



Financial Statement for Businesses

Return completed forms to:
 Petroleum Tank Cleanup Section, Remediation Division
 Department of Environmental Quality
 PO Box 200901
 Helena, MT 59620-0901

1a. Your name and address (including zip code and county)		1b. Business name and address (including zip code and county)		2. Business phone number ()	
3. Name and address of registered agent (including zip code and county)				4. (Check appropriate box) <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Corporation _____	
5. State of incorporation (or country if foreign)	5a. Employer identification number	6. Date of incorporation		7a. Type of business 7b. SIC code	
8. Information about owner, partners, officers, directors, major shareholder (5% or more stock ownership), other holders of more than 5% equity interest, holders of rights to purchase more than equity interest and other persons with an ability to control.					
Name and Title	Effective Date	Home Address	Social Security Number (optional)	Phone Number	Total Shares or Interest


Section I						General Financial Information					
9. Last three years Federal and State income tax returns			Forms Filed		Tax Years Ended		Net Income Before Taxes				
10. Bank accounts (list all types of accounts including checking, savings, certificates of deposit, etc.)											
Name of Institution			Address			Type of Account		Account Number		Balance	
Total (Enter in Item 19)								▶			
11. Bank credit available (lines of credit, etc.)											
Name of Institution			Address			Credit Limit		Amount Owed	Credit Available	Monthly	
Totals								▶			
12. Location, box number, and contents of all safe deposit boxes rented or accessed											

* This information is requested pursuant to Section 104(e) of the Comprehensive Environmental Response, Compensation and Liability Act, 42 U.S.C. § 9604, and is not subject to approval of the Paperwork Reduction Act of 1980, 44 U.S.C. § 3501, et seq.

Section I – <i>continued</i>		General Financial Information			
13. Real property					
Brief Description and Type of Ownership			Address (include county, state and parcel number)		
a.					
b.					
c.					
d.					
14. Insurance policies owned with business as beneficiary					
Name Insured	Company	Policy Number	Type	Face Amount	Available Loan Value
Total (Enter in Item 21)					
15a. Additional Information (Court and administrative proceedings by or against the business, settlement agreements, agreements to purchase or sell tangible or financial assets other than in the ordinary course of business, legal claims (whether asserted or not), bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, options to buy or sell real or personal property, real or personal property being purchased under contract, real or personal property being held on behalf of the business)					
15b. List all subsidiaries owned, joint ventures, partnerships and other entities controlled by the business. Provide current market value of the business' interest in such subsidiary or other entity.					
16a. Federal government departments or agencies with whom you have a contract for payment of goods or services					
Agency Name	Address	Contract Number	Amount to be Received	Payment Due Date	
16b. Federal government departments or agencies that have extended or given the business loans, grants or assistance, or to which you have applied (or anticipate applying for any loan, grant, or assistance) in the past 5 years					
17. Accounts/Notes receivable (Include loans to stockholders, officers, partners, etc.)					
Agency Name	Address	Amount Due	Due Date	Status	
Total (Enter in Item 20)					

Section II

Asset and Liability Analysis

Description		Current Market Value	Liabilities Balance Due	Equity in Asset	Amount of Monthly Payment	Name and Address of Lien/Note Holder/Obligee	Date Pledged	Date of Final Payment
18. Cash on hand								
19a. Bank accounts								
19b. Securities and other financial assets owned								
20 Accounts/notes receivable								
21. Insurance Loan Value								
22. Real property (from item 13)	a.							
	b.							
	c.							
	d.							
23. Vehicles (model, year, license)	a.							
	b.							
	c.							
24. Machinery and equipment (specify)	a.							
	b.							
	c.							
25. Merchandise and inventory (specify)	a.							
	b.							
26. Other assets (including permits, licenses, tax loss carry forwards, agreements not to compete, other contracts) (specify)	a.							
	b.							
	c.							
	d.							
27. Other liabilities (include judgments, notes, tax liens, etc.)	a.							
	b.							
	c.							
	d.							
	e.							
28. Federal & State taxes owed								
29. Totals 								

Section III Income and Expense Analysis

The following information applies to income and expenses during a one year period:
 _____ to _____
 Accounting method used

Income		Expenses	
30. Gross receipts from sales, services, etc.	\$	36. Materials purchased	\$
31. Gross rental income		37. Wages and salaries of employees	
32. Interest		38. Wages/salaries/bonuses for officers, directors and stockholders	
33. Dividends		39. Rent	
34. Other income (specify)		40. Installment payments (from line 29)	
		41. Supplies	
		42. Utilities/telephone	
		43. Gasoline/oil	
		44. Repairs and maintenance	
		45. Insurance	
		46. Current taxes	
		47. Other, including fees paid for services (specify)	
35. Total	\$	48. Total	\$
		49. Net difference	\$

50. List all transferred real & personal property, including cash (by gift, by loan that was not at fair market terms, by sale for less than fair market value or made outside the normal course of business, etc.) that was made within the last 3 years (items of \$3,000⁰⁰ or more):

Date	Amount	Property Transferred	To Whom (Indicate any relationship to business or its partners, directors, stockholders, or other controlling persons)	Conditions of Transfer

Certification: Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete.

51. Signature _____ 52. Print Name/Title _____ 53. Date _____

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 Department of Environmental Quality
 PO Box 200901
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 Questions? Call (406) 841-5000 or 800-246-8198**