

**CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)  
 CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN**

*Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN*

FACILITY ID #		CERS ID #	DATE OF PLAN PREPARATION/REVISION (MM/DD/YYYY)
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BUSINESS NAME (Same as Facility Name or DBA - Doing Business As) \_\_\_\_\_

BUSINESS SITE ADDRESS \_\_\_\_\_

BUSINESS SITE CITY	A6.	<b>CA</b>	ZIP CODE
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TYPE OF BUSINESS (e.g., Painting Contractor)	A8.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance)	A9.
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THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING (Check all that apply): A10.

1. HAZARDOUS MATERIALS;  2. HAZARDOUS WASTES

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR BY (Check all that apply): B1.

1. CALLING PUBLIC EMERGENCY RESPONDERS (e.g., 9-1-1)  
 2. CALLING HAZARDOUS WASTE CONTRACTOR  
 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

In the event of an emergency involving hazardous materials and/or hazardous waste, all facilities must IMMEDIATELY:

1. Notify facility personnel and evacuate if necessary in accordance with the Emergency Action Plan (Title 8 California Code of Regulations §3220);
2. Notify local emergency responders by calling 9-1-1;
3. Notify the local Unified Program Agency (UPA) at the phone number below; and
4. Notify the State Warning Center at (800) 852-7550.

Facilities that generate, treat, store or dispose of hazardous waste have additional responsibilities to notify and coordinate with other response agencies. Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator must follow the appropriate requirements for the category of facility and type of release involved:

1. Title 22 California Code of Regulations §66265.56. Emergency Procedures for generators of 1,000 kilograms or more of hazardous waste in any calendar month.
2. Title 22 California Code of Regulations §66265.196. Response to Leaks or Spills and Disposition of Leaking or Unfit-for-Use Tank Systems.
3. Title 40 Code of Federal Regulations §302.6. Notification requirements for a release of a hazardous substance equal to or greater than the reportable quantity.
4. Title 22 California Code of Regulations §66262.34(d)(2) and Title 40 Code of Federal Regulations §262.34(d)(5)(ii) for generators of less than 1000 kilograms of hazardous waste in any calendar month.

Following notification and before facility operations are resumed in areas of the facility affected by the incident, the Emergency Coordinator shall notify the local UPA and the local fire department's hazardous materials program, if necessary, that the facility is in compliance with requirements to:

1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

EMERGENCY RESPONSE PHONE NUMBERS:	AMBULANCE, FIRE, POLICE AND CHP .....	9-1-1	
	CALIFORNIA STATE WARNING CENTER (CSWC)/CAL OES .....	(800) 852-7550	
	NATIONAL RESPONSE CENTER (NRC) .....	(800) 424-8802	
	POISON CONTROL CENTER .....	(800) 222-1222	
	LOCAL UNIFIED PROGRAM AGENCY (UPA) .....		C1.
	OTHER (Specify): _____		C2. C3.
NEAREST MEDICAL FACILITY / HOSPITAL NAME:			C4. C5.

AGENCY NOTIFICATION PHONE NUMBERS:	CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC) ....	(916) 255-3545	
	REGIONAL WATER QUALITY CONTROL BOARD (RWQCB) .....		C6.
	U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA) .....	(800) 300-2193	
	CALIFORNIA DEPT. OF FISH AND WILDLIFE (CDFW) .....	(916) 358-2900	
	U.S. COAST GUARD (USCG) .....	(202) 267-2180	
	CAL OSHA .....	(916) 263-2800	
	CAL FIRE OFFICE OF THE STATE FIRE MARSHAL (OSFM) .....	(916) 323-7390	
	OTHER (Specify): _____		C7. C8.
	OTHER (Specify): _____		C9. C10.



### G. EMERGENCY EQUIPMENT

Check the applicable boxes to list emergency response equipment available at the facility, identify the location(s) where the equipment is kept, and indicate the equipment's capability, if applicable.

