

STATE OF IDAHO
DEPARTMENT OF INSURANCE
700 WEST STATE STREET, 3rd FLOOR
PO BOX 83720
BOISE, ID 83720-0043

FOR DEPARTMENT USE ONLY
1025 _____

CONTINUATION FEE STATEMENT
PETROLEUM CLEAN WATER TRUST FUND

COMPANY NAME				FOR CALENDAR YEAR ENDING DECEMBER 31, 2016
MAILING ADDRESS	CITY	STATE	ZIP CODE	DOMICILE STATE

To continue your eligibility as a registered trust fund, the following items are due on or before March 1, 2017, pursuant to provisions of IDAPA 18.01.44.020.03.a.xi.

- A copy of your Annual Statement for the calendar year.
- A copy of your most recent audited financial statement.
- A payment in the amount of \$500.00 for Annual Continuation Fee.

Make your check payable to: **Idaho Department of Insurance**.
There will be a \$20.00 charge on all returned checks. Idaho Code § 28-22-105
Your canceled check is your receipt.

Contact Person

Signature of Authorized Representative

Telephone Number Ext.

Title

Email Address

Date