LP Delivery Plans for the Barron Farmers Union Co-op

We have two plans of delivery that we offer. Please choose one of these plans for each tank location and return to our office.

Automatic Delivery Plan:
This is the plan we recommend. It allows the Co-op to schedule our deliveries for the best efficiency and cost savings. These savings are reflected in lower prices to you. We will deliver fuel to you on a schedule that fits our routing best and keeps you with an adequate and safe supply on hand. This program is available to all customers who comply with our credit policy. Not following our credit policy will result in cancellation of service with no further notice.

If supplemental heating changes occur, such as wood heat, or other changes in heating fuel use, such as adding or subtracting an LP appliance, the Co-op must be notified immediately. We will not be responsible for damages that occur if the Co-op is not notified of any changes affecting usage.

Please note: Not all fuel systems can be maintained on *AUTO FILL PLAN. WE PREFER THAT ALL PREPAY AND BUDGET PLAN PATRONS BE ON AUTO FILL PLAN. IF LP IS YOUR BACK-UP HEAT, WE WOULD PREFER YOU TO BE ON WILL-CALL.*

Will-Call Delivery Plan (WCP)
This plan depends upon you to monitor your fuel levels for home heating and calling in your order to us. The Co-op is not responsible if you run out of fuel. Since you will not be on a regular delivery route, your cost for fuel will be higher than the Auto Fill plan. A $60.00 service charge will be applicable if propane or fuel oil is delivered after hours, weekends, and holidays. A FIVE DAY NOTICE IS REQUIRED FOR DELIVERY TO AVOID A SPECIAL DELIVERY CHARGE. A special delivery charge will apply to immediate deliveries made outside made outside of that day's route and same day deliveries or if the truck has already been in the area for the day. Minimum deliveries will be a fill or 200 gallons, whichever is less.

ADP	WCP	Tank Locations
☐	☐	House
☐	☐	Garage/Shed
☐	☐	Cabin
☐	☐	Milkhouse/Barn
☐	☐	Other _____

_____ _____
Patron's Signature Date Patron's Name (Please Print)

_____ _____
Mailing Address, City, State, Zip Telephone Number

_____ _____
Authorized Company Representative Date Account Number