

MODEL RESOLUTION

[Authorization to Make Application for Financial Assistance]

WHEREAS, _____ is a “state” or “local government” as defined in the Rules of the Georgia Department of Natural Resources, Environmental Protection Division (hereinafter, “EPD Rules”), Rule number 391-3-19-.09; and

WHEREAS, _____ **is a (county/municipal corporation)** [OR] **is not a county or municipal corporation** within the meaning of O.C.G.A. Section 12-8-95(b)(4) and EPD Rule 391-3-19-.09; and

WHEREAS, the site more particularly described in Exhibit “A” attached hereto is a solid waste handling facility as defined by EPD Rule 391-3-4-.10(67) (hereinafter, “the Site”), and has been placed **on the National Priorities List pursuant to the federal Comprehensive Environmental Response, Compensation and Liability Act of 1980** [AND/OR] **on the Hazardous Site Inventory pursuant to the Hazardous Site Response Act (O.C.G.A., Section 12-8-90 et seq.)**; and

WHEREAS, the **Director of the Georgia Department of Natural Resources, Environmental Protection Division (“EPD”)** [AND/OR] **United States Environmental Protection Agency** has notified _____ in writing that it is a “responsible party” (as defined in EPD Rule 391-3-19-.02(2)(s)) for the Site; and

WHEREAS, _____ **has expended** [OR] **has already expended, and anticipates expending in the future,** [OR] **anticipates expending** certain costs associated with the investigation, remediation, post-closure care and maintenance of the Site (hereinafter, “the Costs”); and

WHEREAS, the Costs (or a portion thereof) may be eligible for **reimbursement** [OR] **advance** [OR] **reimbursement and/or advance** to _____ by the Director of EPD from the Hazardous Waste Trust Fund (pursuant to O.C.G.A. Section 12-8-90 et seq., EPD Rule 391-3-19-.09 and other pertinent law), provided said Costs (or portion thereof) are determined by EPD to be “Eligible Costs” (as defined in EPD Rule 391-3-19-.09(4)(a)), and provided _____ has met the “Eligibility Requirements” set forth in EPD Rule 391-3-19-.09(2); and

WHEREAS, the said “Eligibility Requirements” set forth in EPD Rule 391-3-19-.09(2) require, among other things, that the following criteria be met in order for the Costs (or portion thereof) to be eligible for **reimbursement** [OR] **reimbursement and/or advance** :

- “ ... (e) the state or local government has adopted an authorizing resolution; and
- (f) the state or local government has submitted to the Director [of EPD] a completed application for financial assistance on forms as provided by the Director...” ; and

WHEREAS, _____ desires to make application to EPD for **reimbursement** [OR] **reimbursement and/or advance** of the Costs (or a portion thereof) on the form(s) provided by the Director of EPD (as completed and attached hereto as Exhibit “B”), and to take any other action which may be necessary or appropriate to have the Costs (or portion thereof) fully considered for such purposes; and

WHEREAS, in the event the attached applications are approved by EPD, _____ desires to receive the sums approved by EPD as **reimbursement** [OR] **reimbursement/advance** of the

Costs (or a portion thereof), and to process, administratively handle and utilize said sums for such approved purposes; and

WHEREAS, _____ is confident that it can otherwise satisfy the “Eligibility Requirements” set forth in EPD Rule 391-3-19-.09(2);

NOW, THEREFORE, BE IT RESOLVED that [TITLE--e.g., the Chairman, Executive Director, or other official usually empowered to take the contemplated action(s) on behalf of the respective state or local government] is hereby fully authorized to complete and execute the application attached hereto as Exhibit “B” on behalf of _____, and to submit same to EPD for its consideration.

BE IT FURTHER RESOLVED that _____ is hereby authorized to take any and all other action, without further approval or action of this **[board, commission etc.]** (including, but not limited to, executing supplemental forms, agreements, application amendments, additional applications and the like, and providing additional information or documentation), which may be necessary or appropriate in order for the Costs (or portion thereof) to be fully considered by EPD for **reimbursement** [OR] **reimbursement and/or advance** from the Hazardous Waste Trust Fund in accordance with the provisions of O.C.G.A. Section 12-8-90 et seq., EPD Rule 391-3-19-.09, and other pertinent law.

THIS ____ Day of _____, 202__.

[NAME OF STATE OR LOCAL GOVERNMENT]

[Official no. 1]

[Official no. 2]

[Official no. 3]

[Official no. 4]

ATTEST:

[Secretary or other authorized official]