RI UST Fund Submission Information & Instructions

Background

The RI UST Financial Responsibility Fund, otherwise known as the RI UST Fund, offers certain owners/operators of underground storage tanks (USTs) a reimbursement mechanism for remediation costs in the case of a release of petroleum.

UST owners/operators are required by RI general law to demonstrate financial responsibility to clean up any potential release from their USTs, as mandated by the Environmental Protection Agency and regulated by the State of Rhode Island. Claims for reimbursement are made after costs have been incurred and paid for in the process of remediating a release from an eligible UST.

Process and Required Forms

1. **First-time applicants:** All first-time applicants are required to submit a completed *Form 1: Compliance Application, Form 1a: Deductible Determination,* and an initial $150.00 application fee to RI DEM at

   Dept. of Environmental Management
   235 Promenade Street, Room 380
   Providence, RI 02908.

   This will determine eligibility for reimbursement for costs associated with remediation of contamination for leaking underground storage tanks. The next step, once approved, is below.

2. **Approved First-time Applicants, Supplemental Claims, and Resubmittals**: Following the notification that your site is "in compliance", all claimants must submit a completed *Form 2: Request for Reimbursement* and an *Invoice Submission Form* Excel spreadsheet. These must be submitted to the address listed above, by all applicants, supplemental claimants, and for any resubmissions.

   These forms are required to verify that the site and associated release are eligible and that a $20,000.00 deductible has been spent on eligible costs.

Information Regarding the Excel Spreadsheet for Invoices

A Microsoft Excel spreadsheet file titled "***Invoice Submission Form.xls***" must be completed and submitted by all applicants, supplemental claimants, and for any resubmissions. Invoice information is to be entered into the spreadsheet.

- Rename/save the file using the following naming mechanism: RFR# Disbursement#. Use DISB as an abbreviation.

  Example: For a submission for RFR #401 for Disbursement # 22 use the file name, "401DISB22.xls".

- The file can accept information for a maximum of thirty (30) invoices. If additional space is needed, please create an additional file as Volume 2 using VOL as an abbreviation.
  Example: "401DISB22VOL2.xls".

Excel Spreadsheet Columns:

1. **RFR Number** – Column A: Enter the RFR Number assigned by RI DEM in each line where invoice data is entered. Do not enter the RFR number on lines that will not be used for invoice data.
2. **Vendor** - Enter the vendor/contractor/supplier for the primary invoice being submitted.
3. **Invoice Number** - Enter the invoice number as it appears on the original invoice being submitted.
4. **Invoice Date** - Enter the date as indicated on the invoice.
5. **Invoice Amount** - Enter the invoice amount as it appears on the invoice. If the entire invoice is *not* being claimed for reimbursement, this field should be modified to reflect the claimed amount. It is suggested, however, that the amount entered in this form also be indicated on the invoice with any deductions to show *exactly* which items are not claimed or *exactly* what discount has been applied.
   - If this invoice is a Resubmittal, enter the amount that is being claimed for resubmittal. This amount may not exceed the amount indicated as "No Backup" on the "Claim Summary Detail Report".
6. **Resubmittal** - Enter an upper case "N" to show that this invoice is not a resubmittal. Enter an uppercase "Y" to indicate that this invoice is being resubmitted.
7. **Third Party** - Enter an uppercase "N" to indicate that the invoice is not a Third-Party Claim. If you are using this form for a Third-Party invoice, you must first contact the RI DEM UST Management Program office.
8. **Work Start Date** - Enter the first date of work for which this specific invoice contains costs.
9. **Work End Date** - Enter the last date of work for which this specific invoice contains costs.
10. **Memo** - Enter a detailed description of the scope of work that this specific invoice covers. Ignore the formatting for printing purposes.

Questions? Contact the RI DEM UST Management Program at DEM.USTFund@dem.ri.gov.