc. from the forces of accumulated snow/ice/icicles with a protective structure (contact your local building or fire official for guidance). When removing snow:

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- Use care around tanks, piping, tubing, valves, regulators and other equipment to prevent damage
- Use a broom instead of a shovel.
- Do not shovel snow from roofs onto propane equipment. The weight of the snow/ice/icicle could damage propane equipment causing a leak.

SAFE ACCESS

Provide structurally sound access to propane equipment free from snow, ice, debris or other obstructions.

In the event of an accidental release or spill out of doors, these actions should be taken: Evacuate immediate area. Eliminate all possible sources of ignition including heat, sparks and open flame. Provide maximum ventilation and shut off source(s) of leak if possible to do so safely. If cylinder or container is leaking, contact the nearest Suburban Propane supplier or local fire department. Never enter a vapor (white) cloud.

Release without fire: Use a “fogging” hose stream of water to break up and dissipate propane into the atmosphere. Stay uphill and upwind of release at all times.

Release with fire: Apply a direct stream of water to container in order to prevent overheating. Do not attempt to extinguish flame until source of leak is shut off. Water spray or “fog” should be used for adjacent areas and to dissipate liquid propane to atmosphere.

Extinguishing Media: Class B fire-extinguishing media such as Halon, CO₂, or dry chemical can be used. Water spray or fog is appropriate for surrounding areas. Do not extinguish flame until source of gas is shut off. Only those with specialized training should attempt fire fighting. For further information, refer to NPGA “Propane Emergencies” Text #7220.

| |
|---------------------------------------|
| SECTION 11 – OTHER INFORMATION |
|---------------------------------------|

Propane fired equipment may emit carbon monoxide in its flue gasses.

CARBON MONOXIDE AND YOUR SAFETY

WHAT IS CARBON MONOXIDE (CO)? You can’t taste or smell CO, but it is a very dangerous gas, produced when any fuel burns. High levels of CO can come from appliances that are not operating correctly, or from a venting system or chimney that becomes blocked.

CO CAN BE DEADLY! High levels of CO can make you dizzy or sick (see below). In extreme cases, CO can cause brain damage or death.

- Headache
- Dizziness
- Fatigue
- Shortness of breath
- Nausea

IF YOU SUSPECT CO IS PRESENT, ACT IMMEDIATELY!

1. If you or a family member shows physical symptoms of CO poisoning, get everyone out of the building and call 911 or your local fire department.
2. If it is safe to do so, open windows to allow entry of fresh air, and turn off any appliances you suspect may be releasing CO.
3. If no one has symptoms, but you suspect that CO is present, call your propane retailer or a qualified service technician to check CO levels and your propane equipment.

Item No. 1519278 SAF 5152 0109

TO HELP REDUCE THE RISK OF CO POISONING:

- Have a qualified service technician check your propane system appliances and related venting systems annually, preferably before heating season begins.
- Install UL-listed CO detectors on every level of your home.
- Never use a gas oven or range-top burners to provide space heating.
- Never use portable heaters indoors unless they are designed and approved for indoor use.
- Never use a barbecue grill (propane or charcoal) indoors for cooking or heating.
- Regularly check your appliance exhaust vents for blockage.

SIGNS OF IMPROPER APPLIANCE OPERATION THAT CAN GENERATE HIGH CO LEVELS:

- Sooting, especially on appliances and vents.
- Unfamiliar or burning odor.
- Increased moisture inside of windows.

FURTHER CONSUMER SAFETY INFORMATION

We urge you to visit www.suburbanpropane.com for Consumer Safety Information prepared by the Propane Education & Research Council (PERC). Pamphlets called "Important Propane Safety information for You and Your Family," "Important Propane Safety Information for Users of Small Cylinders" (including cylinder transportation, storage and inspection procedures), an expansive "Propane Safety" booklet, weather/natural disaster information, and Suburban's Material Safety Data Sheet (MSDS) may be read and downloaded online. These documents are also available free of charge by calling Suburban at 1-888-223-0029 and PERC pamphlets containing a Scratch and Sniff Test of propane odor can be purchased at 1-866-905-1075 or www.propanecatalog.com.

SECTION 12 –CONTACT INFORMATION

This Material Safety Data Sheet, issued January 2009, was prepared by Safety Services of Suburban Propane and supercedes September 2008.

For further information write to:
SUBURBAN PROPANE, L.P.
Safety Services
240 Route 10 West
P.O. Box 206
Whippany, NJ 07981-0206
Or call: (973) 887 – 5300

DISCLAIMER: The information contained in this document is believed to be correct at the time of writing. NO WARRANTY OF MERCHANTABILITY, SUITABILITY FOR ANY SPECIFIC PURPOSE, OR ANY ASPECT REGARDING ITS INTENDED USE OR THE EXPECTED RESULTS TO BE OBTAINED ARE EXPRESSED OR IMPLIED. This information and the product furnished is done so on condition that the person(s) receiving them shall make their own determination as to the suitability of the product for any specific purpose, and that they assume any and all risks associated with that use.

ATTACHMENT H – BULK FUEL TANK DELIVERY LOCATIONS



Bulk Fuel Tank
Locations.xls

To open the document, double click on the icon.

*If you are unable to access the above inserted file
once you have doubled clicked on the icon,
please contact Nevada State Purchasing at
srvpurch@admin.nv.gov for an emailed copy.*

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location: Service |
|-----------------------------------|--|--|--|---|-------------------------------------|--|----------|--------------------------|
| NDOC Facility Name | Address | Tank Size/Gal. | Fuel Type | Tanks Above or Below | Est. Annual Volume | Comments | County | Location |
| South | | | | | | | | |
| High Desert State Prison | 22010 Cold Creek Rd, Indian Springs 89070 | 30,000 30,000 30,000 30,000 1,000 | Diesel #2 Diesel #2 Diesel #2 Diesel #2 Propane | Above Above Above Above Above | 551,613 | The large tanks can only hold a max. of 20,000 gal. each due to support structure. | CLARK CO | Las Vegas |
| Southern Desert Correction Center | #1 Cold Creek Rd, Indian Springs 89070 | 4,000 2,000 40,000 1,000 1,000 1,000 1,000 1,000 1,000 500 500 | Unleaded Diesel #2 Diesel #2 Propane Propane Propane Propane Propane Propane Propane Propane | Below Below Above Above Above Above Above Above Above Above Above | 3,941 2,799 142,863 38,904 | Vehicles Vehicles Boiler Warehouse Warehouse Warehouse Warehouse | CLARK CO | Las Vegas |
| Three Lakes Valley, NDOC | 21055 Cold Creek Rd, Indian Springs 89070 | 1,000 | Propane | Above | 28,995 | | CLARK CO | Las Vegas |
| Conservation Camp NDOC | | 1,000 10,000 6,000 | Propane Diesel Unleaded | Above Above Above | | Part of Southern Desert | CLARK CO | Las Vegas |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location: Service |
|-------------------------------------|--|-----------------|-----------|-----------------------------|-------------------------|----------|------------|--------------------------|
| Boot Camp | | 1,000 | Propane | Above | Part of Southern Desert | Culinary | CLARK CO | Las Vegas |
| Jean Conservation Camp, NDOC | 3 Prison Road, Jean, 89019 | 1,000 | Propane | Above | | | CLARK CO | |
| | | 1,000 | Propane | Above | 309,952 | | | Las Vegas |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 5,000 | Diesel | Above | | | | |
| Southern Nevada Correctional Center | 1 Prison Road, Jean, 89019 | 2,000 | Diesel #2 | Above | | | CLARK CO | |
| | | 2,000 | Diesel #2 | Above | | | | Las Vegas |
| | | 2,000 | Diesel #2 | Above | | | | |
| | | 2,000 | Diesel #2 | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| Casa Grande | 3955 W. Russell Rd, Las Vegas, 89118 | No bulk fuel | | | | | CLARK CO | |
| Transitional Housing | | | | | | | | |
| Florence McClure Womens | 4370 Smiley Rd, North Las Vegas, 89115 | No bulk fuel | | | | | CLARK CO | |
| Correctional Center | | | | | | | | |
| Pioche Conservation Camp, NDOC | 1 Hardtimes Rd. Pioche, 89043 | 1,000 | Propane | Above | 83,343.00 | | LINCOLN CO | Ely Serv |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selec Location Servic | |
|-------------------------------------|--|-----------------|----------------|-----------------------------|--------------------------------|-------------------|-------------|-----------------------|--|
| North | | | | | | | | | |
| Northern Nevada Correctional Center | 1721 E. Snyder Ave, Carson City, 89702 | 5,000 | Red Dye Diesel | Below | 1,588.00 | Generator | CARSON CITY | | |
| | | 2,500 | Red Dye Diesel | Below | CLOSED | Medical Center | | | |
| | | 500 | Red Dye Diesel | Above | | Biomass | | | |
| Stewart Conservation Camp, NDOC | 1721 E. Snyder Ave, Carson City, 89702 | 1,000 | Propane | Above | Part of NN Correctional Center | | CARSON CITY | Sparks / | |
| | | 1,000 | Red Dye Diesel | Above | Paid by Prison Industries | Ranch | | | |
| Nevada State Prison | 3301 E. 5th Street, Carson City 89702 | 1,000 | Unleaded | Above | CLOSED | Vehicles | CARSON CITY | Sparks | |
| | | 3,000 | Diesel #2 | Above | | Generator | | | |
| | | 5,200 | Diesel #2 | Above | | Boilers | | | |
| | | 250 | Propane | Above | | Prison Industries | | | |
| Warm Springs | 3301 E. 5th Street, Carson City 89702 | No bulk fuel | | | | | CARSON CITY | | |
| Correctional Center | | | | | | | | | |
| North Nevada | 2595 E. Second Street, Reno 89502 | No bulk fuel | | | | | WASHOE CO | | |
| Restitution Center | | | | | | | | | |
| Lovelock Correctional Center | 1200 Prison Rd, Lovelock 89419 | 10,000 | Unleaded | Below | 4562 | Vehicles | PERSHING CO | | |
| | | 10,000 | Diesel #2 | Below | 704 | Vehicles | | | |
| | | 20,000 | Diesel #2 | Below | | Boilers | | | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location: Service |
|---------------------------------|--|-----------------|----------------|-----------------------------|--------------------|------------------|---------------|--------------------------|
| Humbolt Conservation Camp, NDOC | 8105 Conservation Rd., Winnemucca, 89446 | 1,000 | Propane | Above | 36,805 | | HUMBOLDT CO | ELKO PROPRANE |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 250 | Diesel #2 | Above | 272 | Vehicles | | |
| Carlin Conservation Camp, NDOC | 124 Suzie Creek Rd., Carlin, 89822 | | | | | | ELKO CO | |
| Wells Conservation Camp, NDOC | HC 67-50, Wells, 89835 | 1,000 | Propane | Above | 33,880 | | ELKO CO | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 1,000 | Propane | Above | | | | |
| | | 288 | Propane | Above | | | | |
| | | 288 | Propane | Above | | | | |
| Ely State Prison | 4569 N. State Rt. 490, Ely, 89301 | 20,000 | Diesel #2 | Below | 266,381 | | WHITE PINE CO | |
| | | 20,000 | Diesel #2 | Below | | | | |
| | | 10,000 | Blended Diesel | Below | 3,440 | 60/40 for Winter | | |
| | | 10,000 | Unleaded | Below | 10,899 | | | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location Service | |
|---------------------------------|--|-----------------|-----------|-----------------------------|--------------------|----------|---------------|-------------------------|--|
| Ely Conservation Camp, DOC | Horse & Cattle Camp Rd, Ely, 89301 | 1,000 | Propane | Above | | | WHITE PINE CO | Ely Servi | |
| | | 1,000 | Propane | Above | | | | | |
| | | 1,000 | Propane | Above | | | | | |
| | | 1,000 | Propane | Above | | | | | |
| | | 1,000 | Propane | Above | | 36,005 | | | |
| | | 500 | Propane | Above | | | | | |
| | | 288 | Propane | Above | | | | | |
| | | | | | | | | | |
| Tonopah Conservation Camp, NDOC | 100 Conservation Rd, Tonopah, 89049 | 1,000 | Propane | Above | 35,811 | | NYE CO | Ely | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location Service |
|----------------------------|--|---|---|---|--|-----------------|---------------|-------------------------|
| NDOT Location Names | | | | | | | | |
| | Address | Tank Size/Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | |
| District I | | | | | | | | |
| Alamo | US HWY 93, Milepost LN 40.9. Approximately 1 mile north of Alamo on east side of HWY. | 4,000 Gal. 4,000 Gal. 500 Gal. | Diesel Unleaded Propane | Above | 26504 24,114 21 | | LINCOLN CO | Las Vegas |
| Beatty | US HWY. 95, M.P. NY 60 | 10,000 Gal. 2,000 Gal. 500 Gal. | Diesel Unleaded Propane | Below Below Above | 19,597 6,978 691 | | NYE CO | Las Vegas |
| Big Smoky | On SR 376 at Milepost NY 53.3 approximately 60 miles north of Tonopah; | 2,000 Gal. 4,000 Gal. | Unleaded Diesel | Above Above | 1,829 13,432 | | ESMERALDA CO | |
| Blue Jay | US 6 at milepost NY 65.8. 60 miles east of Tonopah. | 10,000 Gal. 1,000 Gal | Diesel Unleaded | Below | 10,638 1,143 | | NYE CO | - Ely Las Vegas |
| Glendale | Near the Junction of I-15 and SR 168, Maintenance Station is at Milepost 0.1 on SR 168 | 8,000 Gal. 8,000 Gal. 500 Gal. | Diesel Unleaded Propane | Above | 20,635 22,680 1,869 | | CLARK CO | Las Vegas |
| Goldfield | US 95 Milepost ES 19.5 4th & South St.'s | 4,000 Gal. 2,000 Gal. | Diesel Unleaded | Above | 17,880 839 | | ESMERALDA CO | |
| Indian Springs | US 95. 1/4 mile South of McFarlin St. | 4,000 Gal. 1,000 Gal. | Diesel Unleaded | Above | 644 10,016 | | CLARK CO | Las Vegas |
| Las Vegas | 123 E. Washington Ave., LV | 10,000 Gal. 10,000 Gal. 10,000 Gal. 1,000 Gal. 3,000 Gal. | Diesel Unleaded Unleaded Propane Bio Diesel | Below Below Below Above Above | 87,848 153,777 153,777 42,995 43,151 | | CLARK CO | Las Vegas |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selected Location Service |
|------------------|--|--|----------------------------------|-----------------------------|-----------------------------|----------|------------|---------------------------|
