

**New York State Office of General Services
Procurement Services Group
Fuel Delivery Schedule - 05600 Gas**

Delivery Year: 2021 - 2023

State Agencies

Category: Gas

Albany

Delivery Point

NYS OGS - Fleet Admin. - Bldg. 18

Contact Information

Christian Jackstadt Tel 518-457-1744 Fax 518-457-7263 christian.jackstadt@ogs.ny.gov 05600

Delivery Location ID: 3087

Address

1220 Washington Ave.

City

Albany

Zip

12226

Filed Requirements for Fuel Type: GAS REG 159,784 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 10,000 | | VR |
| GAS REG | 1 | 10,000 | | VR |

NYS Thruway Authority - Albany Maint.

Contact Information

Jeff Webster Tel 518-436-3045 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 10301

Address

Interchange 23 Rte. 9w

City

Albany

Zip

12209

Filed Requirements for Fuel Type: GAS REG 150,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 6,000 | AG | VR |
| GAS REG | 1 | 2,000 | AG | VR |

Albany

Delivery Point

NYS Thruway Authority - Albany Sign Shop

Contact Information

Jeff Webster Tel 518-436-3043 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 2751

| Address | City | Zip |
|-------------------------------|------------------------------------|---------------------------|
| Interchange 23 Rte. 9w | Albany | 12209 |
| Filed Requirements for | Fuel Type: FLEX FUEL (E-85) | 45,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| FLEX FUEL (E-85) | 1 | 6,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

SUNY - University at Albany - Grounds Bldg.

Contact Information

Nancy Dame Tel 518-442-3450 Fax 518-437-4571 05600

Delivery Location ID: 3848

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 1400 Washington Ave. | Albany | 12222 |
| Filed Requirements for | Fuel Type: GAS REG | 57,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 8,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | |

| Fuel Type Subtotals | |
|----------------------------|----------------|
| FLEX FUEL (E-85) | 45,000 |
| GAS REG | 366,784 |
| Albany County Total | 411,784 |

Allegany

Delivery Point

SUNY - Alfred State College - Bus Garage

Contact Information

Rachel Brandow Tel 607-587-4755 Fax 607-587-3284 BrandoRE@alfredstate.edu 05600

Delivery Location ID: 43

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 244 | Alfred | 14802 |
| Filed Requirements for | Fuel Type: GAS REG | 9,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

SUNY - Alfred State College - Facilities Serv.

Contact Information

Rachel Brandow Tel 607-587-4755 Fax 607-587-3284 brandore@alfredstate.edu 05600

Delivery Location ID: 10624

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 10 Upper College Dr. | Alfred | 14802 |
| Filed Requirements for | Fuel Type: GAS REG | 20,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

SUNY - Alfred State College - Farm Complex

Contact Information

Rachel Brandow Tel 607-587-4755 Fax 607-587-3284 brandore@alfredstate.edu 05600

Delivery Location ID: 44

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 244 | Alfred | 14802 |
| Filed Requirements for | Fuel Type: GAS REG | 1,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 500 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

Allegany

Delivery Point

NYS DOT - F - Friendship - 61041

Contact Information

Site Manager Tel 585-973-2171 Fax 518-457-0413 05600

Delivery Location ID: 2655

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 14 South Branch St. | Friendship | 14739 |
| Filed Requirements for | Fuel Type: GAS REG | 8,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

SUNY - Alfred State College - Wellsville Vocational School

Contact Information

Rachel Brandow Tel 607-587-4755 Fax 607-587-3284 brandore@alfredstate.edu 05600

Delivery Location ID: 46

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Brooklyn Ave. | Wellsville | 14895 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 44,000 |
| Allegany County Total | 44,000 |

Broome

Delivery Point

NYS OPWDD - Broome DDSO

Contact Information

Tim Smith Tel 607-240-4647 Fax 607-770-0204 todd.harris@opwdd.ny.gov 05600

Delivery Location ID: 233

| Address | City | Zip |
|------------------|------------|-------|
| 249 Glenwood Rd. | Binghamton | 13905 |

Filed Requirements for Fuel Type: FLEX FUEL (E-85) 17,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| | | | | |

Filed Requirements for Fuel Type: GAS REG 120,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 6,000 | | |

NYS DOT - S/F - Castle Creek

Contact Information

Jim Massar Tel 607-775-0522 Fax 607-775-3801 tom.laskowski@dot.ny.gov 05600

Delivery Location ID: 8263

| Address | City | Zip |
|---------------|--------------|-------|
| I - 81 Exit 7 | Castle Creek | 13744 |

Filed Requirements for Fuel Type: GAS REG 13,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | | |

NYS OPRHP - Central Reg - Chenango Valley SP

Contact Information

Michael Boyle Tel 607-648-5251 Fax 607-648-8445 michael.boyle@parks.ny.gov 05600

Delivery Location ID: 3240

| Address | City | Zip |
|--------------------|----------------|-------|
| 153 State Park Rd. | Chenango Forks | 13746 |

Filed Requirements for Fuel Type: GAS REG 6,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

Broome

Delivery Point

NYS OPRHP - Central Reg - Chenango Valley SP - Golf Course

Contact Information

Larry Specchio Tel 607-648-5251 Fax 607-648-8445 larry.specchio@parks.ny.gov 05600

Delivery Location ID: 438

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 153 State Park Rd. | Chenango Forks | 13746 |
| Filed Requirements for | Fuel Type: GAS REG | 3,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

Johnson City Bus Garage

Contact Information

Delivery Location ID: 123554

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 144 East Maine Rd. | Johnson City | 13790 |
| Filed Requirements for | Fuel Type: GAS REG | 10,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| | | |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

NYS DOT - S/F - Port Crane Subresidency

Contact Information

Jim Massar Tel 607-775-0522 Fax 05600

Delivery Location ID: 2703

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 369 & Ballyhack Rd. | Port Crane | 13833 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

Broome

Delivery Point

| Fuel Type Subtotals | |
|----------------------------|----------------|
| FLEX FUEL (E-85) | 17,000 |
| GAS REG | 158,000 |
| Broome County Total | 175,000 |

Cattaraugus

Delivery Point

NYS DOT - F - Allegany Sub Res

Contact Information

Don Krotz Tel 716-373-2814 Fax 716-945-2620 05600

Delivery Location ID: 2890

Address

4220 Rte. 417

City

Allegany

Zip

14706

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Allegany Reg - Quaker SP - Maint. Center

Contact Information

JOHN DRY Tel 716-354-9101 x227 Fax 716-354-6725 john.dry@parks.ny.gov 05600

TODD Stewart Tel 716-354-2103 Fax todd.stewart@parks.ny.gov 05600

Delivery Location ID: 70006

Address

Asp Rte. 3

City

Salamanca

Zip

14779

Filed Requirements for Fuel Type: GAS REG 20,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Cattaraugus

Delivery Point

NYS OPRHP - Allegany Reg - Red House SP - Allegany Region

Contact Information

| | | | | |
|-------------|-----------------------|------------------|--------------------------|-------|
| JOHN DRY | Tel 716-354-9101 x227 | Fax 716-354-6725 | john.dry@parks.ny.gov | 05600 |
| JOHN SNYDER | Tel 716-354-9101 | Fax | john.snyder@parks.ny.gov | 05600 |
| Tim Okeefe | Tel 716-354-9101 | Fax | tim.okeefe@parks.ny.gov | 05600 |

new park manager of red house

Delivery Location ID: 62

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| Asp Rte. 1 | Salamanca | 14779 |
| Filed Requirements for | Fuel Type: GAS REG | 25,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | | |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

| | |
|---------------------------------|---------------|
| Fuel Type Subtotals | |
| GAS REG | 50,000 |
| Cattaraugus County Total | 50,000 |

Cayuga

Delivery Point

NYS DOCCS - Auburn CF - Front Garage

Contact Information

John Vanderpoel Tel 315-253-8401 Fax 315-253-8401 John.Vanderpoel@doccs.ny.gov 05600

Delivery Location ID: 9043

Address

135 State St.

City

Auburn

Zip

13021

Filed Requirements for Fuel Type: GAS REG 210,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,500

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - Auburn Sub HQ - 31021

Contact Information

Chris Covert Tel 315-539-3112 Fax 518-457-0413 05600

Delivery Location ID: 2495

Address

151 Dunning Ave.

City

Auburn

Zip

13021

Filed Requirements for Fuel Type: GAS REG 7,100 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

VaporRecovery (VR)

NYS OPRHP - Finger Lakes Reg - Fair Haven Beach SP - Maint Shop

Contact Information

Lisa Hendrick Tel 315-776-1775 Fax 315-947-6401 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 9090

Address

14985 Park Rd.

City

Fair Haven

Zip

13064

Filed Requirements for Fuel Type: GAS REG 6,782 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

Cayuga

Delivery Point

NYS DOCCS - Cayuga CF

Contact Information

Pamela Quill Tel 315-497-1110 x3100 Fax 315-497-1110 x3299 pamela.quill@doccs.ny.gov 05600

Delivery Location ID: 355

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 2202 State Rte. 38a | Moravia | 13118 |
| Filed Requirements for | Fuel Type: GAS REG | 26,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

NYS OPRHP - Finger Lakes Reg - Fillmore Glen SP

Contact Information

Jeff Zaia Tel 315-497-0130 Fax 315-497-0128 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 9188

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 1686 State Rte. 38 | Moravia | 13118 |
| Filed Requirements for | Fuel Type: GAS REG | 3,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 500 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | |

NYS Thruway Authority - Weedsport Maint.

Contact Information

Dan Fogarty Tel 315-834-3018 Fax melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 50018

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Exit 40, Mp 304. 19 | Weedsport | 13166 |
| Filed Requirements for | Fuel Type: GAS REG | 50,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

Cayuga

Delivery Point

| Fuel Type Subtotals | |
|----------------------------|----------------|
| GAS REG | 303,882 |
| Cayuga County Total | 303,882 |

Chautauqua

Delivery Point

NYS OPRHP - Allegany Reg - Long Point SP - Lake Chautauqua

Contact Information

| | | | | |
|----------------|-----------------------|------------------|-----------------------------|-------|
| John Dry | Tel 716-354-9101 x227 | Fax 716-354-6725 | john.dry@parks.ny.gov | 05600 |
| Marla Connelly | Tel 716-386-3165 x202 | Fax 716-386-4700 | marla.connelly@parks.ny.gov | 05600 |
| Thomas Ennis | Tel 716-386-2722 | Fax | thomas.ennis@parks.ny.gov | 05600 |

Delivery Location ID: 3150

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| 4459 Rte. 430 | Bemus Point | 14712 |
| Filed Requirements for | Fuel Type: GAS REG | 4,700 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 6,000 |
| | | <u>AboveGround (AG)</u> |
| | | VR |

NYS OPRHP - Allegany Reg - Midway SP

Contact Information

| | | | | |
|----------------|------------------|-----|-----------------------------|-------|
| Danielle Dewey | Tel 716-498-0329 | Fax | danielle.dewey@parks.ny.gov | 05600 |
|----------------|------------------|-----|-----------------------------|-------|

Delivery Location ID: 11310

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| 4859 State Rte. 430 | Bemus Point | 14712 |
| Filed Requirements for | Fuel Type: GAS REG | 850 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 500 |
| | | <u>AboveGround (AG)</u> |
| | | VR |

NYS DOCCS - Brocton - Lakeview SICF

Contact Information

| | | | | |
|--------------|------------------|------------------|---------------------------|-------|
| John Romanik | Tel 716-792-7100 | Fax 716-792-7100 | John.Romanik@doccs.ny.gov | 05600 |
|--------------|------------------|------------------|---------------------------|-------|

Delivery Location ID: 1870

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| 9300 Lake Ave. | Brocton | 14716 |
| Filed Requirements for | Fuel Type: GAS REG | 25,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |

Chautauqua

Delivery Point

NYS OPRHP - Allegany Reg - Lake Erie SP

Contact Information

| | | | | |
|--------------------|-----------------------|------------------|---------------------------------|-------|
| John Dry | Tel 716-354-9101 x227 | Fax 716-354-6725 | john.dry@parks.ny.gov | 05600 |
| Kristina Schoepfer | Tel 716-792-9216 | Fax | kristina.schoepfer@parks.ny.gov | 05600 |
| Marla Connelly | Tel 716-386-3165 | Fax 716-386-4700 | marla.connely@parks.ny.gov | 05600 |
| Rober Cash | Tel 716-792-9216 | Fax | robert.cash@parks.ny.gov | 05600 |

New park manager of Lake Erie

Delivery Location ID: 3149

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 5505 Rte. 5 | Brocton | 14716 |
| Filed Requirements for | Fuel Type: GAS REG | 2,700 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

SUNY - Fredonia - Garage Services Complex

Contact Information

| | | | | |
|--------------|------------------|------------------|---------------------------|-------|
| John Schmidt | Tel 716-673-3485 | Fax 716-673-4707 | john.schmidt@fredonia.edu | 05600 |
|--------------|------------------|------------------|---------------------------|-------|

Delivery Location ID: 3892

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| Ring Rd. | Fredonia | 14063 |
| Filed Requirements for | Fuel Type: GAS REG | 40,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,500 |
| | | <u>AboveGround (AG)</u> |
| | | <u>VaporRecovery (VR)</u> |

Chautauqua

Delivery Point

NYS DOT - S/F - Mayville - 52057

Contact Information

Eric Meka Tel 716-753-2821 Fax 518-457-0413 05600

Delivery Location ID: 2554

Address

109 East Chautauqua St.

City

Mayville

Zip

14757

Filed Requirements for Fuel Type: GAS REG 19,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS Thruway Authority - Silver Creek Maint.

Contact Information

Rodney Steger Tel 716-934-3362 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 50016

Address

Interchange #58 Mp 455. 5

City

Silver Creek

Zip

14136

Filed Requirements for Fuel Type: GAS REG 50,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

NYS Thruway Authority - Westfield Maint.

Contact Information

Randy Hardy Tel 716-326-2231 Fax melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 50019

Address

Interchange #60 Mp485

City

Westfield

Zip

14787

Filed Requirements for Fuel Type: GAS REG 45,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |
| GAS REG | 1 | 1,000 | AG | VR |

Chautauqua

Delivery Point

| Fuel Type Subtotals | |
|--------------------------------|----------------|
| GAS REG | 187,250 |
| Chautauqua County Total | 187,250 |

Chemung

Delivery Point

NYS DOCCS - Elmira CF

Contact Information

Robert Ruppel Tel 607-734-3901 x3950 Fax 607-734-3901 x3998 robert.ruppel@doccs.ny.gov 05600

Delivery Location ID: 50939

Address

1879 Davis St.

City

Elmira

Zip

14902-0500

Filed Requirements for Fuel Type: GAS REG 30,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Finger Lakes Reg - Newtown Battlefield SP - Res/Shop

Contact Information

Victoria Srnka Tel 607-379-7645 Fax Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 10126

Address

2346 County Rte. 60

City

Elmira

Zip

14901

Filed Requirements for Fuel Type: GAS REG 1,600 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)
 GAS REG 1 270 AG

NYS OPRHP - Finger Lakes Reg - Mark Twain SP - Soaring Eagles GC

Contact Information

Robert Jacobson Tel 607-739-0034 Fax 607-739-4524 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 2115

Address

201 Middle Rd.

City

Horseheads

Zip

14845

Filed Requirements for Fuel Type: GAS PREM 3,500 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Chemung

Delivery Point

NYS DOCCS - Southport CF - Garage #17

Contact Information

| | | | | |
|-------------|------------------------|------------------------|---------------------------|-------|
| Bruce Noyes | Tel 607-737-0850 | Fax 607-737-0850 x3299 | elise.speck@doccs.ny.gov | 05600 |
| Dave Morgan | Tel 607-737-0850 x3988 | Fax 607-737-0850 x3299 | david.morgan@doccs.ny.gov | 05600 |

Delivery Location ID: 9747

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 236 Bob Masia Dr. | Pine City | 14871 |
| Filed Requirements for | Fuel Type: GAS MID | 24,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS MID | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

NYS DOCCS - Southport CF - Power Plant Bldg. 23

Contact Information

Delivery Location ID: 3758

| | | |
|-------------------------------|------------------------------------|---------------------------|
| Address | City | Zip |
| 236 Bob Masia Dr. | Pine City | 14871 |
| Filed Requirements for | Fuel Type: FLEX FUEL (E-85) | 11,900 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| | | |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|-----------------------------|---------------|
| FLEX FUEL (E-85) | 11,900 |
| GAS MID | 24,000 |
| GAS PREM | 3,500 |
| GAS REG | 31,600 |
| Chemung County Total | 71,000 |

Chenango

Delivery Point

NYS DOT - S/F - Bainbridge - 92254

Contact Information

Mike Kranbuhl Tel 607-843-6884 Fax 518-457-0413 05600

Delivery Location ID: 2613

Address

4445 State Rte. 206

City

Bainbridge

Zip

13733

Filed Requirements for Fuel Type: GAS REG 8,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS DOT - S/F - Oxford - 92191

Contact Information

Mike Kranbuhl Tel 607-843-6884 Fax 518-457-0413 05600

Delivery Location ID: 2697

Address

State Rte. 12

City

Oxford

Zip

13930

Filed Requirements for Fuel Type: GAS REG 13,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | | |

NYS OPRHP - Central Reg - Bowman Lake SP

Contact Information

steve gibbon Tel 607-334-2718 Fax stephen.gibbon@parks.ny.gov 05600

Delivery Location ID: 194

Address

745 Bliven Sherman Rd.

City

Oxford

Zip

13830

Filed Requirements for Fuel Type: GAS REG 3,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 750 | AG | |

Chenango

Delivery Point

NYS DEC - Sherburne Maintenance Center

Contact Information

Randy Ortlieb Tel 607-674-4067 Fax 315-426-9034 randy.ortlieb@dec.ny.gov 05600

Delivery Location ID: 1345

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 2715 State Hwy Route 80 | Sherburne | 13460 |
| Filed Requirements for | Fuel Type: GAS REG | 15,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,500 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 39,000 |
| Chenango County Total | 39,000 |

Clinton

Delivery Point

NYS DOCCS - Altona CF - Bldg. 30 Garage

Contact Information

William Gurbal Tel 518-236-7841 x3950 Fax 518-236-7841 william.gurbal@doccs.ny.gov 05600

Delivery Location ID: 70

Address

555 Devil Den Rd.

City

Altona

Zip

12910

Filed Requirements for Fuel Type: GAS REG 16,750 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS DOCCS - Clinton CF - Garage

Contact Information

Robert Otis Tel 518-492-2511 x3987 Fax 518-492-2511 x3199 donna.donahue@doccs.ny.gov 05600

Delivery Location ID: 675

Address

Cook St.

City

Dannemora

Zip

12929

Filed Requirements for Fuel Type: GAS MID 40,000 Gallons

Tank(s) Detail

GAS MID

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS DOT - S/F - Plattsburgh Co. Residency - 71017

Contact Information

Site Manager Tel 315-785-2360 Fax 518-457-0413 05600

Delivery Location ID: 2700

Address

81 South Peru St.

City

Plattsburgh

Zip

12901

Filed Requirements for Fuel Type: GAS REG 17,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Clinton

Delivery Point

SUNY - Plattsburgh - City of Plattsburgh Rugar St. Storage Warehouse.

Contact Information

Bill Circelli Tel 518-564-5040 Fax circelwa@plattsburgh.edu 05600

Delivery Location ID: 50463

| Address | City | Zip |
|-----------------|-------------|-------|
| 40 Sanborn Ave. | Plattsburgh | 12901 |

Filed Requirements for Fuel Type: GAS REG 40,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | |

| Fuel Type Subtotals | |
|-----------------------------|----------------|
| GAS MID | 40,000 |
| GAS REG | 73,750 |
| Clinton County Total | 113,750 |

Columbia

Delivery Point

NYS OPRHP - Taconic Reg - Lake Taghkanic SP - 1

Contact Information

Robert Snyder Tel 518-581-3631 Fax 518-851-3633 robert.snyder@parks.ny.gov 05600

Delivery Location ID: 10972

Address

1528 State Rte. 82

City

Ancram

Zip

12502

Filed Requirements for Fuel Type: GAS REG 6,300 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 0 | 0 | | |
| GAS REG | 0 | 0 | | |
| GAS REG | 1 | 500 | AG | VR |
| GAS REG | 0 | 0 | | |

NYS OPRHP - Taconic Reg - Taconic SP

Contact Information

Christopher Rickard Tel 518-329-3993 Fax 518-329-0725 christopher.rickard@parks.ny.gov 05600

Delivery Location ID: 3215

Address

253 Rte. 344

City

Copake Falls

Zip

12517

Filed Requirements for Fuel Type: GAS REG 5,500 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | VR |

NYS OPRHP - Taconic Reg - Clermont HS

Contact Information

Susan Boudreau Tel 518-537-4240 Fax 518-537-6240 susan.boudreau@parks.ny.gov 05600

Delivery Location ID: 3164

Address

One Clermont Ave.

City

Germantown

Zip

12526

Filed Requirements for Fuel Type: GAS REG 1,700 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 500 | AG | VR |

Columbia

Delivery Point

NYS DOCCS - Hudson CF

Contact Information

| | | | | |
|-------------------|------------------------|------------------------|--------------------------------|-------|
| Charles Cozzolino | Tel 518-828-4311 x3950 | Fax | charles.cozzolino@doccs.ny.gov | 05600 |
| Russell Clark | Tel 518-828-4311 x3850 | Fax 518-828-4311 x3955 | russell.clark@doccs.ny.gov | 05600 |
| Tera Schnetzler | Tel 518-828-4311 x3100 | Fax | tera.schnetzler@doccs.ny.gov | 05600 |

Delivery Location ID: 1730

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 50 East Court St. | Hudson | 12534 |
| Filed Requirements for | Fuel Type: GAS REG | 34,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NYS Thruway Authority - Berkshire Maint.

Contact Information

| | | | | |
|-----------|------------------|-----|-----------------------------------|-------|
| Ryan Troy | Tel 518-766-4861 | Fax | melissa.vandenburg@thruway.ny.gov | 05600 |
|-----------|------------------|-----|-----------------------------------|-------|

Delivery Location ID: 8573

| | | |
|-----------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| Interchange B2, Mile Post B15. 25 | Old Chatham | 12136 |
| Filed Requirements for | Fuel Type: GAS REG | 40,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

| | |
|------------------------------|---------------|
| Fuel Type Subtotals | |
| GAS REG | 87,500 |
| Columbia County Total | 87,500 |

Cortland

Delivery Point

NYS DOT - F - Cortland - 32051

Contact Information

Site Manager Tel 607-756-7072 Fax 518-457-0413 05600

Delivery Location ID: 2636

Address

3668 Rte. 281

City

Cortland

Zip

13045

Filed Requirements for Fuel Type: GAS REG 9,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | VR |

SUNY - Cortland - Transportation

Contact Information

Tim Gowe Tel 607-543-1750 Fax 607-753-5949 tim.gowe@cortland.edu 05600

Delivery Location ID: 3887

Address

1 West Rd.

City

Cortland

Zip

13045

Filed Requirements for Fuel Type: GAS REG 41,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | | |

NYS DOT - S/F - Polkville - 32153

Contact Information

Cathleen Wilson Tel 607-756-7072 Fax cathleen.wilson@dot.ny.gov 05600

Delivery Location ID: 8775

Address

4771 Rte. 41

City

Polkville

Zip

13045

Filed Requirements for Fuel Type: GAS REG 9,100 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | | |

Cortland

Delivery Point

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 59,100 |
| Cortland County Total | 59,100 |

Delaware

Delivery Point

NYS DOT - S/F - Delhi Subresidency

Contact Information

Kathleen VanValkenburgh Tel 607-746-2268 Fax 615-234-7179 kathleen.vanvalkenburgh@dot.ny.gov 05600

Delivery Location ID: 2903

Address

167 Delview Terrace Extension

City

Delhi

Zip

13753

Filed Requirements for Fuel Type: GAS REG 4,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | | |

SUNY - Delhi

Contact Information

Josh Wright Tel 607-746-4030 Fax 607-746-4157 wrightjp@delhi.edu 05600

Delivery Location ID: 10599

Address

Rte. 10, Main St./454 Delhi Dr.

City

Delhi

Zip

13753

Filed Requirements for Fuel Type: GAS REG 28,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,500 | | |

NYS DOT - F - Hancock

Contact Information

Jennifer Hartz Tel 607-637-3450 Fax jennifer.hartz@dot.ny.gov 05600

Delivery Location ID: 9452

Address

Golf Course Rd.

City

Hancock

Zip

13783

Filed Requirements for Fuel Type: GAS REG 13,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | |

Delaware

Delivery Point

NYS DOT - F - Stamford Subresidency

Contact Information

Resident Engineer Tel 607-652-7251 Fax 518-457-0413 bnear@dot.state.ny.us 05600

Delivery Location ID: 2948

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 53 Murphy Rd. , Rte. 23 | Stamford | 12167 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | |

NYS DOT - S/F - Walton

Contact Information

Rich Hyzer Tel 607-865-4164 Fax 518-457-0413 bnear@dot.state.ny.us 05600

Delivery Location ID: 2739

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 32266 State Rte. 10 | Walton | 13856 |
| Filed Requirements for | Fuel Type: GAS REG | 1,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 52,000 |
| Delaware County Total | 52,000 |

Dutchess

Delivery Point

City of Beacon DPW Facility

Contact Information

Reuben Simmons Tel 845-831-0932 Fax highway@cityofbeacon.org 05600

Delivery Location ID: 122139

Address

30 Camp Beacon Rd.

City

Beacon

Zip

12508

Filed Requirements for Fuel Type: OPRG(E) GAS MID 40,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS Bridge Authority - Newburgh Beacon Bridge

Contact Information

Gregory Hill Tel 845-831-3700 Fax 845-691-7914 05600

Delivery Location ID: 2463

Address

Rte. 1 - 84, Toll Plz.

City

Beacon

Zip

12508

Filed Requirements for Fuel Type: OPRG(E) GAS REG 35,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOCCS - Fishkill CF - Garage Gasoline

Contact Information

Michael Bo Tel 845-831-4800 Fax 845-831-4800 michael.bo@doccs.ny.gov 05600

Delivery Location ID: 11024

Address

271 Matteawan Rd.

City

Beacon

Zip

12508

Filed Requirements for Fuel Type: OPRG(E) GAS REG 40,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Dutchess

Delivery Point

NYS DOCCS - Downstate CF

Contact Information

Mary Burns Tel 845-831-6600 x3250 Fax 845-831-6600 x3299 mary.burns@docs.state.ny.us 05600
 Accts. Payable

Delivery Location ID: 1220

Address

121 Red School House Rd.

City

Fishkill

Zip

12524

Filed Requirements for Fuel Type: OPRG(E) GAS REG 32,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - S/F - Fishkill Yard

Contact Information

Ed Ratschki Tel 845-896-6340 Fax ed.ratschki@dot.ny.gov 05600

Delivery Location ID: 2913

Address

247 Rte. 9

City

Fishkill

Zip

12524

Filed Requirements for Fuel Type: OPRG(E) GAS REG 10,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Taconic Reg - Taconic SP - Rudd Pond Area

Contact Information

Chris Rickard Tel 518-789-3059 Fax 518-789-0825 Chris.Rickard@parks.ny.gov 05600

Delivery Location ID: 3341

Address

234 Rudd Pond Rd.

City

Millerton

Zip

12546

Filed Requirements for Fuel Type: OPRG(E) GAS REG 500 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Dutchess

Delivery Point

NYS OPRHP - Taconic Reg - James Baird SP

Contact Information

Kevin OBrien Tel 845-452-3724 Fax 845-452-6393 kevin.obrien@parks.ny.gov 05600

Delivery hours 6:30 am- 5:00 pm Leave ticket in the mailbox

Delivery Location ID: 9070

Address

22 Maintenance Ln.

City

Pleasant Valley

Zip

12569

Filed Requirements for Fuel Type: OPRG(E) GAS REG 13,600 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - F - Fairview - 82177

Contact Information

Site Manager Tel 845-471-5488 Fax 518-457-0413 05600

Delivery Location ID: 2482

Address

334 Violet Ave.

City

Poughkeepsie

Zip

12601

Filed Requirements for Fuel Type: OPRG(E) GAS REG 13,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - F - Poughkeepsie BC 80011

Contact Information

Site Manager Tel 845-471-5488 Fax 518-457-0413 05600

Delivery Location ID: 9503

Address

610 Dutchess Tpke.

City

Poughkeepsie

Zip

12603

Filed Requirements for Fuel Type: OPRG(E) GAS REG 35,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Dutchess

Delivery Point

NYS OPRHP - Taconic Reg - Dinsmore Golf Course

Contact Information

Richard Stimson Tel 845-889-4082 Fax 845-889-8321 Richard.Stimson@parks.ny.gov 05600

Delivery Location ID: 100257

Address

5371 Rt. 9

City

Staatsburg

Zip

12580

Filed Requirements for Fuel Type: OPRG(E) GAS REG 1,600 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Taconic Reg - Mills Norrie SP - 2

Contact Information

Kristina Schoepfer Tel 845-889-3881 Fax 845-889-8321 Kristina.Schoepfer@parks.ny.gov 05600

Delivery Location ID: 10973

Address

91 Mills Mansion Dr.

City

Staatsburg

Zip

12580

Filed Requirements for Fuel Type: OPRG(E) GAS REG 10,550 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOCCS - Green Haven CF - Garage

Contact Information

Dale Rabideau Tel 845-221-2711 x3950 Fax 845-221-2711 x2099 dale.rabideau@doccs.ny.gov 05600

Delivery Location ID: 10768

Address

594 Rte. 216

City

Stormville

Zip

12582

Filed Requirements for Fuel Type: OPRG(E) GAS REG 36,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Fuel Type Subtotals

| | |
|------------------------------|----------------|
| OPRG(E) GAS MID | 40,000 |
| OPRG(E) GAS REG | 227,250 |
| Dutchess County Total | 267,250 |

Erie

Delivery Point

NYS OPRHP - Niagara Reg - Buffalo Harbor SP

Contact Information

JOHN WENNER Tel 716-822-1207 Fax john.wenner@parks.ny.gov 05600

Delivery Location ID: 123511

Address

1111 Fuhrmann Blvd.

City

Buffalo

Zip

14203

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 500 | AG | VR |

NYS OPRHP - Niagara Reg - Woodlawn Beach SP

Contact Information

BRAD MAYS Tel 716-826-1930 Fax brad.mays@park.ny.gov 05600

Delivery Location ID: 123507

Address

3580 Lakeshore Rd.

City

Buffalo

Zip

14219

Filed Requirements for Fuel Type: GAS REG 1,550 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 500 | AG | VR |

NYS Thruway Authority - Buffalo Div. Support

Contact Information

Steve Steklasa Tel 716-825-7576 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3010

Address

Dingens & Weiss Sts

City

Buffalo

Zip

14206

Filed Requirements for Fuel Type: GAS REG 15,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

Erie

Delivery Point

SUNY - Buffalo

Contact Information

Kenneth Martyna Tel 716-645-5962 Fax 716-645-2150 kmartyna@buffalo.edu 05600

Delivery Location ID: 9040

Address

220 Winspear Ave.

City

Buffalo

Zip

14260

Filed Requirements for Fuel Type: GAS REG 43,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | | |

NYS Thruway Authority - Buffalo Sec. Maint.

Contact Information

Shawn O'Brien Tel 716-891-3540 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3011

Address

1870 Walden Ave.

City

Cheektowaga

Zip

14225

Filed Requirements for Fuel Type: FLEX FUEL (E-85) 20,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| FLEX FUEL (E-85) | 1 | 2,000 | AG | VR |

Filed Requirements for Fuel Type: GAS REG 120,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 6,000 | AG | VR |
| GAS REG | 0 | 0 | | |

Erie

Delivery Point

NYS DOT - F - Clarence - 53083

Contact Information

Site Manager Tel 716-632-3386 Fax 518-457-0413 05600

Delivery Location ID: 10158

Address

Rte. 5

City

Clarence

Zip

14031

Filed Requirements for Fuel Type: GAS REG 6,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

VaporRecovery (VR)

NYS DOCCS - Collins CF - Vehicle Maint. Bldg. 97

Contact Information

John Schmit Tel 716-532-4588 x3990 Fax 716-532-4588 x3199 kelly.crise@doocs.ny.gov 05600
 agency owned fuel refilling stations

Delivery Location ID: 6678

Address

Middle Rd.

City

Collins

Zip

14034

Filed Requirements for Fuel Type: GAS REG 65,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS DOT - F - Collins Maint. - 54293

Contact Information

James Doran Tel 716-649-2157 Fax 716-649-2351 05600

Delivery Location ID: 2634

Address

14299 Gowanda St. Rd.

City

Collins

Zip

14034

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

Erie

Delivery Point

NYS OPRHP - Niagara Reg - Knox Farms SP

Contact Information

Andrew Hillman Tel 716-549-1802 Fax andrew.hillman@parks.ny.gov 05600

Delivery Location ID: 7090

Address

437 Buffalo Rd.

City

East Aurora

Zip

14052

Filed Requirements for Fuel Type: GAS REG 2,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Niagara Reg - Beaver Island Golf Course 1

Contact Information

Fred Myers Tel 716-773-5530 Fax fred.myers@parks.ny.gov 05600

Delivery Location ID: 135

Address

300 East River Rd.

City

Grand Island

Zip

14072

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Niagara Reg - Beaver Island SP

Contact Information

Sam Mattina Tel 716-773-3271 Fax sam.mattina@parks.ny.gov 05600

Delivery Location ID: 3318

Address

2136 West Oakfield Rd.

City

Grand Island

Zip

14072

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Erie

Delivery Point

NYS DOT - S/F - Hamburg Maint. - 54091

Contact Information

Brendan Simon Tel 716-649-2157 Fax 518-457-0413 05600

Delivery Location ID: 2660

Address

3754 Lakeview Rd.

City

Hamburg

Zip

14075

Filed Requirements for Fuel Type: GAS REG 26,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Niagara Reg - Evangola SP

Contact Information

Andy Hillman Tel 716-549-1802 Fax 716-549-8062 andrew.hillman@parks.ny.gov 05600

Delivery Location ID: 3169

Address

10317 Old Lake Shore Rd.

City

Irving

Zip

14081

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS DOT - S/F - Tonawanda Sub HQ - 53093

Contact Information

Norm Abraham Tel 716-683-3476 Fax 518-457-0413 05600

Delivery Location ID: 2587

Address

Rte. 265 Knoche & Military Rd.

City

Tonawanda

Zip

14150

Filed Requirements for Fuel Type: GAS REG 4,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Erie

Delivery Point

NYS Thruway Authority - Niagara Maint.

Contact Information

Jack Cosentino Tel 716-877-7490 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3037

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 265 Grand Island Blvd. | Tonawanda | 14150 |
| Filed Requirements for | Fuel Type: GAS REG | 50,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS OPWDD - Western NY DDSO - West Seneca

Contact Information

Pamela Kihl Tel 716-608-2529 Fax 716-517-3702 Pamela.A.Kihl@opwdd.ny.gov 05600
8 a.m. - 4 p.m.

Delivery Location ID: 7519

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 1200 East & West Rd. | West Seneca | 14224 |
| Filed Requirements for | Fuel Type: GAS REG | 76,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 6,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |
| GAS REG | 1 | 1,000 |

| Fuel Type Subtotals | |
|--------------------------|----------------|
| FLEX FUEL (E-85) | 20,000 |
| GAS REG | 660,050 |
| Erie County Total | 680,050 |

Essex

Delivery Point

NYS DOT - F - Elizabethtown Essex County

Contact Information

David Vosburg Tel 518-873-2170 Fax 518-873-6681 05600

Delivery Location ID: 11098

Address

7735 State Rte. 9n

City

Elizabethtown

Zip

12932

Filed Requirements for Fuel Type: GAS REG 15,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

VaporRecovery (VR)

NYS ORDA - Center

Contact Information

Colin Fadden Tel 518-302-5393 Fax 518-523-3834 cfadden@orda.org 05600

Jay Harvey Tel 518-302-5324 Fax jharvey@orda.org 05600

Delivery Location ID: 9262

Address

2634 Main St.

City

Lake Placid

Zip

12946

Filed Requirements for Fuel Type: GAS MID 15,000 Gallons

Tank(s) Detail

GAS MID

Number of Tanks

2

Capacity Gal.

1,500

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS ORDA - Olympic Sport Complex XC

Contact Information

Colin Fadden Tel 518-302-5393 Fax cfadden@orda.org 05600

Jamie Campbell Tel 518-523-4868 Fax jcampbell@orda.org 05600

Delivery Location ID: 21509

Address

81 Bobsled Run Ln.

City

Lake Placid

Zip

12946

Filed Requirements for Fuel Type: GAS MID 20,000 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

Essex

Delivery Point

| Fuel Type Subtotals | |
|---------------------------|----------------|
| GAS MID | 71,000 |
| GAS REG | 51,000 |
| Essex County Total | 122,000 |

Franklin

Delivery Point

NYS DOCCS - Bare Hill CF

Contact Information

| | | | | |
|-----------------|------------------------|------------------------|----------------------------|-------|
| Karissa L OHare | Tel 518-483-8411 x3100 | Fax | karissa.ohare@doccs.ny.gov | 05600 |
| Pamela Rivers | Tel 518-483-8411 x3100 | Fax 518-481-8411 x3299 | pamela.rivers@doccs.ny.gov | 05600 |

Delivery Location ID: 9797

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 181 Brand Rd. | Malone | 12953 |
| Filed Requirements for | Fuel Type: GAS REG | 55,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 6,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

NYS DOCCS - Franklin CF

Contact Information

| | | | |
|-------------------|------------------------|------------------------|---------------------------|
| Robert Drosdowich | Tel 518-483-6040 x3950 | Fax 518-483-6040 x3298 | 05600 |
| Stacey Bilow | Tel 518-483-6040 x3988 | Fax | stacey.bilow@doccs.ny.gov |
| | | | 05600 |

Delivery Location ID: 1505

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 62 Bare Hill Rd. | Malone | 12953 |
| Filed Requirements for | Fuel Type: GAS REG | 30,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 10,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

Franklin

Delivery Point

NYS DOT - F - Malone Residency

Contact Information

Site Manager Tel 518-785-2360 Fax 518-457-0413 05600

Delivery Location ID: 2684

Address

15003 State Rte. 30

City

Malone

Zip

12953

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | | |
| GAS REG | 1 | 2,500 | | |

NYS DOT - F - Tupper Lake - 72233

Contact Information

Kevin Warner Tel 518-483-0770 Fax kevin.warner@dot.ny.gov 05600

Delivery Location ID: 2639

Address

3155 State Rte. 30

City

Tupper Lake

Zip

12986

Filed Requirements for Fuel Type: GAS REG 500 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS OPWDD - Sunmount DDSO

Contact Information

Rene Breton Tel 518-359-4185 Fax vonna.frontera@opwdd.ny.gov 05600

Vonna F Frontera Tel 518-359-4105 Fax 518-359-4167 vonna.frontera@opwdd.ny.gov 05600
gasoline & E-85

Delivery Location ID: 50112

Address

2445 State Rte. 30

City

Tupper Lake

Zip

12986

Filed Requirements for Fuel Type: FLEX FUEL (E-85) 52,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| FLEX FUEL (E-85) | 1 | 4,300 | | VR |

Franklin

Delivery Point

| Fuel Type Subtotals | |
|------------------------------|----------------|
| FLEX FUEL (E-85) | 52,000 |
| GAS REG | 90,500 |
| Franklin County Total | 142,500 |

Genesee

Delivery Point

NYS Thruway Authority - Batavia Maint.

Contact Information

Larry Altieri Tel 585-343-7313 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3007

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Interchange #48 Mp 390. 1 | Batavia | 14020 |
| Filed Requirements for | Fuel Type: GAS REG | 55,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NYS OPRHP - Genesee Reg - Darien Lakes SP

Contact Information

Chad Work Tel 585-547-9481 Fax 585-493-5272 alexandria.caryl@parks.ny.gov 05600

Delivery Location ID: 936

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 10289 Harlow Rd. | Darien Center | 14040 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | |

| Fuel Type Subtotals | |
|-----------------------------|---------------|
| GAS REG | 61,000 |
| Genesee County Total | 61,000 |

Greene

Delivery Point

NYS DOT - S/F - Cairo - 13061, 13067

Contact Information

Site Manager Tel 518-622-9312 Fax 518-457-0413 05600

Delivery Location ID: 2657

Address

Rte. 23 & Bross St.

City

Cairo

Zip

12413

Filed Requirements for Fuel Type: GAS REG 2,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS Bridge Authority - Rip VanWinkle Bridge

Contact Information

Jack Kelly Tel 518-943-2360 Fax 518-943-1819 05600

Delivery Location ID: 2464

Address

99 State Rte. 23

City

Catskill

Zip

12414

Filed Requirements for Fuel Type: GAS REG 15,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,500 | AG | |

NYS Thruway Authority - Catskill Maint.

Contact Information

Ed Dolan Tel 518-943-0133 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 10295

Address

600 Rte. 23b

City

Leeds

Zip

12451

Filed Requirements for Fuel Type: GAS REG 50,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

Greene

Delivery Point

| Fuel Type Subtotals | |
|----------------------------|---------------|
| GAS REG | 67,000 |
| Greene County Total | 67,000 |

Herkimer

Delivery Point

NYS Thruway Authority - Herkimer Maint.

Contact Information

Mike Blais Tel 315-866-3252 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 9322

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Exit 30 Mp 219. 70 | Herkimer | 13350 |
| Filed Requirements for | Fuel Type: GAS REG | 65,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NYS OPRHP - Central Reg - Herkimer Home SHS

Contact Information

Daniel Prime Tel 607-547-8662 Fax daniel.prime@parks.ny.gov 05600

Delivery Location ID: 3276

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 200 State Rte. 169s | Little Falls | 13365 |
| Filed Requirements for | Fuel Type: GAS REG | 750 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 750 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 65,750 |
| Herkimer County Total | 65,750 |

Jefferson

Delivery Point

NYS DOT - S/F - Adams Subresidency - 73063

Contact Information

Matt Bush Tel 315-785-9317 Fax 518-457-0413 05600

Delivery Location ID: 2609

Address

51 West Church St.

City

Adams

Zip

13605

Filed Requirements for Fuel Type: GAS REG 7,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

NYS DOT - S/F - Collins Landing Subresidency - 73143

Contact Information

Site Manager Tel 315-482-2447 Fax 518-457-0413 05600

Delivery Location ID: 5348

Address

43092 State Rte. 12

City

Alexandria Bay

Zip

13607

Filed Requirements for Fuel Type: GAS REG 4,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS DOCCS - Cape Vincent CF - Power House

Contact Information

Tim Rexford Tel 315-654-4100 Fax 315-654-4100 Timothy.Rexford@doccs.ny.gov 05600

Delivery Location ID: 277

Address

36560 State Rte. 12e

City

Cape Vincent

Zip

13618

Filed Requirements for Fuel Type: GAS REG 18,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | |

Jefferson

Delivery Point

NYS DOT - F - Watertown Jefferson Main Residency - 73051

Contact Information

Greg Grimshaw Tel 315-785-9317 Fax 315-785-5635 05600

Delivery Location ID: 2457

Address

22430 State Rte. 342

City

Watertown

Zip

13601

Filed Requirements for Fuel Type: GAS REG 13,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

NYS DOT - S/F - Watertown Bridge Maint. - 73170

Contact Information

Matt Bush Tel 315-785-9317 Fax 518-457-0413 05600

Delivery Location ID: 2619

Address

23192 Rte. 12, Outer Bradley St.

City

Watertown

Zip

13601

Filed Requirements for Fuel Type: GAS REG 9,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

| Fuel Type Subtotals | |
|-------------------------------|---------------|
| GAS REG | 51,000 |
| Jefferson County Total | 51,000 |

Kings

Delivery Point

CUNY - Brooklyn College - Heating Plant Parking Lot

Contact Information

Steven Alliano Tel 718-951-5891 Fax 718-951-5479 salliano@brooklyn.cuny.edu 05600

Delivery Location ID: 5946

| Address | City | Zip |
|-------------------------------|---|---|
| Ocean Ave. & Ave. H Gate | Brooklyn | 11210 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 2,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> |
| OPRG(E) GAS REG | 1 1,000 | VR |

CUNY - Kingsborough Community College

Contact Information

Elizabeth Barreras Tel 718-368-5124 Fax ebarreras@kbcc.cuny.edu 05600

James Weaver Tel 718-368-5124 Fax james.weaver@kbcc.cuny.edu 05600

Delivery Location ID: 1831

| Address | City | Zip |
|-------------------------------|---|---|
| 2001 Oriental Blvd. | Brooklyn | 11235 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 15,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|---------------------------|---------------|
| OPRG(E) GAS REG | 17,000 |
| Kings County Total | 17,000 |

Livingston

Delivery Point

NYSDEC - Avon Regional Office

Contact Information

| | | | | |
|------------------|------------------|-----|---------------------------|-------|
| James Webb | Tel 585-259-5805 | Fax | james.webb@dec.ny.gov | 05600 |
| William F Shutts | Tel 585-226-5384 | Fax | william.shutts@dec.ny.gov | 05600 |

Delivery Location ID: 123539

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 6274 East Avon - Lima Rd. | Avon | 14414 |
| Filed Requirements for | Fuel Type: GAS REG | 32,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 3,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

NYSDEC - Caledonia Fish Hatchery

Contact Information

| | | | | |
|------------------|------------------|-----|---------------------------|-------|
| Robert STEIN | Tel 585-538-6300 | Fax | robert.stein@dec.ny.gov | 05600 |
| William F Shutts | Tel 607-622-8277 | Fax | william.shutts@dec.ny.gov | 05600 |

Delivery Location ID: 123494

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 16 North St. | Caledonia | 14423 |
| Filed Requirements for | Fuel Type: GAS REG | 2,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 500 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

Livingston

Delivery Point

SUNY - Geneseo - Clark Services Bldg.

