

Eligibility Application

NORTH CAROLINA DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF WASTE MANAGEMENT
UNDERGROUND STORAGE TANK SECTION
PETROLEUM UNDERGROUND STORAGE TANK CLEANUP FUNDS

Instructions

Submit this application to access the Commercial or Noncommercial State Trust Funds. The application must be completed by the owner/operator of the underground storage tank(s), or landowner. Submit one application for each discharge or release before seeking reimbursement.

This application can be completed and printed from our Web site or you can save it to your personal computer and complete it later. Before you complete the form, check each answer carefully. Incomplete applications will be returned. Drop down boxes left blank will automatically be filled with a default answer, which may cause your application to be returned. Please send in the original, signed document, as copied applications will be returned. If you have any questions, please call 919.733.8486. When complete, mail applications to:

DENR
DIVISION OF WASTE MANAGEMENT
UST SECTION
1637 MAIL SERVICE CENTER
RALEIGH NC 27699-1637

I. Supporting Information

Please provide all information requested and attach all additional information necessary.

1. Facility ID # 0- _____ Site Priority Ranking _____ (Obtain from your regional office)
Incident # _____
2. UST(s) site address Street _____
City _____, NC Zip _____ County _____
3. Name of current site occupant(s) Name _____
Name _____
Name _____
4. Name of the current landowner(s) Name _____
Name _____
Name _____
5. Last owner of UST while in use Name _____
Street _____
City _____, NC Zip _____ County _____
Phone (____) _____
6. Name of consultant or other party to be copied on correspondence Name _____
Street _____
City _____, NC Zip _____ County _____
Phone (____) _____
7. If the tanks on this site are not currently in use, please supply the same data for the last tank operator when tanks were in operation:
Name _____
Street _____
City _____, NC Zip _____ County _____
Phone (____) _____

8. Date discharge or release first discovered? _____

a. How discharge or release was discovered?
(If you chose "other," please detail here.) _____

b. Date discharge or release reported to Department? _____

c. How discharge or release was reported?
(If you chose "other," please detail here.) _____

9. Please provide the following data for all petroleum or non-petroleum UST(s) and/or AST(s) at this location. Check your answers carefully. Drop down boxes left blank will automatically be filled with a default answer, which may cause your application to be returned. If you need additional room, complete [Attachment A](#) and turn it in with your completed application. In the "Contents" column, enter contents when different from the available selections.

UST or AST	Install Date	Date Acquired*	Tank #	Volume in gals.	Contents	Use	Last date used	Removed? Permanently closed?	Permanent closure date	If tank leaked, enter date

*Enter only if different than install date.

10. Are there any other possible sources of contamination at this site other than the UST(s) and/or AST(s) listed above? _____

If "yes," please explain.

What We Need From You

11. Please provide the following for this site. Attach all documents, clearly labeled, to your completed application.
- a. Scaled site map with location and i.d.# for all USTs, ASTs and product lines ever used at this site. Show relation to property lines and structures. Please indicate sample locations.
 - b. If release or discharge was detected on or after January 1, 1994, complete the *Compliance Certification* form included in this file. If the release resulted solely from a noncommercial UST do NOT complete this form.
 - c. If the release occurred after January 1, 1994 and the tanks met the 1998 upgrade requirements, attach dated copies of invoices and receipts for all equipment and services needed to comply with upgrade.
 - d. Attach documentation to verify the last date that each UST or AST listed above was used. Examples include: petroleum distributor invoices with last product delivery date, gas company statement with connection date indicated or third party affidavits.
 - e. Completed "Non-Recovery From Other Sources Disclosure Certification" form included in this file. Note: Please call 919.733.8486 if any information provided on this form is altered due to your actions.
 - f. Copy of the "24 Hour Report" and test results showing soil and/or groundwater contamination.

II. Non-Recovery From Other Sources Disclosure Certification

Facility Name _____ Facility ID#: 0- _____

Incident # _____

1. Other Source Funds

Have you, or anyone acting on your behalf, received funds from any source (including, but not limited to, lawsuits, settlements, judgments, contributions from other potentially responsible parties, insurance claims, lending institutions or any other source regardless of how the funds were characterized) related in any way to the release for which you request reimbursement from the Leaking Petroleum Underground Storage Tank Cleanup Funds? _____

If you answered "yes," provide the following data; if you answered "no," please skip down to question 2.

- a. List each source of funds and the amount. Enter "Funds paid for" if it is different from the available selections.

Date	Source	Funds paid for	Amount
			\$
			\$
			\$
			\$
			\$
			\$

- b. If any of the money received was for purposes other than contamination cleanup costs, attach documentation (settlement agreement, pleading, judgements, or any other document that identifies the purpose(s) for which the money was received) to support that fact.
- c. Are you obligated to repay any part of the funds received? _____
If you answered "yes," attach documentation indicating amount to be repaid.

2. Insurance

Is there now or has there ever been an insurance policy covering this site? _____

a. If you answered "yes," please provide the following data.

Company Name	Policy #	Claim Rep. Name	Claim Rep phone #

b. Have you already or do you intend to file a claim with the insurance carrier(s)? _____

If you answered "yes," attach an explanation of the status of the claim and copies of the latest insurance company correspondence.

c. If you answered "no," provide your reasons in the space below.

3. Litigation

Do you contend that any other person is liable or otherwise responsible for the release? _____

If you answered "yes," please explain below.

a. Have you sought or do you intend to seek money from any other party potentially responsible for the release? _____

If you answered "yes," provide the data requested below; if you answered "no," please skip to Section III.

For each party, list name, address, telephone number and representative.

