



## Affidavit for Commercial Transportation Spills

Vehicle Owner(s) Name(s) and Address

Job Site Address (If different)

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Vehicle Type: \_\_\_\_\_

Commodity Transported: \_\_\_\_\_

I (we) verify that I am (we are) the owner(s) of the vehicle identified above, that the vehicle named released the petroleum and that the oil contaminating soil is virgin oil, not used oil, oil refuse or oil mixed with waste.

\_\_\_\_\_  
Vehicle Owner or Authorized Agent Printed Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Vehicle Owner's or Authorized Agent's signature

\_\_\_\_\_  
Date