## Owner/Operator and Licensed Professional Engineer/Geologist Budget Certification Form

I hereby certify that I intend to seek payment from the UST Fund for costs incurred while performing corrective action activities for Leaking UST incident \_\_\_\_\_\_\_\_. I further certify that the costs set forth in this budget are for necessary activities and are reasonable and accurate to the best of my knowledge and belief. I also certify that the costs included in this budget are not for corrective action in excess of the minimum requirements of 415 ILCS 5/57, no costs are included in this budget that are not described in the corrective action plan, and no costs exceed Subpart H: Maximum Payment Amounts, Appendix D Sample Handling and Analysis amounts, and Appendix E Personnel Titles and Rates of 35 III. Adm. Code 732 or 734. I further certify that costs ineligible for payment from the Fund pursuant to 35 III. Adm. Code 732.606 or 734.630 are not included in the budget proposal or amendment. Such ineligible costs include but are not limited to:

Costs associated with ineligible tanks. Costs associated with site restoration (e.g., pump islands, canopies). Costs associated with utility replacement (e.g., sewers, electrical, telephone, etc.). Costs incurred prior to IEMA notification. Costs associated with planned tank pulls. Legal fees or costs. Costs incurred prior to July 28, 1989. Costs associated with installation of new USTs or the repair of existing USTs.		
Owner/Operator:		
Authorized Representative:	Title:	
Signature:	Date:	
Subscribed and sworn to before me the	day of ,	
	Seal:	

(Notary Public)

In addition, I certify under penalty of law that all activities that are the subject of this plan, budget, or report were conducted under my supervision or were conducted under the supervision of another Licensed Professional Engineer or Licensed Professional Geologist and reviewed by me; that this plan, budget, or report and all attachments were prepared under my supervision; that, to the best of my knowledge and belief, the work described in the plan, budget, or report has been completed in accordance with the Environmental Protection Act [415 ILCS 5], 35 III. Adm. Code 732 or 734, and generally accepted standards and practices of my profession; and that the information presented is accurate and complete. I am aware there are significant penalties for submitting false statements or representations to the Illinois EPA, including but not limited to fines, imprisonment, or both as provided in Sections 44 and 57.17 of the Environmental Protection Act [415 ILCS 5/44 and 57.17].

L.P.E./L.P.G.:	L.P.E./L.P.G. Seal:
L.P.E./L.P.G. Signature:	Date:
Subscribed and sworn to before me the day of _	,
	Seal:
(Notary Public)	

The Illinois EPA is authorized to require this information under 415 ILCS 5/1. Disclosure of this information is required. Failure to do so may result in the delay or denial of any budget or payment requested hereunder.