

**NORTH DAKOTA CORN COUNCIL BLENDER PUMP  
MATCHING GRANT APPLICATION FORM  
July 1, 2011 – April 30, 2013**



**\$2,500 PER PUMP – 1-4 pumps  
\$5,000 PER PUMP – 5-8 pumps  
Maximum 8 pumps per location**

**Locations installing more than 4 pumps per site will be eligible for \$5,000 per pump (pumps 5-8) from the Corn Council.**

**Please complete and submit this form with all required supporting documents.**

1. Name of Applicant: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_
  
2. Blender Pump Project Address (if different from above):  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
  
3. Contact Person Name: \_\_\_\_\_  
 Affiliation with Applicant: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**\*\* [www.blenderpumps.nd.gov](http://www.blenderpumps.nd.gov) provides guidelines for the state funding portion of \$5,000 per pump, including application State Form Number 59918 (06/11), certification form from the State Health Department, reimbursement form and other pertinent information.**

4. Budget: Fill out the budget information below:

Item	Total Cost
Materials	
<b>TOTAL</b>	

5. Number of gas / ethanol blender pumps being installed: \_\_\_\_\_
  
6. Expected project beginning date: \_\_\_\_\_ Expected completion date: \_\_\_\_\_

7. Name(s) of local area that will be served by the project (counties, cities, municipalities, etc), including major roadways within the service territory and other information that would be useful in evaluating the potential effectiveness of this project.

8. Will the pumps utilize resources (feedstock, refined product, or both) produced in ND?

Yes                       No

a. Please list where you anticipate getting your supply:

9. Reporting Ethanol Consumption. I am willing to share ethanol volumes sold for a six month period prior to and during the first 12 months after installation of blender pumps to the North Dakota Corn Council.

Yes                       No

Certification:

I, the undersigned authorized representative of the applicant, certify that to the best of my knowledge the information in the application is true and correct, and, if funded, the applicant will install pumps with nickel plated components and any required additions to handle high blends of ethanol in the manner described in this application and sell biofuels for a minimum of 12 months at the retail location listed above. I also certify that the applicant shall maintain accounting records in accordance with generally accepted governmental accounting principles and that the funds awarded will be included in those audits or financial statements that cover all or part of the project duration period noted above. I further certify that the applicant represents a gasoline retail station within the state of North Dakota and is in compliance with all local, state and federal laws and regulations for constructing and operating motor fuel storage and dispensing equipment. I also further certify that the applicant is in good financial standing and has no delinquencies on existing North Dakota State Government grants or loans.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Mail an original of the completed grant application and any supporting documents to:

**North Dakota Corn Utilization Council**  
**1411 32<sup>nd</sup> Street S, Ste 2**  
**Fargo, ND 58103**  
**(701)364-2250**

<b>For ND Corn Council Use Only</b>	
_____	Date Received
_____	Date approval letter from ND Commerce received
_____	Approved by ND Corn Council
_____	Denied by ND Corn Council
_____	Signature / Initials