

PTRCB Claim Checklist

Check (✓)	<p>Checklist for Submitting a Complete PTRCB Form 3 Claim for Reimbursement)</p> <p>See "Form 3 Instructions" for details (Item #'s correlate to the Boxes on the Form 3, Page 1)</p>
<p><i>Before you submit your claim, please check that:</i> -</p> <p><i>It has not been over five (5) years since work was done.</i></p> <ul style="list-style-type: none"> - <i>The claim is not less than \$500*</i> - - <i>Page #1 of Claim form – Boxes #1 through #8</i> 	
<p>Facility & Release information (Box #1) is correct. Only ONE Release per claim form.</p>	
<p>Owner information (Box #2) should be for the current owner of the Release.</p>	
<p>Payable to (i.e., payee) (Box #4) MUST be completed</p> <ul style="list-style-type: none"> ➤ Is the designated payee on the Form 3 someone other than the owner? A Designation of Representative form (Form 5) is required to show that the owner has designated the listed payee to be the one who receives the reimbursement. ➤ If needed, is the Form 5 on file with PTRCB or has it been mailed or sent with the claim? ➤ Ignore this step if the owner is the payee (see Proof of Payment – Box #10) ➤ Unsure if you have a Form 5 on file for a release? Email Taylor.Pirre@mt.gov 	
<p>Claimant (person filing the claim) MUST be completed (Box #5).</p> <ul style="list-style-type: none"> ➤ If the information is listed in another item, you may indicate that. Example language: "Same as Owner" or "same as Box X". 	
<p>Operator (Box #3), Consultant (Box #6), Any other person (Box #7) – complete as needed for those that need email communications about the claim.</p>	
<p>Total amount of this claim (Box #8) should reflect the correct amount you are claiming from your attached invoices.</p> <ul style="list-style-type: none"> ➤ If different than the invoiced amount, make notes on the invoice(s) of WHAT you are or are not claiming. You may mark right on the invoice copy you submit. The amounts claimed on page 2 of the Form 3 need to be clearly annotated on the invoices submitted with the claim so that the total claimed amounts match the invoiced amounts being submitted for reimbursement. 	
<p><i>Page #2 of Claim form – Section #9 through #11</i></p>	
<p>CAP ID #, CAP Date, CAP Modification (Form 8) (Section #9) or exception.</p> <ul style="list-style-type: none"> ➤ CAP = corrective action plan and is also referred to as a work plan. ➤ CAP date is the DATE OF THE CAP, not the obligation date or DEQ approval date. ➤ A separate page #2 is required for each CAP in the claim, more than one work plan can be used in submitting costs as long as they are both for the same release. 	
<p>Task table (Section #9) Complete the table using PTRCB Obligation letter tasks, a matching Form 3 is sent to the consultant and owner at the time of the obligation letter so that the approved tasks are contained.</p> <ul style="list-style-type: none"> ➤ verify the total on page 2(s) matches the total amount claimed box #8 on page #1. 	
<p>Proof of Payment (POP) (Section #10)</p> <ul style="list-style-type: none"> ➤ Include ALL sufficient POPs for contractors and/or subcontractors. ➤ Proof of payment is required for all subcontractor invoices for which you are charging a 7% markup. 	

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	<ul style="list-style-type: none"> ➤ Proof of Payment is also required when the owner is also the listed payee on the Form 3 (See Box #4). ➤ A valid proof of payment is a Form 6, a cancelled check with both sides scanned, or a formal letterhead from the one being paid confirming the payment has been received in full, for the invoices that were paid, the date of the invoice and the signature from the entity that received the payment, the same information contained on the Form 6.
	<p>Assent to Audit (Form 2) (Section # 11)</p> <ul style="list-style-type: none"> ➤ Is one on file with PTRCB for contractors and subcontractors as required by law, ARM 17.58.331? No payment can be made without a Form 2 on file with PTRCB for anyone doing billable labor on-site. ➤ If unsure and using a new contractor, email Taylor.Pirre@mt.gov and ask. The best business practice is to submit a Form 2 granting global assent for any PTRCB eligible site, otherwise the contractor will have to submit one for each release they work on.
	<p>Include ALL necessary backup.</p> <ul style="list-style-type: none"> ➤ ALL (contractor and/or subcontractor's) lodging receipts ➤ Utility Statements – include all you are claiming costs for and the following month that shows the claimed charges have been paid, i.e., if claiming charges for August, include the statement for September to show August charges were paid. ➤ See instructions for other necessary backup.

Page #3 of Claim form – Box #12 and Box #13

	<p>Sign, date, and notarize</p> <p>Double check that your figures are correct, and the information provided is sufficient and complete!</p> <ol style="list-style-type: none"> 1. If in doubt or have questions about the process, please see our Form 3 instructions <u>http://deq.mt.gov/Portals/112/DEQAdmin/PET/Documents/Forms/Form_3Instructions.pdf</u> 2. Or call Taylor at 406-444-9710 or email Taylor.Pirre@mt.gov <p>If a claim is submitted incomplete or deficient, reimbursement may be suspended, or the claim may be rejected and sent back to the claimant for completion.</p>
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17.58.334 CLAIM FOR REIMBURSEMENT

- (1) Upon completion of any task or subtask identified in a corrective action plan, the owner or operator, or a remediation contractor acting on behalf of the owner or operator, may submit the claim to the board on a form provided by the board.
- (2) The claim must include all the information required by the board's claim form, and a certification verified by a notary public that the individual signing the claim form is the owner or operator or is authorized to represent the owner or operator and that the statements in the claim form are true to the best of the signer's knowledge.
- (3) Applications may be submitted in a piecemeal manner on the cleanup of a single release in situations where the cleanup would require a considerable period of time.
- (4) The individual that signed the claim can request in writing that any incomplete or insufficiently documented costs be withdrawn from the claim. Withdrawn costs may be submitted at a later date on a new claim form. Costs that are withdrawn and later submitted will be processed as a new claim.
- (5) The **minimum claim value** may not be less than \$500 except:
 - (a) when a claim includes only utility bills or laboratory invoices, the minimum is reduced to \$100; (b) when the five-year limitation period set forth in 75-11-307(2)(i), MCA, will expire before a total of \$500 in cleanup costs will be accrued;
 - (c) when the claim is the final claim for a resolved release; and
 - (d) when specific circumstances warrant, additional exceptions may be permitted.
- (6) When submitting an invoice to be divided among multiple releases, the invoice must be equal to or in excess of \$500.