



Colorado Department of Labor and Employment  
Division of Oil and Public Safety  
Petroleum Cleanup and Redevelopment Fund  
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Web: [www.colorado.gov/ops](http://www.colorado.gov/ops)

## TANK REMOVAL REIMBURSEMENT APPLICATION

This form should be used when the Applicant has already established eligibility to the Redevelopment Fund. Please submit this form to the Brownfields Program via email to the email address listed above. More information is available on the [Brownfields Program](#) web page.

(Office Use Only)	Facility #:	Event #:
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### Applicant Information

Property Owner Name:						
Contact Name:						
Email Address:				Phone #:		
Mailing Address:	Street:					
	City:		State:		ZIP:	
Reimbursement Address: <input type="checkbox"/> Same as above	Street:					
	City:		State:		ZIP:	

### Tank Information

Removal Date:		# of Tanks Removed:	
Tank	Tank Material	Capacity	

### Reimbursement Information

*Attach invoices and proof of payment of tank removal activities.*

Total Tank Removal Cost:		Requested Reimbursement Amount:	
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### Signatory Section

Legal Name of Applicant:		Social Security # or FEIN:	
Applicant Signature*:			Date:
Email Address:			

\*This application is considered signed when the signature of the Applicant is delivered by scanned image (e.g., .pdf or .tif file extension name) as an attachment to electronic mail (email). Such scanned signature shall be treated in all respects as having the same effect as an original signature.