



Dry Cleaner Environmental Response Fund Program
Reimbursement Application Checklist & Instructions
PUB-RR-751 July 2012

These instructions supplement the application forms necessary for obtaining reimbursement from the Dry Cleaner Environmental Response Fund (DERF) Program. The checklist below and the subsequent instructions will help you prepare a complete and successful reimbursement application.

Application Checklist

1. Talk with your DNR Remediation & Redevelopment regional project manager.

Feel free to ask questions if you don't know how to proceed or need clarification on such topics as program requirements, application procedures, eligible costs, or unusual circumstances.

2. Prepare your application.

These forms must be included with EVERY claim.

- Dry Cleaner Environmental Response Program Reimbursement Application, form 4400-211
- Linking Spreadsheet, 4400-214D.xls - Reimbursement Cost Detail
- Verification of Taxpayer ID Number, Substitute W-9 Form
- Detailed invoices & copies of original subcontractor invoices
- Canceled checks (copies of both sides) or other proof of payment
- A detailed progress report including maps and approved change orders (if applicable)
- Copy of the signed Agent Agreement (if applicable)

1st Claim Only – These forms are only required in the 1st Claim after a consultant has been selected.

- A Site Map
- A Legal Description
- SI Bid Summary, form 4400-233 or Bid Proposals Summary, 4400-212 (interim & remedial action)
- A copy of each accepted proposal (contract) for consulting and contract services, including documentation of any changes to the original contract and records of contract negotiations

Caution: Be aware there is a **penalty for claiming ineligible costs** on your reimbursement application. If you apply for reimbursement of an ineligible cost, the department will reduce your claim by the ineligible amount as well as charge you a penalty of 50% of the ineligible amount. If a consultant fills out the claim and submits ineligible costs for reimbursement, the consultant must pay the 50% penalty for the ineligible costs claimed and the claim will be reduced by the ineligible amount. Per s. 292.65(8)(j)2., Wis. Stats., the consultant may not charge the owner or operator for this amount. Contact your DNR project manager or the DERF auditor, prior to submitting your application if you are uncertain about eligibility. For a list of eligible and ineligible costs see NR 169.13 which can be found at <http://www.legis.state.wi.us/rsb/code/nr/nr169.pdf>.

3. Forward your completed application and materials to your DNR region project manager.

Costs must be submitted within 120 days of completing the response action.



Wisconsin Dept. of Natural Resources
PO Box 7921, Madison, WI 53707
dnr.wi.gov, search "DERF"



DERF Application (Form 4400-211) Instructions

To prevent a delay in processing your application, complete the entire application form and assemble any attachments required. Detailed instructions for the form's completion follow.

Application Type

Check the boxes that describe what type of application you are submitting.

- Immediate - taken within a short period after the discharge of a hazardous substance, or after the discovery of a hazardous substance discharge to minimize the harmful effects to air, land or water, and to eliminate any imminent health and safety threat to the public or the environment.
- Site Investigation - determining the extent of the contamination.
- Interim - taken to contain or stabilize a discharge in order to minimize any health and safety threats to the public or the environment, while other response actions, are being taken or planned.
- Remedial Action - taken to clean up the contamination and work toward closure of the site.

The box marked "partial request - number _" is to indicate the number of requests in that particular category (SI or RA) to date, not the overall number of requests.

Response Action Time Period

Enter the start date and end date of the response actions for which you are requesting reimbursement. This means the period of time covered by all work activities and invoices you are submitting for reimbursement in this application. Remember to include all costs during the time period. **Important:** Costs incurred prior to the end date on the application will not be eligible for reimbursement in future applications.

Agent Information

Complete this section if the applicant is acting as an agent for the responsible party. A copy of the signed agent agreement must be included.

Assignment of Payment

An applicant may assign a reimbursement payment to another. If applicable, enter the name, mailing address, and telephone number of the party to whom you would like the reimbursement to be paid. **Important:** the assignee may need to complete a Verification of Taxpayer Identification Number, Substitute W-9 form to receive a payment. Submit the form with your application.

Multiple Responsible Persons

Enter the names and contact information for any other owner/operators eligible for reimbursement from the program for discharges at this facility. If there are no other eligible persons to notify, check the box.

Insurance Information

Select your insurance status and enclose additional information if requested. At the time of your application for reimbursement, you are required to provide information about insurance policies that were in effect at the time of the discharge. Cleanup costs covered by insurance are not eligible for reimbursement.

Other Sources of Reimbursement

If you have applied for or are intending to apply to another program for a tax credit for work that is also eligible for this program or for a reimbursement of costs associated with this discharge, provide the name of the program and your date of application.

Application Certification

The applicant or agent must sign and date the application, thus certifying its accuracy.

Original Bid Documentation & Forms

These are needed on the 1st claim of a phase (SI or RA) only.

