UTAH PETROLEUM STORAGE TANK TRUST FUND / REQUEST FOR PAYMENT VOUCHER

Summary Worksheet

State Project Manager: Date:

SUBMITTED BY:

PAYEE:

ADDRESS:

TYPE OF BUSINESS:

SOLE PROPRIETOR____PARTNERSHIP____CORPORATION____

FED TAX ID # OR SS #

RELEASE ID: _____

FACILITY NUMBER: _____

SITE NAME: _____

SITE LOCATION: _____

PHONE:

BILL TO:

UTAH DEPT. of ENVIRONMENTAL QUALITY
ENVIRONMENTAL RESPONSE & REMEDIATION
168 NORTH 1950 WEST/ P O BOX 144840
SALT LAKE CITY, UTAH 84114-4840

PHONE NO. (801) 536-4100

DATE	WORK PLAN	SERVICES RENDERED/DESCRIPTION - MUST INCLUDE COPIES OF INVOICES, CHECKS & DETAILED BACK-UP DOCUMENTATION	INVOICE #	AMOUNT

I, the undersigned, certify that the above listed items or services were required for and used at this site, that the charges appearing hereon are correct, and that no part of the same has been paid for by the PST Fund. The presentation of a claim based on materially false information is subject to criminal penalties. Utah Code Ann. §19-6-429.

TOTAL SUBMITTED: $

SIGNATURE OF RESPONSIBLE PARTY DATE SIGNATURE OF CONSULTANT FOR PROJECT DATE

NOTE: Signatures of BOTH Responsible Party AND Consultant required for Direct Reimbursement to the Consultant.
Only one signature required for reimbursement to Owner.

CLAIM # 1

PMT #

LESS DISALLOWED COSTS:

SUB-TOTAL APPROVED: $

LESS DEDUCTIBLE: $

TOTAL TO REIMBURSE: $

STATE USE:

PROJECT MANAGER DATE	ACCOUNTANT DATE	**EXECUTIVE SECRETARY** DATE
PST SECTION MANAGER DATE	MSC DATE	DEQ/FINANCE DATE

	FUND	AGENCY	UNIT	APPR CODE	SOURCE	PROGRAM	FUNCTION	AMOUNT
FINANCIAL CODING	**7720**	**480**	**4731**	**7220**	**6137**			$