



# Illinois Environmental Protection Agency

2520 West Iles Avenue • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217) 782-3397

## COMPOST FACILITIES FINANCIAL ASSURANCE CERTIFICATION

Required by 35 Ill. Adm. Code 830.107

You may complete this form online, save a copy locally, print, sign and submit it to:

Bureau of Land, Waste Reduction and Compliance Section  
Mail Code #33  
2520 West Iles Avenue, P.O. Box 19276  
Springfield, IL 62794-9276

### I. IDENTIFICATION INFORMATION

IEPA ID #: \_\_\_\_\_ County: \_\_\_\_\_  
Facility Name: \_\_\_\_\_  
Compost Permit #: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Illinois Zip Code: \_\_\_\_\_

### II. CERTIFICATION

I \_\_\_\_\_, the Operator or a duly authorized representative thereof, do hereby certify under penalty of law that the Operator has complied with the provisions of:

1. 35 Ill. Adm. Code 830.206 – Operating Plan for Permitted Landscape Waste Compost Facilities;
2. 35 Ill. Adm. Code 830.210 – Personnel Training for Permitted Landscape Waste Compost Facilities;
3. 35 Ill. Adm. Code 830.211 – Record keeping for Permitted Landscape Waste Composting Facilities;
4. 35 Ill. Adm. Code 830.504 – Testing Requirements for End-Product Compost Derived from Landscape Waste;
5. 35 Ill. Adm. Code 830.507 – Sampling Methods; and,
6. 35 Ill. Adm. Code 830, Subpart F: FINANCIAL ASSURANCE.

I affirm that the above-cited regulations have, to the best of my knowledge and belief, been fully complied with. Such affirmation is made under penalty of perjury as defined in Section 32-2 of the Criminal Code of 1961 (720 ILCS 5/32-2). I am aware that there are significant penalties for making false statements, including the possibility of fine and imprisonment for knowingly committing violations.

***Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))***

\_\_\_\_\_  
Owner or Authorized Representative

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Printed Name:

\_\_\_\_\_  
Title: