

PIONEER VALLEY OIL, INC.

40 O'Neil Street, Easthampton, MA 01027 • 1512 Memorial Drive, Chicopee, MA 01020 42 Crystal Street, Lenox Dale, MA 01242, P.O. Box 385 Toll Free 1-866-883-HEAT (4328) • (413) 568-4443 • (413) 532-4443 • (413) 448-2444 PIONEERVALLEYOIL.COM

2025/2026 FIXED PRICE PRE-PAY PLAN \$3.099 PER GALLON - OIL

Delivery Period Beginning: September 1, 2025 Delivery Period Ending: April 30, 2026

PIONEER VALLEY OIL, INC. is offering you a fixed price pre-pay plan for the 2025-2026 heating season which allows you to pay for your annual heating requirements in full on or before July 20, 2025 at a fixed price of \$3.099-per gallon - oil (400 gallon minimum).

Only while supplies last.

This plan will cover deliveries from September 1, 2025 through April 30, 2026. Any deliveries after prepaid **gallons** are used, will be charged at the current cash price for that day.

As a fixed price pre-pay customer, you must be on **automatic delivery.** You will only be removed from our automatic delivery if you notify us by phone or in writing after April 30, 2026. Any deliveries made after April 30, 2026 will be billed at the current cash price for that day. No cash refunds will be issued. Any credit must be taken in oil.

Please note that this agreement will not be valid if the supply of oil or propane is affected due to an act of war, national emergency, disaster or unavailability of oil. Early termination of contract will result in a \$500.00 fee. Refusal of delivery will result in a \$60.00 fee.

Please sign and return to our office with your payment by June 20, 2025. Cash, Check, Credit/debit card payments will be accepted.

All checks should be payable to: PIONEER VALLEY OIL, INC.



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Delivery Period Beginning: September 1, 2025	Delivery Period Ending: Ap	oril 30, 2026
Estimated yearly gallons - oil X (Minimum - 400 gallons)		
Plus or minus any credit	-	
Payment due by \$		
PLEASE CHOOSE A PAYMENT METHOD BEL	ow	
VISA MC DEBIT		
Account#	Expiration Date	_CVC
CHECK# in the amount of \$		_
CASH		
NAME (PLEASE PRINT)		
ADDRESS:		
CITY:		
TELEPHONE#:	_ CELL#	
EMAIL:		
By signing this contract I agree that I have read, and understand delivery service works.	and, how the fixed price pre-pay pla	n and automatic
l,, agre	e to the terms and conditions of	this plan.

DATE _____

SIGNATURE ____