

**North Carolina Department of Environment and Natural Resources
Division of Energy, Mineral, and Land Resources
Energy Section - Oil and Gas Program**

Oil & Gas Program Use Only

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**Form
1**

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Financial Responsibility Ownership

15A NCAC 05H .1302

Applicant or Permittee Name: Phone:

Company Name: Fax:

Address: Email:

City: State: Zip:

Lease/Well Name: Nearest Town/City:

Well Number: County:

Commission Issued Drilling Unit Number: Well Site Ingress/Egress Location:

Approximate Date Land Disturbing Activities Will Commence: Total Acreage of Disturbed or Uncovered Areas:

Provide the name, phone number, and Email address for the person to contact onsite if problems occur with erosion control, stormwater, and any oil and gas well site operations:

Name: Phone:

Email:

List all individuals approved to submit documents on behalf of the applicant or permittee and individuals designated as an agent(s) of the financially responsible party:

Name: Title:

Name: Title:

Name: Title:

Name: Title:

Form 1 - Financial Responsibility Ownership

Applicant or Permittee Name:

Provide the name, address, phone number, fax number, and Email address for the person who is financially responsible for oil and gas operations:

Name:

Phone:

Address:

Fax:

Email:

Attach a copy of the Certificate of Assumed Name if the financial responsible party is a partnership or other person engaging in business under an assumed name:

Check Box to indicate Certificate of Assumed Name is attached by email or with hardcopy of this form.

If file is attached with email submittal, please write the name of the file.

Notary Public Information:

I, _____, a Notary Public of the County of _____

State of North Carolina, hereby certify that _____

appeared personally before me this day and being duly sworn acknowledge that the above form was executed by him/her.

Witness my hand and notarial seal, this _____ day of _____, 20 _____

Notary

My commission expires

Seal

This form must be signed by the financially responsible party.

Print Name: _____

Title: _____

Signature: _____

Date: _____