Site Investigation (SI) Bid Summary, form 4400-233

This form is required to document the consultant selection process for site investigations that were initiated after April 19, 2004. It summarizes the minimum of 3 and maximum of 6 proposals that were received as part of the program's bidding requirements, and provides a consistent format for submitting costs in the categories of drilling, analytical, consulting, and miscellaneous costs. Detailed instructions accompany this form when it is downloaded from the web site.

Bid Proposals Summary, form 4400-212 (for bids prior to April 19, 2004)

Summarize the bid proposals you received during the consultant selection process for interim response actions and remedial response action costs being submitted for reimbursement. Use this form for documenting site investigation bids initiated before April 19, 2004. Detailed instructions for filling out this form appear on the reverse side of the form itself. (**Note:** You are not required to submit this form if you conducted your consultant selection process prior to February 1, 2000.)

A Site Map

Submit a map indicating the facility's legal property boundaries including town, range, section and quarter-quarter section with your application.

A Legal Description

Submit a legal description of the land parcel where the facility is located which corresponds to the most recent accurate parcel description filed with the register of deeds in the county where the land parcel is located.

Accepted Service Contracts

Submit a copy of each bid proposal you accepted for consulting and contract services, including records of any contract negotiations. Code the bid proposals to the standard cost categories described on page four and include the categories on your invoices and cost detail worksheet.

Documentation Required with each Reimbursement Claim

Dry Cleaner Environmental Response Program Reimbursement Application (form 4400-211)

The application is required with each and every claim submitted.

DERF Linking Spreadsheet (form 4400-214D) - Reimbursement Cost Detail Worksheet

Links the bid, change order, costs claimed and expenses for the claim. Instructions for the spreadsheet appear on the DERF website at: dnr.wi.gov/Aid/DERF. This form must be updated with each change order request & subsequent approval.

Taxpayer Identification Number Verification, Substitute W-9 form

The DNR must have your federal taxpayer identification number on file in order to issue a reimbursement payment to you. Complete this form to indicate your taxpayer identification number to us. Remember, if you do assign your payment to a person who loans money to you for the purpose of conducting cleanup activities, that person must complete this form. Note: Reimbursement payments may be considered reportable income. Contact your personal tax specialist for additional information.

☐ **Progress Report** - A progress report must accompany all interim payment requests. This should summarize work completed to date or work completed since the last progress report was submitted and any other documentation your DNR Project Manager requests.

☐ **Change Orders (if applicable)** - Change orders approved during the claim period must accompany all payment requests. Change orders must include:

- Summary of work completed to date. This must include a description of all work that has been completed and a description of the proposed additional work to be performed.
- Any maps or other reference materials necessary to detail activities.
- Updated DERF Linking Spreadsheet (form 4400-214D) to provide the details for both incurred and proposed costs.

☐ **Detailed Invoices**

- Submit all of the invoices for each eligible cost that you are claiming. Invoices should contain a detailed explanation of the work performed. They should identify the nature of the services or materials provided, the amount charged for the services or materials, the identity of the provider, and the dates on which the services or materials were provided. If an invoice from your contractor does not provide a detailed explanation, you must attach an explanation to the invoice. If an invoice identifies subcontractor costs, include a copy of the subcontractor's invoice. Also include receipts for miscellaneous expenses.
- Code each line item on every invoice to the standard cost categories described in the coding instructions under other information. You may allocate costs from one invoice or invoice item into two or more cost categories by indicating the percentage (or dollar amount) attributable to each cost category that applies. **Costs not eligible for reimbursement should be crossed out on the invoice and not coded.**
- Miscellaneous cost category should only be used for expenses that cannot be attributed to one of the other categories.
- Proof of payment include copies of both sides of canceled checks or other proof of payment for all costs claimed.

Other Information

Cost Categories:

A - Soil Investigation **C** - Groundwater Investigation **E** - Air/Vapor Investigation **G** - Lab & Other Analysis
B - Soil Remediation **D** - Groundwater Remediation **F** - Air/Vapor Remediation **H** - Miscellaneous

Site Investigation (SI) requests:	Remedial Action Requests
<ul style="list-style-type: none"> • 1 request per fiscal year • Minimum of \$15,000 • Maximum of 3 SI requests • 1 final request can be submitted at any time; must include the Site Investigation report 	<ul style="list-style-type: none"> • 2 requests per fiscal year allowed • No minimum amount • Final request may be submitted at any time • Must be submitted within 120 days of completing the response action

This document is intended solely as guidance and does not contain any mandatory requirements except where requirements found in statute or administrative rule are referenced. Any regulatory decisions made by the Department of Natural Resources in any matter addressed by this guidance will be made by applying the governing statutes and administrative rules to the relevant facts. The Wisconsin Department of Natural Resources provides equal opportunity in its employment, programs, services, and functions under an Affirmative Action Plan. If you have any questions, please write to Equal Opportunity Office, Department of Interior, Washington, D.C. 20240. This publication is available in alternative format upon request. Please call 608-267-3543 for more information.