



EXCAVATION EXPENSES WORKSHEET
 NORTH DAKOTA INSURANCE DEPARTMENT - SPECIAL FUNDS DIVISION
 PETROLEUM TANK RELEASE COMPENSATION FUND (PTRCF)
 SFN 17331 (Rev. 1-2006)

INSTRUCTIONS: Please use this form when requesting bid proposals and when submitting your reimbursement request to the Petroleum Tank Release Compensation Fund, 1701 South 12th St., Bismarck, ND 58501, 701-328-9600, 701-328-9610.

Date:		Claim Number:	
Tank Owner:			Telephone Number:
Street Address:		City	State Zip Code
Excavation Company:			Telephone Number:
Street Address:		City	State Zip Code
Date Work Completed:			
Tank Owner Location: (Site Address)			
Number and Size of UST(s) Pulled			
DESCRIPTION OF SERVICES		PROPOSAL	ACTUAL EXPENSES
CONTAMINATED SOIL AND TANK REMOVAL EXPENSES			
Land Farming or Disposal Charge \$ _____ Per CY X _____ Total CY =			
Back-hoe Charge \$ _____ Per CY X _____ Total CY =			
Loader Charge \$ _____ Per CY X _____ Total CY =			
Trucking Charge \$ _____ Per CY X _____ Total CY =			
Mobilization Charge			
Cement and Asphalt Removal/Disposal			
Cement Sawing			
FILL EXPENSES			
Pea rock/sand/clay/other (Specify) \$ _____ Per CY X _____ Total CY =			
Trucking Charge: \$ _____ Per CY X _____ Total CY =			
Other Expenses: (Please Itemize - Example: crane charge, tank removal, subcontractor(s) labor expenses, etc.)			
TOTAL		\$	\$

(Please Read Reverse Side)

The Actual Expenses Total must be manually calculated.

Please include all individual receipts and copies of canceled checks with this worksheet when requesting reimbursement from the Petroleum Tank Release Compensation Fund. If you are including 'other expenses' that were not part of the original proposal, please fully explain these expenses below. Thank you.

Petroleum Tank Release Compensation Fund
1701 South 12th Street
Bismarck, ND 58504
701-328-9600
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