



**Utah Department of Environmental Quality
Division of Environmental Response and Remediation**

**Petroleum Storage Tank Loan Program
Loan Application**

Applicant

Name	Date of Birth	SSN	Phone
Address	City	St.	Zip
Rent Own	Yrs?	marital status	
Previous Address	City	St.	Zip
Rent Own	Yrs?	no. dependents	
Name and address of Employer (if not the facility)		Yrs. worked at present job	

Co-applicant

Name	Date of Birth	SSN	Phone
Address	City	St.	Zip
Rent Own	Yrs?	marital status	
Previous Address	City	St.	Zip
Rent Own	Yrs?	no. dependents	
Name and address of Employer (if not the facility)		Yrs. worked at present job	

Business

Name	Phone		
Address	City	St.	Zip
Fed. Tax Id/SSN			

Facility and Tank Information

Name	ID#		
Address	City	St.	Zip
Facility Mortgage with			

Type of Ownership

Sole Co-owner
 Partnership Corporation
 Incorporated in (state): _____

Tank Information

Tank #				
Age				
Capacity				
Substance Stored				

Use of Loan Proceeds

Spill Prevention Overfill Prevention Tank Lining
 Cathodic Protection: Sacrificial Anode Impressed Current
 Leak Detection System Type of System _____
 Replace Tanks Permanently Close Tanks

Certified Contractors to be used:

Installer	Cert. #	Phone
Remover	Cert. #	Phone
Sampler	Cert. #	Phone
Tester	Cert. #	Phone

Other UST facilities you own:

Name	Facility ID#		
Address	City	St.	Zip
No. of: USTs	ASTs		
Name	Facility ID#		
Address	City	St.	Zip
No. of: USTs	ASTs		

Circle Yes or No for each of the following:

Yes	No	Are all UST registration fees paid for all facilities you own?
Yes	No	Are all Petroleum Storage Tank fund fees paid for all facilities you own?
Yes	No	Do all facilities you own have a current Certificate of Compliance?
Yes	No	Are all your facilities currently in compliance with all UST rules and regulations?
Yes	No	I have less than \$1,000,000 annual gross income and fewer than 5 full-time employee equivalents. The facility is not owned or operated by anyone not meeting these criteria.
Yes	No	My income is derived solely from operations at UST facilities.
Yes	No	I own or operate no more than two facilities.
Yes	No	The facility is located in a US Census Bureau population unit containing fewer than 5,000 people.
Yes	No	There are no more than three operating retail motor fuel outlets within 15 road miles in all directions.
Yes	No	Loan proceeds will be used solely for replacing or upgrading USTs.
Yes	No	All USTs at the facility are greater than 15 years old.
		miles Number of miles to the nearest operating retail outlet selling motor fuel.

Please answer the following:	Applicant	Co-applicant
Are there any outstanding judgments against you?	Yes No	Yes No
Have you declared bankruptcy within the past 7 years?	Yes No	Yes No
Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	Yes No	Yes No
Are you and/or your facility party to a lawsuit?	Yes No	Yes No
Are you obligated to pay alimony, child support, or separate maintenance?	Yes No	Yes No
Are you a co-maker or endorser on a note?	Yes No	Yes No
Are you a US citizen?	Yes No	Yes No
If no, are you a resident alien?	Yes No	Yes No
If no, are you a non-resident alien?	Yes No	Yes No

If yes, explain on attached sheet.
 If yes, when? _____
 If yes, explain on attached sheet.
 If yes, explain on attached sheet.
 If yes, explain on attached sheet.
 If yes, explain on attached sheet.

Loan Information:

Loan amount: _____ (Loan Amount may be no more than \$150,000 per facility, \$50,000 per tank, or 80% of the total cost of the project)

Loan repayment term desired: _____ Monthly payment desired: _____

Proposed security for loans greater than \$30,000: _____

The Director may approve an initial loan disbursement, to be made after loan closing and before the work is done. The disbursement may be for the lesser of 40% of the approved loan amount or the amount the contractor requires as an initial payment before work is done. Enter the amount of the initial disbursement requested: _____

Brief Description of plans for the facility

Please include with your application:

- Detailed construction work plan and budget. This can be in bid form by a contractor.
- Balance sheet (may use form or a separate document)
- Personal and corporation (if applicable) federal and state tax returns for the last two years.

