KAUAI AUTOMATED FUELS NETWORK, INC. P.O. BOX 86, LIHUE, KAUAI, HAWAII 96766 PHONE: (808) 245-3366 FAX: (808) 246-1054

STATE OF HAWAII – FUEL SUPPLY CONTRACT

AGENCY APPLICATION

(Please print or type)

Contract Number: Eff	ective Da
Agency Name:	
Office Address: Pho	one/FAX
Contact Person on Kauai: Pho	one/FAX
Billing Address: Cit	y & Zip C
Contact Person for Billing: Pho	one/FAX
Responsible Person for ordering cards:	

Note: All personnel using Kauai Automated Fuels Network facilities are required to have been instructed on the proper use of the equipment, location of emergency shut off switch and location and use of fire extinguishers. It will be the sole responsibility of the agency to assure that any employee that is issued a card for access to the Kauai Automated Fuels Network facilities has received this training and acknowledges this information in writing. Any malfunction of equipment or observed problem is to be reported immediately to the main office (245-3366) during normal working hours, or (245-1911 or 245-2635) after hours and on weekends and holidays.

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STATE OF HAWAII

AUTOMATED FUEL FACILITIES OPERATING INSTRUCTIONS AND EMERGENCY PROCEDURES

The undersigned acknowledges that he/she has read the following instructions. and is responsible to provide training for others, who may utilize the card, in both operation and safety and to become familiar with the operation of Kauai Automated Fuels Network equipment at all locations that are to be utilized by customer and/or authorized card users.

THE FOLLOWING ARE ABSOLUTELY FORBIDDEN AT ALL KAFN SITES:

NO SMOKING, NO OPEN FLAMES, NO SPARKS, NO RUNNING MOTORS, AND NO FUELING INTO GLASS OR OPEN CONTAINERS.

NO ONE UNDER THE AGE OF 15, OR ANYONE WHO HAS NOT RECEIVED TRAINING IN THE OPERATION OF KAFN EQUIPMENT CAN BE ALLOWED TO OBTAIN FUEL FROM KAFN FACILITIES

(a) KAFN fueling equipment can be activated only by the insertion of a valid KAFN card in the console on the fueling island. The card must be inserted as indicated on the console, and the instructions on the screen must be followed. Ensure the card is not cracked, taped, or otherwise unserviceable before inserting it. Screen instructions require a response in a limited amount of time, otherwise you must insert card again and start over. You must press enter after entering the requested information, each time you enter information. For all State of Hawaii cards you must enter your personal ID number and the odometer reading before selecting the pump to be used. If card does not activate pump, call KAFN on the direct phone provided. Card may be deactivated if payment is overdue or card has been reported missing.

(b) Ensure vehicle is next to pump with its ENGINE OFF, and that you insert nozzle and know pump number before entering card and selecting pump. DO NOT TURN ON PUMP HANDLE UNTIL INSTRUCTED TO DO SO AFTER INSERTING CARD. After selection, you have a limited amount of time to turn on the pump handle and begin fueling before the system will reset. If the system resets you will be unable to fuel and must insert the card again and start over. YOU MUST STAY WITH THE NOZZLE WHILE FUELING. Do not attempt to put anything in the nozzle lever to keep it open. Do not allow anyone else to operate the nozzle - you will be held responsible for accidents. Do not "top off" your tank, allowing fuel to spill on the ground. <u>YOU ARE RESPONSIBLE FOR ANY</u> <u>SPILLS OCCURRING WHILE FUELING YOUR VEHICLE.</u>

(c) When fueling is completed, immediately return handle to the "**OFF**" position and hang up hose on pump. Make sure your gas cap is on. If you wish to obtain a receipt, insert your card at the console and the screen will ask you whether you want a receipt or not. Push "Y" and your receipt will be printed.

(d) If you have a SPILL, you must report it immediately by phone. If you do so, there will be no punishment; KAFN just wants to make sure it gets cleaned up quickly, and will respond and/or give you instructions. If you do not report a spill, KAFN can usually determine who was responsible through computer records, and may revoke your card. If you observe another customer spilling and not reporting it, we would appreciate a call, which will be kept confidential.

STATE OF HAWAII CARD INFORMATION

NOTE: All cards will be issued with the requirement for Miscellaneous and Mileage entry. It will require the operator to enter his personal ID number (up to 9 numbers) and the odometer reading of the vehicle before selecting the pump. Cards may be restricted as to type of fuel. (ie. Regular, Supreme, Diesel).

Card Vehicle ID Number License #	Pin / Security 4 digits	Fueltype Authorized	Odometer Reading	Issued to: Print Name and Initial
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FAX one copy of this form to our office (246-1054) and retain one for me. Have user initial receipt of card and acknowledge training on use of the card.