Letter from Chief Financial Officer

Director

Arkansas Department of Environmental Quality

8001 National Drive, P.O. Box 8913

Little Rock, Arkansas 72219-8913

I am the chief financial officer of Name and address of firm. This letter is in support of this firm’s use of the financial test to demonstrate financial assurance for closure and/or post-closure costs, as specified in subsection H of APC&EC Regulation No. 23 (Hazardous Waste Management) Sections 264 and 265.

1. This firm is the owner or operator of the following facilities in Arkansas for which financial assurance for closure or post-closure care is demonstrated through the financial test specified in subsection H of Regulation No. 23 sections 264 and 265. The current closure and/or post-closure cost estimates covered by the test are shown for each facility:

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

1. This firm guarantees, through the guarantee specified in subsection H of Regulation No. 23 sections 264 and 265, the closure or post-closure care of the following facilities owned or operated by the guaranteed party. The current cost estimates for the closure or post-closure care so guaranteed are shown for each facility:

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

The firm identified above is *(check all that apply)*

[ ]  The direct or higher-tier parent corporation of the owner or operator;

[ ]  owned by the same parent corporation as the parent corporation of the owner or operator, and receiving the following value in consideration of this guarantee      ; or

[ ]  engaged in the following substantial business relationship with the owner or operator      , and receiving the following value in consideration of this guarantee      .

1. In states other than Arkansas, this firm, as owner or operator or guarantor, is demonstrating financial assurance for the closure or post-closure care of the following facilities through the use of a test equivalent or substantially equivalent to the financial test specified in subsection H of Regulation No. 23 sections 264 and 265. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility:

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

1. This firm is the owner or operator of the following hazardous waste management facilities for which financial assurance for closure or, if a disposal facility, post-closure care, is not demonstrated either to EPA or the State of Arkansas through the financial test or any other financial assurance mechanism specified in subsection H of Regulation No. 23 sections 264 and 265. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility:

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

1. This firm is the owner or operator of the following UIC facilities for which financial assurance for plugging and abandonment is required under 40 CFR part 144. The current closure cost estimates as required by 40 CFR 144.62 are shown for each facility:

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

Choose an item.

(EPA Identification Number)

(Name)

(Address)

$

(Amount)

This firm Choose an item. to file a Form 10K with the Securities and Exchange Commission (SEC) for the latest fiscal year.

The fiscal year of this firm ends on Choose an item., Choose an item.. The figures for the following items marked with an asterisk are derived from this firm’s independently audited, year-end financial statements for the latest completed fiscal year, ended Click here to enter a date..

Alternative I

1. Sum of current closure and post-closure cost estimate $total cost estimates shown in five paragraphs above.

\*2. Total liabilities $if any portion of the closure or post-closure cost estimates is included in total liabilities, you may deduct the amount of that portion from this line and add that amount to lines 3 and 4

\*3. Tangible net worth $

\*4. Net worth $

\*5. Current assets $

\*6. Current liabilities $

\*7. Net working capital $line 5 minus line 6

\*8. The sum of net income plus depreciation, depletion, and amortization $

\*9. Total assets in U.S. (required only if less than 90% of firm’s assets are located in the U.S.) $

1. Is line 3 at least $10 million? Choose an item.
2. Is line 3 at least 6 times line 1? Choose an item.
3. Is line 7 at least 6 times line 1? Choose an item.

\*13. Are at least 90% of firm’s assets located in the U.S.? If not, complete line 14 Choose an item.

1. Is line 9 at least 6 times line 1? Choose an item.
2. Is line 2 divided by line 4 less than 2.0? Choose an item.
3. Is line 8 divided by line 2 great than 0.1? Choose an item.
4. Is line 5 divided by line 6 greater than 1.5? Choose an item.

Alternative II

1. Sum of current closure and post-closure cost estimates $total cost estimates shown in five paragraphs above
2. Current bond rating of most recent issuance of this firm and name of rating service
3. Date of issuance of bond Click here to enter a date.
4. Date of maturity of bond Click here to enter a date.

\*5. Tangible net worth $if any portion of the closure and post-closure cost estimates is included in "total liabilities" on your firm's financial statements, you may add the amount of that portion to this line

\*6. Total assets in U.S. (required only if less than 90% of firm’s assets are located in the U.S.) $

1. Is line 5 at least $10 million? Choose an item.
2. Is line 5 at least 6 times line 1? Choose an item.

\*9. Are at least 90% of firm’s assets located in the U.S.? If not, complete line 10 Choose an item.

1. Is line 6 at least 6 times line 1? Choose an item.

I hereby certify that the wording of this letter is identical to the wording specified in APC&EC Regulation No. 23 § 264.151(f) as such regulations were constituted on the date shown immediately below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date