

## **Fleet Program Interest Form**





COMPANY NAME			CONTACT NAME	
STREET ADDRESS	CITY		STATE	ZIP
EMAIL ADDRESS			PHONE	
WHAT BEST DESCRIB	BES YOUR FLEET? CHECK	CALL THAT APPLY		
CORPORATE FLEET	UTILITY & EDUCATION FL	EET GOVERNMENT & PUBLIC SAFETY FLEET		
☐ Construction	☐ Utility Fleets	☐ Federa	l Government	□ Ambulance
☐ Consumer Products/	☐ Telecom Fleets	☐ State/F	Provincial Government	☐ Fire
Manufacturing	☐ Other Utility	Munici	pal/Local Government	□ Police
☐ Transportation	☐ University/College/School	□ Other (	Government	<ul> <li>Other Public Safety</li> </ul>
☐ Other	■ Nonprofit			
S YOUR FLEET CENTRALLY N PLEASE CHECK THE FOLLOW DOES YOUR FLEET PROVIDE	MANAGED?	NTAGED COMMUNITY? - Ye		
S YOUR FLEET CENTRALLY N PLEASE CHECK THE FOLLOW DOES YOUR FLEET PROVIDE DO YOU CURRENTLY HAVE A	MANAGED?	NTAGED COMMUNITY?		
S YOUR FLEET CENTRALLY MELEASE CHECK THE FOLLOW DOES YOUR FLEET PROVIDE DO YOU CURRENTLY HAVE AN WHAT PERCENT (%) OF YOUR	MANAGED?	NTAGED COMMUNITY?	s 🗖 No	DATA COLLECTED
IS YOUR FLEET CENTRALLY MELEASE CHECK THE FOLLOWN DOES YOUR FLEET PROVIDE DO YOU CURRENTLY HAVE AN WHAT PERCENT (%) OF YOUR SIZE OF FLEET	MANAGED?	NTAGED COMMUNITY?	s □ No I that apply)	DATA COLLECTED  □ Fuel Costs
S YOUR FLEET CENTRALLY MELEASE CHECK THE FOLLOW DOES YOUR FLEET PROVIDE DO YOU CURRENTLY HAVE AN WHAT PERCENT (%) OF YOUR SIZE OF FLEET  Less than 50 vehicles	MANAGED? Yes No VING STATES WHERE YOU HAVE FI SERVICES FOR OR IN A DISADVAI NY ELECTRIC VEHICLES IN YOUR R FLEET IS CURRENTLY ELECTRIC	TAGED COMMUNITY?	I that apply) cks <10,000 lbs.)	☐ Fuel Costs
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