



PETROLEUM MARKETERS MANAGEMENT INSURANCE COMPANY
2894 – 106th St., PO Box 7628
Urbandale, IA 50323
800/942-1000, 515/334-3001 (phone)
515/334-3013 (fax)

OWNERSHIP BACKGROUND INFORMATION

Thank you for your interest in obtaining insurance from Petroleum Marketers Management Insurance Company. Please complete the information requested below, and sign and date this form.

Provide the name, address and Social Security Number or Federal Tax Identification Number for the individual or company (and affiliates) that is the (A) owner of the property; (B) owner of the petroleum storage tanks; and (C) operator of the petroleum storage tanks. An affiliate is any individual or corporation that has a 20% or greater ownership interest in the subject company. Please utilize the following format:

Property Owner Name: _____

Address: _____

City, State, Zip: _____

Phone number: _____

Federal Tax ID number: _____

Does this entity conduct business under any other name? **Yes or No**

If yes, list all DBAs and their addresses. Affiliates (provide the same information)

Petroleum storage tank system Owner Name: _____

Address: _____

City, State, Zip: _____

Phone number: _____

Federal Tax ID number: _____

Does this entity conduct business under any other name? **Yes or No**

If yes, list all DBAs and their addresses. Affiliates (provide the same information)

Petroleum storage tank system Operator Name: _____

Address: _____

City, State, Zip: _____

Phone number: _____

Federal Tax ID number: _____

Does this entity conduct business under any other name? **Yes or No**

If yes, list all DBAs and their addresses. Affiliates (provide the same information)

For each owner, operator, and their affiliates, provide a complete listing of all other petroleum storage tank facilities in which they have any interest as an owner or operator.

Is any owner, operator, affiliate or any of the facilities listed above subject to an enforcement action by any regulatory agency in the United States, for any violation of petroleum storage tank technical requirements or environmental regulations? **Yes or No**

If yes, please provide detailed information on the violation, penalties, or required response.

I verify that the above is complete, true and correct.

Signature _____ Date _____

Print Name _____

Board of Directors
Ron Burmeister, Chairman; W. A. Krause, M.J. Dolan, Richard D. Johnson, Ron McGauvran