



WARNING: For security purposes all ZIP files transmitted to DFW/OSPR via-email will be returned undeliverable.

NOTE: A Contingency Plan is also required, pursuant to Government Code Section 8670.29

Please type or print clearly in English when completing this application. Refer to pages 8 and 9 of application for instructions on completing this form.

SECTION A. GENERAL INFORMATION

- 1. Legal name of applicant:**
- 2. Mailing**

- 3. Telephone:**
- 4. Email address:**
- 5. Address of principal place of business of applicant if different from above.**

- 6. Trade name (if any), dba, or other name generally known to the public**

7. Financial contact person information: name, address, title, telephone, facsimilie, and email address.

Contact Name:

Title:

Mailing Address:

Telephone number:

Facsimile number:

Email address:

8. If applicant is a subsidiary or not wholly owned, provide the following information:

a. Name of parent corporation or owning entities:

Mailing

b. Date and state of incorporation of parent corporation/owning entities.

Date:

State:

9. Certificate(s) recipient (who should receive certificates) including name, address, telephone, facsimile, email address. (NO P.O. Boxes)

Recipient Name:

Mailing Address:

Telephone number:

Facsimile number:

Email address:

10. Agent for Service of Process. Agent must provide U.S. address. No P.O. Boxes.

Name:

Mailing Address:

Telephone number:

1. **OTHER TYPE OF FACILITY** (Rail yard, fueling stations, transfer terminal, etc.)

a. Type of facility:

b. Volume on site:

1. Product
(barrels) Material

Net oil:

c. For all types of facilities reported in this section provide separate documents describing the facility. These documents should include all relevant information which could affect reasonable worst case spill volume. This information should include storage tank capacities and type of secondary containment.

d. The product of the Reasonable Worst Case Spill Volume in Barrels (as determined in the applicant's oil spill contingency plan) multiplied by \$10,000.

e. For each facility, provide the following information that is reflected in the contingency plan for the facility (Reference Title 14, California Code of Regulations, Section 817.04(h)(2)).

Largest Reasonable Worst Case Spill volume: (barrels)

SECTION D. DECLARATION
(Must be completed by all applicants)

I, _____ (print name) am the applicant, or I am a principal of the applicant, an authorized agent*, or an official of the applicant, and have the authority to sign this application on behalf of the applicant. I DECLARE under penalty of perjury that I have examined this application, including all accompanying schedules and statements, and to the best of my knowledge, information and belief, find it to be true, correct, and complete. Furthermore, it is agreed that the applicant named in Section A of this application is the responsible party in the event of an oil spill. I execute this declaration in my capacity as applicant, principal of the applicant, official of the applicant or as the authorized

DATE

Signature

Title or Official Capacity

NOTE: If the Declaration is signed by an authorized agent of the applicant, the applicant or a principal of the applicant must sign the following Section E. Delegation of Authority

SECTION E. DELEGATION OF AUTHORITY BY THE APPLICANT

(Must be completed by the applicant or principal of the applicant if the above declaration has been executed by an agent acting on behalf of the applicant)

I, (name of the applicant) hereby declare that (name of authorized agent whose signature appears in Section D) is authorized to submit an application for a California Certificate of Financial Responsibility on behalf of the applicant.

DATE

Signature

Title or Official Capacity

INSTRUCTIONS

1 Owner or operator means, in the case of a railroad facility, any person who owns, has ownership interest in, or operates the railroad facility.

2. Submit completed application by selecting one of the following methods:

U.S. Mail or Courier Service:

Department of Fish and Wildlife
Office of Spill Prevention and Response (OSPR)
1700 K Street, Suite 250 Sacramento, CA
95811

Fax: (916) 323-4727

Email: cacofr-facilities@wildlife.ca.gov

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2. Application Process: Applications will be reviewed within 21 calendar days of receipt provided that adequate information was furnished in the application and acceptable evidence of financial responsibility has been received. OSPR verifies the amount of financial responsibility provided per the formulas located in regulation.

To calculate financial responsibility, see Section 791.7 (e) (2) A-F at <https://www.wildlife.ca.gov/OSPR/Legal/OSPR-Regulations-Index>

Renewal Process: COFRs for facilities are good for two (2) years. COFRS for mobile transfer units are good for one (1) year. Applications will be reviewed within 21 calendar days of receipt provided that adequate information was furnished in the application and acceptable evidence of financial responsibility has been received.

NOTE: Use of self insurance requires submission of audited financial statements annually.

5. Specific instructions relating to the application process.

Section A - General Information: MUST BE completed by all applicants.

Section B - Description of Facility: Description of the Facility: must be completed by all applicants. (If application applies to more than one facility, for each facility list the specific information required in Section C on separate sheets.)

Section C - Specific Description of the Facility or Facilities:

Railroad Facility: Must be completed by the owner or operator of a railroad that transports oil as cargo.

2. ~~Facilities:~~ Must be completed by owners or operators of other types of facilities associated with railroad operations that are located on or in California waters or are located where a release of oil could impact waters of the State.

Section D - Declaration

- a. If a question does not apply, answer "not applicable."
- b. Incomplete applications will not be processed until OSPR receives additional information needed for processing.
- c. If additional space is required, supplemental sheets may be attached.

Please contact the Financial Responsibility Unit at (916) 445-9338 if you have any questions.