

**Lender Application for participation in the
Petroleum UST Linked Deposit Program**

Name of lending institution

Address for correspondence

City Zip Code

Contact Person Area Code - Phone Number

| Name of UST Owner | Amount Requested | Present Borrowing Rate |
|---|------------------|------------------------|
| Check which applies: First time applicant _____ Renewal request _____ | | |

Note:

In compliance with Section 135 of the Ohio Revised Code, total public funds on deposit at the lending institution may not exceed 30% of the total assets of the lending institution.

The borrowing entity listed above must be the same entity replacing or upgrading the UST system.

Linked Deposit requests must be fixed rate commitments during the period of the deposit of the Petroleum UST Release Compensation Board.

A complete Linked Deposit application consists of Form 1 and Form 2 submitted by an eligible lender. Please send completed applications to:

**The Petroleum UST Release Compensation Board
P.O. Box 163188
Columbus, Ohio 43216-3188**

PETROLEUM UST BOARD LINKED DEPOSITS

Employment Impact Statement

A. Name, Address and Telephone of UST Owner/Applicant:

(area code)

Business Name, Address and Telephone of UST Site:

(Where funds will be used)

(area code)

Employer Federal Identification Number _____

Does the UST owner hold title to the real property on which the USTs are located? yes ____ no ____

B. Business Data

| | Yes | No |
|---|-------|-------|
| 1) Is the business headquartered in Ohio? | _____ | _____ |
| 2) Does the owner own six or fewer petroleum USTs exclusively in Ohio? | _____ | _____ |
| 3) Is the business organized for profit? | _____ | _____ |
| 4) Does the business employ less than fifty persons and have a total annual revenue of two million dollars or less? | _____ | _____ |

Note: If the answer is NO to any of the above questions, the UST owner is not eligible for the PUSTRCB Linked Deposit Program.

5) Indicate the intended use of the funds:

- a) UST replacement _____
- b) UST upgrade _____
- c) combination of both _____

6) List below the volume, storage use, and year installed of each UST the applicant currently owns:

| | <u>UST 1</u> | <u>UST 2</u> | <u>UST 3</u> | <u>UST 4</u> | <u>UST 5</u> | <u>UST 6</u> |
|--|--------------|--------------|--------------|--------------|--------------|--------------|
| Volume | _____ | _____ | _____ | _____ | _____ | _____ |
| Storage Use/ Product | _____ | _____ | _____ | _____ | _____ | _____ |
| Year Installed (? if unknown) | _____ | _____ | _____ | _____ | _____ | _____ |
| Intended Use of Loan (check what applies to each tank) | | | | | | |
| Replacement | _____ | _____ | _____ | _____ | _____ | _____ |
| Upgrade | _____ | _____ | _____ | _____ | _____ | _____ |
| No Action | _____ | _____ | _____ | _____ | _____ | _____ |

C. Employment Data

- 1) Number of jobs at the time of application: Full time _____ Part Time _____
- 2) Number of jobs saved: Full time _____ Part time _____
- 3) Number of jobs created: Full time _____ Part time _____
- 4) What is the annual volume of the UST owner's petroleum business? _____ gallons

D. Please define the UST owner's business structure:
i.e., Corporation _____ Partnership _____ Sole Proprietorship _____

E. Is the UST owner currently participating in any federal, state, or local programs designed to assist businesses? yes _____ no _____ (If yes, describe.)

F. Please describe the economic needs of the area in which the tanks to be upgraded or replaced are located.

G. Please describe the business' need for participation in the PUSTRCB Linked Deposit Program; how the linked deposit benefit will contribute to the business' ability to continue operations at present levels in an environmentally sound manner.

H. Please complete the following employment plan according to the time frames the UST owner estimates that the PUSTRCB Linked Deposit will save or create jobs.

| WITHIN | Jobs Saved | Jobs Created | | Jobs Saved | Jobs Created |
|--------------|---------------|-----------------|-----------|---------------|-----------------|
| 3 months | _____ | _____ | 15 months | _____ | _____ |
| 6 months | _____ | _____ | 18 months | _____ | _____ |
| 12 months | _____ | _____ | 24 months | _____ | _____ |

I. Is the application being made under the PUSTRCB Linked Deposit Program to refinance existing debt created by the upgrade or replacement of UST systems? Yes _____ No _____

If yes, please describe how the refinancing materially affects the ability of the UST owner to continue the employment plan under paragraph H above.

J. Has the company participated in any other Federal, State or Local Government programs?
Yes _____ No _____ (If yes, describe.)

K. If this is a renewal application, you must provide an explanation of how you have met your employment goals as projected in your original application. If you have not, explain the circumstances. Will the renewal contribute to the company's ability to employ? Explain.

L. CERTIFICATION AND STATEMENT OF UST OWNER:

Under penalty of law, the UST owner named in this statement has accurately and truthfully answered the questions as listed and has made application to the financial institution for the sole purpose of preserving and/or creating jobs under the Petroleum UST Linked Deposit Program provisions of the **Ohio Revised Code**. Said UST owner specifically certifies that the funds borrowed from the eligible lending institution will not be used for purposes of gain under an investment arbitrage situation. Said UST owner further certifies that the Linked Deposit benefit will be used exclusively for the replacement or upgrade of petroleum USTs registered with the State Fire Marshal. It is fully understood that any use of the funds, other than that intended pursuant to **Sections 3737.95 to 3737.98 of the Ohio Revised Code**, constitutes an act of fraud. Furthermore, the UST owner agrees to comply with any and all monitoring efforts that may be required by the Petroleum Underground Storage Tank Release Compensation Board. Failure to do so in a complete and timely manner may affect continued participation in the program.

Date

UST Owner (signature)

M. CERTIFICATION OF FINANCIAL INSTITUTION

Under penalty of law, the financial institution making application under the Petroleum UST Linked Deposit Program provisions of the **Ohio Revised Code** certifies that, according to information revealed in the loan application, the applicant is an eligible owner and that the benefits of the linked deposits materially contribute to the preservation and/or creation of jobs. This statement by the financial institution is based upon its best judgment and only upon factors known to it and relevant in financial statements submitted to it by the UST owner in question. It is also understood that, since the Petroleum UST Release Compensation Board is not a lender of funds, the decisions involved in granting loans to the UST owner rests solely upon the financial institution. The lender certifies that the present borrowing rate as listed on the application Form 1, is the present borrowing rate of the eligible UST owner, and is the true borrowing rate that would be charged in the absence of the Linked Deposit Program. No fees will be charged to the applicant to process this application. Approved applicants will receive a fixed-reduced rate of interest on the loan described in this application, for the period of the deposit by the Petroleum UST Release Compensation Board. The lender agrees to comply with any and all monitoring efforts that may be required by the Petroleum UST Release Compensation Board. The lending institution certifies that it is an eligible state depository for the current designation period.

Date

Financial Institution

Authorized Signature

As the authorized signer for the above named financial institution, I further certify that the financial institution has been approved as a public depository of state funds pursuant to Section 135.03 of the Ohio Revised Code and is registered with the State Treasurer.

Signature _____