Contact Information

| | | | | |
|-----------------|------------------|------------------|---------------------|-------|
| | Tel | Fax | | 05600 |
| Kerry Pickering | Tel 585-245-5662 | Fax 585-245-5662 | walkerk@geneseo.edu | 05600 |

Delivery Location ID: 3855

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| 1 College Cir. | Geneseo | 14454 |
| Filed Requirements for | Fuel Type: GAS REG | 35,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,500 |
| | | <u>AboveGround (AG)</u> |
| | | VR |

NYS OPRHP - Genesee Reg - Letchworth SP

Contact Information

| | | | | |
|---------------|------------------|------------------|-------------------------------|-------|
| Douglas Kelly | Tel 585-493-3600 | Fax 585-493-5272 | alexandria.caryl@parks.ny.gov | 05600 |
|---------------|------------------|------------------|-------------------------------|-------|

Delivery Location ID: 9083

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| Main Park Rd. North | Mount Morris | 14510 |
| Filed Requirements for | Fuel Type: GAS REG | 12,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | VR |

NYS DOCCS - Groveland CF - Garage 156

Contact Information

| | | | | |
|-----------------|------------------------|------------------------|------------------------------|-------|
| Howard Rockhill | Tel 585-658-2871 x3968 | Fax 585-658-2871 x3299 | howard.rockhill@doccs.ny.gov | 05600 |
| Mark Fedrau | Tel 585-658-2871 x3950 | Fax 585-658-2871 x3299 | mark.fedrau@doccs.ny.gov | 05600 |

Delivery Location ID: 1617

| | | |
|-------------------------------|---------------------------|-------------------------|
| Address | City | Zip |
| Rte. 36, 7000 Sonyea Rd. | Sonyea | 14556 |
| Filed Requirements for | Fuel Type: GAS MID | 40,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| | | <u>AboveGround (AG)</u> |
| | | VR |

Livingston

Delivery Point

| Fuel Type Subtotals | |
|--------------------------------|----------------|
| GAS MID | 40,000 |
| GAS REG | 81,000 |
| Livingston County Total | 121,000 |

Madison

Delivery Point

NYS OPRHP - Central Reg - Lorenzo SHS

Contact Information

Jennifer Cutignola Tel 315-655-3044 Fax 315-655-4304 jennifer.cutignola@parks.ny.gov 05600

Delivery Location ID: 21305

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 17 Rippleton Rd. | Cazenovia | 13035 |
| Filed Requirements for | Fuel Type: GAS REG | 700 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 750 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

NYS DOT - S/F - Oneida - 24071

Contact Information

Mike Pawloski Tel 315-336-0660 Fax 518-457-0413 05600

Delivery Location ID: 2573

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 635 Lenox Ave. | Oneida | 13421 |
| Filed Requirements for | Fuel Type: GAS REG | 5,100 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|-----------------------------|--------------|
| GAS REG | 5,800 |
| Madison County Total | 5,800 |

Monroe

Delivery Point

SUNY - Brockport - Chapman Serv. Center

Contact Information

Mark Stacy Tel 585-325-5149 Fax 585-395-5885 mstacy@brockport.edu 05600

Delivery Location ID: 6909

Address

382 Holley St.

City

Brockport

Zip

14420

Filed Requirements for Fuel Type: GAS REG 45,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Genesee Reg - Hamilin Beach SP

Contact Information

Kate Gross Tel 585-964-2462 Fax 585-493-5272 alexandria.caryl@parks.ny.gov 05600

Delivery Location ID: 3255

Address

1 Camp Rd.

City

Hamlin

Zip

14464

Filed Requirements for Fuel Type: GAS REG 8,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

NYS OCFS - Industry Residential Center

Contact Information

Christopher Otero Tel 585-533-2844 Fax christopher.otero@ocfs.ny.gov 05600

Matt VanNorman Tel 585-533-2674 Fax matt.vannorman@ocfs.ny.gov 05600

Delivery Location ID: 50219

Address

375 Rush Scottsville Rd.

City

Rush

Zip

14543

Filed Requirements for Fuel Type: GAS REG 36,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

Monroe

Delivery Point

NYS Thruway Authority - Henrietta Maint.

Contact Information

Ben Kohlhagen Tel 585-334-3889 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3040

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Mp 362. 4 Interchange 46 | West Henrietta | 14467 |
| Filed Requirements for | Fuel Type: GAS REG | 50,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| GAS REG | 0 | 0 |
| | | <u>AboveGround (AG)</u> |
| | | <u>VaporRecovery (VR)</u> |
| | | AG |
| | | VR |

| Fuel Type Subtotals | |
|----------------------------|----------------|
| GAS REG | 139,000 |
| Monroe County Total | 139,000 |

Montgomery

Delivery Point

NYS Thruway Authority - Amsterdam Maint.

Contact Information

Jeff Webster Tel 518-842-7842 Fax melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3006

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Interchange #27 Rte. 30s | Amsterdam | 12010 |
| Filed Requirements for | Fuel Type: GAS REG | 70,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| GAS REG | 0 | 0 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOT - F - Fulton Montgomery County Residency - 25091

Contact Information

Site Manager Tel 518-853-3441 Fax 518-457-0413 05600

Delivery Location ID: 2528

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 3059 State Rte. 5s | Fultonville | 12072 |
| Filed Requirements for | Fuel Type: GAS REG | 8,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|--------------------------------|---------------|
| GAS REG | 78,000 |
| Montgomery County Total | 78,000 |

Nassau

Delivery Point

NYS OPRHP - Long Island Reg - Bethpage SP - Maint. Area Tank 2

Contact Information

James Walsh Tel 631-572-0070 Fax james.walsh@parks.ny.gov 05600

Delivery Location ID: 10458

Address

99 Quaker Meeting House Rd.

City

Farmingdale

Zip

11735

Filed Requirements for Fuel Type: OPRG(E) GAS REG 20,000 Gallons

Tank(s) Detail

OPRG(E) GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - Garden City - 02191

Contact Information

Tony Eichhorn Tel 516-222-1936 Fax 518-457-0413 05600

Delivery Location ID: 2530

Address

925 Stewart Ave.

City

Garden City

Zip

11530

Filed Requirements for Fuel Type: OPRG(E) GAS REG 6,000 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - North Merrick HQ - 06131

Contact Information

Margaret Conklin Tel 516-378-3552 Fax 518-457-0413 05600

Delivery Location ID: 2563

Address

1234 Meadowbrook Rd.

City

North Merrick

Zip

11566

Filed Requirements for Fuel Type: OPRG(E) GAS REG 23,000 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

Nassau

Delivery Point

SUNY - Old Westbury

Contact Information

Greg Riveiro Sr Tel 516-876-3324 Fax riveirog@oldwestbury.edu 05600

Delivery Location ID: 122096

Address

223 Store Hill Rd.

City

Old Westbury

Zip

11568

Filed Requirements for Fuel Type: OPRG(E) GAS REG 26,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Long Island Reg - Planting Fields Arboretum - Auto Shop

Contact Information

Vincent Simeone Tel 516-922-8700 Fax 516-922-8610 vincent.simeone@Parks.ny.gov 05600

Delivery Location ID: 6744

Address

1395 Planting Fields Rd.

City

Oyster Bay

Zip

11771

Filed Requirements for Fuel Type: OPRG(E) GAS REG 6,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)
 OPRG(E) GAS REG 1 1,000

NYS DOT - S/F - Syosset Yard

Contact Information

Larry McCarthy Tel 516-935-5608 Fax larry.mccarthy@dot.ny.gov 05600

Delivery Location ID: 2950

Address

500 Robbins Ln.

City

Syosset

Zip

11791

Filed Requirements for Fuel Type: OPRG(E) GAS REG 27,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Nassau

Delivery Point

NYS OPRHP - Long Island Reg - Jones Beach SP - Storehouse

Contact Information

| | | | | |
|----------------------------|------------------|------------------|----------------------------|-------|
| Jeff Mason | Tel 516-679-7260 | Fax 516-679-7235 | Jeffrey.Mason@Parks.ny.gov | 05600 |
| Store house X260 Office | Tel 516-409-2040 | Fax | | 05600 |

Delivery Location ID: 6917

| Address | City | Zip |
|----------------------|---------|-------|
| Storehouse Field #10 | Wantagh | 11793 |

Filed Requirements for Fuel Type: OPRG(E) GAS REG 48,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| OPRG(E) GAS REG | 1 | 4,000 | | |

| Fuel Type Subtotals | |
|----------------------------|----------------|
| OPRG(E) GAS REG | 156,000 |
| Nassau County Total | 156,000 |

New York

Delivery Point

Roosevelt Island Operating Corp.

Contact Information

| | | | | |
|------------------|-----------------------|-----|------------------------------|-------|
| Joe Marino | Tel 347-752-0949 | Fax | joe.marino@rioc.ny.gov | 05600 |
| Shamsodeen Satar | Tel 212-832-4540 x558 | Fax | shamsodeen.satar@rioc.ny.gov | 05600 |

Please deliver fuel before 3 o'clock Monday to Friday

Delivery Location ID: 3592

| | | |
|---------------------------------|-------------|------------|
| Address | City | Zip |
| 680 Main St. , Roosevelt Island | New York | 10044 |

Filed Requirements for Fuel Type: OPRG(E) GAS PREM 40,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|

| Fuel Type Subtotals | |
|------------------------------|---------------|
| OPRG(E) GAS PREM | 40,000 |
| New York County Total | 40,000 |

Niagara

Delivery Point

Barker Central School District

Contact Information

Carol Heiligenthaler Tel 716-860-8505 Fax cheilegenthaler@bardkerbsd.net 05600

Delivery Location ID: 123529

| Address | City | Zip |
|-------------------------------|----------------------------|---------------------------|
| Ridge Road Express, Sta | Barker | 14012 |
| Filed Requirements for | Fuel Type: GAS PREM | 10,465 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS PREM | 1 | 500 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

NYS OPRHP - Niagara Reg - Golden Hill SP

Contact Information

Renee Campbell Tel 716-795-3885 Fax renee.campbell@parks.ny.gov 05600

Delivery Location ID: 5205

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 9691 Lower Lake Rd. | Barker | 14012 |
| Filed Requirements for | Fuel Type: GAS REG | 3,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

New York Power Authority

Contact Information

John Briggs Tel 716-286-6031 Fax 315-792-8454 bruce.shoener@nypa.gov 05600

Randy Fenton Tel 716-286-6451 Fax 315-792-8454 kathy.jones@nypa.gov 05600
Filer

Delivery Location ID: 7665

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 5777 Lewiston Rd. | Lewiston | 14092 |
| Filed Requirements for | Fuel Type: GAS REG | 40,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 6,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | VR |

Niagara

Delivery Point

NYS DOT - S/F - Lewiston Subresidency - 55113

Contact Information

John Cogswell Tel 716-438-2396 Fax 518-457-0413 05600

Delivery Location ID: 2545

Address

Witmer Rd.

City

Lewiston

Zip

14092

Filed Requirements for Fuel Type: GAS REG 4,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Niagara Reg - Earl W. Brydges Artpark SP

Contact Information

Adam Tiede Tel 716-754-7766 Fax adam.tiede@parks.ny.gov 05600

Delivery Location ID: 1253

Address

150 Portage Rd.

City

Lewiston

Zip

14092

Filed Requirements for Fuel Type: GAS REG 4,200 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Niagara Reg - Joseph Davis SP

Contact Information

Josh Bodie Tel 716-754-7766 Fax josh.bodie@parks.ny.gov 05600

Delivery Location ID: 7854

Address

Lower River Rd.

City

Lewiston

Zip

14092

Filed Requirements for Fuel Type: GAS REG 1,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

500

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Niagara

Delivery Point

NYS DOT - S/F - Lockport - 55101

Contact Information

John Cogswell Tel 716-438-2396 Fax 518-457-0413 05600

Delivery Location ID: 8238

Address

Rte. 93, 5055 Lockport - Junction Rd.

City

Lockport

Zip

14094

Filed Requirements for Fuel Type: GAS REG 11,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | AG | VR |

NYS OPRHP - Niagara Reg - DeVeaux Woods SP

Contact Information

Samuel Conti Tel 716-284-5778 Fax samuel.conti@parks.ny.gov 05600

Delivery Location ID: 123512

Address

3180 Deveaux Woods Dr.

City

Niagara Falls

Zip

14305

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | VR |

NYS OPRHP - Niagara Reg - Niagara Falls SP - Maint. Center

Contact Information

DEREK MCCLAIN Tel 716-285-3892 Fax derek.mcclain@parks.ny.gov 05600

Delivery Location ID: 3303

Address

1410 Buffalo Ave.

City

Niagara Falls

Zip

14303

Filed Requirements for Fuel Type: GAS REG 20,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

Niagara

Delivery Point

NYS OPRHP - Niagara Reg - Whirlpool SP - Maint. Center

Contact Information

Timothy Ross Tel 716-285-7740 Fax timothy.ross@parks.ny.gov 05600

Delivery Location ID: 5014

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 2630 Whirlpool St. | Niagara Falls | 14305 |
| Filed Requirements for | Fuel Type: GAS REG | 15,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NYS OPRHP - Niagara Reg - Wilson Tuscarora SP

Contact Information

David Giambra Tel 716-751-6361 Fax david.giambra@parks.ny.gov 05600

Delivery Location ID: 5206

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 3371 Lake Rd. | Wilson | 14172 |
| Filed Requirements for | Fuel Type: GAS REG | 4,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NYS OPRHP - Niagara Reg - Fort Niagara SP

Contact Information

Josh Bodie Tel 716-745-7273 Fax 716-745-3221 josh.bodie@parks.ny.gov 05600

Delivery Location ID: 9087

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 18f | Youngstown | 14174 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

Niagara

Delivery Point

NYS OPRHP - Niagara Reg - Four Mile Creek SP

Contact Information

Fred Guard Tel 716-745-3802 Fax fred.guard@parks.ny.gov 05600

Delivery Location ID: 6786

| Address | City | Zip |
|--------------|------------|-------|
| 973 Lake Rd. | Youngstown | 14174 |

Filed Requirements for Fuel Type: GAS REG 1,400 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | VR |

| Fuel Type Subtotals | |
|-----------------------------|----------------|
| GAS PREM | 10,465 |
| GAS REG | 114,600 |
| Niagara County Total | 125,065 |

Oneida

Delivery Point

NYS DOT - F - Alder Creek 26103

Contact Information

Dan Goodhines Tel 315-392-5232 Fax 315-392-5222 daniel.goodhines@dot.ny.gov 05600

Delivery Location ID: 9501

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 9680 State Dam Rd. | Alder Creek | 13301 |
| Filed Requirements for | Fuel Type: GAS REG | 4,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

NEW YORK POWER AUTHORITY

Contact Information

Delivery Location ID: 123475

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 6520 Glass Factory Rd. | Marcy | 13403 |
| Filed Requirements for | Fuel Type: GAS REG | 22,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| | | |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

New York Power Authority - Frederick R Clark Energy Center

Contact Information

Kathy Jones Tel 315-792-8317 Fax 315-792-8454 kathy.jones@nypa.gov 05600

Michael Gumbs Tel 315-792-8316 Fax 315-792-8454 bruce.shoener@nypa.gov 05600

Delivery Location ID: 6010

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 6520 Glass Factory Rd. | Marcy | 13403 |
| Filed Requirements for | Fuel Type: GAS REG | 22,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 5,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | |

Oneida

Delivery Point

NYS DOCCS - Marcy CF

Contact Information

Joseph Brockway Tel 315-768-1400 x3950 Fax 315-768-1400 x2099 theodore.pelky@docs.state.ny.us 05600

Delivery Location ID: 5656

Address

9000 Old River Rd.

City

Marcy

Zip

13403

Filed Requirements for Fuel Type: GAS REG 70,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

NYS DOCCS - Mohawk - Storehouse

Contact Information

Roxanne M Bradley Tel 315-339-5232 x3100 Fax 315-339-5232 x3299 roxanne.bradley@doccs.ny.gov 05600

Delivery Location ID: 50096

Address

6514 State Rte. 26

City

Rome

Zip

13440

Filed Requirements for Fuel Type: GAS REG 50,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - Rome - 27111

Contact Information

Mike Pawloski Tel 315-336-0660 Fax 518-457-0413 michael.pawloski@dot.ny.gov 05600

Delivery Location ID: 2583

Address

6515 State Rte. 26

City

Rome

Zip

13440

Filed Requirements for Fuel Type: GAS REG 7,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

Oneida

Delivery Point

NYS OPRHP - Central Reg - Delta Lake SP

Contact Information

| | | | | |
|-----------------|------------------|------------------|------------------------------|-------|
| Joe Morisette | Tel 315-337-4670 | Fax 315-337-4496 | joe.morisette@parks.ny.gov | 05600 |
| Michelle Beeman | Tel 315-492-1756 | Fax | michelle.beeman@parks.ny.gov | 05600 |

Delivery Location ID: 3252

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 8797 State Rte. 46 | Rome | 13440 |
| Filed Requirements for | Fuel Type: GAS REG | 8,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 750 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | |

NYS DOT - S/F - Oneida East Residency - 26297

Contact Information

| | | | |
|-------------|------------------|------------------|-------|
| Mike Murphy | Tel 315-732-8032 | Fax 518-457-0413 | 05600 |
|-------------|------------------|------------------|-------|

Delivery Location ID: 1207

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 2436 Chenango Rd. | Utica | 13502 |
| Filed Requirements for | Fuel Type: GAS REG | 23,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

Oneida

Delivery Point

NYS OMH - Mohawk Valley PC

Contact Information

| | | | | |
|-----------------|------------------|------------------|----------------------------|-------|
| | Tel | Fax | | 05600 |
| Bill Hollenbeck | Tel 315-738-3900 | Fax 315-738-4444 | bill.hollenbeck@omh.ny.gov | 05600 |
| Jim Colp | Tel 315-738-3909 | Fax 315-738-4444 | james.colp@omh.ny.gov | 05600 |

Delivery Location ID: 9579

| | | | | |
|-------------------------------|---------------------------|-----------------------|-------------------------|---------------------------|
| Address | City | Zip | | |
| 1400 Noyes St. | Utica | 13502 | | |
| Filed Requirements for | Fuel Type: GAS REG | 30,000 Gallons | | |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 2,000 | AG | |

SUNY - Institute of Technology - Facilities Bldg.