I am willing to:

- 1) Comply with all applicable laws and work with designated technical personnel as assigned by the Director in preparation of proposed Petroleum Storage Tank Loan Application and other documents as needed.
- 2) Allow continued monitoring and evaluation of work plan to ensure proper usage of loan funds.
- 3) Submit a detailed financial statement for review of my credit worthiness and repayment ability.

I/we certify under penalty of law that the information I/we have provided in this application is true and correct, to the best of my/our knowledge. I/we understand that you will retain this application whether or not it is approved. You are authorized to check my/our credit and facility history and to answer questions about your credit experience with me/us. I/we have read and understand the application form and agree to provide additional information which may be legally required to determine creditworthiness. Any and all costs to complete any of the required information are my responsibility. (Note: Falsification of credit information may be a federal offense and may result in exemption from discharge in the event a petition for bankruptcy is filed).

Applicant (print) _____

Co-applicant (print) _____

Applicant Signature _____ Date Signed _____

Co-applicant Signature _____ Date Signed _____



**Utah Department of Environmental Quality
Division of Environmental Response and Remediation**

**Petroleum Storage Tank Loan Program
Balance Sheet**

Statement for:

as of:

Assets		Liabilities	
1. Cash on hand and in banks	\$	Accounts Payable (Schedule 7d)	\$
2. Accounts and Notes receivable (Schedule 1)		Notes Payable- Secured (Schedule 7b)	
3. Inventory (Schedule 2)		Notes Payable- Unsecured (Schedule 7c)	
4. Other Current Assets:		Taxes	
5. _____		Other Current Debts:	
6. _____			
7. _____			
8. Life Insurance, Cash Surrender Value			
9. Stocks and Bonds (Schedule 3)			
10. Total Current Assets: \$		Judgments	
11. Equipment (Schedule 4)	\$	Total Current Liabilities: \$	
12. Vehicles (Schedule 5)		Real Estate Mortgages Payable (Schedule 7a)	\$
13. Real Estate (Schedule 6)		Equipment (Schedule 7b)	
14. Long-term Portion of Notes Receivable		Vehicles (Schedule 7b)	
15. Other Assets:		Long-term Notes Payable (Schedule 7e)	
16. _____		Other Liabilities:	
17. _____			
18. _____		Total Long-term Liabilities: \$	
19. _____		Total All Liabilities: \$	
20. Total Long-term Assets: \$		Total Net Worth (If a corporation, complete Schedule 10.):	\$
21. _____		Total Liabilities and Net Worth:	\$
22. Total Assets: \$			

Supplemental Schedules. If additional space is needed, attach sheet(s)

No. 1 Accounts and Notes Receivable

Name and address of Debtor	Payment Date	Date of Debt	Description of Security Held	Amt. Owed
Total Value:				\$

No. 2 Inventory

Description	Value	Description	Value
Total Value:			\$

No. 3 Stocks and Bonds

Face Value (Bonds) or No. Shares (Stock)	Name of Corporation	Cost	Income Received Last Year	To Whom Pledged	Present Market Value
Total Value:					\$

No. 4 Equipment

Description	Purchase Price	Appraised Value	VIN Number	Value
Total Value:				\$

No. 5 Vehicles

Description	Purchase Price	Appraised Value	VIN Number	Value
Total Value:				\$

No. 6 Real Estate

Legal Description/ Address	Size of Parcel	Appraised Value
Total Value:		\$

No. 7 Mortgages, Notes, and Accounts Payable

Name of Creditor	Description of Security	Total Amount Owed	Payment Date	Due Current Year	Years Remaining
7a Real Estate Mortgages Payable					
7b Notes Payable (Secured)					
7c Notes Payable (Unsecured)					
7d Accounts Payable					
7e Long-term Notes Payable					

The statements made in this Balance Sheet are for the purposes of inducing the Director to grant the credit requested. I/we certify under penalty of law that the information I/we have provided in this Balance Sheet is true and correct, to the best of my/our knowledge. I/we understand that you will retain this statement whether or not credit is approved. You may verify all information given in connection with this statement, employment and income history and answer questions about your credit experience with me/us.

Applicant (print)

Co-applicant (print)

Applicant Signature

Date Signed

Co-applicant Signature

Date Signed