

Financial Responsibility Financial Policy Update Training for NJDEP ONLINE.COM

March 6, 2023



Nicole Lelievre, Supervisor

Contaminated Site Remediation & Redevelopment Program

Bureau of Case Assignment and Initial Notice (BCAIN)

srpustregistration@dep.nj.gov



My Workspace



[My Workspace](#) [User Profile](#) [Certifications](#) [Payments](#) [Documents and Forms](#) [Permit Folder](#)

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server_1

[Help](#) | [Logout](#)

MY WORKSPACE

 **Service Selection**  

 **My Facilities/Program Interests**  

Note: You may add Facilities/Program Interests by clicking the "Add Facilities" button below.

You do not have any facilities in your profile. You may add facilities by selecting the Add Facility button on the My Workspace screen.

 [Add Facilities](#)

 **My Services - Submitted**  

 **My Services - In Progress**  

Note: To edit or resume working on an "In Progress" item, please click on the appropriate number in the ID column.

You do not have any "In Progress" Services.

Facility Search



My Workspace **User Profile** **Certifications** **Payments** **Documents and Forms** **Permit Folder**

Edit Personal Info | Change Cert PIN | Edit Facility Selection | Favorite Contacts | Security Administration

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Help | Logout

FACILITY SEARCH

1 - Specify Search Criteria

2 - Select Facilities

Please Note
You may click on a previously visited page (above) to navigate back to that screen.

In most cases your Program Interest Number is your Facility ID.

Users adding NJPDES Permits to their profile should do so by selecting the "Water Quality" value from the NJDEP Program option. The user should then enter the NJPDES permit number they wish to add to their profile in the "Facility ID" field and click on the Search button.

Pick the search you want to perform:

☒ Retrieve only those facilities that match the search criteria (Need facility ID or name for search)
☐ Retrieve the sites and all of the site's facilities that match the search criteria (Need facility ID or name for search)
☐ Retrieve NJPDES Permit Numbers (Need NJDEP Program and NJPDES permit # for search)
☐ Retrieve the facilities that are associated with an Alternate ID
☐ Retrieve all Program Interest records for a specific NJDEP Program Interest Type (No facility ID or name needed for search)

(Optional) Select NJDEP Program:

Enter either a Facility ID or a Facility Name (if searching by Alternate ID, enter as the Facility ID):

or

Facility ID: **(For NJPDES Facilities Use The NJPDES Permit Number)**

Facility Name:

Search **Cancel**

Facility Search Results



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My Workspace

User Profile

Certifications

Payments

Documents and Forms

Permit Folder

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[Help](#) | [Logout](#)

FACILITY SEARCH RESULTS

1 - Specify Search
Criteria

2 - Select Facilities

Please Note

You may click on a
previously visited page
(above) to navigate
back to that screen.

Please select the facilities you wish to add to your profile. Once you are done selecting facilities, click the 'Add Selected Facilities' button.

Any facilities matching your search criteria that are currently associated with your profile will be separated from the search results and placed into a smaller datagrid above your search results. These facilities will also be automatically added to your selected facilities so that you may change your access type, if needed.

Facilities already in your user profile:

Facilities currently not in your user profile:

Facility	Facility ID	Program	Program Interest Type	County	Municipality
<input checked="" type="checkbox"/> NJDEP TEST FACILITY 1	868908	Site Remediation	SRP-PI	Mercer	Trenton City

Clicking a column title will sort the table by that column.

Clear/Check All

Add More Facilities

Add Selected Facilities

Cancel

or

Facility Search Results



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My Workspace

User Profile

Certifications

Payments

Documents and Forms

Permit Folder

[Edit Personal Info](#) | [Change Cert PIN](#) | [Edit Facility Selection](#) | [Favorite Contacts](#) | [Security Administration](#)

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[Help](#) | [Logout](#)

FACILITY SEARCH RESULTS

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2 - Select Facilities

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Facilities already in your user profile:

Facilities currently not in your user profile:

Facility	Facility ID	Program	Program Interest Type	County	Municipality
<input type="checkbox"/> IMPERIAL NURSERIES	868909000000	Right To Know		Out Of State	Out Of State
<input checked="" type="checkbox"/> NJDEP TEST FACILITY 2	868909	Site Remediation	SRP-PI	Ocean	Toms River Twp

Clicking a column title will sort the table by that column.

Clear/Check All

Add More Facilities

Add Selected Facilities

Cancel

My Workspace

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MY WORKSPACE

Service Selection

My Facilities/Program Interests

Note: You may add Facilities/Program Interests by clicking the "Add Facilities" button below.

