GEORGIA BROWNFIELD PROGRAM Brownfield Eligibility Form

| REQUIRED ELEMENTS | | | | | | | | | |
|--|---|--------|---------|------------------------------|-------|-----|--|--|--|
| | Purchase date or closing date for real estate transaction (mm/dd/yyyy) | | | | | | | | |
| | Due date for submission of the final prospective purchaser compliance status report (mm/dd/yyyy) | | | | | | | | |
| | A \$3,000 application fee in the form of a check payable to the GA Department of Natural Resources. | | | | | | | | |
| | A Legal Description for the subject property, or if not currently available, other documents such as a copy of a Tax Plat or other figure show property boundary. | | | | | | | | |
| | Two (2) paper copies of the prospective purchaser corrective action plan (PPCAP) or prospective purchaser compliance statue report (PPCSR) and one (1) disc (CD or DVD) copy in a searchable document, preferably a PDF (portable document format). | | | | | | | | |
| | BROWNFIELD PROPERTY INFORMATION | | | | | | | | |
| PROPERTY STREET ADDRESS | | | | | | | | | |
| CITY | | | COUNTY | | | ZIP | | | |
| TAX PARCEL NUMBER(s) | | | 0001111 | PROPERTY NAME (if applicable | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| SIZE (Acres) LATITUDE | | | | LONGITUDE | | | | | |
| PLEASE CHECK ALL OF THE FOLLOWING THAT APPLY: Underground Storage Tanks Currently on Site (includes tanks that were closed in place) Removed – Provide date of "No further action" letter | | | | | | | | | |
| ☐ Landfills or buried debris (past or present) | | | | | | | | | |
| ☐ HSRA Release Notification Provide date Notification was filed | | | | | | | | | |
| □ Date of non-listing letter (<i>if applicable</i>), OR □ Listing date and HSI Site Number | | | | | | | | | |
| PROSPECTIVE PURCHASER INFORMATION | | | | | | | | | |
| NAME TITLE | | | | | | | | | |
| COMPANY (if applicable) | | | | | | | | | |
| ADDRESS | | | CITY | | STATE | ZIP | | | |
| PHONE | | E-MAIL | | | | | | | |

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PROPERTY QUALIFYING CRITERIA

§ 12-8-205 of the Brownfield Act

I certify that to the best of my knowledge:

- This property has a pre-existing release.
- This property is not listed on the National Priorities List pursuant to the federal Comprehensive Environmental Response, Compensation, and Liability Act.
- This property is not currently undergoing response activities as required by an order of the U.S. Environmental Protection Agency.
- This property is not currently subject to a hazardous waste facility permit as defined by Georgia Code Section 12-8-62.

PROSPECTIVE PURCHASER QUALIFYING CRITERIA

§ 12-8-206 of the Brownfield Act

I certify that to the best of my knowledge:

- I am not a person who has contributed or is contributing to a release at the property, or a relative by blood within the third degree of consanguinity or by marriage, an employee, shareholder, officer, or agent; or otherwise affiliated with the current owner of the property or any person who has contributed to a release at the property.
- The purchasing corporation or other legal entity, is not a current or former subsidiary, division, parent company, or partner; or employer or former employer; or otherwise affiliated with the current owner of the property or any person who has contributed to a release at the property.
- I certify that I am not in violation of any order, judgment, statute, rule, or regulation subject to the enforcement of the Director of the Georgia Environmental Protection Division.

| I certify that this document and all submitted is, to the best of my kno | | | supervision and th | e information | | | | |
|--|------------------|-----------------------|--------------------|---------------|--|--|--|--|
| Prospective Purchaser / Authorized A | gent Signature | | | | | | | |
| | | | | | | | | |
| Prospective Purchaser / Authorized Ag | ent Name (print) | | Date | | | | | |
| | AUTHORIZED | AGENT (if applicable) | | | | | | |
| NAME | | TITLE | | | | | | |
| COMPANY | | | | | | | | |
| ADDRESS | | CITY | STATE | ZIP | | | | |
| PHONE | E-MAIL | | | | | | | |
| TECHNICAL CONTACT PERSON (CONSULTANT, CONTRACTOR, ETC.) | | | | | | | | |
| NAME | | TITLE | | | | | | |
| COMPANY | | | | | | | | |
| ADDRESS | | CITY | STATE | ZIP | | | | |
| PHONE | E-MAIL | | | | | | | |

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