

## 2025 ADDITIONAL REQUIRED INFORMATION

***For Each Financial Mechanism Used You Must Also Attach the Following Information***

Financial Assurance Mechanism	Attachments Required for Each Mechanism
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Check boxes to ensure all required attachments are included.

<input type="checkbox"/> <b>Trust Fund 20.9.10.13</b>	Documentation that demonstrates payments into the Fund and available balance in fund as of Dec. 31.	<input type="checkbox"/>
<input type="checkbox"/> <b>Surety Bond - 20.9.10.15</b>	Evidence of Bond (copy)	<input type="checkbox"/>
	Demonstration that a trust fund or standby trust fund has been established	<input type="checkbox"/>
	The amounts paid into the trust during past calendar year, and total funds available as of Dec. 31	<input type="checkbox"/>
<input type="checkbox"/> <b>Irrevocable Letter of Credit - 20.9.10.16</b>	Must provide affirmative statement that Letter of Credit is still valid, or copy of renewal letter to demonstrate compliance.	<input type="checkbox"/>
	A letter from the owner or operator referring to the letter of credit by number, issuing institution, issue date, and providing the name and address of the facility, and the amount of funds assured	<input type="checkbox"/>
<input type="checkbox"/> <b>Insurance - 20.9.10.17</b>	Attach copy of the Certificate of Insurance.	<input type="checkbox"/>
	Provide information that demonstrates that premium payments were made.	<input type="checkbox"/>
	Copy of latest annual rating (if applicable) and latest audited financial statement provided by Insurer.	<input type="checkbox"/>
<input type="checkbox"/> <b>Risk Management Pool -20.9.10.18</b>	A demonstration that the Risk Management Pool was approved by the Secretary.	<input type="checkbox"/>
	A valid copy of the contractual agreement among participates.	<input type="checkbox"/>
	Provide annual contribution table to demonstrate payments from the risk sharers.	<input type="checkbox"/>
	Demonstration that owner/operator has incorporated in its framework a trust fund or standby trust fund.	<input type="checkbox"/>
<input type="checkbox"/> <b>Local Government Financial Test - 20.9.10.19</b>	Provide current demonstration of bond rating by Moody's, Standard and Poor's, or other Bond Rating Firm. If not bonded, must provide financial ratios.	<input type="checkbox"/>
	Must attach most recent independently audited year-end financial statements and/or independent Audit Report with findings.	<input type="checkbox"/>

Demonstration that local government has placed a reference to all closure, post-closure care, phase I and phase II assessments, and corrective action costs assured through the financial test into its comprehensive annual financial reports (CAFR) and budgets.

Provide a letter signed by the local government's chief financial officer that lists all the current cost estimates covered by a financial test, as described in Subsection F of 20.9.10.19 NMAC.

Provide a copy of the report to the local government from the local government's independent certified public accountant or the appropriate state agency stating that the certified public accountant or state agency has compared the data in the chief financial officer's letter with the owner's or operator's most recent independently audited, year-end financial statements, and in connection with that examination, no matters came to his attention which caused him to believe that the data in the chief financial officer's letter should be adjusted.

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**Local Government Reserve Fund - 20.9.10.20** Reserve Fund must be created by Resolution. Must attach a copy of the current Resolution.   
Must attach most recent annual audit performed by the state auditor under the Single Audit Act.   
Demonstrate that the annual review of the Resolution has determined adequate funds were deposited and met current obligations.

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**Local Government Guarantee - 20.9.10.21** (Not aware of any facilities using this mechanism.) Provide a certified copy of the guarantee along with the items required under Subsection E of 20.9.10.19 NMAC   
Provide current demonstration of bond rating by Moody's, Standard and Poor's, or other Bond Rating Firm. If not bonded, must provide financial ratios.   
Must attach most recent independently audited year-end financial statements and/or independent Audit Report with findings.   
Demonstration that local government has placed a reference to all closure, post-closure care, phase I and phase II assessments, and corrective action costs assured through the financial test into its comprehensive annual financial reports (CAFR) and budgets.   
Provide a letter signed by the local government's chief financial officer that lists all the current cost estimates covered by a financial test, as described in Subsection F of 20.9.10.19 NMAC.

Provide a copy of the report to the local government from the local government's independent certified public accountant or the appropriate state agency stating that the certified public accountant or state agency has compared the data in the chief financial officer's letter with the owner's or operator's most recent independently audited, year-end financial statements, and in connection with that examination, no matters came to his attention which caused him to believe that the data in the chief financial officer's letter should be adjusted.