| Las Vegas South | 6610 Ullum Drive, LV | 10,000 Gal. 15,000 Gal. 8,000 Gal. | Diesel Unleaded Bio Diesel | Below | 53,323 173,652 27,618 | | CLARK CO | |
| Mina | US 95 at milepost MI 15.7 | 4,000 Gal. 2,000 Gal. | Diesel Unleaded | Above Below | 12,972 711 | | MINERAL CO | |
| Montgomery Pass | US6 Milepost ES 8.3. 12 miles west of SR 360 jct. | 4,000 Gal. 2,000 Gal. | Diesel Unleaded | Above Above | 9,510 791 | | MINERAL CO | |
| Mountain Springs | US 50 Milepost CH 81.6. 57 miles east of Fallon. | 4,000 Gal. 1,000 Gal. | Diesel Unleaded | Above | 15,062 10,107 | | CLARK CO | |
| Mt. Charleston | SR157, Milepost CL 5.17, Approx 17 Miles West of US 95 | 4,000 Gal. 2,000 Gal. 500 Gal. | Diesel Unleaded Propane | Above | 28,244 16,926 25 | | CLARK CO | Las Vegas |
| Panaca | SR 319 (N Side) 1.7 MI E of US 93, Panaca | 10,000 Gal. 10,000 Gal. 500 Gal. | Diesel Unleaded Propane | Below Above Above | 25,219 13,976 316 | | LINCOLN CO | Ely service |
| Searchlight | SR 164, Milepost 18.46, Searchlight | 2,000 Gal. 4,000 Gal. 500 Gal. | Diesel Unleaded Propane | Above Above | 20,863 15,564 97 | | CLARK CO | Las Vegas |
| Tonopah | 805 Erie/Maine, Tonopah | 8,000 Gal. 8,000 Gal. | Diesel Unleaded | Above Above | 61,727 46,258 | | NYE CO | Ely service |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Select Location Service |
|--------------------|---|---|-------------------------------|-----------------------------|----------------------------|----------|---------------|-------------------------|
| District II | | | | | | | | |
| Carson City | Wright & Oregon, Carson City | 10,000 Gal. 10,000 Gal. 10,000 Gal. | Diesel Diesel Unleaded | Below | 37,960 37,960 68,781 | | CARSON CITY | |
| Carson Motor Pool | Oregon St Carson City | 10,000 Gal | Unleaded | Below | 72,557 | | CARSON CITY | |
| Cold Springs | US 50. Milepost CH 81.6. 57 miles east of Fallon. | 4,000 Gal. 1,000 Gal. | Diesel Unleaded | Above | 15,684 994 | | CHURCHILL CO. | |
| Fallon | 888 Harrington Rd., Fallon | 10,000 Gal. 5,000 Gal. | Diesel Unleaded | Below | 32,421 37,197 | | CHURCHILL CO. | |
| Fernley | 750 Old US HWY 40 West (Main St.) Fernely 89408 | 10,000 Gal. 2,000 Gal. 500 Gal. | Diesel Unleaded Propane | Above Below Above | 51,054 52,619 17 | | LYON CO | Sparks |
| Galena Creek | SR 431 Mile Post 18.2. 18350 Mt. Rose Highway | 2,000 Gal. | Diesel | Above | 14,776 | | WASHOE CO. | |
| Gardnerville | 1875 Dump Rd., Gardnerville 89410 | 8,000 Gal. 2,500 Gal. | Diesel Unleaded | Below | 23,139 4,210 | | DOUGLAS CO | |
| Hawthorne | 8th & M St., Hawthorne 89415 | 8,000 Gal. 4,000 Gal. | Diesel Unleaded | Below Above | 15,435 14,494 | | MINERAL CO | |
| Incline Village | Junction SR-28 & SR-431 | 10,000 Gal. 2,000 Gal. | Diesel Unleaded | Below | 10,857 6,499 | | WASHOE CO. | |
| Kingsbury | On logging Rd.; near top of grade on the lake side and runs north; 3 miles up HWY 2097 from the junction with HWY 203, Kingsbury. | 1,000 Gal. | Diesel | Above | 5,329 | | DOUGLAS CO | |
| Lovelock | 650 Grinnel Ave., Lovelock | 8,000 Gal. 4,000 Gal. | Diesel Unleaded | Below Above | 20,676 10,546 | | PERSHING CO | |
| Mount Rose | SR 431. Milepost WA 13.1 | 2,500 Gal. | Diesel | Below | 2,299 | | WASHOE CO. | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selec Location Servic |
|-----------------------|---|---|----------------------------------|-----------------------------|-----------------------------|----------|------------|-----------------------|
| Reno | 315 Galletti Way, Reno | 10,000 Gal. 3,000 Gal. No longer used | Diesel G Diesel Bio Diesel | Below Above | 112,750 14,808 22,056 | | WASHOE CO. | |
| Sparks | 310 Galletti Way, Sparks | 15,000 Gal. Removed 2,000 Gal | Unleaded Propane RFG | Below Above | 63,685 925 | | WASHOE CO. | |
| Spoooner | 2343 US 50, Milepost 12.0, Glenbrook | 4,000 Gal. 2,000 Gal. | Diesel Unleaded | Above | 17,155 4,529 | | DOUGLAS CO | |
| Virgina City | SR 342, MP 2.50 | 5,000 Gal. 2,000 Gal. | Diesel Unleaded | Below | 22,373 5,375 | | STOREY CO | |
| Wellington | SR 829, MP 3.00, Wellington | 8,000 Gal. 1,000 Gal. | Diesel Unleaded | Below | 10,782 494 | | LYON CO | |
| Yerington | 306 North Main St. | 8,000 Gal. | Diesel | Below | 10,784 | | LYON CO | |
| Nevada Highway Patrol | 357 Hammill Ln., Reno | 10,000 Gal. | Unleaded | Below | 106,901 | | WASHOE CO | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selec Location Service |
|------------------------|---|----------------------------|--------------------|-----------------------------|--------------------|---|----------------|------------------------|
| District III | | | | | | | | |
| Austin | JCT. of SR-305 & US-50 | 10,000 Gal. 10,000 Gal. | Diesel Unleaded | Below | 26,024 10,802 | 70/30 or Additive from Oct. thru April | LANDER CO | Ely Servi. |
| Baker | On US 6, Milepost W/P 91.34, 50 Miles East of Ely | 2,000 Gal | Diesel | Above | 1,302 | | WHITE PINE CO. | |
| Battle Mountain | 350 East 4th St., Battle Mountain | 4,000 Gal. 4,000 Gal. | Diesel Unleaded | Above | 24,882 20,449 | 70/30 or Additive from Oct. thru April | LANDER CO | |
| Contact (775) 755-2204 | US 93. Milepost EL 94.6 North of Wells. | 2,000 Gal. 1,000 Gal. | Diesel Unleaded | Above | 9,644 2,773 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Currie | US 93 Milepost EL 11.8 | 2,000 Gal. 1,000 Gal. | Diesel Unleaded | Below Above | 8,307 606 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Elko | 1951 Idaho St., Elko | 12,000 Gal. 10,000 Gal. | Diesel Unleaded | Below | 69,422 101,390 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Ely | 1401 Avenue F, Ely | 10,000 Gal. 10,000 Gal. | Diesel Unleaded | Below | 67,632 58,361 | 70/30 or Additive from Oct. thru April | WHITE PINE CO | Ely Service |
| Emigrant Pass | I-80 Exit 268. Milepost EU 16.7. Approx 10 miles West of Carlin. | 8,000 Gal. | Unleaded | Below | 13,452 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Eureka | US 50 at Milepost EU- 36.74, Eureka | 8,000 Gal. 4,000 Gal. | Diesel Unleaded | Below Above | 31,744 14,485 | 70/30 or Additive from Oct. thru April | EUREKA CO | Ely Service |
| Independence | ST 226, Milepost EL 19.5, on East side of SR 226, 45.5 Miles North of Elko | 2,000 Gal. 500 Gal. | Diesel Unleaded | Above | 3,513 1,673 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Lund | SR 318, Milepost WP 11.9, Approximately One Mile North of Town Site, SR 318 North Main, Lund | 4,000 Gal. 1,000 Gal. | Diesel Unleaded | Above | 15,955 7,100 | 70/30 or Additive from Oct. thru April | WHITE PINE CO | Ely Servi |
| North Fork | SR 225. Milepost EL 77.8. 55 mile north of Elko. | 8,000 Gal. 2,000 Gal. | Diesel Unleaded | Below Below | 10,764 1,464 | 70/30 or Additive from Oct. thru April | ELKO CO | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selec Location Servic |
|--------------------------------------|--|----------------------------|--------------------|------------------------------------|---------------------------|--|---------------|-----------------------|
| Orovada | U.S. 95 M.P. 43.72 | 8,000 Gal. 2,000 Gal. | Diesel Unleaded | Below | 23,185 10,124 | 70/30 or Additive from Oct. thru April | HUMBOLDT CO | |
| Pequop | IR-80, Exit 376, Milepost EL 98.6 on South side of IR 80, 24.6 Miles East of Wells | 1,000 Gal. | Diesel | Above | 2,112 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Quinn River | SR-140, M.P. 51.85, Denio | 8,000 Gal. 2,000 Gal. | Diesel Unleaded | Below | 15,314 3,133 | 70/30 or Additive from Oct. thru April | HUMBOLDT CO | |
| Ruby Valley | SR 229 Milepost EL 35.4. Approx. 11 miles West of US 93 | 8,000 Gal. 5,000 Gal. | Diesel Unleaded | Below | 16,137 2,386 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Wells | Wells Ave. & Fourth St. (NW Corner), Wells | 10,000 Gal. 8,000 Gal. | Diesel Unleaded | Below | 47,345 26,699 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Wendover | FR 459 MP 5 (N Side of I-80), Wendover | 10,000 Gal. 10,000 Gal. | Diesel Unleaded | Below | 22,806 18,328 | 70/30 or Additive from Oct. thru April | ELKO CO | |
| Winnemucca | 725 W 4th St., Winnemucca | 10,000 Gal. 12,000 Gal. | Unleaded Diesel | Below Below | 49,546 58,118 | 70/30 or Additive from Oct. thru April | HUMBOLDT CO | |
| Nevada Department of Forestry | Address | Tank Size/Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | |
| NDF Air Operations | 2301 Firebrand Circle, Minden | 6,000 Gal. 6,000 Gal. | Jet-A | Above | 25,000 | | DOUGLAS CO | |

