

RCRAInfo Financial Assurance Data Entry Form

*EPA ID Number	Handler Name

COST ESTIMATE SECTION

Cost Estimate <i>If updating/deleting a Cost Estimate provide its Seq. No.</i>	<input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete
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Agency	*FA Type	*Amount

*Date <i>(Required for FA Types of A, C, P)</i>	Responsible Person	*Reason <i>(Required for FA Types of A, C, P)</i>	Seq. No.

Area/Unit Notes:	
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Cost Estimate Notes:	
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Does this Cost Estimate add/update/delete any Mechanism/Mechanism Detail information?

Yes No

If Yes, complete only the Mechanism/Mechanism Detail Section on page 2. If No, complete only the Existing Mechanism Section below.

EXISTING MECHANISM SECTION

Link	Unlink	*Mechanism Seq. No.	*Mechanism Type	*Provider Name	*Mechanism Detail Seq. No.	*Identification

*** Required Fields**

MECHANISM/MECHANISM DETAIL SECTION

Check box(es) that apply: <input type="checkbox"/> Mechanism <input type="checkbox"/> Mechanism Detail		<input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete If adding a Mechanism , provide the Mechanism Detail information to which to link the Mechanism. If updating/deleting a Mechanism, provide the Mechanism Seq. No. If adding/updating a Mechanism Detail only, provide the corresponding Mechanism information.		
*Mechanism Type:		Mechanism Seq. No.:		
*Provider:				
Contact Name:		Contact Phone:		
Mechanism Notes:				
*Identification	*Effective Date	*Expiration/Release Date	*Total Face Value Amount	Mechanism Detail Seq. No.
Mechanism Detail Notes:				
Check box(es) that apply: <input type="checkbox"/> Mechanism <input type="checkbox"/> Mechanism Detail		<input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete If adding a Mechanism , provide the Mechanism Detail information to which to link the Mechanism. If updating/deleting a Mechanism, provide the Mechanism Seq. No. If adding/updating a Mechanism Detail only, provide the corresponding Mechanism information.		
*Mechanism Type:		Mechanism Seq. No.:		
*Provider:				
Contact Name:		Contact Phone:		
Mechanism Notes:				
*Identification	*Effective Date	*Expiration/Release Date	*Total Face Value Amount	Mechanism Detail Seq. No.
Mechanism Detail Notes:				

* Required Fields

Additional Mechanism/Mechanism Detail Form

EPA ID Number:		Handler Name:	
Check box(es) that apply: <input type="checkbox"/> Mechanism <input type="checkbox"/> Mechanism Detail		<input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete <i>If adding a Mechanism , provide the Mechanism Detail information to which to link the Mechanism.</i> <i>If updating/deleting a Mechanism, provide the Mechanism Seq. No.</i> <i>If adding/updating a Mechanism Detail only, provide the corresponding Mechanism information.</i>	
*Mechanism Type:			Mechanism Seq. No.:
*Provider:			
Contact Name:		Contact Phone:	
Mechanism Notes:			
*Identification	*Effective Date	*Expiration/Release Date	*Total Face Value Amount
Mechanism Detail Notes:			
Check box(es) that apply: <input type="checkbox"/> Mechanism <input type="checkbox"/> Mechanism Detail		<input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete <i>If adding a Mechanism , provide the Mechanism Detail information to which to link the Mechanism.</i> <i>If updating/deleting a Mechanism, provide the Mechanism Seq. No.</i> <i>If adding/updating a Mechanism Detail only, provide the corresponding Mechanism information.</i>	
*Mechanism Type:			Mechanism Seq. No.:
*Provider:			
Contact Name:		Contact Phone:	
Mechanism Notes:			
*Identification	*Effective Date	*Expiration/Release Date	*Total Face Value Amount
Mechanism Detail Notes:			

* Required Fields