# **FINANCIAL ASSURANCE DEMONSTRATION 40 CFR 146.85**

**INSERT PROJECT NAME**

|  |
| --- |
| **INSTRUCTIONS**This template provides a suggested outline and recommendations for the financial assurance demonstration. Note that references to EPA’s Class VI Rule in the code of federal regulations (CFR) are provided in this template. States with Class VI primacy have requirements that are at least as stringent as EPA’s. If your Class VI well is in a primacy state, consult your permitting authority about any additional requirements for what must be included. Please delete the ***blue text*** and replace the yellow highlighted text before submitting your document. Similarly, please adjust the example text and tables throughout as necessary (e.g., by adding or removing rows or columns). For more information, see EPA’s Class VI guidance documents at <https://www.epa.gov/uic/class-vi-guidance-documents>.  |

# **Facility Information**

Facility name: INSERT FACILITY NAME
INSERT WELL NUMBER

Facility contact: INSERT CONTACT NAME/CONTACT TITLE
INSERT ADDRESS
INSERT PHONE NUMBER/EMAIL ADDRESS

Well location: INSERT CITY, COUNTY, STATE
INSERT LAT/LONG COORDINATES

INSERT PERMIT APPLICANT is providing financial responsibility pursuant to 40 CFR 146.85. INSERT PERMIT APPLICANT is using a INSERT MECHANISM(S) to cover the costs of: corrective action, emergency and remedial response, injection well plugging, post-injection site care, and site closure.

The estimated costs of each of these activities, as provided by INSERT PERMIT APPLICANT, are presented in Table 1.

Table 1. Cost Estimates for Activities to be Covered by Financial Responsibility.

| **Activity** | **Total Cost ($)** |
| --- | --- |
| Corrective Action  |  |
| Plugging Injection Wells |  |
| Post-Injection Site Care  |  |
| Site Closure |  |
| Emergency and Remedial Response |  |

*[Insert or attach the instrument text.*

*If a pay-in schedule is applicable to any instruments/activities, present this information as well.]*