| Locations | Address | Tank Size/ Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | Selec Location Servic |
|--|--|--------------------------|-----------------|-----------------------------|--------------------|----------|---------------|-----------------------|
| Conservation Camps | Address | Tank Size/Gal. | Fuel Type | Tanks Above or Below Ground | Est. Annual Volume | Comments | County | |
| Eastern Sierra (Stewart) Conservation Camp | 1721 E. Snyder Ave, Carson City, 89702 | 1,500 Gal. | Diesel Unleaded | Above | 21,000 | | CARSON CITY | |
| Humboldt Conservation Camp | 8105 Conservation Rd., Winnemucca, 89446 | 2,000 Gal. | Diesel | Above | 15,000 | | HUMBOLDT CO | |
| Carlin Conservation Camp | 124 Suzie Creek Rd., Carlin, 89822 | 1,500 Gal. 500 Gal. | Diesel Unleaded | Above | 15,000 600 | | ELKO CO | |
| Wells Conservation Camp | HC 67-50 Wells, 89835 | 2,000 Gal. | Diesel | Above | 7,800 | | ELKO CO | |
| Ely Conservation Camp | Horse & Cattle Camp Rd, Ely, 89301 | 2,000 Gal. | Diesel | Above | 13,000 | | WHITE PINE CO | |
| Ely Shop | Horse & Cattle Camp Rd, Ely, 89301 | 1,000 Gal. (x3) | Propane | Above | 7,000 | | WHITE PINE CO | Ely service |
| Tonopah Conservation Camp | 100 Conservation Rd, Tonopah, 89049 | 2,000 Gal. 500 Gal. | Diesel Unleaded | Above | 15,000 300 | | NYE CO | |
| Pioche Conservation Camp | 1 Hardtimes Rd. Pioche, 89043 | 1,000 Gal. 500 Gal. | Diesel Unleaded | Above | 13,000 3,000 | | LINCOLN CO | |
| East Lake Conservation | 885 East Lake Blvd. Washoe Valley, 89704 | 2,000 Gal. 2,000 Gal. | Diesel Unleaded | Above Above | 8,000 2,000 | | WASHOE CO | |
| Elko Conservation Camp | 911 Falcon Way, Elko, 89822 | 2,000 Gal. 2,000 Gal. | Diesel Unleaded | Above Above | 10,000 2,000 | | ELKO CO | |
| Mason Valley Fish Hatchery | 50 Hatchery Way, Yerington | 8,000 Gal. | Diesel | Below | 12,000 | | Lyon CO | |