Contact Information

| | | | | |
|--------------|------------------|-----|-----------------------|-------|
| David Manore | Tel 315-792-7280 | Fax | manored1@sunypoly.edu | 05600 |
|--------------|------------------|-----|-----------------------|-------|

Delivery Location ID: 50009

| | | | | |
|-------------------------------|---------------------------|-----------------------|-------------------------|---------------------------|
| Address | City | Zip | | |
| 755 Residential Dr. | Utica | 13502 | | |
| Filed Requirements for | Fuel Type: GAS REG | 14,000 Gallons | | |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 20,000 | AG | |

NYS Thruway Authority - Verona Maint.

Contact Information

| | | | | |
|--------------|------------------|------------------|-----------------------------------|-------|
| Andrew Dawes | Tel 315-363-0084 | Fax 518-436-3011 | melissa.vandenburg@thruway.ny.gov | 05600 |
|--------------|------------------|------------------|-----------------------------------|-------|

Delivery Location ID: 9318

| | | | | |
|-------------------------------|---------------------------|-----------------------|-------------------------|---------------------------|
| Address | City | Zip | | |
| Exit 33 Mp 252. 71 | Verona | 13478 | | |
| Filed Requirements for | Fuel Type: GAS REG | 50,000 Gallons | | |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 4,000 | AG | VR |

Oneida

Delivery Point

| Fuel Type Subtotals | |
|----------------------------|----------------|
| GAS REG | 300,000 |
| Oneida County Total | 300,000 |

Onondaga

Delivery Point

NYS DOT - S/F - Camillus - 34031

Contact Information

Site Manager Tel 315-672-8151 Fax 518-457-0413 05600

Delivery Location ID: 2575

Address

5700 Devoe Rd.

City

Camillus

Zip

13031

Filed Requirements for Fuel Type: GAS REG 16,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS Thruway Authority - Syracuse Maint.

Contact Information

David Ratliff Tel 315-438-2367 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 10240

Address

6150 Tarbell Rd.

City

East Syracuse

Zip

13057

Filed Requirements for Fuel Type: FLEX FUEL (E-85) 15,000 Gallons

Tank(s) Detail

FLEX FUEL (E-85)

Number of Tanks

1

Capacity Gal.

6,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Filed Requirements for Fuel Type: GAS REG 100,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Central Reg - Capital Facility - Const. HQ

Contact Information

Richard Sheckells Tel 315-492-1590 Fax richard.sheckells@parks.ny.gov 05600

Delivery Location ID: 3304

Address

7853 Green Lks Rd.

City

Fayetteville

Zip

13066

Filed Requirements for Fuel Type: GAS REG 20,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Onondaga

Delivery Point

NYS OPRHP - Central Reg - Green Lakes SP - Golf Course

Contact Information

Michelle Beeman Tel 315-492-1756 Fax michelle.beeman@parks.ny.gov 05600

Delivery Location ID: 3177

Address

7900 Green Lakes Rd.

City

Fayetteville

Zip

13066

Filed Requirements for Fuel Type: GAS REG 3,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | |

NYS OPRHP - Central Reg - Clark Reservation SP

Contact Information

Rich Sheckells Tel 315-492-1590 Fax 315-492-1908 richard.sheckells@parks.ny.gov 05600

Delivery Location ID: 3163

Address

6105 East Seneca Tpke. , Rte. 173

City

Jamesville

Zip

13078

Filed Requirements for Fuel Type: GAS REG 7,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | |

NYS DOT - F - Onondaga East Residency - 33061

Contact Information

Dominick Digiambattista Tel 315-458-1910 Fax 315-458-2486 05600

Delivery Location ID: 2574

Address

5430 South Bay Rd.

City

North Syracuse

Zip

13212

Filed Requirements for Fuel Type: GAS REG 34,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 4,000 | | VR |
| GAS REG | 1 | 2,000 | | |

Onondaga

Delivery Point

SUNY - Upstate Medical University

Contact Information

| | | | | |
|--------------------------------|------------------|------------------|----------------------|-------|
| Betty Geppner or Ron Westbrook | Tel 315-464-7497 | Fax 315-464-7495 | geppnerb@upstate.edu | 05600 |
| Patrick T McCarney | Tel 315-464-7497 | Fax | mccarney@upstate.edu | 05600 |

Delivery Location ID: 6844

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 750 East Adams St. | Syracuse | 13210 |
| Filed Requirements for | Fuel Type: GAS REG | 50,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

SUNY - Upstate University Hospital - Community Campus

Contact Information

| | | | | |
|---------------|------------------|-----|---------------------|-------|
| Cheryl Clancy | Tel 315-492-5514 | Fax | clancyc@upstate.edu | 05600 |
|---------------|------------------|-----|---------------------|-------|

Delivery Location ID: 21369

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 4900 Broad Rd. | Syracuse | 13215 |
| Filed Requirements for | Fuel Type: GAS REG | 3,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 550 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|------------------------------|----------------|
| FLEX FUEL (E-85) | 15,000 |
| GAS REG | 233,000 |
| Onondaga County Total | 248,000 |

Ontario

Delivery Point

NYS OPRHP - Finger Lakes Reg - Sonnenberg Gardens & Mansion SHP

Contact Information

John Tharp Tel 315-789-2331 Fax Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 11075

Address

151 Charlotte St.

City

Canandaigua

Zip

14424

Filed Requirements for Fuel Type: GAS REG 1,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

500

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS Thruway Authority - Manchester Maint.

Contact Information

John Breen Tel 585-289-3018 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3029

Address

Interchange #43

City

Manchester

Zip

14504

Filed Requirements for Fuel Type: GAS REG 60,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS OPRHP - Finger Lakes Reg - Ganondagan SHS

Contact Information

Carter Chapman Tel 585-398-6155 Fax Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 9722

Address

1488 State Rte. 444

City

Victor

Zip

14564

Filed Requirements for Fuel Type: GAS REG 2,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

300

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Ontario

Delivery Point

| Fuel Type Subtotals | |
|-----------------------------|---------------|
| GAS REG | 63,000 |
| Ontario County Total | 63,000 |

Orange

Delivery Point

NYS Thruway Authority - Harriman Maint.

Contact Information

Edward Parra Tel 845-782-2417 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 5410

Address

Interchange 16

City

Harriman

Zip

10926

Filed Requirements for Fuel Type: OPRG(E) GAS REG 40,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Minisink Valley CSD - Thomas M Monahan Transportation Center

Contact Information

Dwayne Powers Tel 845-355-5144 Fax 845-355-2813 dpowers@minisink.com 05600

Elizabeth Chakan Tel 845-355-5144 Fax echakan@minisink.com 05600

Delivery Location ID: 122135

Address

179 Centerville Rd.

City

Middletown

Zip

10940

Filed Requirements for Fuel Type: OPRG(E) GAS PREM 51,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - S/F - Middletown Residency - 85101

Contact Information

Richard Gaupman Tel 845-343-4638 Fax 518-457-0413 05600

Delivery Location ID: 2558

Address

3233 Rte. 6

City

Middletown

Zip

10940

Filed Requirements for Fuel Type: OPRG(E) GAS REG 18,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Orange

Delivery Point

NYS OMH - Mid-Hudson Forensic Psych Center

Contact Information

Robert Borre Tel 845-374-8903 Fax robert.borre@omh.ny.gov 05600

Delivery Location ID: 2146

Address

2834 Rte. 17m

City

New Hampton

Zip

10958

Filed Requirements for Fuel Type: OPRG(E) GAS REG 30,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Palisades Reg - NWC SHS

Contact Information

Michael McGurty Tel 845-561-1765 Fax 845-561-6577 michael.mcgurty@parks.ny.gov 05600

Delivery Location ID: 3302

Address

374 Temple Hill Rd. - Site

City

New Windsor

Zip

12553

Filed Requirements for Fuel Type: OPRG(E) GAS REG 3,800 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Town of New Windsor - Highway Dept.

Contact Information

Anthony Fayó Tel 845-563-4607 Fax afayo@town.new-windsor.ny.us 05600

Delivery Location ID: 6990

Address

196 Perimeter Rd. Bldg. 2220

City

New Windsor

Zip

12553

Filed Requirements for Fuel Type: OPRG(E) GAS REG 73,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

OPRG(E) GAS REG 1 3,000

Orange

Delivery Point

City of Newburgh - DPW

Contact Information

Mimi Naclerio Tel 845-565-3297 Fax 845-565-3329 mnaclerio@cityofnewburgh-ny.gov 05600
 6000 gallon tank

Delivery Location ID: 509

Address

88 Pierces Rd.

City

Newburgh

Zip

12550

Filed Requirements for **Fuel Type: OPRG(E) GAS REG** **45,000 Gallons**

Tank(s) Detail

Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS Thruway Authority - Newburgh Maint.

Contact Information

Jim Simons Tel 845-831-7838 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 10294

Address

1309 Rte. 300

City

Newburgh

Zip

12550

Filed Requirements for **Fuel Type: FLEX FUEL (E-85)** **40,000 Gallons**

Tank(s) Detail

Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

FLEX FUEL (E-85) 1 5,200 AG VR

Filed Requirements for **Fuel Type: OPRG(E) GAS REG** **140,000 Gallons**

Tank(s) Detail

Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOCCS - Otisville CF - Garage

Contact Information

James Eve Tel 845-386-1490 x3950 Fax 845-386-1490 x3299 james.eve@doccs.ny.gove 05600

Delivery Location ID: 3395

Address

57 Sanitorium Ave.

City

Otisville

Zip

10963

Filed Requirements for **Fuel Type: OPRG(E) GAS REG** **40,000 Gallons**

Tank(s) Detail

Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Orange

Delivery Point

NYS DOT - S/F - Port Jervis Sub HQ - 85083

Contact Information

Site Manager Tel 845-343-4638 Fax 518-457-0413 05600

Delivery Location ID: 2578

Address

2 Rte. 6

City

Port Jervis

Zip

12771

Filed Requirements for Fuel Type: OPRG(E) GAS REG 5,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Palisades Reg - Sterling Forest - Long Meadow 954

Contact Information

Michael McElroy Tel 845-351-5907 Fax michael.mcelroy@parks.ny.gov 05600

Delivery Location ID: 11278

Address

954 Long Meadow Rd.

City

Tuxedo

Zip

10987

Filed Requirements for Fuel Type: OPRG(E) GAS REG 8,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Palisades Reg - NWC SHS - Regional Restoration

Contact Information

Delivery Location ID: 10195

Address

382 Temple Hill Rd.

City

Vails Gate

Zip

12584

Filed Requirements for Fuel Type: OPRG(E) GAS REG 500 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

| Fuel Type Subtotals | |
|----------------------------|----------------|
| FLEX FUEL (E-85) | 40,000 |
| OPRG(E) GAS PREM | 51,000 |
| OPRG(E) GAS REG | 403,300 |
| Orange County Total | 494,300 |

Orleans

Delivery Point

NYS DOT - S/F - Albion Orleans County Residency - 46061

Contact Information

Site Manager Tel 585-589-6655 Fax 518-457-0413 05600

Delivery Location ID: 8222

Address

14110 Rte. 31

City

Albion

Zip

14411

Filed Requirements for Fuel Type: GAS REG 1,800 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | | |

NYS OPRHP - Genesee Reg - Lakeside Beach SP - Genesee Reg

Contact Information

JODY SEVENSKI Tel 585-682-4888 Fax 585-493-5272 alexandria.caryl@parks.ny.gov 05600

Delivery Location ID: 3256

Address

13691 Roosevelt Hwy.

City

Waterport

Zip

14571

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,000 | AG | VR |

| Fuel Type Subtotals | |
|-----------------------------|--------------|
| GAS REG | 6,800 |
| Orleans County Total | 6,800 |

Oswego

Delivery Point

NYS OPRHP - Central Reg - Battle Island SP - Golf Course

Contact Information

| | | | | |
|---|------------------|------------------|------------------------------|-------|
| Mary Gregg | Tel 315-593-3408 | Fax | mary.gregg@parks.ny.gov | 05600 |
| Michelle Beeman Regional Business Office | Tel 315-492-1756 | Fax 315-492-3277 | michelle.beeman@parks.ny.gov | 05600 |

Delivery Location ID: 124

Address

2150 State Rte. 48

City

Fulton

Zip

13069-4132

Filed Requirements for Fuel Type: GAS REG 2,500 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

250

AboveGround (AG)

AG

VaporRecovery (VR)

NYS OPRHP - Central Reg - Fort Ontario SHS

Contact Information

| | | | | |
|------------------------------------|------------------|------------------|---------------------------|-------|
| Paul Lear Historic Site Manager | Tel 315-343-4711 | Fax 315-343-1430 | paul.lear@parks.ny.gov | 05600 |
| Tim Gray Park Manager | Tel 315-343-4711 | Fax 315-343-1430 | timothy.gray@parks.ny.gov | 05600 |

Delivery Location ID: 9074

Address

1 East Fourth St.

City

Oswego

Zip

13126

Filed Requirements for Fuel Type: GAS REG 1,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

750

AboveGround (AG)

VaporRecovery (VR)

Oswego

Delivery Point

NYS OPRHP - Central Reg - Selkirk Shores SP

Contact Information

| | | | | |
|--------------|------------------|-----|----------------------------|-------|
| Paula Torino | Tel 315-298-4487 | Fax | paula.torino@parks.ny.gov | 05600 |
| Steve Smith | Tel 315-298-5737 | Fax | stephen.smith@parks.ny.gov | 05600 |

Delivery Location ID: 3211

| | | |
|-------------------------------|---|----------------------|
| Address | City | Zip |
| 7101 State Rte. 3 | Pulaski | 13142 |
| Filed Requirements for | Fuel Type: FLEX FUEL (E-85) | 4,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

NYS DOT - S/F - Fulton Subresidency

Contact Information

| | | | |
|--------------|------------------|------------------|-------|
| Site Manager | Tel 315-593-2802 | Fax 518-457-0413 | 05600 |
|--------------|------------------|------------------|-------|

Delivery Location ID: 9598

| | | |
|-------------------------------|---|----------------------|
| Address | City | Zip |
| Rte. 3 & Rathburn Rd. | Volney | 13069 |
| Filed Requirements for | Fuel Type: GAS REG | 6,100 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |
| GAS REG | 1 2,000 | |

| Fuel Type Subtotals | |
|----------------------------|---------------|
| FLEX FUEL (E-85) | 4,500 |
| GAS REG | 9,600 |
| Oswego County Total | 14,100 |

Otsego

Delivery Point

NYS OPRHP - Central Reg - Glimmerglass SP

Contact Information

Shawn Wood Tel 607-547-8662 Fax shawn.wood@parks.ny.gov 05600

Delivery Location ID: 1547

Address

1527 County Rte. 31

City

Cooperstown

Zip

13326

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

750

AboveGround (AG)

AG

VaporRecovery (VR)

NYS DOT - F - Oneonta HQ

Contact Information

Gary Eichler Tel 604-432-5810 Fax gary.eichler@dot.ny.gov 05600

Delivery Location ID: 2932

Address

4359 State Rte. 7

City

Oneonta

Zip

13820

Filed Requirements for Fuel Type: GAS REG 26,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

SUNY - Oneonta

Contact Information

Terry Zimmer Tel 607-436-3548 Fax 607-436-3284 terry.zimmer@oneonta.edu 05600

Delivery Location ID: 3913

Address

West St.

