

FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW		
UNIT	BUILDING	DATE OF PLAN PREPARATION/REVISION
<b>EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS</b>		
<p style="text-align: center;"><b>Unless properly trained and authorized do not try to mitigate spill of hazardous materials</b></p> <p>1. In the event of a <b>release</b> of hazardous materials, wastewater, POL, fire, release of toxic fume  <b>CALL 911</b>  <b>“Release”</b> is defined as any amount that reaches the environment (e.g. asphalt, concrete, water, dirt, or floor drain)</p> <p>2. Notify facility personnel via voice, loudspeaker/intercom, or alarm and evacuate the area impacted by the spill. Assemble at muster location in accordance with the Fire Bill.</p> <p>3. If the situation is safe, turn off ignition sources, remove incompatible and flammable materials, begin containment of the spill by shutting off valves, constructing earthen dikes, close the drain valve to secondary containment, distribute cloth socks/booms in front of storm drains and apply absorbents. Utilize materials in spill kit and proper Personal Protective Equipment (PPE).</p> <p>4. Provide the 911 dispatcher with requested information (5 W’s). <u>Location, type of release, amount, type (hazardous material, wastewater, fire, or fume), are there any injuries, your information, and a call back number</u></p> <p>5. Upon arrival of Fire Emergency Services Department (FESD), provide any assistance necessary (e.g. hazardous material inventory, manpower, and/or absorbents).</p> <p>6. After actions – Completed spill report, collect all soiled spilled material, place into a properly labeled and approved container, and contact RCRS for disposal.</p> <p><b>Note:</b> Spill reports are required for all spills that are outside and shall be filed in Unit Environmental Binder.</p>		
<b>HAZARDOUS MATERIAL STORAGE IN WORKCENTER</b>		
(Check all that apply)		
<b>Hazardous Materials:</b> <input type="checkbox"/> Explosives <input type="checkbox"/> Oxidizers <input type="checkbox"/> Radioactive Materials <input type="checkbox"/> Corrosive Substances <input type="checkbox"/> Hazardous Waste		
<input type="checkbox"/> Oil <input type="checkbox"/> Antifreeze <input type="checkbox"/> Degreasers <input type="checkbox"/> Detergents <input type="checkbox"/> Fuel <input type="checkbox"/> Fire Fighting <input type="checkbox"/> Medical Waste <input type="checkbox"/> Paint		
<input type="checkbox"/> Laboratory <input type="checkbox"/> Water Treatment <input type="checkbox"/> Weapons Cleaning <input type="checkbox"/> Pool Treatment <input type="checkbox"/> Pesticides <input type="checkbox"/> Degreasing Agents		
<b>Other:</b>		
<b>Batteries:</b> <input type="checkbox"/> Lead Acid <input type="checkbox"/> Nickel Cadmium <input type="checkbox"/> Lithium Ion <input type="checkbox"/> Nickel Metal Hydride <input type="checkbox"/> Lithium		
<b>Other:</b>		
<b>Compressed Gas:</b> <input type="checkbox"/> Argon <input type="checkbox"/> Halon <input type="checkbox"/> Hydrogen <input type="checkbox"/> Helium <input type="checkbox"/> Oxygen <input type="checkbox"/> Propane		
<b>Other:</b>		
<b>INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR BY</b> (Check all that apply):		
<input type="checkbox"/> Verbal Warnings <input type="checkbox"/> Alarm System	<input type="checkbox"/> Public Access Intercom <input type="checkbox"/> Portable Radio	<input type="checkbox"/> Telephone/Cell Phone
<u><b>ENVIRONMENTAL COMPLIANCE CONTACT INFORMATION:</b></u>		
Environmental Compliance Officer:	Phone Number:	
Environmental Compliance Coordinator:	Phone Number:	
Site Manager:	Phone Number:	

**Directions:** Within 30 days of the ECC appointment complete a thorough walk-through of each building(s) assigned to your command and under your cognizance updating both page 1 and page 2 with hazardous material information. Post page 1 where personnel can easily access it e.g. door where HM is stored, review the information with all effected personnel in the work-center and file each page 2 in the unit's Environmental Operations Binder.