Name	Mailing Address	Telephone	Representative

b. Has legal action commenced? _____

If you answered "yes," please provide the case number and the county in which the action has been filed. Attach a copy of the complaint and any complaint amendments to this application.

Case Number	County

III. Commercial UST Compliance Certification

Complete this section if your release was detected on or after January 1, 1994. Include data for all underground storage tanks that contributed to the release(s).

Facility ID # 0- _____ Facility Name _____

Incident # _____ UST Operating Permit #* _____
*Only applicable to commercial USTs operating on or after July 1, 1996.

1. Before you discovered the release or discharge, were all USTs that contributed fully upgraded to 1998 standards? Please answer "yes" or "no" for each of the following questions.

a. Were the USTs protected from corrosion? _____

b. Were the piping systems protected from corrosion? _____

c. Were spill buckets installed? _____

d. Was overfill prevention equipment installed? _____

If you answered "yes" to each question, please skip to section IV.

2. Before January 1, 1994, did the owner or operator provide the Department with written notice of their intent to permanently close or upgrade the UST(s) to the 1998 technical standards? _____

If you answered "yes," please attach a copy of the notification.

a. Was the closure/upgrade started before July 1, 1994?
If you answered "yes," attach a copy of the notification. _____

b. Was the closure/upgrade completed before January 1, 1995?
If you answered "yes," attach a copy of the notification. _____

c. Was the discharge or release reported before January 1, 1995?
If you answered "yes," attach a copy of the notification. _____

IV. Compliance with Corrosion Protection Certification

Complete for each UST that contributed to the release. If you need additional room, please complete [Attachment B](#) and turn it in with your completed application.

1. Corrosion protection

Please check your answers carefully. Drop down boxes left blank will automatically be filled with a default answer, which may cause your application to be returned. If you need additional room, please complete [Attachment B](#) and turn it in with your completed application.

Tank #	Capacity (gal.)	Contents	Tank Corrosion Protection	Pipe Corrosion Protection	Date Protection Installed

2. Spill/Overfill Prevention Equipment

Please check your answers carefully. Drop down boxes left blank will automatically be filled with a default answer, which may cause your application to be returned. If you need additional room, please complete [Attachment C](#) and turn it in with your completed application.

Tank #	Capacity (gal.)	Content	Spill Protection	Overfill Protection	Date Protection Installed

V. Affidavit

I/We . (Check the box that applies)

- the owner(s) and/or operators(s) of underground storage tank(s),
- the current landowner(s) who is(are) not owner(s) or operator(s) of underground storage tank(s), contributing to an occurrence(s) of petroleum contamination in soil and/or groundwater. The contamination occurred at the following address:

Contaminated Site Address _____

 City _____ State _____ Zip _____

- A. have not willfully violated any substantive law, rule, or regulation applicable to underground storage tanks (USTs) and intended to prevent or mitigate discharges or releases or to facilitate the early detection of discharges or releases;
- B. have not caused or contributed to the discharge or release due to willful or wanton misconduct;
- C. have paid any annual operating fees due pursuant to G.S. 143-215.94C;
- D. have identified and fully disclosed any fee, commission, percentage, gift, or other consideration which any owner, lessee, or operator and the person responsible for conducting the site rehabilitation has or will receive as a result of his employment of a person, company, corporation, individual, or firm for purposes of conducting site rehabilitation;
- E. understand that the Funds are only for reimbursement of costs expended for cleanup of releases and discharges of petroleum from underground storage tanks;
- F. understand that the owner or operator is required to comply with all statutes and rules relating to the subject cleanup action regardless of eligibility for any reimbursement from the Funds;
- G. understand that reimbursement from the Funds for cleanup costs does not in any way represent a determination by the Department that the subject cleanup is being performed in compliance with all applicable statutes and rules;
- H. understand that the applicable deductible(s) per occurrence or site must be met prior to any monies being reimbursed from the Funds;
- I. understand that reimbursement from the Funds shall only be for costs directly related to the subject cleanup and determined to be reasonable and necessary by the Department, that reimbursement requests shall be subject to audit by the Department, and that the Department may seek recovery of any reimbursed funds relating to ineligible costs;
- J. have provided the information contained in this application and believe it to be true and accurate; and
- K. understand that submission of a false statement, representation, or documentation to the Department under Article 21 of Chapter 143 of the General Statutes, or under any rules adopted shall be guilty of a misdemeanor, punished by a fine not to exceed ten thousand dollars (\$10,000), or by imprisonment not to exceed six months or both, and may result in ineligibility for reimbursement from the Funds.
- L. swear that the information provided on this form and all attachment are true and valid to the best of my (our) knowledge.
- M. hereby authorize to the Department of Environment and Natural Resources to contact and obtain any information deemed necessary from any of the above-named parties for the purpose of determining applicant eligibility and the amount eligible for reimbursement from the Leaking Petroleum Underground Storage Tank Cleanup Funds.
- N. hereby declare under penalty of perjury that all facts and statements set forth herein are true and correct to the best of my (our) knowledge and belief.
- O. also declare that if funds are received after completion of this Certification, I (we) will notify the Department promptly. If reimbursement is received from the Department, and we have also received funds from other sources, I (we) will remit to the Funds the amount determined by the Department to be double payment.
- P. understand that any misrepresentation made on this form, or failure to disclose funds received or funds which may be received in the future, will result in the disqualification of the claim.

Applicant name/Signatory*	Title	Company
Applicant address	Applicant Telephone number	
Applicant signature	Date	Fed ID / SS #

Before me personally appeared _____ known to me to be the person described in and who executed the foregoing instrument to and before me that executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this _____ day of _____, 20 _____

Notary Public _____ My commission expires _____

STATE OF _____ COUNTY OF _____

*Attach copy of power of attorney or executor document.