

ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION UNDERGROUND STORAGE TANK PROGRAM

SUPPLEMENTAL INFORMATION TO CERTIFICATION OF FINANCIAL RESPONSIBILITY

Owners or Operators of Underground Storage Tank (UST) systems are required to provide proof of Financial Responsibility (FR) annually to the Alaska Department of Environmental Conservation (ADEC.) FR submittals or verification of FR are also required when installing a new UST, responding to a cleanup, changing FR mechanisms, or at specific request of ADEC. Financial Responsibility is required for underground storage tanks owned or operated by private parties or local governments. State and Federal owners and operators are exempt from this requirement.

A. Owner/Operator Information

1. Owner ID: _____ 2. Owner Name: _____
3. Owner Type: Please Check one: Petroleum Marketer Petroleum Non-Marketer
4. Monthly Throughput*: Please check one:
 Less than 10,000 gallons 10,000 gallons or more
5. Number of Tanks*: Total number of regulated tanks _____ *nationwide if applicable

B. Facility Information (please use additional forms if you have more facilities)

1. ADEC ID #		FACILITY NAME & LOCATION:	
2. ADEC ID #		FACILITY NAME & LOCATION:	
3. ADEC ID #		FACILITY NAME & LOCATION:	
4. ADEC ID #		FACILITY NAME & LOCATION:	
5. ADEC ID #		FACILITY NAME & LOCATION:	
6. ADEC ID #		FACILITY NAME & LOCATION:	

C. Financial Responsibility Information

I have provided the following completed and signed Certificate of Financial Responsibility form to ADEC because of one of the following (please check applicable boxes):

- Newly installed UST system
 Response to a cleanup
 Request by ADEC or EPA
 Annual proof to ADEC
 FR mechanism changed
 Other_____

Please return completed forms to:
ADEC, UST FR Coordinator
410 Willoughby #303, P.O. Box
111800, Juneau, AK 99811-1800

Financial Responsibility Questions?
ADEC, FR Coordinator
907-465-5233/ Fax 907-465-5245
<http://www.dec.state.ak.us/spar/ipp/tanks.htm>

General Underground Storage Tank Questions?
UST Manager: (907) 269-8149

Certification of Financial Responsibility

In accordance with 40 CFR 280.111(b)(11)(i).

_____ [name of Owner or Operator]
hereby certifies that he / she is in compliance with the requirements of Subpart H of 40 CFR Part 280 and 18 AAC 78.910. The financial assurance mechanism(s) used to demonstrate financial responsibility under Subpart H of 40 CFR Part 280 and 18 AAC 78.910 are as follows:

Type of Mechanism (circle all that apply):

Insurance, Risk Retention Group, Self Insurance, Guarantee, Letter of Credit,
Fully Funded Trust Fund, Standby Trust Fund, Surety Bond, Local Government Bond,
Local Government Guarantee, Local Government Test.

Name of Insurer or company providing financial responsibility:

Mechanism Number (insurance policy number):

Amount of Coverage:

Per occurrence: _____ Annual aggregate: _____.

Effective Period of Coverage:

From _____ to _____.

Included Coverage (circle all that apply):

“Taking corrective action”, “Compensating third-party damages” for “sudden accidental”,
“non-sudden accidental” or “accidental” releases.

Signature of witness or notary

Signature of owner or operator

Name of witness or notary

Name of owner or operator

Date

Title

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Please mail this Certification and Proof of FR to: ADEC, UST FR Coordinator, 410 Willoughby Ave.,
Suite 303, P.O. Box 111800, Juneau, AK 99811-1800 or fax to (907) 465 - 5245.

(rev.9/19/2012)