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**Corporate Financial Test - 20.9.10.22**  
(Only valid for private entities.)

Provide current demonstration of bond rating by Moody's, Standard and Poor's, or other Bond Rating Firm. If not bonded, must provide financial ratios.

Must attach a copy of the independent certified public accountant's unqualified opinion of the owner's or operator's financial statements for the latest completed fiscal year.

Provide a letter signed by the owner's or operator's chief financial officer that lists all the current cost estimates covered by a financial test, including, but not limited to, cost estimates required for municipal solid waste management facilities and cost estimates required for any facilities described in Subsection C of 20.9.10.22 NMAC.

If the chief financial officer's letter provides a demonstration that the firm has assured for environmental obligations as provided in Subparagraph (b) of Paragraph (2) of Subsection A of 20.9.10.22 NMAC, then the letter shall include a report from the independent certified public accountant that verifies that all of the environmental obligations covered by a financial test have been recognized as liabilities on the audited financial statements, how these obligations have been measured and reported, and that the tangible net worth of the firm is at least \$10 million plus the amount of any guarantees provided.

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**Multiple Mechanisms - 20.9.10.23**

Owners may satisfy financial assurance requirements by establishing more than one financial mechanism per facility. Must provide required documentation for each mechanism used to cover all projected costs.

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Please note: If the required attachments are not provided, the Solid Waste Bureau will be issuing Notices of Violation for this reporting year.

**All Financial Assurance Estimates, supporting documents must be sent to the Solid Waste Bureau, not the NMED Secretary.** Documents not sent directly to the Solid Waste Bureau may be lost.



**Transfer Station  
Financial Assurance Closure Cost Estimate Form  
For 2025 - Submit by February 14, 2025**

Facility Name:	Permit No.	
Facility Owner:	Phone/Cell No.	
Prepared by:	Phone/Cell No.	
Email:	Date Prepared	
Facility Address:	Financial Assurance Mechanism(s) Used:	

**Please note estimates must be developed as a Worst -Case Cost Scenarios**

Cost Estimate By Task		Task
Total Waste Removal Costs	\$	Includes stockpiles, and site clean-up (specify loading /hauling rate, \$/mile/round trip) (Number of tons, estimated number of trips, \$/ton for tipping fees)
Removal of recyclables or scrap metal	\$	Includes recyclables, brush and tree waste, wood chips or other materials. (Costs for removal, hauling, or delivery to appropriate locations or recycling facility)
Removal of old equipment/vehicles	\$	Removal of deliver trucks, roll-off boxes and scrap materials. (Obtain estimates for delivery to scrap dealer, note any payments for scrap to offset these costs)
Removal of Scales	\$	Sell scales if possible, and if not, take to scrap dealer. (Note estimate \$ amount )
Building clean-up/ repair	\$	Obtain services for professional clean-up/repair of building.
3rd party overseer costs	\$	Cost of obtaining and using a qualified 3 <sup>rd</sup> party to oversee site closure and provide closure certification documentation.
Subtotal	\$	Subtotal estimated costs
Consumer Price Index	%	Annual Consumer Price Index (CPI) Percentage from US Bureau of Labor Statistics.
Increase due to Inflation	\$	(CPI % * Subtotal) <i>Note: divide % by 100 then multiply with Subtotal to arrive at the correct added cost of inflation. [(CPI % / 100)*Subtotal] +Subtotal</i>
<b>Total Estimated Cost</b>	<b>\$</b>	Subtotal + Increase due to Inflation

**Address the following Notes and Assumptions to explain how estimate costs were obtained, add others as necessary.**

**Notes and Assumptions:**

1. Clean -up costs to labor, equipment to clean-up facility, site and washdown facility
2. Dollar amount obtained from quotes or estimates for tasks
3. Cost estimate assumes on-site accumulation of \_\_\_\_\_ tons @ current rate tons received/per/day, and average operational weekly capacity
4. Waste and residues will be loaded into what size bins \_\_\_\_\_ or tractor trailers \_\_\_\_\_
5. Provide Name of landfill that wastes will be disposed.  
Roundtrip distance, provide estimated cost/per mile, and tipping fee cost at this LF.
6. Provide facility name where remaining recyclables or scrap metal will be delivered.  
Provide costs for transport, and any fees.
7. Provide name, address and qualifications of the 3rd party overseer and hourly cost for services.