Facility Name	Facility ID	Program	Access Type	Access Status	Change Access	Manage Security	View	Remove
NJDEP TEST FACILITY 1	868908	Site Remediation	General	Granted				
NJDEP TEST FACILITY 2	868909	Site Remediation	General	Granted				

Clicking a column title will sort the table by that column.

[Add Facilities](#)

My Workspace



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[njdep home](#) | [about dep](#) | [index by topic](#) | [programs/units](#) | [dep online](#)

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User Profile

Certifications

Payments

Documents and Forms

Permit Folder

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Server: Server_1

[Help](#) | [Logout](#)

MY WORKSPACE



Service Selection



Note: Access to this electronic service selection and submittal area is granted by selecting facilities using the [user profile](#). Some services are accessible without selecting facilities as shown below.

Underground Storage Tank (UST) Program

[UST Registration Services](#)

[UST Additional Certification Service](#)

[Submission Approval Area](#)

Configure Services

Instructions



[njdep home](#) | [about dep](#) | [index by topic](#) | [programs/units](#) | [dep online](#)

[My Workspace](#)

[User Profile](#)

[Certifications](#)

[Payments](#)

[Documents and Forms](#)

[Permit Folder](#)

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[Help](#) | [Logout](#)

INSTRUCTIONS

1 - Instructions

2 - Submission Type Selection

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Completion of this UST Facility Certification Questionnaire will satisfy the registration requirements of the Underground Storage of Hazardous Substances Act, N.J.S.A. 58:10A-21 et seq., and the Underground Storage Tank Rules N.J.A.C. 7:14B et. seq. An owner or operator's submission of false, inaccurate, or incomplete information on this Questionnaire constitutes a violation of these regulations and may result in a delay or denial of a Registration.

For full instructions about online filing of an Initial UST Facility Registration, Annual Renewal/Modification of UST Facility Registration, or a Financial Responsibility Insurance Policy Update, click here: https://www.nj.gov/dep/srp/srra/forms/ust_fc_questionnaire_online_ins.pdf.

If you need any additional information about UST registration, click here: <https://www.nj.gov/dep/srp/bust/>.



[Continue](#)

Submission Type Selection

[My Workspace](#)[User Profile](#)[Certifications](#)[Payments](#)[Documents and Forms](#)[Permit Folder](#)

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[Help](#) | [Logout](#)

SUBMISSION TYPE SELECTION

[1 - Instructions](#)[2 - Submission Type Selection](#)

Please Note

You may click on a previously visited page (above) to navigate back to that screen.


Make choices by clicking on the radio button on the left of the Service Description, then click continue to proceed. Clicking the highlighted link will take you to the online instructions.

Choose 'Annual Renewal/Modification of UST Facility Registration' if you have an UST Registration that you wish to renew or modify. Renewals (and modifications filed during the renewal period) will need to pay the renewal invoice at the end of the service.

Choose 'Financial Responsibility Insurance Policy Update' to update an effective UST Registration with the latest insurance policy or financial responsibility mechanism. Any Facility whose UST expiration date does not coincide with the period of their insurance policy or other financial mechanism must file this service when they are issued a new insurance policy or Financial Responsibility mechanism (except State or Federal facilities which are exempt).

Choose 'Initial UST Facility Registration' if you will be registering a new UST Facility.

- ☐ [Annual Renewal/Modification of UST Facility Registration](#)
- ☒ [Financial Responsibility Insurance Policy Update](#)
- ☐ [Initial UST Facility Registration](#)

 Click on the type description to see more information about that type. If you have difficulty make sure your pop up setting is enabled.

[Continue](#)

Multi-Facility Selection



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Server: Server_1

[Help](#) | [Logout](#)

MULTI-FACILITY SELECTION

1 - Instructions

2 - Submission Type Selection

3 - Facility Selection

4 - Submission Name

5 - Financial Responsibility

6 - Attachment Upload

7 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

For the Financial Responsibility Update, select one or more Regulated Underground Storage Tank Facilities in order to update the financial Information, which is most often an insurance policy. You may complete one service per policy/financial responsibility mechanism by choosing multiple facilities below. You may only select more than one facility **if all facilities are under the same policy.** To add a facility that is not on the list, click the "Click Here" link below the grid. The facility must have an existing UST Registration that is Pending, Effective, or Expired to continue.