- 5.1.1.1 Reporting Month
- 5.1.1.2 Ordering Agency
- 5.1.1.3 Delivery Date
- 5.1.1.4 Description of Fuel
- 5.1.1.5 Gallons Ordered
- 5.1.1.6 Unit Price per Gallon
- 5.1.1.7 Applicable Taxes
- 5.1.1.8 Additional Fees, if applicable
- 5.1.1.9 Total Invoice Amount

5.1.2 Reports are to be submitted to the Purchasing Division, Attn: Nancy Feser, via email at nfeser@admin.nv.gov.

6. COMPANY BACKGROUND AND REFERENCES

6.1 VENDOR INFORMATION

6.1.1 Vendors must provide a company profile in the table format below.

| Question | Response |
|--|---|
| Company name: | Suburban Propane, L.P. |
| Ownership (sole proprietor, partnership, etc.): | Limited Partnership |
| State of incorporation: | Delaware |
| Date of incorporation: | 11/19/95 as Limited Partnership |
| # of years in business: | 84 years (established 1928) |
| List of top officers: | Michael J. Dunn, Jr. ~ CEO Michael Stivala ~ CFO |
| Location of company headquarters: | 240 Route 10 West Whippany, NJ 07981 |
| Location(s) of the company offices: | 4 in NV ~ over 400 nationally |
| Location(s) of the office that will provide the services described in this RFQ: | Sparks, NV; Elko, NV; Ely, NV; Las Vegas, NV |
| Number of employees locally with the expertise to support the requirements identified in this RFQ: | 33 |
| Number of employees nationally with the expertise to support the requirements in this RFQ: | N/A ~ service to be provided only in NV |
| Location(s) from which employees will be assigned for this project: | Sparks, NV; Elko, NV; Ely, NV; Las Vegas, NV |

6.1.2 **Please be advised**, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state must register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.

6.1.3 The selected vendor, prior to doing business in the State of Nevada, must be appropriately licensed by the State of Nevada, Secretary of State's Office

pursuant to NRS76. Information regarding the Nevada Business License can be located at <http://sos.state.nv.us>.

| Question | Response |
|---------------------------------|----------------------|
| Nevada Business License Number: | NV19961040108 |
| Legal Entity Name: | Suburban Propane, LP |

Is "Legal Entity Name" the same name as vendor is doing business as?

| | | | |
|-----|---|----|--|
| Yes | X | No | |
|-----|---|----|--|

If "No", provide explanation.

