

**TOWN OXFORD**  
**Fuel Delivery and Inspection Form**

Date: \_\_\_\_\_

Time of Arrival: \_\_\_\_\_

Time of Departure: \_\_\_\_\_

Truck Number: \_\_\_\_\_

Name of Truck Driver: \_\_\_\_\_

Name of Town Employee: \_\_\_\_\_

**BEFORE UNLOADING:**

Is all spill response equipment and personal protective equipment in place?

Yes ☐ No ☐

In the case of bulk fuel delivery, does tank capacity exceed the amount of delivery?

Yes ☐ No ☐ N/A ☐

In the case of drum fuel delivery, are all drums free of leaks and punctures?

Yes ☐ No ☐ N/A ☐

**COMMENCE UNLOADING. REMAIN WITH VEHICLE AT ALL TIMES.**

**AFTER UNLOADING IS COMPLETE:**

Have all fuel containers, including the vehicle, been inspected for leaks?

Yes ☐ No ☐

Has the ground at the unloading point been inspected for evidence of leaks?

Yes ☐ No ☐

If there are any leaks or spills, has the material been properly cleaned?

Yes ☐ No ☐

Has the correct amount of fuel been delivered?

Yes ☐ No ☐

Has a receipt been collected?

Yes ☐ No ☐

**DELIVERY IS COMPLETE.**