City

Oneonta

Zip

13820

Filed Requirements for Fuel Type: GAS REG 35,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

Otsego

Delivery Point

NYS DOT - F - Springfield Subresidency - 95161

Contact Information

Jason Decker Tel 315-858-2069 Fax jason.decker@dot.ny.gov 05600

Delivery Location ID: 50028

| Address | City | Zip |
|-----------------|-------------|-------|
| 4675 US Rte. 20 | Springfield | 13468 |

Filed Requirements for Fuel Type: GAS REG 6,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | | |

| Fuel Type Subtotals | |
|----------------------------|---------------|
| GAS REG | 72,000 |
| Otsego County Total | 72,000 |

Rensselaer

Delivery Point

NYS DOT - S/F - North Petersburgh - 14263

Contact Information

Site Manager Tel 518-658-3063 Fax 518-457-0413 05600

Delivery Location ID: 2569

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 22 | North Petersburgh | 12138 |
| Filed Requirements for | Fuel Type: GAS REG | 3,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|--------------------------------|--------------|
| GAS REG | 3,500 |
| Rensselaer County Total | 3,500 |

Rockland

Delivery Point

NYS OPRHP - Palisades Reg - Bear Mt. - Garage

Contact Information

Bill Skinner Tel 845-786-2701 Fax 845-786-1784 nancy.sporbert@parks.ny.gov 05600

Delivery Location ID: 3202

| Address | City | Zip |
|-------------------------------|---|------------------------|
| 14 Wpa Way | Bear Mountain | 10911 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 110,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

NYS OPRHP - Palisades Reg - Rockland Lake SP - Garage

Contact Information

Chris Nielsen Tel 845-268-3020 Fax 845-268-7598 christian.nielsen@parks.ny.gov 05600

Delivery Location ID: 3201

| Address | City | Zip |
|-------------------------------|---|-----------------------|
| 100 Rte. 9w | Congers | 10920 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 12,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

NYS OPRHP - Palisades Reg - Rockland Lake SP - North Maint. Bldg.

Contact Information

Delivery Location ID: 9283

| Address | City | Zip |
|-------------------------------|---|-----------------------|
| 200 Championship Rd. | Congers | 10920 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 26,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

Rockland

Delivery Point

NYS Bridge Authority - Bear Mountain Bridge

Contact Information

| | | | | |
|--------------------|------------------|-----|---------------------|-------|
| | Tel | Fax | | 05600 |
| Joseph A. Rochfort | Tel 845-691-4721 | Fax | jrochfort@nysba.net | 05600 |

Delivery Location ID: 2460

| | | |
|-------------------------------|---|-----------------------|
| Address | City | Zip |
| Rte. 6 & 202 | Fort Montgomery | 10922 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 10,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

Village of Haverstraw DPW

Contact Information

| | | | | |
|-----------------|------------------|-----|---------------|-------|
| Vanessa O Lopez | Tel 845-429-2562 | Fax | dpw@vohny.com | 05600 |
|-----------------|------------------|-----|---------------|-------|

Delivery Location ID: 123565

| | | |
|-------------------------------|---|-----------------------|
| Address | City | Zip |
| 115 Bowline Plant Rd. | Haverstraw | 10927 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 15,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

NYS OPRHP - Palisades Reg - Tallman Mt. SP

Contact Information

| | | | | |
|-----------------|------------------|------------------|-----------------------------|-------|
| Clark Alexandre | Tel 845-359-0544 | Fax 845-786-1784 | nancy.sporbert@parks.ny.gov | 05600 |
|-----------------|------------------|------------------|-----------------------------|-------|

Delivery Location ID: 6578

| | | |
|-------------------------------|---|----------------------|
| Address | City | Zip |
| Rte. 9w | Sparkill | 10976 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 2,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

Rockland

Delivery Point

NYS OPRHP - Palisades Reg - Tallman Mt. SP - Maint. Garage

[Contact Information](#)

Delivery Location ID: 9158

| Address | City | Zip |
|--------------------------------|---|----------------------|
| 20 Tallman Mtn. Rd. | Sparkill | 10926 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 8,000 Gallons |
| Tank(s) Detail | Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR) | |

NYS OPRHP - Palisades Reg - Harriman SP - Lake Welch Beach OLD

[Contact Information](#)

Matthew Driver Tel 845-947-2444 Fax 845-947-3103 matthew.driver@parks.ny.gov 05600

Delivery Location ID: 11086

| Address | City | Zip |
|--------------------------------|---|-----------------------|
| Lake Welch Dr. | Stony Point | 10980 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 10,000 Gallons |
| Tank(s) Detail | Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR) | |

NYS OPRHP - Palisades Reg - Harriman SP - Lake Welch vGarage

[Contact Information](#)

Delivery Location ID: 11142

| Address | City | Zip |
|--------------------------------|---|-----------------------|
| 800 Kanawauke Rd. | Stony Point | 10980 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 10,000 Gallons |
| Tank(s) Detail | Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR) | |

Rockland

Delivery Point

NYS DOH - Helen Hayes Hospital - Garage Bldg. 9

Contact Information

Daniel Scherer Tel 845-786-4435 Fax daniel.scherer@helenhayeshosp.org 05600

Delivery Location ID: 6068

Address

51 - 55 Rte. 9w

City

West Haverstraw

Zip

10993

Filed Requirements for Fuel Type: OPRG(E) GAS PREM 8,500 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS Thruway Authority - Nyack Maint.

Contact Information

Jerome Crearer Tel 845-727-2232 Fax 518-436-3011 Melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3041

Address

201 North Rte. 303

City

West Nyack

Zip

10994

Filed Requirements for Fuel Type: FLEX FUEL (E-85) 12,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

FLEX FUEL (E-85) 1 2,000 AG VR

Filed Requirements for Fuel Type: OPRG(E) GAS REG 65,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

| Fuel Type Subtotals | |
|------------------------------|----------------|
| FLEX FUEL (E-85) | 12,000 |
| OPRG(E) GAS PREM | 8,500 |
| OPRG(E) GAS REG | 268,500 |
| Rockland County Total | 289,000 |

Saratoga

Delivery Point

Town of Moreau Highway Dept

Contact Information

Paul Joseph Tel 518-792-5675 Fax 518-792-5697 moreauhwy@townofmoreau.org 05600

Delivery Location ID: 122134

Address

1543 Rte. 9

City

Moreau

Zip

12828

Filed Requirements for Fuel Type: GAS REG 13,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|

BOCES WSWHE - F D Myers Education Center

Contact Information

Mike Nelson Tel 518-581-3480 Fax 518-581-3498 mnelson@wsweboces.org 05600

Wayne Carter Tel 518-581-3680 x3680 Fax wccarter@wsweboces.org 05600

Delivery Location ID: 8884

Address

15 Henning Rd.

City

Saratoga Springs

Zip

12866

Filed Requirements for Fuel Type: GAS REG 10,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 1,500 | AG | VR |

NYS DOT - S/F - Saratoga Springs Residency - 15091

Contact Information

Doug Rose Tel 518-584-3790 Fax 518-457-0413 05600

Delivery Location ID: 2713

Address

351 West Ave. & Rte. 50

City

Saratoga Springs

Zip

12866

Filed Requirements for Fuel Type: GAS REG 7,100 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 4,000 | | |

Saratoga

Delivery Point

NYS OPWDD - Wilton Maintenance

Contact Information

Kelly Smith Tel 518-388-1226 Fax kelly.smith@opwdd.ny.gov 05600

Delivery Location ID: 122039

| Address | City | Zip |
|-----------------------|--------|-------|
| 75 Northern Pines Rd. | Wilton | 12831 |

Filed Requirements for Fuel Type: GAS MID 3,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS MID | 1 | 500 | AG | |

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS MID | 3,000 |
| GAS REG | 30,100 |
| Saratoga County Total | 33,100 |

Schenectady

Delivery Point

Town of Niskayuna - Fire Department

Contact Information

Christine Lischynsky Tel 518-377-8411 x1 Fax 518-688-0275 clischynsky@niskayuna.org 05600

Delivery Location ID: 123525

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 2135 River Rd. | Niskayuna | 12309 |
| Filed Requirements for | Fuel Type: GAS MID | 23,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS MID | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | |

NYS OPWDD - Capital District DDSO - OD Heck

Contact Information

Kelly Smith Tel 518-388-1226 Fax kelly.smith@opwdd.ny.gov 05600

Delivery Location ID: 289

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Balltown & Consaul Rd. | Schenectady | 12304 |
| Filed Requirements for | Fuel Type: GAS MID | 12,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS MID | 1 | 4,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | | VR |

| Fuel Type Subtotals | |
|---------------------------------|---------------|
| GAS MID | 35,000 |
| Schenectady County Total | 35,000 |

Schoharie

Delivery Point

New York Power Authority - Blenheim Gilboa Power Plant

Contact Information

| | | | | |
|-----------------|------------------|------------------|----------------------|-------|
| Kathy Jones | Tel 315-792-8317 | Fax 315-792-8454 | kathy.jones@nypa.gov | 05600 |
| Filer | | | | |
| Kelvin Nahrwold | Tel 518-278-6325 | Fax 315-792-8454 | | 05600 |

Delivery Location ID: 11185

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 397 Power Plant Access Rd. | Gilboa | 12076 |
| Filed Requirements for | Fuel Type: GAS REG | 24,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 3,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|-------------------------------|---------------|
| GAS REG | 24,000 |
| Schoharie County Total | 24,000 |

Schuyler

Delivery Point

NYS OPRHP - Finger Lakes Reg - Watkins Glen SP - Maint. Area

Contact Information

Ronald Roney Tel 607-535-4511 Fax 607-387-3390 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 7125

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 3531 Walnut Rd. | Watkins Glen | 14891 |
| Filed Requirements for | Fuel Type: GAS REG | 9,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| | AG | VR |

| Fuel Type Subtotals | |
|------------------------------|--------------|
| GAS REG | 9,000 |
| Schuyler County Total | 9,000 |

Seneca

Delivery Point

NYS OPRHP - Finger Lakes Reg - Seneca Lake SP

Contact Information

John Tharp Tel 315-789-2331 Fax ronda.williamson@parks.ny.gov 05600

Delivery Location ID: 9231

Address

100 Waterloo Geneva Rd.

City

Geneva

Zip

14456

Filed Requirements for Fuel Type: GAS PREM 3,500 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|

NYS DOCCS - Five Points CF - Garage

Contact Information

Paul Rainis Tel 607-869-5111 x3966 Fax 607-869-5111 x3966 louis.bower@doccs.ny.gov 05600

Scott Serrett Tel 607-869-5111 x3950 Fax scott.serrett@doccs.ny.gov 05600

Delivery Location ID: 7108

Address

6600 State Rte. 96

City

Romulus

Zip

14541

Filed Requirements for Fuel Type: GAS REG 32,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 4,000 | AG | VR |

NYS OPRHP - Finger Lakes Reg - Sampson SP - Maint. Shop

Contact Information

Don Greule Tel 315-585-9953 Fax Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 6554

Address

6096 Rte. 96a

City

Romulus

Zip

14541

Filed Requirements for Fuel Type: GAS REG 3,500 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|

Seneca

Delivery Point

NYS OPRHP - Finger Lakes Reg - Cayuga Lake SP

Contact Information

Rachael Bowman Tel 315-568-5163 Fax 607-387-3390 Laurie.McDonald@parks.ny.gov 05600

Automatic Delivery

Delivery Location ID: 358

Address

2678 Lower Lake Rd.

City

Seneca Falls

Zip

13148

Filed Requirements for Fuel Type: GAS REG 2,500 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

GAS REG

1

1,000

AG

NYS DOT - F - Seneca - 36151

Contact Information

Site Manager Tel 315-539-3112 Fax 315-539-9328 05600

Delivery Location ID: 6603

Address

78 East River Rd.

City

Waterloo

Zip

13165

Filed Requirements for Fuel Type: GAS REG 7,200 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

GAS REG

1

2,000

Seneca

Delivery Point

NYS DOCCS - Willard DTC - Power Plant

Contact Information

| | | | | |
|--------------------------|------------------|------------------|----------------------------|-------|
| Adam Crane | Tel 607-869-5500 | Fax | adam.crane@doccs.ny.gov | 05600 |
| Deliver M-F 7am-3pm only | | | | |
| Laura Morris | Tel 607-869-5500 | Fax | Laura.Morris@doccs.ny.gov | 05600 |
| Power House | Tel 607-869-5500 | Fax 607-869-5500 | jason.schultz@doccs.ny.gov | 05600 |

Delivery Location ID: 5039

| | | |
|----------------------|-------------|------------|
| Address | City | Zip |
| 7116 County Rte. 132 | Willard | 14588 |

Filed Requirements for Fuel Type: GAS MID 52,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS MID | 1 | 2,000 | AG | VR |

| Fuel Type Subtotals | |
|----------------------------|----------------|
| GAS MID | 52,000 |
| GAS PREM | 3,500 |
| GAS REG | 45,200 |
| Seneca County Total | 100,700 |

St Lawrence

Delivery Point

NYS DOT - S/F - Cranberry Lake Subresidency - 75243

Contact Information

Russ Currier, Jr. Tel 315-265-2320 Fax 315-265-2867 russ.currier@dot.ny.gov 05600
 ARE

Delivery Location ID: 2509

| | | |
|-------------------|----------------|------------|
| Address | City | Zip |
| 7045 State Rte. 3 | Cranberry Lake | 12927 |

Filed Requirements for Fuel Type: GAS REG 8,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 2,000 | | |

NYS DOT - S/F - Hailesboro Subresidency - 75124

Contact Information

Ron Tulley Tel 315-287-3541 Fax 315-287-4253 rtulley@dot.state.ny.us 05600
 Site Manager

Delivery Location ID: 7874

| | | |
|---------------------|-------------|------------|
| Address | City | Zip |
| 38 Country Club Rd. | Hailesboro | 13645 |

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 2,000 | AG | VR |

New York Power Authority - St. Lawrence/FDR Power Plant

Contact Information

Bruce Shoener Tel 315-792-8576 Fax 315-792-8454 bruce.shoener@nypa.gov 05600

 Kathy Jones Tel 315-792-8317 Fax 315-792-8454 kathy.jones@nypa.gov 05600
 Filer

Delivery Location ID: 11152

| | | |
|-------------------------|-------------|------------|
| Address | City | Zip |
| 830 Barnhart Island Rd. | Massena | 13662 |

Filed Requirements for Fuel Type: GAS REG 51,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 2 | 8,000 | AG | |
| GAS REG | 1 | 3,000 | AG | |

St Lawrence

Delivery Point

NYS DOT - F - Massena Subresidency - 75113

Contact Information

Russ Currier, Jr. Tel 315-265-2320 Fax 315-265-2867 russ.currier@dot.ny.gov 05600
 ARE

Delivery Location ID: 7876

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 535 County Rte. 42 | Massena | 13662 |
| Filed Requirements for | Fuel Type: GAS REG | 4,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOCCS - Riverview CF

Contact Information

Antonio Orolgio Tel 315-393-8400 x3980 Fax antonio.orolgio@doocs.ny.gov 05600
 Danny Olmstead Tel Fax danny.olmstead@doocs.ny.gov 05600

