

MINNESOTA POLLUTION CONTROL AGENCY DRYCLEANER FUND

ASSIGNMENT CERTIFICATION

PART I – BACKGROUND INFORMATION

MPCA Project # _____

(PLEASE PRINT CLEARLY OR TYPE)

DRYCLEANER FUND APPLICANT'S NAME	SITE NAME (IF BUSINESS)
STREET ADDRESS	SITE ADDRESS
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE
DRYCLEANER FUND APPLICANT'S TELEPHONE ()	CONTACT PERSON AND TELEPHONE AT SITE ()
APPLICANT IS: <input type="checkbox"/> OWNER <input type="checkbox"/> OPERATOR	
FIRST ASSIGNEE'S NAME	SECOND ASSIGNEE'S NAME
STREET ADDRESS	STREET ADDRESS
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE
ASSIGNEE'S TELEPHONE NUMBER ()	ASSIGNEE'S TELEPHONE NUMBER ()
DOLLAR AMOUNT ASSIGNED \$	DOLLAR AMOUNT ASSIGNED \$
ASSIGNEE'S STATUS <input type="checkbox"/> ADVANCED FUNDS FOR RESPONSE ACTION <input type="checkbox"/> PROVIDED RESPONSE ACTION SERVICES	ASSIGNEE'S STATUS <input type="checkbox"/> ADVANCED FUNDS FOR RESPONSE ACTION <input type="checkbox"/> PROVIDED RESPONSE ACTION SERVICES

PART II – ASSIGNMENT CERTIFICATION

I _____ [Drycleaner Fund applicant] in consideration of _____, receipt of which is hereby acknowledged, hereby assign to _____, and _____ [assignees] his/her/its/their executors, administrators and assigns the sum of money indicated on the first page of this certification for each such assignee from money now due or which may become due to _____ [Drycleaner Fund applicant] from the Drycleaner Environment Response and Reimbursement Account pursuant to Minn. Stat. § 115B.49 for eligible costs actually incurred by _____ [Drycleaner Fund applicant] for response action activities at _____ [the site] in response to the dry cleaning product discharge that was reported to _____ [agency name] on _____ [date reported] and which are the subject of the application for reimbursement which was signed by the applicant on _____.

It is further expressly understood and acknowledged that this assignment is limited to the application signed by the applicant on _____ and relates only to payment that may become due from the Drycleaner Fund as a result of this specific application. Future supplemental applications for this site will not be subject to this assignment. If an assignment is deemed necessary for supplemental applications for this site, a separate assignment certification will be required.

It is expressly understood that the Minnesota Pollution Control Agency shall make payment to the Drycleaner Fund applicant and the assignee or assignees herein designated by a multi-party check payable jointly to the Drycleaner applicant and assignee(s) and requiring endorsement of all payees.

It is further expressly understood and acknowledged that this assignment does not relieve the Drycleaner Fund applicant of any duties, responsibilities or liabilities under local, state or federal law relating to the discharge or the conditions of reimbursement pursuant to Minn. Stat. Ch. 115B.49.

IN WITNESS WHEREOF, the Drycleaner Fund applicant has hereunder set their hands this _____ day of _____, 20 _____.

Drycleaner Fund Applicant’s Name (Print or Type)	Subscribed and sworn to before me this _____ day of _____.
Drycleaner Fund Applicant’s Signature	Notary Public
Date Signed	My Commission Expires