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UNIT	BUILDING		DATE OF PLAN PREPARATION/REVISION		
<b>EMERGENCY EQUIPMENT</b> Check the box for equipment available or unavailable for the building.					
Item	Available	Unavailable	Item	Available	Unavailable
CHEMICAL PROTECTIVE SUITS, APRONS, AND/OR VESTS, GLOVES, BOOTS	<input type="checkbox"/>	<input type="checkbox"/>	AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>
SUMP AND/OR HOLDING TANK	<input type="checkbox"/>	<input type="checkbox"/>	ALL-IN-ONE SPILL KIT	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY GLASSES, GOGGLES, AND FACE SHIELDS	<input type="checkbox"/>	<input type="checkbox"/>	ABSORBENT MATERIAL	<input type="checkbox"/>	<input type="checkbox"/>
GAS CYLINDER LEAK REPAIR KIT	<input type="checkbox"/>	<input type="checkbox"/>	SPILL OVERPACK DRUMS	<input type="checkbox"/>	<input type="checkbox"/>
FIRST AID KITS	<input type="checkbox"/>	<input type="checkbox"/>	BERM AND/OR DIKING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>
PLUMBED EYEWASH FOUNTAIN AND/OR SHOWER	<input type="checkbox"/>	<input type="checkbox"/>	BROOM	<input type="checkbox"/>	<input type="checkbox"/>
PORTABLE EYEWASH KITS AND/OR STATION	<input type="checkbox"/>	<input type="checkbox"/>	SHOVEL	<input type="checkbox"/>	<input type="checkbox"/>
FIXED FIRE SUPPRESSION SYSTEMS AND/OR SPRINKLERS	<input type="checkbox"/>	<input type="checkbox"/>	EXHAUST HOOD	<input type="checkbox"/>	<input type="checkbox"/>
CHEMICAL NEUTRALIZERS	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Sketch a map below indicating the exact locations of items from the asset list. Use the corresponding alphabetic characters from the asset list to label each asset. For units with multiple buildings, provide separate maps for each building. <b>Note:</b> You may attach printed maps to this form if needed.																													
<b>FACILITY MAP:</b> Add the letters from the asset list to this rectangle or print a google map image of your building and add the letters from the asset list.																													
<div style="border: 1px solid black; height: 150px; width: 100%; background-color: #f0f0f0; margin-bottom: 10px;"></div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="padding: 5px;">Asset List</th> </tr> </thead> <tbody> <tr><td style="text-align: center; padding: 5px;"><b>A</b></td><td style="padding: 5px;">Satellite Accumulation Area</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>B</b></td><td style="padding: 5px;">Tank</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>C</b></td><td style="padding: 5px;">Sewer/Storm Drain</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>D</b></td><td style="padding: 5px;">Evacuation Route</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>E</b></td><td style="padding: 5px;">Emergency Response Equipment</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>F</b></td><td style="padding: 5px;">Hazardous Material Storage</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>G</b></td><td style="padding: 5px;">Gas Shut-off</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>H</b></td><td style="padding: 5px;">Exits/Entrances</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>I</b></td><td style="padding: 5px;">Compressed Gas Storage</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>J</b></td><td style="padding: 5px;">Battery Storage</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>K</b></td><td style="padding: 5px;">Oil Water Separator</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>L</b></td><td style="padding: 5px;">Muster Point</td></tr> <tr><td style="text-align: center; padding: 5px;"><b>M</b></td><td style="padding: 5px;">Alarm Notification System</td></tr> </tbody> </table>	Asset List		<b>A</b>	Satellite Accumulation Area	<b>B</b>	Tank	<b>C</b>	Sewer/Storm Drain	<b>D</b>	Evacuation Route	<b>E</b>	Emergency Response Equipment	<b>F</b>	Hazardous Material Storage	<b>G</b>	Gas Shut-off	<b>H</b>	Exits/Entrances	<b>I</b>	Compressed Gas Storage	<b>J</b>	Battery Storage	<b>K</b>	Oil Water Separator	<b>L</b>	Muster Point	<b>M</b>	Alarm Notification System
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