Delivery Location ID: 3541

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 1110 Tibbits Dr. , Rte. 37 | Ogdensburg | 13669 |
| Filed Requirements for | Fuel Type: GAS REG | 25,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOT - S/F - Ogdensburg Subresidency - 75091

Contact Information

Ernie Olin Tel 315-265-2320 Fax 315-265-2867 russ.currier@dot.state.ny.us 05600
 ARE

Delivery Location ID: 2692

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 2317 Greene St. | Ogdensburg | 13669 |
| Filed Requirements for | Fuel Type: GAS REG | 9,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

St Lawrence

Delivery Point

Ogdensburg Bridge & Port Authority

Contact Information

Kathy Greene Tel 315-393-4080 x243 Fax kgreene@ogdensport.com 05600

Delivery Location ID: 3078

| Address | City | Zip |
|-------------------------------|---|----------------------|
| 1 Bridge Plz. | Ogdensburg | 13669 |
| Filed Requirements for | Fuel Type: FLEX FUEL (E-85) | 9,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

Ogdensburg International Airport

Contact Information

Delivery Location ID: 123514

| Address | City | Zip |
|-------------------------------|---|----------------------|
| 5840 State Rte. 812 | Ogdensburg | 13669 |
| Filed Requirements for | Fuel Type: GAS REG | 1,400 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

NYS DOT - S/F - Potsdam Residency 75103

Contact Information

Mike Ploof Tel 315-265-2320 Fax mike.ploof@dot.ny.gov 05600

Delivery Location ID: 2705

| Address | City | Zip |
|-------------------------------|---|-----------------------|
| 7280 US Rte. 11 | Potsdam | 13676 |
| Filed Requirements for | Fuel Type: GAS REG | 14,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |
| GAS REG | 1 2,000 AG VR | |

| Fuel Type Subtotals | |
|---------------------------------|----------------|
| FLEX FUEL (E-85) | 9,000 |
| GAS REG | 117,400 |
| St Lawrence County Total | 126,400 |

Steuben

Delivery Point

NYS DEC - Bath Hatchery 1

Contact Information

Kenneth Osika Tel 607-776-7087 Fax 607-776-1909 kenneth.osika@dec.ny.gov 05600

Delivery Location ID: 21297

Address

7169 Fish Hatchery Rd.

City

Bath

Zip

14810

Filed Requirements for Fuel Type: GAS REG 5,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

500

AboveGround (AG)

AG

VaporRecovery (VR)

NYSDEC - Bath Fish Hatchery

Contact Information

Ken Osika Tel 607-776-7087 Fax kenneth.osika@dec.ny.gov 05600

Delivery Location ID: 123489

Address

7169 Hatchery Rd.

City

Bath

Zip

14810

Filed Requirements for Fuel Type: GAS REG 1,600 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

500

AboveGround (AG)

AG

VaporRecovery (VR)

NYS OPRHP - Finger Lakes Reg - Stony Brook SP

Contact Information

John Snyder Tel 585-335-8111 Fax 585-335-8072 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 6553

Address

10820 Rte. 36s

City

Dansville

Zip

14437

Filed Requirements for Fuel Type: GAS REG 4,800 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

AG

VaporRecovery (VR)

Steuben

Delivery Point

Sonora Maintenance Center

Contact Information

| | | | | |
|------------------|------------------|-----|----------------------------|-------|
| Brian Patterson | Tel 607-583-2772 | Fax | brian.patterson@dec.ny.gov | 05600 |
| William F Shutts | Tel 607-622-8277 | Fax | william.shutts@dec.ny.gov | 05600 |

Delivery Location ID: 123486

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 6894 Rte. 226 | Savona | 14879 |
| Filed Requirements for | Fuel Type: GAS REG | 13,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

| Fuel Type Subtotals | |
|-----------------------------|---------------|
| GAS REG | 24,400 |
| Steuben County Total | 24,400 |

Suffolk

Delivery Point

NYS DOT - F - Babylon Bridge Maint.

Contact Information

Site Manager Tel 631-661-1685 Fax 518-457-0413 05600

Delivery Location ID: 2894

Address

325 West Main St.

City

Babylon

Zip

11702

Filed Requirements for Fuel Type: OPRG(E) GAS REG 18,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Long Island Reg - Belmont Lake SP - Gate 2

Contact Information

Anthony Frederico Tel 631-321-3587 Fax 631-321-3728 anthony.frederico@parks.ny.gov 05600

Delivery Location ID: 7933

Address

625 Belmont Ave.

City

Babylon

Zip

11702

Filed Requirements for Fuel Type: OPRG(E) GAS REG 55,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

OPRG(E) GAS REG 1 3,000

NYS OPRHP - Long Island Reg - Captree SP

Contact Information

Kevin Boone Tel 631-669-0449 Fax 631-321-3726 Kevin.Boone@Parks.ny.gov 05600

Tim Byrne Tel 631-669-0449 Fax 631-321-3726 Timothy.Byrne@Parks.ny.gov 05600

Delivery Location ID: 11116

Address

East End Of Ocean Pkwy.

City

Babylon

Zip

11702

Filed Requirements for Fuel Type: OPRG(E) GAS REG 23,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

OPRG(E) GAS REG 1 1,750

Suffolk

Delivery Point

NYS DOT - F - Central Islip - 04191

Contact Information

Site Manager Tel 516-231-6860 Fax 518-457-0413 05600

Delivery Location ID: 2505

Address

371 Carleton Ave.

City

Cental Islip

Zip

11722

Filed Requirements for Fuel Type: OPRG(E) GAS REG 8,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Middle Country CSD - Suffolk Transportation

Contact Information

Teno Gustavson Tel 631-665-3245 x4173 Fax tgustavson@suffolkbus.com 05600

Delivery Location ID: 123504

Address

1162 Old Town Rd.

City

Coram

Zip

11727

Filed Requirements for Fuel Type: OPRG(E) GAS REG 118,816 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Long Island Reg - Heckscher SP - Maint. Shop

Contact Information

David Auguste Tel 631-581-2100 Fax 631-277-9591 david.auguste@parks.ny.gov 05600

Delivery Location ID: 3179

Address

Field #2 Heckscher Pkwy.

City

East Islip

Zip

11730

Filed Requirements for Fuel Type: OPRG(E) GAS REG 13,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Suffolk

Delivery Point

NYS OPRHP - Long Island Reg - Heckscher SP - SPIF Greenhouse

Contact Information

David August Tel 631-581-2100 Fax david.auguste@parks.ny.gov 05600

Delivery Location ID: 50106

Address

Field #3 Heckscher Pkwy.

City

East Islip

Zip

11730

Filed Requirements for Fuel Type: OPRG(E) GAS REG 30,000 Gallons

Tank(s) Detail

OPRG(E) GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

VaporRecovery (VR)

SUNY - Farmingdale State College

Contact Information

Mark Orlich Tel 631-420-2658 Fax mark.orlich@farmingdale.edu 05600

Delivery Location ID: 3890

Address

2350 Broadhollow Rd.

City

Farmingdale

Zip

11735

Filed Requirements for Fuel Type: OPRG(E) GAS REG 30,000 Gallons

Tank(s) Detail

OPRG(E) GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

VaporRecovery (VR)

NYS OPRHP - Long Island Reg - Bayard Cutting

Contact Information

Nelson Sterner Tel 631-581-1002 Fax nelson.sterner@parks.ny.gov 05600

Delivery Location ID: 21473

Address

440 Montauk Hwy.

City

Great River

Zip

11739

Filed Requirements for Fuel Type: OPRG(E) GAS REG 3,000 Gallons

Tank(s) Detail

OPRG(E) GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

VaporRecovery (VR)

Suffolk

Delivery Point

NYS DOT - F - Hauppauge - 04203

Contact Information

Theodore Galgan Tel 631-582-8674 Fax 631-582-3245 theodore.galgan@dot.ny.gov 05600

Delivery Location ID: 10136

Address

2005 Express Dr. N

City

Hauppauge

Zip

11787

Filed Requirements for Fuel Type: OPRG(E) GAS REG 2,500 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OGS - SOB Hauppauge

Contact Information

Dorothy Upegui Tel 631-952-6222 Fax 631-952-6226 dorothy.uegui@ogs.ny.gov 05600

Delivery Location ID: 3083

Address

250 Veterans Memorial Hwy.

City

Hauppauge

Zip

11788-5506

Filed Requirements for Fuel Type: OPRG(E) GAS REG 65,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Long Island Reg - Sunken Meadow SP

Contact Information

Sean Cruickshank Tel 631-269-9333 Fax 631-269-9331 Sean.Cruickshank@Parks.ny.gov 05600

Delivery Location ID: 3296

Address

Rte. 25a & Sunken Meadow Pkwy.

City

Kings Park

Zip

11754

Filed Requirements for Fuel Type: OPRG(E) GAS REG 20,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

OPRG(E) GAS REG 3 1,000

Suffolk

Delivery Point

NYS OPRHP - Long Island Reg - Caumsett SHP - Crews Qtrs

Contact Information

| | | | | |
|----------------|------------------|------------------|-------------------------------|-------|
| Leonard Krauss | Tel 631-423-1770 | Fax 631-423-8645 | leonard.kraussjr@parks.ny.gov | 05600 |
| Will Monahan | Tel 631-423-1770 | Fax | william.monahan@parks.ny.gov | 05600 |

Delivery Location ID: 11016

| | | |
|-------------------------------|-----------------------------------|---------------------------|
| Address | City | Zip |
| 25 Lloyd Harber Rd. | Lloyd Harbor | 11743 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 4,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| OPRG(E) GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

NYS DOT - S/F - Melville - 05131

Contact Information

| | | | | |
|---------------------|------------------|------------------|--|-------|
| Moustafa Saad-Eldin | Tel 516-420-4270 | Fax 518-457-0413 | | 05600 |
|---------------------|------------------|------------------|--|-------|

Delivery Location ID: 6643

| | | |
|-------------------------------|-----------------------------------|---------------------------|
| Address | City | Zip |
| 1400 Walt Whitman Rd. | Melville | 11747 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 16,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| | | |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

NYS OPRHP - Long Island Reg - Hither Hills SP

Contact Information

| | | | | |
|----------|------------------|------------------|-------------------------------|-------|
| Tom Dess | Tel 631-668-3781 | Fax 631-668-7893 | thomas.dess@oprhp.state.ny.us | 05600 |
|----------|------------------|------------------|-------------------------------|-------|

Delivery Location ID: 1709

| | | |
|-------------------------------|-----------------------------------|---------------------------|
| Address | City | Zip |
| 164 Old Montauk Hwy. | Montauk | 11954 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 8,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| OPRG(E) GAS REG | 1 | 1,000 |
| | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |

Suffolk

Delivery Point

NYS OPRHP - Long Island Reg - Montauk Downs SP

Contact Information

Thomas Dess Tel 631-668-3781 Fax 631-668-7893 thomas.dess@oprhp.state.ny.us 05600

Delivery Location ID: 2219

Address

50 South Fairview Ave.

City

Montauk

Zip

11954

Filed Requirements for Fuel Type: OPRG(E) GAS REG 7,000 Gallons

Tank(s) Detail

OPRG(E) GAS REG

Number of Tanks

1

Capacity Gal.

1,000

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - Port Jefferson

Contact Information

Michael Bahnsen Tel 631-642-0246 Fax michael.bahnsen@dot.ny.gov 05600

Delivery Location ID: 11541

Address

245 Hallock Rd.

City

Port Jefferson

Zip

11776

Filed Requirements for Fuel Type: OPRG(E) GAS REG 3,000 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

NYS DOT - S/F - Riverhead Yard

Contact Information

Gil Diaz Tel 516-727-0534 Fax 516-231-3142 05600

Delivery Location ID: 2941

Address

1900 Rte. 58

City

Riverhead

Zip

11901

Filed Requirements for Fuel Type: OPRG(E) GAS REG 8,000 Gallons

Tank(s) Detail

Number of Tanks

Capacity Gal.

AboveGround (AG)

VaporRecovery (VR)

Suffolk

Delivery Point

NYS DOT - F - Hampton Bays

Contact Information

| | | | |
|--------------|------------------|------------------|-------|
| Gil Diaz | Tel 516-727-0534 | Fax 516-231-3142 | 05600 |
| Site Manager | Tel 631-728-4390 | Fax 518-457-0413 | 05600 |

Delivery Location ID: 10162

| Address | City | Zip |
|-------------------------------|---|----------------------|
| Rte. 27 & Peonic Ave. | Shinnecock Hills | 11968 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 2,200 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

SUNY - Stony Brook University - Southampton College

Contact Information

| | | | | |
|--------------------|------------------|------------------|-----------------------------|-------|
| John Waldron | Tel 631-632-5058 | Fax 631-632-2447 | john.waldron@stonybrook.edu | 05600 |
| ordering questions | | | | |

Delivery Location ID: 10219

| Address | City | Zip |
|-------------------------------|---|----------------------|
| 239 Montauk Hwy. | Southampton | 11968 |
| Filed Requirements for | Fuel Type: OPRG(E) GAS REG | 7,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> <u>Capacity Gal.</u> <u>AboveGround (AG)</u> <u>VaporRecovery (VR)</u> | |

| Fuel Type Subtotals | |
|-----------------------------|----------------|
| OPRG(E) GAS REG | 442,016 |
| Suffolk County Total | 442,016 |

Sullivan

Delivery Point

NYS DOT - F - Kenoza Lake Subresidency New Truck Bay

Contact Information

Rick Shaddock Tel 845-482-5066 Fax rick.shaddock@dot.ny.gov 05600

Delivery Location ID: 50173

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 5935 Rte. 52 | Kenoza Lake | 12750 |
| Filed Requirements for | Fuel Type: GAS REG | 3,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 950 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | |

NYS DOT - F - Monticello - 97181

Contact Information

Ed Mall Tel 845-794-7450 Fax 518-457-0413 ed.mall@dot.ny.gov 05600

Delivery Location ID: 11269

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 165 East Broadway | Monticello | 12701 |
| Filed Requirements for | Fuel Type: GAS REG | 14,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | |
| | | <u>VaporRecovery (VR)</u> |
| | | |

NYS DOCCS - Woodbourne CF - Garage

Contact Information

Deven Bossert Tel 845-434-2080 x3966 Fax 845-434-2080 x2099 05600

Delivery Location ID: 8327

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 99 Prison Rd. | Woodbourne | 12788 |
| Filed Requirements for | Fuel Type: GAS REG | 30,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

Sullivan

Delivery Point

| Fuel Type Subtotals | |
|------------------------------|---------------|
| GAS REG | 47,000 |
| Sullivan County Total | 47,000 |

Tompkins

Delivery Point

NYS DOT - S/F - Ithaca - 37221

Contact Information

Site Manager Tel 607-756-7072 Fax 518-457-0413 05600

Delivery Location ID: 2665

Address

3rd St. Ext.