6.1.4 Vendors are cautioned that some services may contain licensing requirement(s). Vendors shall be proactive in verification of these requirements prior to proposal submittal. Proposals that do not contain the requisite licensure may be deemed non-responsive.

6.1.5 Has the vendor ever been engaged under contract by any State of Nevada agency?

| | | | |
|-----|--|----|---|
| Yes | | No | X |
|-----|--|----|---|

If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.

| Question | Response |
|-------------------------------------|----------|
| Name of State agency: | |
| State agency contact name: | |
| Dates when services were performed: | |
| Type of duties performed: | |
| Total dollar value of the contract: | |

6.1.6 Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?

| | | | |
|-----|--|----|---|
| Yes | | No | X |
|-----|--|----|---|

If "Yes", please explain when the employee is planning to render services, while on annual leave, compensatory time, or on their own time?

If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person will be performing or producing the services which you will be contracted to provide under this contract, you must disclose the identity of each such person in your response to this RFQ, and specify the services that each person will be expected to perform.

6.1.9 Company background/history and why vendor is qualified to provide the services described in this RFQ. Limit response to no more than five (5) pages.
Suburban Propane has been in the business of supplying and delivering propane to end user customers since 1928. We have been doing this in the State of Nevada for over 50 years under either the current Suburban name or predecessor companies, including but not limited to VanGas, H&R Propane, and Turner Gas. We are a full-service propane company with reliable 24/7 emergency service. Our after-hours Call Center is staffed with knowledgeable and trained Suburban employees, not a message machine, pager, or answering service. We are proud of our excellent safety record that is possible through extensive and thorough training of our employees and strict adherence to all

6.1.7 Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor’s ability to perform or fulfill its obligations if a contract is awarded as a result of this RFQ must also be disclosed. Does any of the above apply to your company?

| | | | |
|-----|--|----|---|
| Yes | | No | X |
|-----|--|----|---|

If “Yes”, please provide the following information. Table can be duplicated for each issue being identified.

| Question | Response | |
|---|----------|-------------|
| Date of alleged contract failure or breach: | | |
| Parties involved: | | |
| Description of the contract failure, contract breach, or litigation, including the products or services involved: | | |
| Amount in controversy: | | |
| Resolution or current status of the dispute: | | |
| If the matter has resulted in a court case: | Court | Case Number |
| Status of the litigation: | | |

6.1.8 Vendors must review the insurance requirements specified in ***Attachment E, Insurance Schedule for RFQ 3064***. Does your organization currently have or will your organization be able to provide the insurance requirements as specified in ***Attachment E***.

| | | | |
|-----|---|----|--|
| Yes | X | No | |
|-----|---|----|--|

Any exceptions and/or assumptions to the insurance requirements ***must*** be identified on ***Attachment B, Technical Proposal Certification of Compliance with Terms and Conditions of RFP***. Exceptions and/or assumptions will be taken into consideration as part of the evaluation process; however, vendors must be specific. If vendors do not specify any exceptions and/or assumptions at time of proposal submission, the State will not consider any additional exceptions and/or assumptions during negotiations.

Upon contract award, the successful vendor ***must*** provide the Certificate of Insurance identifying the coverages as specified in ***Attachment E, Insurance Schedule for RFP 3064***.

- 6.2.1.3 Vendors must describe the methodology, processes and tools utilized for:
- A. Selecting and qualifying appropriate subcontractors for the project/contract;
 - B. Ensuring subcontractor compliance with the overall performance objectives for the project;
 - C. Ensuring that subcontractor deliverables meet the quality objectives of the project/contract; and
 - D. Providing proof of payment to any subcontractor(s) used for this project/contract, if requested by the State. Proposal should include a plan by which, at the State's request, the State will be notified of such payments.
- 6.2.1.4 Provide the same information for any proposed subcontractors as requested in **Section 6.1, Vendor Information**.
- 6.2.1.5 Business references as specified in **Section 6.3, Business References** must be provided for any proposed subcontractors.
- 6.2.1.6 Vendor shall not allow any subcontractor to commence work until all insurance required of the subcontractor is provided to the vendor.
- 6.2.1.7 Vendor must notify the using agency of the intended use of any subcontractors not identified within their original proposal and provide the information originally requested in the RFQ in **Section 6.2, Subcontractor Information**. The vendor must receive agency approval prior to subcontractor commencing work.

6.3 BUSINESS REFERENCES

- 6.3.1 Vendors should provide a minimum of three (3) business references from similar projects performed for private, state and/or large local government clients within the last three (3) years.
- 6.3.2 Vendors must provide the following information for every business reference provided by the vendor and/or subcontractor:

The "Company Name" must be the name of the proposing vendor or the vendor's proposed subcontractor.

| | | | |
|--|------------------|--|----------------------|
| Reference #: | 1 and 2 | | |
| Company Name: | Suburban Propane | | |
| Identify role company will have for this RFQ project (check one): | | | |
| X | VENDOR | | SUBCONTRACTOR |

| | |
|--|--------------------------------|
| Project Name: | |
| Reference 1 ~ Primary Contact Information | |
| Name: | Garden Shop Nursery ~ Ed |
| Street Address: | |
| City, State, Zip | |
| Phone, including area code: | 775-825-3527 |
| Facsimile, including area code: | 775-825-6586 |
| Email address: | |
| Reference 2 ~ Primary Contact Information | |
| Name: | Round Mountain Gold ~ Ken Hall |
| Street Address: | |
| City, State, Zip | |
| Phone, including area code: | 775-377-3189 |
| Facsimile, including area code: | |
| Email address: | Ken.hall@kinross.com |

- 6.3.3 Vendors must also submit *Attachment F, Reference Questionnaire* to the business references that are identified in *Section 6.3.2*.
- 6.3.4 The company identified as the business references must submit the Reference Questionnaire directly to the Purchasing Division.
- 6.3.5 It is the vendor's responsibility to ensure that completed forms are received by the Purchasing Division on or before the deadline as specified in *Section 11, RFQ Timeline* for inclusion in the evaluation process. Reference Questionnaires not received, or not complete, may adversely affect the vendor's score in the evaluation process.
- 6.3.6 The State reserves the right to contact and verify any and all references listed regarding the quality and degree of satisfaction for such performance.

