



Colorado Department of Labor and Employment
Division of Oil and Public Safety
Petroleum Storage Tank Committee
633 17th Street, Suite 500
Denver, CO 80202-3610

Phone: 303-318-8525
Fax: 303-318-8488
Email: cdle_petroleumstoragetankcommittee@state.co.us
Web: www.colorado.gov/cdle/petroleum

Colorado Petroleum Storage Tank Fund Protest of Fund Payment Report

Per 7 CCR 1101-14 §8-6, a Protest must be submitted within **60 calendar days** of the date of the Fund Payment Report. Any Protest received after the 60 calendar days will be dismissed, deeming all decisions related to the amount of reimbursement and percentage reductions final.

This form should be used when an applicant disputes a decision by the Petroleum Storage Tank Committee as stated on the Fund Payment Report and wishes to petition to the Committee to review its decision. Protests may be submitted on issues related to the eligibility determination, the amount of reimbursement and the percentage reductions imposed. Assigned percentage reductions will apply to all future reimbursement applications related to an event, therefore, percentage reductions must be protested within 60 calendar days of the date Original Fund Payment Report.

Corrective action costs that are considered out of scope, or exceeding the phase of work budget for an approved correction action plan or modification, and the associated economic feasibility summary, are considered to be **not eligible** for reimbursement per 7 CCR 1101-14 §8-2(c). Protests received for not eligible costs will be returned to the applicant.

The Protest of Fund Payment Report must be signed by the Applicant who signed on the Reimbursement Application. A signature that has been scanned in is acceptable.

All Protest of Fund Payment Reports must include a statement of protest. Supporting documentation is accepted and encouraged.

Submit the Protest of Fund Payment Report to OPS by emailing the completed PDF file to:

- Electronically (as a pdf) to: cdle_petroleumstoragetankcommittee@state.co.us



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PROTEST OF FUND PAYMENT REPORT

A Protest must be submitted within 60 calendar days of the date of the Fund Payment Report.

1. PREQ INFORMATION

(Reimbursement Application Information)

(PREQ# (s) BEING PROTESTED) (AMOUNT BEING PROTESTED)

(DATES OF WORK FROM) (DATES OF WORK TO)

(PSTC DATE) (FPR DATE)

2. SITE INFORMATION

(Location of the Facility)

(FACILITY ID #) (EVENT ID # OR (RELEASE #)

(SITE NAME)

(SITE ADDRESS) (CITY)

3. APPLICANT INFORMATION

(Must match Reimbursement Application)

(APPLICANT NAME)

(COMPANY NAME)

(ADDRESS)

(CITY) (STATE) (ZIP)

(EMAIL ADDRESS)

(PHONE) (FAX)

4. REPRESENTATIVE INFORMATION

☐ Check if representative is to be primary contact for this Protest

(REPRESENTATIVE NAME)

(COMPANY NAME)

(ADDRESS)

(CITY) (STATE) (ZIP)

(EMAIL ADDRESS)

(PHONE) (FAX)

5. STATEMENT OF PROTEST

(Clear statement of each item being disputed on the PSTC Fund Payment Report – Attach a copy of the Fund Payment Report)

6. APPLICANT SIGNATURE

(Must match Applicant that signed the PREQ)

(APPLICANT NAME TYPED)

(DATE)

(SIGNATURE)

Office Use Only:

Protest #:

Staff:

Comments: