

[SETTLOR'S NAME], Settlor

**STANDBY TRUST AGREEMENT**

---

**For the Benefit of the  
New York State Department of Environment Conservation**

**SCHEDULE A**

This Agreement demonstrates financial assurance for the cost estimate(s) at the following facility in New York State:

<b>Inactive Hazardous Waste Site Identification Number</b>	<b>Name and Address of Assured</b>	<b>Name and Address of Assured Activity</b>	<b>Cost Estimates for Regulatory Assurances</b>
<b>DER Site No.</b>			Long-Term Implementation, Maintenance and Monitoring: \$[Enter Amount, if none, enter 0]  Enforcement Costs of any Institutional or Engineering Controls: \$[Enter Amount, if none, enter 0]

## SCHEDULE B

### List of Properties Comprising Trust Fund

None at the time of the [First, Second, ...] Amendment which makes the Trust Agreement an unfunded Trust.

Funding of this Standby Trust Agreement number [enter agreement number] is contingent upon drafts against that [insert Letter of Credit or Surety Bond] number [enter #] issued by [insert financial institution's name] on [date – Month Day, YYYY], and subsequently amended on [date – Month Day, YYYY ... Enter all dates on which the instrument has been amended], in accordance with the terms of that [insert Letter of Credit or Surety Bond] filed with the Commissioner for the facility and cost estimates identified on attached Schedule A.

#### Contact Information for this Standby Trust Agreement:

Name

Title

Financial Institution

Address

Phone

Email

#### Contact for [insert Letter of Credit or Surety Bond]:

Name

Title

Financial Institution

Address

Phone

Email

## EXHIBIT A

Below is a list of persons designated to act on behalf of the Remedial Party. [Note: This list can include as many names/addresses as appropriate.]

Signatory's Name  
Title  
Company Name  
Address  
City, State Zip  
Phone Number

Signatory's Name  
Title  
Company Name  
Address  
City, State Zip  
Phone Number

etc.