

STATE OF FLORIDA STORAGE TANK LOCAL GOVERNMENT FINANCIAL TEST (Letter from Chief Financial Officer)

Reference: 40 CFR 280.105(c)

I am the chief financial officer of _____, herein referred to as the "firm", _____

[Name of the local government owner or operator, or guarantor]

[Address of the firm]

This letter is in support of the use of the _____ to demonstrate financial responsibility for _____

[Insert "local government financial test" and/or "guarantee"]

[Insert "taking corrective action" and/or "compensating third parties for bodily injury and property damage caused by"]

_____ in the amount of at least

[Insert "accidental discharges" or "sudden accidental discharges" or "nonsudden accidental discharges" or leave blank if only corrective action is covered]

\$ _____ per occurrence and \$ _____ annual aggregate arising from operating (a)

storage tank(s). Storage tanks at the following facilities are assured by this financial test:

Facility/Tank Schedule

[List information for each facility. See Instruction #6 on page *i* for details. Indicate "See attachment identifying instrument and dated [date]" if required.]

DEP FacID (for sites in Florida)	Facility Name and Site Address (for all sites covered)	Number of Tanks or Tank I.D. Nos.

This firm has not received an adverse opinion, or a disclaimer of opinion, from an independent auditor on its financial statements for the latest completed fiscal year that ended _____. The figures in Part I of the worksheet are derived from these audited financial statements and footnotes. Any outstanding issues of general obligation or revenue bonds, if rated, have a Moody's rating of Aaa, Aa, A, or Baa, or a Standard & Poor's rating of AAA, AA, A, or BBB; if rated by both firms, the bonds have a Moody's rating of Aaa, Aa, A, or Baa, and a Standard & Poor's rating of AAA, AA, A, or BBB.

[Date]

Worksheet for Municipal Financial Test

Part I: Basic Information

1. Total Revenues
 - a. Revenues \$ _____
 [Value of revenues excludes liquidation of investments and issuance of debt. Value includes all general fund operating and non-operating revenues, as well as all revenues from all other governmental funds including enterprise, debt service, capital projects, and special revenues, but excluding revenues to funds held in a trust or agency capacity.]
 - b. Subtract interfund transfers \$ _____
 - c. Total Revenues \$ _____
2. Total Expenditures
 - a. Expenditures \$ _____
 [Value consists of the sum of general fund operating and non-operating expenditures including interest payments on debt, payments for retirement of debt principal, and total expenditures from all other governmental funds including enterprise, debt service, capital projects, and special revenues.]
 - b. Subtract interfund transfers \$ _____
 - c. Total Expenditures \$ _____
3. Local Revenues
 - a. Total Revenues (from 1c) \$ _____
 - b. Subtract total intergovernmental-transfers \$ _____
 - c. Local Revenues \$ _____
4. Debt Service
 - a. Interest and fiscal charges \$ _____
 - b. Add debt retirement \$ _____
 - c. Total Debt Service \$ _____
5. Total Funds \$ _____
 [Sum of amounts held as cash and investment securities from all funds, excluding amounts held for employee retirement funds, agency funds, and trust funds.]
6. Population (Persons) _____

Part II: Application of Test

7. Total Revenues to Population
 - a. Total Revenues (from 1c) _____
 - b. Population (from 6) _____
 - c. Divide 7a by 7b _____
 - d. Subtract 417 _____
 - e. Divide by 5,212 _____
 - f. Multiply by 4.095 _____
8. Total Expenses to Population
 - a. Total Expenses (from 2c) _____
 - b. Population (from 6) _____
 - c. Divide 8a by 8b _____
 - d. Subtract 524 _____
 - e. Divide by 5,401 _____
 - f. Multiply by 4.095 _____

9. Local Revenues to Total Revenues
 - a. Local Revenues (from 3c) _____
 - b. Total Revenues (from 1c) _____
 - c. Divide 9a by 9b _____
 - d. Subtract 0.695 _____
 - e. Divide by 0.205 _____
 - f. Multiply by 2.840 _____
10. Debt Service to Population
 - a. Debt Service (from 4c) _____
 - b. Population (from 6) _____
 - c. Divide 10a by 10b _____
 - d. Subtract 51 _____
 - e. Divide by 1,038 _____
 - f. Multiply by -1.866 _____
11. Debt Service to Total Revenues
 - a. Debt Service (from 4c) _____
 - b. Total Revenues (from 1c) _____
 - c. Divide 11a by 11b _____
 - d. Subtract 0.068 _____
 - e. Divide by 0.259 _____
 - f. Multiply by -3.533 _____
12. Total Revenues to Total Expenses
 - a. Total Revenues (from 1c) _____
 - b. Total Expenses (from 2c) _____
 - c. Divide 12a by 12b _____
 - d. Subtract 0.910 _____
 - e. Divide by 0.899 _____
 - f. Multiply by 3.458 _____
13. Funds Balance to Total Revenues
 - a. Total Funds (from 5) _____
 - b. Total Revenues (from 1c) _____
 - c. Divide 13a by 13b _____
 - d. Subtract 0.891 _____
 - e. Divide by 9.156 _____
 - f. Multiply by 3.270 _____
14. Funds Balance to Total Expenses
 - a. Total Funds (from 5) _____
 - b. Total Expenses (from 2c) _____
 - c. Divide 14a by 14b _____
 - d. Subtract 0.866 _____
 - e. Divide by 6.409 _____
 - f. Multiply by 3.270 _____
15. Total Funds to Population
 - a. Total Funds (from 5) _____
 - b. Population (from 6) _____
 - c. Divide 15a by 15b _____
 - d. Subtract 270 _____
 - e. Divide by 4,548 _____
 - f. Multiply by 1.866 _____
16. Financial Index
 Add 7f + 8f + 9f + 10f + 11f +
 12f + 13f + 14f + 15f + 4.937 _____

I hereby certify that the financial index shown on line 16 of the worksheet is greater than zero and that the wording of this letter is identical to the wording as adopted and incorporated by reference in Rule(s) 62-761.420 and/or 62-762.421, F.A.C.

[Signature of Chief Financial Officer]

[Name and Title]

[Signature of Witness or Notary]

[Printed Name of Witness or include Notary Seal]

[Date of Witness or Notary]

[CFO Office Contact: Name and Title]

[Phone Number]

[Email Address]