City

Ithaca

Zip

14850

Filed Requirements for Fuel Type: GAS REG 1,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 2,000 | AG | VR |

NYS OPRHP - Finger Lakes Reg - Robert H Treman SP

Contact Information

James Brophy Tel 607-273-3440 Fax 607-272-1886 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 21040

Address

Maintenance Shop

City

Ithaca

Zip

14850

Filed Requirements for Fuel Type: GAS REG 11,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 1,800 | AG | |

SUNY - Cornell - Fuel Farm

Contact Information

Tel Fax 05600

Sally Compton Tel 607-255-6261 Fax src4@cornell.edu 05600

Delivery Location ID: 6262

Address

307 East Palm Rd.

City

Ithaca

Zip

14853

Filed Requirements for Fuel Type: GAS REG 194,000 Gallons

| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| GAS REG | 1 | 7,000 | AG | |

Tompkins

Delivery Point

| Fuel Type Subtotals | |
|------------------------------|----------------|
| GAS REG | 206,000 |
| Tompkins County Total | 206,000 |

Ulster

Delivery Point

NYS Bridge Authority - Mid-Hudson Bridge 1

Contact Information

Joseph A. Rochfort Tel 845-691-7245 Fax jrochfort@nysba.ny.gov 05600

Delivery Location ID: 2472

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 44 - 55, Toll Plz. | Highland | 12528 |
| Filed Requirements for | Fuel Type: GAS REG | 25,500 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 3,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

NYS ORDA - Belleayre Mountain Ski Area

Contact Information

Dennis Fickeria, Sr. Tel 845-254-6072 Fax 845-254-5608 dafickeria@belleayre.com 05600

Lisa Morgan Tel 845-254-6214 Fax 845-254-5608 lamorgan@belleayre.com 05600

Delivery Location ID: 21056

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 181 Galli Curci Rd. | Highmount | 12441 |
| Filed Requirements for | Fuel Type: GAS MID | 8,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS MID | 0 | 6,000 |
| GAS MID | 1 | 8,000 |
| | | <u>AboveGround (AG)</u> |
| | | VR |
| | | <u>VaporRecovery (VR)</u> |

NYS Bridge Authority - Kingston Rhinecliff

Contact Information

Jared Geuss Tel 845-336-8181 Fax 845-336-4975 05600

Delivery Location ID: 2471

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 199, Toll Plz. | Kingston | 12401 |
| Filed Requirements for | Fuel Type: GAS REG | 13,600 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |

Ulster

Delivery Point

NYS DOT - S/F - Kingston

Contact Information

Site Manager Tel 845-471-5488 Fax 518-457-0413 05600

Delivery Location ID: 2921

Address

11 Quarry St.

City

Kingston

Zip

12443

Filed Requirements for Fuel Type: GAS REG 14,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

VaporRecovery (VR)

NYS Thruway Authority - Kingston Maint.

Contact Information

Dan Franz Tel 845-338-1316 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3025

Address

Interchange #19 Rte. 28

City

Kingston

Zip

12401

Filed Requirements for Fuel Type: GAS REG 60,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Town of Marlborough Highway Dept.

Contact Information

Delivery Location ID: 123530

Address

1650 Rte. 9w

City

Milton

Zip

12547

Filed Requirements for Fuel Type: GAS REG 55,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

3,000

AboveGround (AG)

AG

VaporRecovery (VR)

Ulster

Delivery Point

NYS DOT - S/F - Mt. Tremper

Contact Information

Site Manager Tel 845-331-5533 Fax 518-457-0413 05600

Delivery Location ID: 2927

Address

5056 Rte. 28

City

Mount Tremper

Zip

12457

Filed Requirements for Fuel Type: GAS REG 7,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

NYS DOCCS - Eastern NY CF - Motor Fueling Station

Contact Information

Jim Vogt Tel 845-647-7400 Fax 845-647-7400 x3299 05600

Delivery Location ID: 11096

Address

30 Institution Rd.

City

Napanoch

Zip

12458

Filed Requirements for Fuel Type: GAS REG 21,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

5,000

AboveGround (AG)

AG

VaporRecovery (VR)

NYS OPRHP - Palisades Reg - Minnewaska SP - Preserve

Contact Information

ERIC HUMPHREY Tel 845-255-0753 Fax 845-255-3505 eric.humphrey@parks.ny.gov 05600

Delivery Location ID: 2198

Address

5281 Rte. 44/55

City

New Paltz

Zip

12561

Filed Requirements for Fuel Type: GAS REG 11,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Ulster

Delivery Point

SUNY - New Paltz - Service Bldg. Auto Shop

Contact Information

James Miller Tel 845-257-3324 Fax 845-257-1280 millerj2@newpaltz.edu 05600

Delivery Location ID: 6544

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 1 Hawk Dr. | New Paltz | 12561 |
| Filed Requirements for | Fuel Type: GAS REG | 46,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOCCS - Shawangunk CF

Contact Information

Rebecca Scaringi Tel 845-895-2081 x3100 Fax 845-895-2081 x3299 rebecca.scaringi@doocs.ny.gov 05600

Delivery Location ID: 50030

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 200 Quick Rd. | Walkkill | 12589 |
| Filed Requirements for | Fuel Type: GAS REG | 18,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOCCS - Walkkill CF

Contact Information

Robert Milby Tel Fax 05600

Robert Milby Tel 845-895-2021 x3950 Fax 845-895-2021 x3299 robert.milby@doocs.ny.gov 05600

Delivery Location ID: 4816

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 208, 50 Mckendrick Dr. | Walkkill | 12589 |
| Filed Requirements for | Fuel Type: GAS REG | 30,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | |

Ulster

Delivery Point

NYS DOT - S/F - Wawarsing 87283

Contact Information

Keith Savoury Tel 845-331-5533 Fax 518-457-0413 bnear@dot.state.ny.us 05600

Delivery Location ID: 2593

| Address | City | Zip |
|-------------------------------|---------------------------|----------------------|
| Institution Ln. | Wawarsing | 12489 |
| Filed Requirements for | Fuel Type: GAS REG | 5,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 0 | 0 |
| GAS REG | 1 | 1,000 |

| Fuel Type Subtotals | |
|----------------------------|----------------|
| GAS MID | 8,000 |
| GAS REG | 306,100 |
| Ulster County Total | 314,100 |

Warren

Delivery Point

NYS ORDA - Gore Mountain Ski Area

Contact Information

| | | | | |
|--------------|------------------------|------------------|---------------------------|-------|
| Lori Bennett | Tel 518-251-4806 | Fax 518-251-5171 | lori@goremountain.com | 05600 |
| Neil Dunkley | Tel 518-251-2411 x1700 | Fax 518-251-5171 | ndunkley@goremountain.com | 05600 |

Delivery Location ID: 3102

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| Peaceful Valley Rd. | North Creek | 12853 |
| Filed Requirements for | Fuel Type: GAS MID | 20,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS MID | 1 | 6,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOT - S/F - Warrensburg - 17121, 17127

Contact Information

| | | | | |
|--------------|------------------|-----|-------------------------|-------|
| Rebecca Hoag | Tel 518-623-3511 | Fax | rebecca.hoag@dot.ny.gov | 05600 |
|--------------|------------------|-----|-------------------------|-------|

Delivery Location ID: 2607

| | | |
|-------------------------------|---------------------------|---------------------------|
| Address | City | Zip |
| 4021 Main St. , Rte. 9 | Warrensburg | 12885 |
| Filed Requirements for | Fuel Type: GAS REG | 18,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 2,000 |
| | | <u>AboveGround (AG)</u> |
| | | <u>VaporRecovery (VR)</u> |

| | |
|----------------------------|---------------|
| Fuel Type Subtotals | |
| GAS MID | 20,000 |
| GAS REG | 18,000 |
| Warren County Total | 38,000 |

Washington

Delivery Point

NYS DOCCS - Washington CF - Garage & Salt Storage

Contact Information

| | | | | |
|--------------|------------------------|------------------------|---------------------------|-------|
| Ann Fiorini | Tel 518-639-4486 x3100 | Fax 518-639-4486 x3299 | ann.fiorini@doccs.ny.gov | 05600 |
| Shelly LaFay | Tel 518-639-4486 x3220 | Fax 518-639-4486 x3299 | shelly.lafay@doccs.ny.gov | 05600 |

Delivery Location ID: 4891

| | | |
|----------------|-------------|------------|
| Address | City | Zip |
| 72 Lock 11 Ln. | Comstock | 12821 |

Filed Requirements for Fuel Type: GAS REG 65,000 Gallons

| | | | | |
|-----------------------|------------------------|----------------------|-------------------------|---------------------------|
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> | <u>AboveGround (AG)</u> | <u>VaporRecovery (VR)</u> |
| GAS REG | 1 | 6,000 | AG | VR |

| Fuel Type Subtotals | |
|--------------------------------|--------|
| GAS REG | 65,000 |
| Washington County Total | |
| | 65,000 |

Wayne

Delivery Point

NYS DOT - S/F - Newark - 48021

Contact Information

Greg Kerrick Tel 315-332-4000 Fax 518-457-0413 05600

Delivery Location ID: 2691

| Address | City | Zip |
|-------------------------------|---------------------------|----------------------|
| 1140 East Union St. | Newark | 14513 |
| Filed Requirements for | Fuel Type: GAS REG | 4,200 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 4,000 |

| Fuel Type Subtotals | |
|---------------------------|--------------|
| GAS REG | 4,200 |
| Wayne County Total | 4,200 |

Westchester

Delivery Point

NYS DOCCS - Bedford Hills Taconic

Contact Information

Nuala Odonohue Tel 914-241-3010 x3200 Fax 914-241-3010 x3299 nuala.odonohue@doccs.ny.gov 05600

Delivery Location ID: 50224

Address

250 Harris Rd.

City

Bedford Hills

Zip

10507

Filed Requirements for Fuel Type: OPRG(E) GAS REG 30,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - S/F - Arlo Lane Subresidency - 88144

Contact Information

Ray Bergin Tel 914-737-1280 Fax 914-232-0719 Raymond.Bergin@dot.ny.gov 05600

Delivery Location ID: 8258

Address

54 Arlo Ln.

City

Cortlandt Manor

Zip

10566

Filed Requirements for Fuel Type: OPRG(E) GAS REG 9,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS Thruway Authority - Larchmont Maint.

Contact Information

Garrett Weiss Tel 914-834-2909 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3027

Address

629 Fifth Ave.

City

Larchmont

Zip

10538

Filed Requirements for Fuel Type: OPRG(E) GAS REG 40,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Westchester

Delivery Point

SUNY - Purchase College - Facilities Garage

Contact Information

| | | | | |
|-----------------|------------------|------------------|------------------------------|-------|
| Elizabeth Pleva | Tel 914-251-6070 | Fax | Elizabeth.pleva@purchase.edu | 05600 |
| Steve Dorso | Tel 914-251-6918 | Fax 914-251-6935 | steven.dorso@purchase.edu | 05600 |

Delivery Location ID: 7036

Address

735 Anderson Hill Rd.

City

Purchase

Zip

10577

Filed Requirements for Fuel Type: OPRG(E) GAS REG 18,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS Thruway Authority - Tarrytown Tappan Zee Maint.

Contact Information

| | | | | |
|----------------|------------------|------------------|-----------------------------------|-------|
| Fabio Amendola | Tel 914-524-0264 | Fax 518-436-3011 | melissa.vandenburg@thruway.ny.gov | 05600 |
|----------------|------------------|------------------|-----------------------------------|-------|

Delivery Location ID: 3036

Address

333 South Broadway

City

Tarrytown

Zip

10591-5697

Filed Requirements for Fuel Type: OPRG(E) GAS REG 100,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - S/F - Eastview - 89151

Contact Information

| | | | | |
|------------------|------------------|-----|-----------------------------|-------|
| Annamarie Fecher | Tel 914-592-6557 | Fax | annamarie.fecher@dot.ny.gov | 05600 |
|------------------|------------------|-----|-----------------------------|-------|

Delivery Location ID: 8260

Address

1 Dana Rd.

City

Valhalla

Zip

10595

Filed Requirements for Fuel Type: OPRG(E) GAS REG 4,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Westchester

Delivery Point

NYS Thruway Authority - Cross-Westchester Maint.

Contact Information

Don Wood Tel 914-694-5413 Fax 518-436-3011 melissa.vandenburg@thruway.ny.gov 05600

Delivery Location ID: 3013

Address

565 Westchester Ave.

City

West Harrison

Zip

10604

Filed Requirements for Fuel Type: OPRG(E) GAS REG 15,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS DOT - S/F - Sprain Brook

Contact Information

Keith O'Connor Tel 914-779-4657 Fax 914-592-4956 keith.o'connor@dot.ny.gov 05600

Delivery Location ID: 2947

Address

300 Grassy Sprain Rd.

City

Yonkers

Zip

10710

Filed Requirements for Fuel Type: OPRG(E) GAS REG 7,000 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

NYS OPRHP - Taconic Reg - Franklin D. Roosevelt SP

Contact Information

Robert Guarino Tel 914-245-4434 Fax 914-245-7958 robert.guarino@parks.ny.gov 05600

OPRG(E) Deliver 7:00am- 3:00pm Ticket drop in the office

Delivery Location ID: 21360

Address

2957 Crompond Rd.

City

Yorktown Heights

Zip

10598-2917

Filed Requirements for Fuel Type: OPRG(E) GAS REG 8,150 Gallons

Tank(s) Detail Number of Tanks Capacity Gal. AboveGround (AG) VaporRecovery (VR)

Fuel Type Subtotals

| | |
|---------------------------------|----------------|
| OPRG(E) GAS REG | 231,150 |
| Westchester County Total | 231,150 |

Wyoming

Delivery Point

NYS DOCCS - Wyoming CF - Service Center

Contact Information

Shawn Embt Tel 585-591-1010 x3980 Fax 585-591-1010 x3299 05600

Delivery Location ID: 10226

Address

3203 Dunbar Rd.

City

Attica

Zip

14011

Filed Requirements for Fuel Type: GAS REG 50,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

VaporRecovery (VR)

NYS OPRHP - Genesse Reg - Letchworth SP - South Maint. Area

Contact Information

DOUGLAS KELLY Tel 585-493-3605 Fax doug.kelly@parks.ny.gov 05600

Delivery Location ID: 1948

Address

Main Park Rd. South

City

Castile

Zip

14427

Filed Requirements for Fuel Type: GAS REG 35,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

2

Capacity Gal.

2,000

AboveGround (AG)

AG

VaporRecovery (VR)

NYS DOT - S/F - Warsaw - 47071, 47101, 47077

Contact Information

Site Manager Tel 585-786-3310 Fax 518-457-0413 05600

Delivery Location ID: 2740

Address

3879 Rte. 19s

City

Warsaw

Zip

14569

Filed Requirements for Fuel Type: GAS REG 4,000 Gallons

Tank(s) Detail

GAS REG

Number of Tanks

1

Capacity Gal.

4,000

AboveGround (AG)

AG

VaporRecovery (VR)

VR

Wyoming

Delivery Point

| Fuel Type Subtotals | | |
|-----------------------------|---------|---------------|
| | GAS REG | 89,000 |
| Wyoming County Total | | 89,000 |

Yates

Delivery Point

NYS OPRHP - Finger Lakes Reg - Keuka Lake SP

Contact Information

William Farrand Tel 315-536-3666 Fax 315-536-7356 Laurie.McDonald@parks.ny.gov 05600

Delivery Location ID: 5386

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| 3560 Pepper Rd. | Bluff Point | 14478 |
| Filed Requirements for | Fuel Type: GAS REG | 2,587 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

NYS DOT - S/F - Penn Yan - 63114

Contact Information

John MacDowell Tel 607-535-4992 Fax 518-457-0413 05600

Delivery Location ID: 8245

| Address | City | Zip |
|-------------------------------|---------------------------|---------------------------|
| Rte. 14a South Of Penn Yan | Penn Yan | 14527 |
| Filed Requirements for | Fuel Type: GAS REG | 6,000 Gallons |
| <u>Tank(s) Detail</u> | <u>Number of Tanks</u> | <u>Capacity Gal.</u> |
| GAS REG | 1 | 1,000 |
| | | <u>AboveGround (AG)</u> |
| | | AG |
| | | <u>VaporRecovery (VR)</u> |
| | | VR |

| Fuel Type Subtotals | |
|---------------------------|--------------|
| GAS REG | 8,587 |
| Yates County Total | 8,587 |

Statewide Fuel Type Totals

| | |
|------------------|-----------|
| FLEX FUEL (E-85) | 226,400 |
| GAS MID | 293,000 |
| GAS PREM | 17,465 |
| GAS REG | 4,599,453 |
| OPRG(E) GAS MID | 40,000 |
| OPRG(E) GAS PREM | 99,500 |
| OPRG(E) GAS REG | 1,745,216 |

Statewide Total: 7,021,034