

Department of Environment & Natural Resources
Division of Waste Management

Site Name	City / County	Incident #
Responsible Party	Incident Mgr	Region
RP Type (Owner/Operator / Landowner / Attorney-in-fact)	TA Supplement / Change Order?	Prev. TA #
Primary Consultant	(Reserved for Incident Manager)	
Phone / Fax Number	Task Authorization Number:	
Project Mgr / Email	Site Risk / Rank / Abatement:	
Proposal# / Scope Dates	Type (Comm / NonComm / Both)	
Has STF Eligibility Been Determined? YES / NO / Pending	Site Status (Active or NFA/Date)	

- ♦ **Attach all Main Consultant/Contractor invoices.**
- ♦ **Attach proof of payment directly to the front of each invoice.**

[illegible]

	Requested	Preapproved		Claimed
TOTALS:	\$0.00			
Total Standard Costs (Non-Third Party)	\$0.00		Total Standard Costs	
Total applied as Third Party Costs	\$0.00		Total Third Pty Costs	

Main Consultant	Project Mgr Signature: _____	Date: _____
UST Section	RO Task Authorization: _____	Date: _____
	CO Rate Authorization: _____	Date: _____

I _____ (tank owner/operator/landowner) understand and agree that reimbursement of claims submitted to the Department for costs incurred as a result of properly completing the tasks preapproved herein will not be paid until after the Department has paid all claims for tasks that the Department directs.

Signature _____ Date _____

County of _____ State of _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: _____

(Describe if signed individually or in representative capacity)

WITNESS my hand and official seal, this day of A.D.

Notary Public _____ My Commission expires _____

***Important:** The date of reimbursement of costs approved herein is dependent on the balance of funds in the Trust Fund. There may be a delay in the reimbursement of claims for work done.

** SSA = "See Supporting Attachment" for additional details on sub-task unit reductions in multi-phase tasks (e.g. Tasks 2.084, 4.090, 7.420, etc.)

*** ✓ +/- Reviewer Initials = Task, Unit count, or Rate approved in full as presented by Consultant.