*Select	Facility	Facility ID	Facility Type	Municipality	Address
<input checked="" type="checkbox"/>	NJDEP TEST FACILITY 1	868908	SRP-PI	Trenton City	401 E State St
<input checked="" type="checkbox"/>	NJDEP TEST FACILITY 2	868909	SRP-PI	Toms River Twp	1510 Hooper Ave

Clicking a column title will sort the table by that column.

If you do not see the Facility you are looking for, it may be because the facility has not been added to your user profile. To search for facilities and add them to your profile, please [click here](#).

* Required

Clear

Continue

Submission Name



[njdep home](#) | [about dep](#) | [index by topic](#) | [programs/units](#) | [dep online](#)

- My Workspace
- User Profile
- Certifications
- Payments
- Documents and Forms
- Permit Folder

Version: 10.1.07
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Server: Server_1

[Help](#) | [Logout](#)

- 1 - Instructions
- 2 - Submission Type Selection
- 3 - Facility Selection
- 4 - Submission Name
- 5 - Financial Responsibility
- 6 - Attachment Upload
- 7 - Certification

Please Note
You may click on a previously visited page (above) to navigate back to that screen.

SUBMISSION NAME

The UST Facility Name below is used to find the service in your Workspace, and in the Certification tabs if needed. The auto-populated name lists the UST Service Type, The Service ID #, the Facility (PI ID) Number, and the Facility name. If more than one facility was picked, one of the Facility IDs will be displayed, followed by "and others". Review the auto-populated submission name, and click continue.

Use the Comments field to provide additional information as necessary.

***UST Facility Name:**

Comments:

* Required

 [Continue](#)

Financial Responsibility



Version: 10.1.07

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Server: Server_1

[Help](#) | [Logout](#)

FINANCIAL RESPONSIBILITY

1 - Instructions

2 - Submission Type Selection

3 - Facility Selection

4 - Submission Name

5 - Financial Responsibility

6 - Attachment Upload

7 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

UST Financial Responsibility Update #1070143@868908 and Others

Choose the specific type of mechanism from the dropdown list and complete all required fields. The most frequently chosen type of mechanism is insurance. Consult with your broker or insurance agent if you have questions about completing any of the fields.

*Type of Mechanism:



Select Type of Mechanism.

* *Required*

[Continue](#)

Financial Responsibility



[Skip Navigation](#)

[njhome](#) | [citizen](#) | [business](#) | [government](#) | [services A to Z](#) | [departments](#)

[search](#)

[njdep](#)
department of environmental protection

[njdep online](#)

[njdep home](#) | [about dep](#) | [index by topic](#) | [programs/units](#) | [dep online](#)

[My Workspace](#) | [User Profile](#) | [Certifications](#) | [Payments](#) | [Documents and Forms](#) | [Permit Folder](#)

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Server: Server_1

[Help](#) | [Logout](#)

FINANCIAL RESPONSIBILITY

1 - Instructions
2 - Submission Type Selection
3 - Facility Selection
4 - Submission Name
5 - Financial Responsibility
6 - Attachment Upload
7 - Certification

Please Note
You may click on a previously visited page (above) to navigate back to that screen.

Choose the specific type of mechanism for insurance. Consult with your broker or insurance agent.

*Type of Mechanism:
FEDERAL/STATE FACILITY-FR Not Required
FINANCIAL TEST OF SELF INSURANCE
GUARANTEE
INSURANCE
LETTER OF CREDIT
LOCAL GOVERNMENT BOND RATING TEST
LOCAL GOVERNMENT FINANCIAL TEST
LOCAL GOVERNMENT FUND
LOCAL GOVERNMENT GUARANTEE
SUMP TANKS ONLY - FR NOT REQUIRED
SURETY BOND
TRUST FUND
INSURANCE

*Carrier/Issuing Institution:
Crum & Forster

*Name of Insured:
NJDEP LLC

*Policy Number:
STP123456

*Effective Date:
02/01/2023

*Expiration Date:
02/01/2024

*Limit of Liability:
Each "Occurrence" or "Incident"
\$ 1,000,000

08 and Others

fields. The most frequently chosen type of mechanism is selecting any of the fields.

Financial Responsibility



- 2 - [Submission Type Selection](#)
- 3 - Facility Selection
- 4 - Submission Name

5 - Financial Responsibility

6 - Attachment Upload

7 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

UST Financial Responsibility Update #1070143@868908 and Others

Choose the specific type of mechanism from the dropdown list and complete all required fields. The most frequently chosen type of mechanism is insurance. Consult with your broker or insurance agent if you have questions about completing any of the fields.

