

State of Wisconsin
Department of Natural Resources
P.O. Box 7921, Madison WI 53707-7921
dnr.wi.gov

Deposit with the Department

For Use by Hazardous Waste Facilities
Form 4430-028 (R 8/06)

In order to provide proof of financial responsibility in accordance with s. 289.41 Wisconsin Statutes, and subch. H of ch. NR 664, Wis. Adm. Code,

(Owner)

of _____
(Address)

hereby transfers to the Department the cash, certificates of deposit, or U.S. Government Securities

described on Schedule "A" attached, having a current market value of \$ _____
The cash, certificates of deposit, or U.S. Government Securities shall be placed in a segregated interest bearing account named "Closure or Long-term Care Account for the

_____ " (the Account)
(Hazardous Waste Facility)

(EPA Identification Number)

located at _____
(Address)

(Separate accounts will be established for Closure and Long-term Care funds.)

The Department shall have to right to use part or all of the funds in the Account to carry out the closure and/or long-term care requirements in the approved closure and/or long-term care plan or the applicable requirements in s. NR 664.0143 and 664.0145 if the owner fails to do so.

Signatures:

(Owner)

(Date)

Approved:

State of Wisconsin
/Department of Natural Resources
For the Secretary

By _____
(Date)