

**SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
BUREAU OF LAND AND WASTE MANAGEMENT
DIVISION OF MINING AND SOLID WASTE MANAGEMENT**

**IRREVOCABLE STANDBY LETTER OF CREDIT
COVERING CLOSURE AND/OR POST-CLOSURE CARE
OF SOLID WASTE MANAGEMENT FACILITIES**

Director, Division of Mining and Solid Waste Management
Bureau of Land and Waste Management
South Carolina Department of Health and Environmental Control
2600 Bull Street
Columbia, South Carolina 29201

RE: Facility Name: _____
Facility I.D. No.: _____
Closure Amount: _____
Post-Closure Amount: _____

Dear Sir or Madam:

We hereby establish our Irrevocable Standby Letter of Credit No. _____ in your favor, at the request and for the account of **[owner's or operator's name and address]** up to the aggregate amount of **[expressed in words]**, U.S. dollars \$_____, available upon presentation of:

- (1) Your sight draft, bearing reference to this Letter of Credit No. _____, and
- (2) Your signed statement reading as follows:

"I certify that the amount of the draft is payable pursuant to regulations issued under the authority of the South Carolina Department of Health and Environmental Control (SCDHEC), Solid Waste Policy and Management Act of 1991 (Supp. 2011)."

This letter of credit is effective as of **[date]** and shall expire on **[date at least 1 year later]** but such expiration date shall be automatically extended for a period of **[at least 1 year]** on **[date]** and on each successive expiration date, unless, at least 120 days before the current expiration date, we notify both you and **[owner's or operator's name]** by certified mail that we have decided not to extend this letter of credit beyond the current expiration date. In the event you are so notified, any unused portion of the credit shall be available upon presentation of your sight draft for 120 days after the date of receipt by both you and **[owner's or operator's name]**, as shown on the signed return receipts.

Whenever this letter of credit is drawn on under and in compliance with the terms of this credit, we shall duly honor such draft upon presentation to us, and we shall deposit the funds into the SCDHEC account of your choosing, all in accordance with your instructions.

This credit is subject to _____
[insert "the most recent edition of the Uniform Customs and Practice for Documentary Credits, published by the International Chamber of Commerce", OR "the Uniform Commercial Code"].

[Signature & title of official of issuing institution]

[Date]

[Typed Name]
[Name of Issuing Institution]
[Address]
[Telephone Number]

[Notary Public Signature & Seal]