TYPE	EQUIPMENT AVAILABLE <small>G1.</small>	LOCATION <small>G2.</small>	CAPABILITY <small>G3.</small>
<b>EXAMPLE</b>	<input checked="" type="checkbox"/> CHEMICAL PROTECTIVE GLOVES	<i>SPILL RESPONSE KIT</i>	<i>SINGLE USE, OIL RESISTANT ONLY</i>
<b>Safety and First Aid</b>	1. <input type="checkbox"/> CHEMICAL PROTECTIVE SUITS, APRONS, AND/OR VESTS		
	2. <input type="checkbox"/> CHEMICAL PROTECTIVE GLOVES		
	3. <input type="checkbox"/> CHEMICAL PROTECTIVE BOOTS		
	4. <input type="checkbox"/> SAFETY GLASSES, GOGGLES, AND FACE SHIELDS		
	5. <input type="checkbox"/> HARD HATS		
	6. <input type="checkbox"/> AIR-PURIFYING RESPIRATORS		
	7. <input type="checkbox"/> SELF-CONTAINED BREATHING APPARATUS (SCBA)		
	8. <input type="checkbox"/> FIRST AID KITS		
	9. <input type="checkbox"/> PLUMBED EYEWASH FOUNTAIN AND/OR SHOWER		
	10. <input type="checkbox"/> PORTABLE EYEWASH KITS AND/OR STATION		
	11. <input type="checkbox"/> OTHER		
<b>Fire Fighting</b>	12. <input type="checkbox"/> PORTABLE FIRE EXTINGUISHERS		
	13. <input type="checkbox"/> FIXED FIRE SUPPRESSION SYSTEMS AND/OR SPRINKLERS		
	14. <input type="checkbox"/> FIRE ALARM BOXES		
	15. <input type="checkbox"/> OTHER		
<b>Spill Control and Clean-Up</b>	16. <input type="checkbox"/> ALL-IN-ONE SPILL KIT		
	17. <input type="checkbox"/> ABSORBENT MATERIAL		
	18. <input type="checkbox"/> CONTAINER FOR USED ABSORBENT		
	19. <input type="checkbox"/> BERM AND/OR DIKING EQUIPMENT		
	20. <input type="checkbox"/> BROOM		
	21. <input type="checkbox"/> SHOVEL		
	22. <input type="checkbox"/> VACUUM		
	23. <input type="checkbox"/> EXHAUST HOOD		
	24. <input type="checkbox"/> SUMP AND/OR HOLDING TANK		
	25. <input type="checkbox"/> CHEMICAL NEUTRALIZERS		
	26. <input type="checkbox"/> GAS CYLINDER LEAK REPAIR KIT		
	27. <input type="checkbox"/> SPILL OVERPACK DRUMS		
	28. <input type="checkbox"/> OTHER		
<b>Communications and Alarm Systems</b>	29. <input type="checkbox"/> TELEPHONES (e.g., Cellular)		
	30. <input type="checkbox"/> INTERCOM AND/OR PA SYSTEM		
	31. <input type="checkbox"/> PORTABLE RADIOS		
	32. <input type="checkbox"/> AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT		
<b>Other</b>	33. <input type="checkbox"/> OTHER		
	34. <input type="checkbox"/> OTHER		

## H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases due to seismic motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS (Check all that apply): <span style="float: right;">H1.</span> <input type="checkbox"/> 1. HAZARDOUS MATERIALS AND/OR WASTE STORAGE AREAS <input type="checkbox"/> 2. PROCESS LINES AND PIPING <input type="checkbox"/> 3. LABORATORY <input type="checkbox"/> 4. WASTE TREATMENT AREA	LOCATIONS (e.g., Shop, outdoor shed, lab): <span style="float: right;">H2.</span>
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Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS AND/OR EQUIPMENT (Check all that apply): <span style="float: right;">H3.</span> <input type="checkbox"/> 1. SHELVES, CABINETS AND/OR RACKS <input type="checkbox"/> 2. TANKS AND SHUT-OFF VALVES <input type="checkbox"/> 3. PORTABLE GAS CYLINDERS <input type="checkbox"/> 4. EMERGENCY SHUT-OFF AND/OR UTILITY VALVES <input type="checkbox"/> 5. SPRINKLER SYSTEMS <input type="checkbox"/> 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane tank)	LOCATIONS: <span style="float: right;">H4.</span>
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## I. EMPLOYEE TRAINING