7. COST

- 7.1 As needed, using agencies will obtain quotes from all contracted vendors in the region in which purchase is to be made.
- 7.2 Purchase will be made with consideration of lowest cost and availability of fuel delivery.
- 7.3 Cost of fuel and any additional fees must be provided to the using agency at time quotes are requested. **Any fees not disclosed at time of quote will not be paid.**

8. FINANCIAL

8.1 PAYMENT

Upon review and acceptance by the State of invoice, payments for invoices will be made within 10-15 days of receipt, providing all required information, documents and/or attachments have been received.

6.1.9 Company background/history and why vendor is qualified to provide the services described in this RFQ. Limit response to no more than five (5) pages.
Suburban Propane has been in the business of supplying and delivering propane to end user customers since 1928. We have been doing this in the State of Nevada for over 50 years under either the current Suburban name or predecessor companies, including but not limited to VanGas, H&R Propane, and Turner Gas. We are a full-service propane company with reliable 24/7 emergency service. Our after-hours Call Center is staffed with knowledgeable and trained Suburban employees, not a message machine, pager, or answering service. We are proud of our excellent safety record that is possible through extensive and thorough training of our employees and strict adherence to all applicable local, State and Federal laws, codes, and regulations.

6.1.10 Length of time vendor has been providing services described in this RFQ to the public and/or private sector. Please provide a brief description.
See response to 6.1.9

6.1.11 Financial information and documentation to be included in Part III, Confidential Financial of vendor's response in accordance with *Section 12.4, Part II – Confidential Financial.*

6.1.11.1 Dun and Bradstreet Number ~ 93-924-1584

6.1.11.2 Federal Tax Identification Number ~ 22-3410352

6.2 SUBCONTRACTOR INFORMATION

6.2.1 Does this proposal include the use of subcontractors, excluding the use of common carriers registered with a valid SCAC?

| | | | |
|-----|--|----|---|
| Yes | | No | X |
|-----|--|----|---|

If "Yes", vendor must:

6.2.1.1 Identify specific subcontractors and the specific requirements of this RFQ for which each proposed subcontractor will perform services.

6.2.1.2 If any tasks are to be completed by subcontractor(s), vendors must:

A. Describe the relevant contractual arrangements;

B. Describe how the work of any subcontractor(s) will be supervised, channels of communication will be maintained and compliance with contract terms assured; and

C. Describe your previous experience with subcontractor(s).

ATTACHMENT G – STATE OF NEVADA REGISTRATION SUBSTITUTE IRS FROM W-9

The completed form must be included in *Tab II, Financial Information and Documentation* of the *Part III – Confidential Financial* proposal submittal.



KTLVEN-05
Registration.doc

To open the document, double click on the icon.

*If you are unable to access the above inserted file
once you have doubled clicked on the icon,
please contact Nevada State Purchasing at
srvpurch@admin.nv.gov for an emailed copy.*

**STATE OF NEVADA
VENDOR REGISTRATION**



Mail or fax to:
STATE PURCHASING
 515 E MUSSER ST STE 300
 CARSON CITY NV 89701
PHONE: 775/684-0187
FAX: 775/684-0188

All sections are mandatory and require completion. IRS Form W-9 will not be accepted in lieu of this form.

1. NAME For proprietorship, provide proprietor's name in first box and DBA in second box.

| | |
|--|-------------------------|
| Legal Business Name, Proprietor's Name or Individual's Name Suburban Propane, L.P. | Doing Business As (DBA) |
|--|-------------------------|

2. ADDRESS/CONTACT INFORMATION

| | | | | | |
|--|--------------------|--------------------------|--|-----------------------------------|--------------------------|
| Address A – Physical address of <input checked="" type="checkbox"/> Company Headquarters <input type="checkbox"/> Individual's Residence Is this a US Post Office deliverable address? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | Address B <input checked="" type="checkbox"/> Additional Remittance – PO Box, Lockbox or another physical location. | | |
| Address 240 Route 10 | | | Address 1499 SE Tech Center Place Ste 130 | | |
| Address P O Box 206 | | | Address | | |
| City Whippany | State NJ | Zip Code 07981 | City Vancouver | State WA | Zip Code 98683 |
| E-mail Address | | | E-mail Address jboyd@suburbanpropane.com | | |
| Phone Number | Fax Number | | Phone Number 360-597-0671 | Fax Number 360-253-8199 | |
| Primary Contact | | | Primary Contact Jeff Boyd, General Manager | | |

3. ORGANIZATION TYPE AND TAX IDENTIFICATION NUMBER (TIN) Check only **one** organization type and supply the applicable Social Security Number (SSN) or Employee Identification Number (EIN). For proprietorship, provide SSN or EIN, not both.

| | | |
|---|--|---|
| <input type="checkbox"/> Individual (SSN) | <input type="checkbox"/> LLC tax classification: | SSN |
| <input type="checkbox"/> Sole Proprietorship (SSN or EIN) | <input type="checkbox"/> Disregarded Entity | Name associated with SSN: |
| <input checked="" type="checkbox"/> Partnership (EIN) | <input checked="" type="checkbox"/> Partnership | EIN 22-23410352 |
| <input type="checkbox"/> Corporation (EIN) | <input type="checkbox"/> Corporation | New TIN? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – Provide previous TIN & effective date. |
| <input type="checkbox"/> Government (EIN) | | Previous TIN: _____ Date: _____ |
| <input type="checkbox"/> Tax Exempt/Nonprofit (EIN) | | |
| <input type="checkbox"/> Trust/estate (SSN or EIN) | | |

OTHER INFORMATION Check all that apply.

| | | |
|---|---|---|
| <input type="checkbox"/> Doctor or Medical Facility | <input type="checkbox"/> In-State (Nevada) | <input checked="" type="checkbox"/> Nevada Business License Number: NV19961040108 |
| <input type="checkbox"/> Attorney or Legal Facility | <input type="checkbox"/> DBE Certificate #: | |

4. ELECTRONIC FUNDS TRANSFER Per NRS 227, payment to all payees of the State of Nevada will be electronic. Complete the following information **AND** provide a copy of a voided imprinted check for the account. If there are no checks for the account, restate the bank information on company letterhead. Individuals may provide a signed letter. **A deposit slip will not be accepted.** For a savings account, provide a signed letter with the bank information. Information on this form and the support documentation **must match.** Allow 10 working days for activation.

| | | |
|---|--|---|
| The information is for address <input type="checkbox"/> A <input type="checkbox"/> B <input checked="" type="checkbox"/> Both | | |
| Bank Name JP Morgan Chase | Bank Account Type <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings | Provide an e-mail address for receiving Direct Deposit Remittance Advices. treasurydept@suburbanpropane.com |
| Transit Routing Number 021000021 | Bank Account Number 323204554 | |

Do not have a bank account.

5. IRS FORM W-9 CERTIFICATION AND SIGNATURE

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, **and**
- I am a U.S. citizen or other U.S. person (as defined by IRS Form W-9 rev January 2011).

Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

| | | |
|-------------------------------|--|------------------------|
| Signature <i>J.S. Boyd</i> | Print Name & Title of Person Signing Form <i>JEFF BOYD, GEN. MGR.</i> | Date <i>10-8-13</i> |
|-------------------------------|--|------------------------|

| | | | |
|---|---|--|--|
| FOR STATE CONTROLLER'S OFFICE USE ONLY | | Name of State agency contact & phone number: | |
| Primary 1099 Vendor <input type="checkbox"/> | 1099 Indicator <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Entered By | Date | Comments | |

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Registration Instructions

General Instructions:

1. The substitute IRS Form W-9 is for the use of United States entities only. Non-US entities must submit an IRS Form W-8.
2. Type or legibly print all information except for signature.
3. All sections are mandatory and require completion.

Specific Information:

1. NAME

- a. Partnership, Corporation, Government or Nonprofit – Enter legal business name as registered with the Internal Revenue Service (IRS) in first box. If the company operates under another name, provide it in the second box.
- b. Proprietorship – Enter the proprietor's name in the first box and the business name (DBA) in the second box.
- c. Individual – Name must be as registered with the Social Security Administration (SSA) for the Social Security number (SSN) listed in Section 3.

2. ADDRESS/CONTACT INFORMATION

- a. Address A – *If the address is non-deliverable by the United States Postal Service, complete both Address A and B sections.*
Company – Provide physical location of company headquarters.
Individual – Provide physical location of residence.
E-mail – Provide complete e-mail address when available.
Telephone Number – Include area code.
Fax Number – Include area code.
Primary Contact – Person (and phone number or extension) to be contacted for payment-related questions or issues.

- b. Address B – Provide additional remittance address and related information when appropriate.

3. ORGANIZATION TYPE AND TAX IDENTIFICATION NUMBER (TIN)

- a. Individual – A person that has no association with a business.
- b. Proprietorship – A business owned by one person.
- c. Partnership – A business with more than one owner and not a corporation.
- d. Corporation – A business that may have many owners with each owner liable only for the amount of his investment in the business.
- e. LLC – Limited Liability Company. **Must mark appropriate classification – disregarded entity, partnership or corporation.**
- f. Government – The federal government, a state or local government, or instrumentality, agency, or subdivision thereof.
- g. Tax Exempt/Nonprofit – Organization exempt from federal income tax under section 501(a) or 501(c)(3) of the Internal Revenue Code.
- h. Doctor or Medical Facility – Person or facility related to practice of medicine.
- i. Attorney or Legal Facility – Person or facility related to practice of law.
- j. In-state – Nevada entity.
- k. Disadvantaged Business Enterprise (DBE) – A small business enterprise that is at least 51% owned and controlled by one or more socially and economically disadvantaged individuals. **Provide certification number.** See <http://www.nevadadbe.com> for certification information.
- l. Nevada Business License number – Current NV business license number which was issued by the NV Secretary of State.
- m. The Taxpayer Identification Number (TIN) is always a 9-digit number. It will be a Social Security Number (SSN) assigned to an individual by the SSA or an Employer Identification Number (EIN) assigned to a business or other entity by the IRS.
Per the IRS, use the owner's social security number for a proprietorship.

4. ELECTRONIC FUNDS TRANSFER

Per NRS 227, payment to all payees of the State of Nevada will be electronic. Provide a copy of a voided imprinted check or restate bank information on letterhead. **A deposit slip will not be accepted.** Information on this form and the support documentation **must match.**

- a. Bank Name – The name of the bank where account is held.
- b. Bank Account Type – Indicate whether the account is checking or savings.
- c. Transit Routing Number – Enter the 9-digit Transit Routing Number.
- d. Bank Account Number – Enter bank account number.
- e. Direct Deposit Remittance Advice – Direct Deposit Remittance Advices are sent via e-mail when possible. Companies should provide an address that will not change, i.e. accounting@business.com.

5. IRS FORM W-9 CERTIFICATION AND SIGNATURE

- a. The Certification is copied from IRS Form W-9 (rev. January 2011). See IRS Form W-9 for further information.
- b. The Signature should be provided by the individual, owner, officer, legal representative or other authorized person of the entity listed on the form.
- c. Print the name and title, when applicable, of the person signing the form.
- d. Enter the date the form was signed. Forms over three years old will not be processed.

Do not complete any remaining areas. They are for State of Nevada use only.

Mail or Fax signed form to:

NEVADA STATE PURCHASING
515 E MUSSER ST STE 300
CARSON CITY NV 89701
Fax: 775/684-0188

Sending to any other location will delay processing.

Questions can be directed to 775/684-0187