

Mail duplicate original to:  
Solid Waste Financial Coordinator  
Florida Department of Environmental Protection  
2600 Blair Stone Road MS 4548  
Tallahassee, Florida 32399-2400

## **EXHIBIT A (Revised)**

To be attached to State of Florida Solid Waste Facility \_\_\_\_\_ Agreement entered into  
Enter "Trust Fund" or "Standby Trust Fund"  
as of \_\_\_\_\_ by and between \_\_\_\_\_,  
Date of Agreement Owner or operator  
the Grantor, and \_\_\_\_\_, the Trustee,  
Bank name  
for account number \_\_\_\_\_  
Enter "N/A" if pooled account or no acct. no. assigned

All orders, requests, and instructions by the Grantor to the Trustee shall be in writing and signed by one of the following persons:

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Type Name and Title

This amendment is executed on \_\_\_\_\_ and will become effective upon FDEP approval.

### **GRANTOR**

\_\_\_\_\_  
Authorized Signature for Grantor

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail Address

### **TRUSTEE**

\_\_\_\_\_  
Authorized Signature for Trustee

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Signature of Witness or Notary

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Witness or Notary Seal