

# INDIPAY DATA REQUEST FORM

Updated For Model Version 2024.0.1 (January 2025)

## INSTRUCTIONS

*This form requests information regarding the financial status of your household, including spouse and dependents. The data will be used to evaluate your ability to pay for environmental cleanup or the associated penalties. If you need more space for your answers, please attach additional sheets of paper. Note that further documentation may be requested for any of your responses. Any other information you wish to provide supporting your case is welcome, particularly if you feel your situation is not adequately described through the information requested here.*

Certification			
I certify under penalty of law that this statement of assets, liabilities, and other information is true, correct, and complete to the best of my knowledge and belief. I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement. Based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge and belief, true, accurate, and complete. I further understand that I may be subject to prosecution under federal and/or state law should I provide any information that is not true, correct, and complete to the best of my knowledge. I am authorized and empowered to act on behalf of the claimant.			
Signature:		Date:	
Printed Name:			
Spouse's Signature:		Date:	
Spouse's Printed Name:			
Names of Additional Household Members:			
Street Address:			
City:	State:	Zip:	
County:			

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<b>Household Members' Income</b>									
<i>List all forms of income that household members earn, <b>and</b> provide signed tax returns (1-5 years as instructed by the enforcement case team).</i>						<i>For income period, specify either:  <u>W</u>eekly, <u>M</u>onthly,  <u>Q</u>uarterly, or  <u>Y</u>early.</i>			
<b>Name</b>									
Relationship to Applicant	Self	Spouse							
Age									
Sex									
Employer									
Years Employed									
<b>Gross (Pre-Tax) Income</b>						<b>W</b>	<b>M</b>	<b>Q</b>	<b>Y</b>
Wages/Salaries									
Sales Commissions									
Investment Income									
Net Business Income									
Rental Income									
Pension + Social Security Income									
Child Support									
Alimony									
Other (attach description)									

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<b>Household Living Expenses</b>						
<i>List household living expenses typical of last year, indicating if any are likely to change significantly in the current year. If you own an operating business, exclude any business expenses; instead, attach any available financial statements for your business.</i>						
						Period
EXPENSE	AMOUNT	W	M	Q	Y	
Rent						
Home maintenance						
Transportation (inc. auto maint.)						
Home heating oil, gas, etc.						
Electricity						
Water & sewer						
Telephone						
Food						
Clothing, personal care						
Medical (other than premiums)						
Mortgage payments (principal and interest only)						
Car payments						
Credit card interest						
Educational loan payments						
Other debt payments						
Home insurance						
Life insurance						
Auto insurance						
Medical insurance						
Property taxes						
Federal income taxes (net of any refunds)						
State & local income taxes (net of any refunds)						
FICA						
Other taxes						
Childcare						
Tuition						
Legal or professional fees						
Other (attach description)						

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<b>Net Worth</b>			
<i>Provide the following information to the best of your ability. Data should be as current as possible, as well as include spouse and dependents. Estimates are acceptable; if you wish, note such items with an "E." If you are the sole proprietor of a business, please list business assets and liabilities to the extent that the information sought is not already provided in your tax returns, in addition to personal assets and liabilities. Mark these entries with a "B" to identify them as business assets and liabilities.</i>			
	Assets	Liabilities	Comments
<b>Bank Accounts</b>	Balance		
<i>Checking, NOW, Savings, Money Market, CDs etc.</i>			
		N/A	
		N/A	
		N/A	
		N/A	
		N/A	
<b>Financial Investments (stocks, bonds, etc.)</b>	Market Value		
		N/A	
		N/A	
		N/A	
		N/A	
		N/A	
<b>Retirement Funds and Accounts</b>	Market Value		
<i>IRA, 401(k), Keogh, vested interest in company retirement fund, etc.</i>			
		N/A	
		N/A	
		N/A	
		N/A	
		N/A	
<b>Life Insurance Policies (with cash value)</b>	Cash Value		
<i>Whole life, universal life, etc.</i>			
		N/A	
		N/A	
		N/A	
		N/A	
<b>Vehicles Used for Commuting</b>	Market Value	Loan Balance	
<i>Cars, trucks, motorcycles, etc.: list up to two vehicles used for commuting purposes.</i>			
<b>Vehicles (other than for commuting)</b>	Market Value	Loan Balance	
<i>Cars, trucks, motorcycles, recreational vehicles, motor homes, boats, airplanes.</i>			

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	Assets	Liabilities	Comments
<b>Primary Residence</b>	Market Value	Mortgage Balance	
<b>Real Estate (other than primary residence)</b>	Market Value	Mortgage Balance	
<i>Lands, buildings, land with buildings.</i>			
<b>Personal Property</b>	Market Value	Debt Balance	
<i>Household goods and furniture, jewelry, art, antiques, collections, precious metals, etc. List only items with a value greater than \$500.</i>			
<b>Credit Cards and Lines of Credit</b>		Balance Due	
	N/A		
	N/A		
	N/A		
	N/A		
	N/A		
<b>Other Debts and/or Assets</b>	Market Value	Debt Balance	
<i>Any other assets and any debts on those assets, plus any other debts owed to individuals, fixed obligations, taxes owed, overdue alimony or child support, etc.</i>			

## **INDIPAY DATA REQUEST FORM**

<b>Additional Information</b>	
<i>For any question that you check off as applicable, provide additional information below or on separate pages, for both yourself and your spouse, as well as for any dependents.</i>	
Reason to believe financial situation will change during the next year?	
Currently selling or purchasing any real estate?	
Property held by other person/entity on applicant's behalf?	
Party in pending lawsuit (other than this enforcement action)?	
Any belongings repossessed in last three years?	
Is applicant a Trustee, Beneficiary, Executor, or Administrator of a Trust?	
Participant or beneficiary of estate or profit-sharing plan?	
Declared bankruptcy in last seven years?	
Receive any type of federal aid or public assistance?	