

Consulting Firm Selection Form (Form 2A) Instructions

The purpose of the Consulting Firm Selection form (Form 2A), is to document compliance with COMM 47's requirement that petroleum product tank owners/operators consider at least 3 consulting firm proposals before selecting a consulting firm.

To complete form 2A:

1. On line A enter the Site Name
2. On line B enter the Site Address
3. On line C enter the 11-digit Commerce number. Please refer to this number in all future correspondence with the Department of Commerce regarding this claim.
4. In section D enter each consulting firm's name and address from which you obtained a proposal. Enter the date when the proposal was made by the consulting firm. Also, indicate the consulting firm chosen and the date when the consulting firm was hired.
5. On line E provide your signature.
6. On line F provide the date of your signature on line E.
7. Once the form 2A is completed, submit the form with the entire claim packet to the PECFA program.

Form 2A

CONSULTING FIRM SELECTION

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

COMM 47.33(1)(a) Consulting firm selection, states:

1. An owner or operator shall select a qualified consulting firm to conduct the site investigation and development of a remedial action plan. The owner or operator shall select and contract with a consulting firm after making a comparison of qualified consulting firms by obtaining and reviewing a minimum of 3 proposals for services or utilizing another selection process approved by the department.

Site Location

A. Site Name
B. Site Address
C. COMMERCE Number

D. Reviewed Consulting Firm Proposals

1.		
Consulting Firm Name		
Consulting Firm Address	Proposal Date	
Consulting Firm's Proposal Selected <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Date of contract:		
2.		
Consulting Firm Name		
Consulting Firm Address	Proposal Date	
Consulting Firm's Proposal Selected <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Date of contract:		
3.		
Consulting Firm Name		
Consulting Firm Address	Proposal Date	
Consulting Firm's Proposal Selected <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Date of contract:		

E. Owner/Operator Signature

F. Date Signed