Employee training is required for all employees and/or contractors handling hazardous materials and/or hazardous wastes during normal and/or emergency operations. Most facilities will need to submit a separate Training Plan. However, your CUPA may accept this section as the Training Plan for some small facilities. Employee training plans may include the following content:

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|--|--|
| <ul style="list-style-type: none"> <li>• Applicable laws and regulations;</li> <li>• Emergency response plans and procedures;</li> <li>• Safety Data Sheets;</li> <li>• Hazard communication related to health and safety;</li> <li>• Methods for safe handling of hazardous substances;</li> <li>• Hazards of materials and processes (e.g., fire, explosion, asphyxiation);</li> <li>• Hazard mitigation, prevention and abatement procedures;</li> <li>• Coordination of emergency response actions;</li> <li>• Notification procedures for local emergency responders, CUPA, Cal OES, and onsite personnel;</li> </ul> | <ul style="list-style-type: none"> <li>• Communication and alarm systems;</li> <li>• Personal protective equipment;</li> <li>• Use and maintenance of emergency response equipment and supplies (e.g. Fire extinguishers, respirators, spill control materials);</li> <li>• Decontamination procedures;</li> <li>• Evacuation procedures and evacuation staging locations;</li> <li>• Identification of facility areas, equipment, and systems vulnerable to earthquakes and other natural disasters.</li> <li>• OTHER (Specify):</li> </ul> |
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Check the applicable boxes below to indicate how the employee training program is administered.

<input type="checkbox"/> 1. FORMAL CLASSROOM	<input type="checkbox"/> 2. VIDEOS	<input type="checkbox"/> 3. SAFETY MEETINGS	<input type="checkbox"/> 4. STUDY GUIDES / MANUALS	11.
<input type="checkbox"/> 5. OTHER (Specify): _____				12.
<input type="checkbox"/> 6. NOT APPLICABLE SINCE FACILITY HAS NO EMPLOYEES				
<input type="checkbox"/> 7. CHECK IF A SEPARATE EMPLOYEE TRAINING PLAN IS USED AND UPLOADED TO CERS AS A PDF DOCUMENT				13.
<input type="checkbox"/> 8. CHECK IF EMPLOYEE TRAINING IS COVERED BY THE ABOVE REFERENCED CONTENT AND OTHER DOCUMENTS ONSITE				14.

### EMPLOYEE TRAINING FREQUENCY AND RECORDKEEPING TRAINING MUST BE:

- Provided initially for new employees as soon as possible following the date of hire. New employees should not work in an unsupervised position that involves hazardous materials handling and/or hazardous waste management without proper training;
- Provided within six months from the date of hire for new employees at a large quantity generator;
- Ongoing and provided at least annually;
- Amended prior to a change in process or work assignment;
- Given upon modification to the Emergency Response/Contingency Plan.

**Large Quantity Generator Training:** Large quantity generators (1,000 kg or more) must retain written plan and documentation of employee training which includes:

- A written description of the type and amount of both initial and ongoing training that will be given to persons filling each job position having responsibility for hazardous waste management and/or emergency response.
- The name, job title and job description for each position at the facility related to hazardous waste management.
- Current employee training records must be retained until closure of the facility and former employee training records must be retained for at least three years after termination of employment.

**Small Quantity Generator Training:** Small quantity generators (less than 1,000 kg) must include basic hazardous waste management and emergency response procedures but a written employee training plan and training records are not required. In order to show that the facility has met the small quantity generator employee training requirement, an employee training plan and training records may be made available.

**Hazardous Materials Business Plan Training:** Businesses must provide initial and annual employee training that includes the content referenced above. The training may be based on the job position and training records must be made available for a period of at least three years.

## J. LIST OF ATTACHMENTS

Check one of the following: <input type="checkbox"/> 1. NO ATTACHMENTS ARE REQUIRED; or <input type="checkbox"/> 2. THE FOLLOWING DOCUMENTS ARE ATTACHED:	J1.  J2.
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# Instructions for Completing the CERS Consolidated Emergency Response/Contingency Plan

## Introduction

Health and Safety Code (HSC) §25505(a)(3) requires that a Hazardous Materials Business Plan (HMBP) contain an Emergency Response Plan and Procedures for immediate response to a reportable release or threatened release of a hazardous material. HSC §25505(a)(4) requires that HMBPs include employee training in safety procedures and emergency response plans and procedures in the event of a reportable release or threatened release.

