



U.S. Environmental Protection Agency, Region IX
Financial Statement for Businesses *

(If additional space is needed, attach a separate sheet)

1. Your name and address <i>(including zipcode and county)</i>	1a. Business name and address <i>(including zipcode and county)</i>	2. Business phone number ()	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 _____
3. Name and address of registered agent <i>(including zipcode and county)</i>		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
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10. Bank accounts *(List all types of accounts including checking, savings, certificates of deposit, etc.)*

Name of Institution	Address	Type of Account	Account No.	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 - continued

General Financial Information

13. Real property

Brief Description and Type of Ownership	Address (include county, state and parcel number)
a.	
b.	
c.	

14. Insurance policies owned with business as beneficiary

Name Insured	Company	Policy Number	Type	Face Amount	Available Loan Value
				Total (Enter in Item 21)	

15. 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).

15a. 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.

16. Federal government departments or agencies with whom you have a contract for payment of goods or services

Agency Name	Address	Contract No.	Amount to be Received	Payment Due Date

16a. 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 (a)	Cur. Mkt Value (b)	Liabilities Bal. Due (c)	Equity in Asset (d)	Amount of Mo. Pymt. (e)	Name and Address of Lien/Note Holder/Obligee (f)	Date Pledged (g)	Date of Final Pymt. (h)
18. Cash on hand							
19. Bank accounts							
19a. 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 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 judgements, notes, tax liens, etc.)		a.					
		b.					
		c.					
		d.					
		e.					
28. Federal & State Taxes Owed							
29. Totals							

