



State of California
State Water Resources Control Board
Division of Financial Assistance
P.O. Box 944212
Sacramento, CA 94244-2121

(Instructions on reverse side)

For State Use Only

CERTIFICATION OF FINANCIAL RESPONSIBILITY FOR UNDERGROUND STORAGE TANKS CONTAINING PETROLEUM

A. I am required to demonstrate Financial Responsibility in the required amounts as specified in California Code of Regulations (CCR), Title 23, Division 3, Chapter 18, Section 2807,



500,000 dollars per occurrence



1 million dollars annual aggregate

or

AND

or



1 million dollars per occurrence



2 million dollars annual aggregate

B. Make Believe Co. hereby certifies that it is in compliance with the requirements of Section 2807,

(Name of Tank Owner or Operator)

California Code of Regulations, Title 23, Division 3, Chapter 18, Article 3, Section 2807.

The mechanisms used to demonstrate financial responsibility as required by Section 2807 are as follows:

C. Mechanism Type	Name and Address of Issuer	Mechanism Number	Coverage Amount	Coverage Period	Corrective Action	Third Party Comp
State UST Fund	State UST Cleanup Fund P.O. Box 944212 Sacramento, CA 94244-2120	N/A for UST Cleanup Fund	\$995,000 per Occurrence and Annual Aggregate	State UST Cleanup Fund Continuous	YES	YES
Chief Financial Officer Letter	Make Believe Co. 123 Tank Street Fund City, CA 90001	N/A for this mechanism	\$5,000 per Occurrence and Annual Aggregate	Annual	YES	YES

Note: This is a sample certification of a petroleum UST owner or operator using the State Cleanup Fund as the Financial responsibility mechanism, in conjunction with the state alternative mechanism "Letter from Chief Financial Officer." For additional information and requirements refer to Title 23, Division 3, Chapter 18, of the California Code of Regulations and Division 20, Chapter 6.75 of the California Health and Safety Code.

Note: If you are using the State Fund as any part of your demonstration of financial responsibility, your execution and submission of this certification also certifies that you are in compliance and shall maintain compliance with all conditions for participation in the Fund. See instructions.

D. Facility Name	Make Believe Co.	Facility Address	Station #1 123 Tank Street Fund City, CA 90002
Facility Name	Make Believe Co.	Facility Address	Station #2 200 Site Avenue Fund City, CA 90002
Facility Name		Facility Address	
E. Signature of Tank Owner or Operator	Date	Name and Title of Tank Owner or Operator	
	7-3-07	Rhea Cycle - Owner	
Signature of Witness or Notary	Date	Name of Witness or Notary	
	7-3-07	Tom Storage	



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Note:

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D. Facility Name	Facility Address	
Facility Name	Facility Address	
Facility Name	Facility Address	
E. Signature of Tank Owner or Operator	Date	Name and Title of Tank Owner or Operator
Signature of Witness or Notary	Date	Name of Witness or Notary

INSTRUCTIONS

CERTIFICATION OF FINANCIAL RESPONSIBILITY

Please type or print information clearly. All UST sites owned or operated may be listed on one form, therefore, a separate certification is not required for each site.

DOCUMENT INFORMATION

- A. **Coverage Required** Check the appropriate boxes.
- B. **Name of Tank Owner or Operator** Full name of either the tank owner or the operator
- C. **Mechanism Type** Indicate which approved mechanism(s) are being used to show financial responsibility either as contained in the federal regulations, 40 CFR Part 280 Subpart H, Sections 280.93 through 280.107, or Section 2808.1 Chapter 18, Div. 3, Title 23, CCR (see Financial Responsibility Guide for more information). (See the Financial Responsibility Guide for more information at:
http://www.waterboards.ca.gov/water_issues/programs/ustcf/financialresponsibility.shtml

If using the State Cleanup Fund to demonstrate financial responsibility, you must meet all applicable eligibility requirements contained in California Health and Safety Code, Chapter 6.75, Division 20 and Title 23 of the California Code of Regulations, Division 3, Chapter 18. The payment of UST storage fees imposed pursuant to Article 5 of Chapter 6.75 of Division 20 of the Health and Safety Code does not guarantee funding – persons using the State Cleanup Fund must satisfy all applicable eligibility requirements.

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|---------------------------------|--|
| Name of Issuer | List all names and address of companies and/or individuals issuing coverage. |
| Mechanism Number | List identifying number for each mechanism used. Example: insurance policy number, Letter of Credit number, etc., etc. If using the State Cleanup Fund, leave blank. |
| Coverage Amount | Indicate amount of coverage for each listed mechanism. If more than one mechanism is indicated, total must equal 100% of financial responsibility for each site. |
| Coverage Period | Indicate the effective date(s) of all mechanisms. State Cleanup Fund coverage is continuous as long as you maintain compliance and remain eligible to participate in the Fund. |
| Corrective Action | Indicate yes or no. Does the specified financial assurance mechanism provide coverage for corrective action? It is a required coverage. If using the State Cleanup Fund, indicate "yes." |
| Third Party Compensation | Indicate yes or no. Does the specified financial assurance mechanism provide coverage for corrective action? It is a required coverage. If using the State Cleanup Fund, indicate "yes." |
- D. **Facility Information** Provide all facility and or site names and addresses.
- E. **Signature Block** Provide signature and date signed by tank owner or operator; printed or typed name and title of tank owner or operator; signature of witness or notary and date signed; and printed or typed name of witness or notary. (If notary signs please attach documentation.)

Where to Mail certification:

Please send original to your local agency(ies) [agency(ies) that issues the UST permits]. Keep a copy of the certification at each listed site. For information on your local agency(ies) refer to <http://www.calcupa.net/contact/default.asp>.

Questions:

If you have questions about financial responsibility requirements or about the Certification of Financial Responsibility form, please contact the State Water Resources Control Board, Underground Storage Tank Cleanup Fund at 1-800-813-FUND (3863) or refer to http://www.waterboards.ca.gov/water_issues/programs/ustcf/contactus.shtml.

Note: Penalties for Failure to Comply with Financial Responsibility Requirements:

Failure to comply may result in: 1) jeopardizing claimant eligibility for the State Cleanup Fund, and 2) liability for civil penalties of up to \$10,000 per day, per underground storage tank, for each day of violation as stated in Article 7, Section 25299.76(a) of the California Health and Safety Code.