



State Emergency Response Commission

Facility Annual Chemical Filing Fee Worksheet (Oil and Gas Extraction and Storage Site(s))

Date Due _____ / ____ / ____

Facility Name _____

Address _____

City _____ OH Zip _____ - _____

Revenue ID _____ Revenue Type _____ RTKOG _____

County _____

Ohio EPA Use ONLY	
Check ID#	_____
Check Date	_____
Check #	_____
Check Amount	\$ _____

I. Fee Calculation

Line A: Base inventory filing fee	\$ 50.00	(A)
Line B: Write the total number of storage facilities which you reported in excess of 10,000 pounds (32/33 barrels) of petroleum crude oil or other hazardous substance(s) on site in connection with the production or storage of crude oil.	_____	(B)
Line C: Subtract 25 from the amount listed on Line B (if this number is less than 0, enter 0).	_____	(C)
Line D: Multiply the amount on Line C _____ x \$10	\$ _____	(D)
Line E: Add the total on Line D to Line A. If the total amount exceeds \$900, enter \$900 on Line E.	\$ _____	(E)

II. List county(ies) and the total number of wells for each which your parent company has operating oil and gas extraction/storage site(s)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

III. Credits

Line F: Enter any credits that were paid to any city or municipality as a result of a "grandfathered" local Right-to-Know (RTK) program. (Any facility claiming this credit must attach a receipt or other document showing the amount paid and that the purpose was for community RTK). If no fee was paid, enter zero (0).	\$ _____	(F)
--	----------	-----

IV. Late Fees

Line G: If your inventory and filing fee is postmarked after March 31, your facility must pay a 10% late filing fee. Enter Line E _____ x .10	\$ _____	(G)
---	----------	-----

V. Total Filing Fee Due

Line H: Subtract Line F from Line E, then add Line G if applicable. Amount on Line H is your facility's annual inventory filing fee.	(E - F + G)	\$ _____	(H)
--	-------------	----------	-----

If you need assistance, please call (614) 644-2260 or 1-888-644-2260 (toll-free)

Make checks payable to: Treasurer, State of Ohio EPA
Return this form to: Ohio EPA, Dept. L-2711, Columbus, OH 43260-2711
 Please include Revenue ID# on check