*Type of Mechanism:

INSURANCE



*Carrier/Issuing Institution:

Crum & Forster

*Name of Insured:

NJDEP LLC

*Policy Number:

STP123456

*Effective Date:

02/01/2023

*Expiration Date:

02/01/2024

*Limit of Liability:
Each "Occurrence" or "Incident"

\$ 1,000,000

*Limit of Liability:
Aggregate

\$ 1,000,000

*Limit of Defense Costs

\$ 250,000

*Does this policy have multiple
Retroactive Dates?

No

*What is the earliest Retroactive
Date?:

02/01/2023

* Required



Continue

Attachment Upload



UST Financial Responsibility Update #1070275@868909 (NJDEP TEST FACILITY 2)

The table will be auto populated with the required financial mechanism based on the type of mechanism selected earlier in the service. If you are submitting an insurance policy and it does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the "Add Attachment" dropdown list below.

If you chose Financial Test of Self Insurance or Financial Test for Local Government earlier in the service, applicable forms can be found at: [NJDEP SRP - Forms: UST-Related](#). If your service requires an installer's certification, that form can also be found at the link above.

If you need to upload an authorization to sign on behalf of the Tank Owner and/or Facility Operator, there is no specific form. The authorization should be signed by the Tank Owner and/or Facility Operator as applicable.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	<input type="button" value="Choose File"/> No file chosen		0	
Total Uploaded:					0 MB	

* Required

[How do I upload a File?](#)

Add Attachment...

Add Attachment

Continue

Attachment Upload

[My Workspace](#)[User Profile](#)[Certifications](#)[Payments](#)[Documents and Forms](#)[Permit Folder](#)

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[Help](#) | [Logout](#)

ATTACHMENT UPLOAD

UST Financial Responsibility Update #1070143@868908 and Others

The table will be auto populated with the required financial mechanism based on the type of mechanism selected earlier in the service. If you are submitting an insurance policy and it does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the "Add Attachment" dropdown list below.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf		0.03	
Total Uploaded:					0.03 MB	

* Required

[How do I upload a File?](#)

Add Attachment...

Add Attachment



Continue

1 - Instructions

2 - Submission Type Selection

3 - Facility Selection

4 - Submission Name

5 - Financial Responsibility

6 - Attachment Upload

7 - Certification

Please Note

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Attachment Upload



Please Note

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Side Plan	Side Plan	jpg, png, tif, zip, txt	Side Plan.pdf
			Total Uploaded:

* *Required*

[How do I upload a File?](#)

Certificate of Insurance/Endorsement ▼

Add Attachment...

Certificate of Insurance/Endorsement

Financial Responsibility Assurance Mechanism

Owner & Operator auth of Representative Signature



Attachment Upload

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Server: Server_1

[Help](#) | [Logout](#)

ATTACHMENT UPLOAD

[1 - Instructions](#)[2 - Submission Type Selection](#)[3 - Facility Selection](#)[4 - Submission Name](#)[5 - Financial Responsibility](#)[6 - Attachment Upload](#)[7 - Certification](#)

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

UST Financial Responsibility Update #1070143@868908 and Others

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Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf		0.03	
Total Uploaded:					0.03 MB	

* Required

[How do I upload a File?](#)

Add Attachment...

Add Attachment



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Certification

[My Workspace](#)[User Profile](#)[Certifications](#)[Payments](#)[Documents and Forms](#)[Permit Folder](#)

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Server: Server_1

[Help](#) | [Logout](#)

SERVICE CERTIFICATION

[1 - Instructions](#)[2 - Submission Type Selection](#)[3 - Facility Selection](#)[4 - Submission Name](#)[5 - Financial Responsibility](#)[6 - Attachment Upload](#)[7 - Certification](#)

Please note that your Certification PIN and your Password are two different things. It is possible that you have made your Certification PIN and your Password identical values. If you have forgotten what your Certification PIN is, click on the "Forgot Certification PIN" button below and you can then create a new one.

WARNING: After clicking "Certify" a Summary page will appear. To ensure a successful submission, wait for the Summary page to appear, then scroll to the bottom and click "Return" before exiting the browser or clicking on any tabs.

Certification by Access Type: Third Party

Service ID	Submittal Type	Creation Date	View
1070143	Underground Storage Tank (UST) Program - UST Registration Services - Financial Responsibility Insurance Policy Update	02/08/2023	

"I certify under penalty of law that I believe the information provided in this document is true, accurate, and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

Name of Certifying Party: NICOLE LELIEVRE

User ID of Certifying Party: NICOLELELIEVRE

Please Note
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