LETTER FROM CHIEF FINANCIAL OFFICER

(Closure and/or Post-Closure Care)

Secretary

Louisiana Department of Environmental Quality

Post Office Box 4313

Baton Rouge, Louisiana 70821-4313

Attention: Office of Environmental Services,

Waste Permits Division

Dear Choose an item.:

I am the chief financial officer of INSERT 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   
LAC 33:V.Chapter 37 and 43.

**DELETE BEFORE PRINTING - Fill out the following five paragraphs. If there are no facilities that belong in a particular paragaph, select "None".**

**DELETE BEFORE PRINTING - For each facility, include its EPA ID Number, name, address, and current closure and/or post-closure cost estimates. Identify each cost as to whether it is for closure or post-closure.**

1. This firm is the owner or operator of the following facilities for which financial assurance for closure or post-closure costs is being demonstrated through the financial test specified in LAC 33:V.Chapters 37 and 43. The current closure and/or post-closure cost estimates covered by the test are shown for each facility: Choose an item.

2. This firm guarantees, through the guarantee specified in   
LAC 33:V.Chapters 37 and 43, financial assurance for closure or post-closure costs at 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.

The firm identified above is INSERT one or more: (1) the direct or higher-tier parent corporation of the owner or operator; (2) 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 (3) engaged in the following substantial business relationship with the owner or operator \_\_\_\_\_\_\_, and receiving the following value in consideration of this guarantee \_\_\_\_\_\_\_\_\_\_\_\_\_. [Attach a written description of the business relationship or a copy of the contract establishing each relationship to this letter.]

3. In states other than Louisiana, 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 LAC 33:V.Chapters 37 and 43. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility: Choose an item. .

4. 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 the U.S. Environmental Protection Agency or to a state through the financial test or any other financial assurance mechanism specified in LAC 33:V.Chapters 37 and 43 or equivalent or substantially equivalent state mechanisms. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility: Choose an item..

5. This firm is the owner or operator or guarantor 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..

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..

**DELETE BEFORE PRINTING - Fill in Alternative I if the first criteria of LAC 33:V.3707.F.1 or 3711.F.1 or the first criteria of LAC 33:V.4403.E.1 or 4407.E.1 are used.**

| **Alternative I** | | |
| --- | --- | --- |
| 1. Sum of current closure and post-closure estimates [total of all cost estimates shown in the 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 percent of firm's assets are located in the U.S.): | $ | |
|  | YES | NO |
| 10. Is line 3 at least $10 million? |  |  |
| 11. Is line 3 at least six times line 1? |  |  |
| 12. Is line 7 at least six times line 1? |  |  |
| \*13. Are at least 90 percent of firm's assets located in the U.S.? If not, complete line 14. |  |  |
| 14. Is line 9 at least six times line 1? |  |  |
| 15. Is line 2 divided by line 4 less than 2.0? |  |  |
| 16. Is line 8 divided by line 2 greater than 0.1? |  |  |
| 17. Is line 5 divided by line 6 greater than 1.5? |  |  |

I hereby certify that the wording of this letter is identical to the wording specified in LAC 33:V.3719.F as such regulations were constituted on the date shown immediately below.

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

Signature

INSERT Name of Person Signing

INSERT Title of Person Signing

Click here to enter a date.

**DELETE BEFORE PRINTING - Fill in Alternative II if the second criteria of LAC 33:V.3707.F.1 or 3711.F.1 or the second criteria of LAC 33:V.4403.E.1 or 4407.E.1 are used.**

| **Alternative I** | | |
| --- | --- | --- |
| 1. Sum of current closure and post-closure cost estimates [total of all cost estimates shown in the 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: |  | |
| 4. Date of maturity of bond: |  | |
| \*5. Tangible net worth [if any portion of the closure and post-closure cost estimate 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 percent of firm's assets are located in the U.S.]: | $ | |
|  | YES | NO |
| 7. Is line 5 at least $10 million? |  |  |
| \*8. Is line 5 greater than six times line 1? |  |  |
| \*9. Are at least 90 percent of firm's assets located in the U.S.? If not, complete line 10. |  |  |
| 10. Is line 6 at least six times line 1? |  |  |

I hereby certify that the wording of this letter is identical to the wording specified in LAC 33:V.3719.F as such regulations were constituted on the date shown immediately below.

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

Signature

INSERT Name of Person Signing

INSERT Title of Person Signing

Click here to enter a date.

INSERT

ANY

NECESSARY ATTACHMENTS