THIS PAGE INSTRUCTIONS ONLY

Pledge of Revenue Requirements for Postclosure Maintenance and/or Corrective Action

Complete transmittal form, CIWMB 114 (07/2008) Pledge of Revenue Requirements, as specified in Title 27, California Code of Regulations, Division 2, Subdivision 1, Chapter 6 (the Regulations). It shall contain the original signature of the owner or operator of the solid waste landfill.

Part 1. Owner/Operator Establishing Pledge of Revenue

Owner: The person(s) that owns, in whole or in part, the land on which the facility is located.

Operator: The person(s) to whom the approval to operate the facility is granted, and is responsible for the overall operation of the facility including but not limited to, complying with all applicable federal, state, and local requirements, and the design, construction, and physical operation of the operating area, and control the activities at a facility.

Part 2. Pledge of Revenue

Specify covered costs and enter amount of annual pledged revenue from Pledge of Revenue Agreement.

Part 3. List of Attachments

Fill in the date for each document and attach a copy

Resolution by Governing Body (List the Date and Resolution Number).

Pledge of Revenue Agreement (List Date of Final Signature to Agreement).

Annual Certification by the Public Agency. The operator is required by section 22233(b)(4)(B) of the Regulations to demonstrate the pledged revenue continues to to be available when needed and will cover the [postclosure maintenance and/or corrective action] cost estimate(s) identified in the updated Annual Inflation Report required by section 22236 of the Regulations. Following the first submittal of the Pledge of Revenue Agreement, the operator is required to submit Annual Certifications with the Annual Inflation Report (copies of the resolution and agreement are not required annually, unless amended).

Part 4. Signature Block

Sign and date the Pledge of Revenue Requirements form, CIWMB 114 (07/2008), and submit to the attention of the Manager, Financial Assurances Section, CIWMB.

Part 5. Other

PRIVACY STATEMENT

The Information Practices Act (California Civil Code Section 1798.17) and the Federal Privacy Act (5 U.S.C. 552a(e)(3)) require that this notice be provided when collecting personal information from individuals.

AGENCY REQUESTING INFORMATION: California Integrated Waste Management Board.

UNIT RESPONSIBLE FOR MAINTENANCE OF FORM: Financial Assurances Section, California Integrated Waste Management Board, 1001 I Street, P.O. Box 4025, Sacramento, California 95812-4025. Contact the Manager, Financial Assurances Section, at (916) 341-6000.

AUTHORITY: Public Resources Code section 43600 et seq.

PURPOSE: The information provided will be used to verify adequate financial assurance of solid waste disposal facilities listed.

REQUIREMENT: Completion of this form is mandatory. The consequence of not completing this form is denial or revocation of a permit to operate a solid waste disposal facility.

OTHER INFORMATION: After review of this document, you may be requested to provide additional information regarding the acceptability of this mechanism.

ACCESS: Information provided in this form may be provided to the U.S. Environmental Protection Agency, State Attorney General, Air Resources Board, California Department of Toxic Substances Control, Energy Resources Conservation and Development Commission, Water Resources Control Board, and California Water Resources Control Boards. For more information or access to your records contact the California Integrated Waste Management Board, 1001 I Street, P.O. Box 4025, Sacramento California 95812-4025, (916) 341-6000.

PLEDGE OF REVENUE REQUIREMENTS

NOTE: This form is the transmittal sheet for documents required to be submitted to the CIWMB for a Pledge of Revenue as specified in Title 27, California Code of Regulations, Division 2, Subdivision 1, Chapter 6. Please refer to the instructions for definitions of terms and for completing this form.

Part 1. OWNER/OPERATOR ESTABLISHING PLEDGE OF REVENUE

Check one box only

☐ **OWNER** ☐ **OPERATOR**

OWNER/OPERATOR NAME (Type or Print)	**NAME OF CONTACT FOR PLEDGE OF REVENUE (Type or Print)**
ADDRESS, CITY, STATE, ZIP	ADDRESS, CITY, STATE, ZIP
TELEPHONE #:	TELEPHONE #:
FAX #:	FAX #:
E-MAIL ADDRESS:	E-MAIL ADDRESS:

Part 2. PLEDGE OF REVENUE

PLEDGE OF REVENUE AGREEMENT FOR: (Check applicable boxes):	**ANNUAL PLEDGED REVENUE**
☐ 1. POSTCLOSURE MAINTENANCE COSTS	$
☐ 2. CORRECTIVE ACTION COSTS	$
☐ 3. BOTH (COMBINED COSTS AS WELL AS COSTS IDENTIFIED ABOVE)	$

Part 3. LIST OF ATTACHMENTS (Fill in for each document and attach a copy)

REQUIRED WITH ALL PLEDGE OF REVENUE SUBMITTALS:

☐ **1. RESOLUTION BY GOVERNING BODY (Date and Resolution Number)** ☐ **2. PLEDGE OF REVENUE AGREEMENT DATE**

☐ **3. DATE OF ANNUAL CERTIFICATION OF CONTINUED AVAILABILITY OF PLEDGED REVENUE** (See Instructions)

Part 4. SIGNATURE BLOCK

OWNER/OPERATOR ESTABLISHING PLEDGE OF REVENUE

I certify under penalty of perjury that the information provided in this form and any attachments is true and correct to the best of my knowledge and belief.

SIGNATURE:

PRINTED NAME:

TITLE: DATE:

Part 5. OTHER (Attach additional sheets to explain any responses that need clarification).

ANNUAL CERTIFICATION OF PLEDGED REVENUE FOR _____ LANDFILL

SOLID WASTE FACILITY NO. _____

I hereby certify thatthe pledged revenue continues to be available when needed and will cover the postclosure maintenance costs and/or corrective action costs shown in the Pledge of Revenue Requirements Form and as required by Title 27, California Code of Regulations, Division 2, Subdivision 1, Chapter 6.

_____ _____

Signature Date

Typed or Printed Name _____

Title and Public Agency _____

Phone Number _____

Please sign and return this Certification to the California Integrated Waste Management Board, P.O. Box 4025, Sacramento, California 95812-4025, and to the attention of the Manager, Financial Assurances Section, MS 10A-18.