# Financial Assurance Form

**Arkansas Department of Environmental Quality**  
**Regulated Storage Tanks Division**  
5301 Northshore Drive  
North Little Rock, AR 72118-5317

## Financial Assurance Form

1. **Owner Name and Address:**
   
<table>
<thead>
<tr>
<th>Address 1</th>
<th>Address 2</th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>
   
   **Telephone #:**

2. **Facility Name and Address:**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address 1</th>
<th>Address 2</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

   **Telephone #:**

3. **Number of Regulated Storage Tank Systems at this Facility. Include those currently 'in-use' and any that are temporarily closed:**
   
   - Aboveground - Number of Tanks: __________
   - Belowground - Number of Tanks: __________

4. **Are your storage tank systems registered correctly with the Arkansas Department of Environmental Quality?**

   - Yes
   - No

5. **Indicate method of financial assurance:**

   - Petroleum Storage Tank Trust Fund
   - Insurance
   - Guaranty
   - Surety Bond
   - Letter of Credit
   - Insurance Pool
   - Other mechanism allowed by 40 CFR 280

6. **If Petroleum Storage Tank Trust Fund is checked in number 5 above, do you have financial responsibility in the deductible amounts of $7,500 per occurrence for corrective action costs and $7,500 per occurrence for third-party claims, by any one or combination of the following: insurance, guaranty, surety bond, letter of credit, insurance pool, or other mechanism allowed by 40 CFR 280 and Arkansas Pollution Control and Ecology Commission Regulation No. 12?**

   - Yes
   - No

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### Certification

(Read and sign only after completing items 1-6)

I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this document, and that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

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**Owner's Name (Please Print):**

**Owner's Signature:**

**Date Signed:**

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Financial Assurance Form – Revised 08/22/2013