Title 22 California Code of Regulations (22 CCR) §66262.34(a)(4) requires facilities that generate 1,000 kilograms or more of hazardous waste in any one calendar month, or accumulate more than 6,000 kilograms of hazardous waste on-site at any one time, prepare a Contingency Plan. In addition, facilities that generate more than 1 kilogram of acutely hazardous waste (AHW) in any one calendar month, or more than 100 kilograms of debris resulting from the spill of an AHW, or which treat hazardous waste onsite under the Permit by Rule (PBR) onsite treatment tier must also prepare a Contingency Plan.

The California Environmental Reporting System (CERS) Consolidated Emergency Response/Contingency Plan is designed to consolidate emergency response and contingency plan requirements for both hazardous materials handlers and hazardous waste generator facilities. It provides a basic emergency response plan and a training plan template for a typical small- to mid-size regulated facility, and simplifies Unified Program regulatory requirements. Attachments and/or other documents may be required for certain facilities due to the size and/or the nature of operations or processes that warrant additional planning.

Use of the CERS Consolidated Emergency Response/Contingency Plan is not mandatory. You may use another emergency plan document provided that it satisfies the HSC and 22 CCR emergency response plan/contingency plan content requirements. *In addition, please note that the Employee Training section referenced in Section I. of the CERS Consolidated Emergency Response/Contingency Plan may not be an acceptable training plan in some jurisdictions and a separate training plan may be required.*

## General Instructions

- This plan applies to both HMBP and hazardous waste generator facilities. Consider both programs as you complete each plan section.
- Be specific.
- Facilities with frequent employee turnover may substitute position titles for specific employee names when identifying emergency coordinators or emergency response team members to avoid frequent plan revisions.
- Review the specific line item instructions before completing your plan.
- After completion, the plan or its equivalent must be scanned, if necessary, and uploaded to CERS as a PDF document.

## Specific Line Item Instructions

- A1. FACILITY ID NUMBER – Enter the Facility ID number issued by the certified unified program agency (CUPA) or Participating Agency (PA).
- A2. CERS ID Number – Enter the CERS ID number obtained from CERS or your local CUPA or PA.
- A3. DATE OF PLAN PREPARATION/REVISION – Enter the date the plan was initially prepared or recently revised.
- A4. BUSINESS NAME – Enter the business name used to identify the facility in CERS.
- A5. BUSINESS SITE ADDRESS – Enter the site address where the facility is located.
- A6. CITY – Enter the city or unincorporated area in which the facility is located.
- A7. ZIP CODE – Enter the 5 or 9 digit zip code for the facility.
- A8. TYPE OF BUSINESS – Briefly describe the type of business.
- A9. INCIDENTAL OPERATIONS – Briefly describe any operations at the facility associated with hazardous materials storage or hazardous waste generation that may not be obvious from the description in A3.
- A10. THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING – Check box 2 “HAZARDOUS WASTES” if the facility generates hazardous waste. Note: Box 1 is always checked since both hazardous waste and non-waste hazardous chemicals are considered hazardous materials.
- B1. INTERNAL RESPONSE – Check one or more of the three boxes to indicate how facility personnel will respond to emergency incidents.

## Instructions for Completing the CERS Consolidated Emergency Response/Contingency Plan

- C1. LOCAL UNIFIED PROGRAM AGENCY PHONE – Enter the phone number of the local UPA that implements the Hazardous Materials Business Plan (HMBP) and hazardous waste generator program elements. If there is more than one UPA, identify the second agency in C5.
- C2. OTHER AGENCY NAME – If applicable, enter the name of another UPA or emergency response agency.
- C3. OTHER AGENCY PHONE – If applicable, enter the phone number of the agency named in C2.
- C4. NEAREST MEDICAL FACILITY or HOSPITAL NAME – Enter the name of the nearest hospital or medical facility.
- C5. NEAREST MEDICAL FACILITY or HOSPITAL PHONE – Enter the phone number of the nearest hospital or medical facility named in C4.
- C6. REGIONAL WATER QUALITY CONTROL BOARD PHONE – Enter the phone number of the local RWQCB.
- C7. OTHER AGENCY NAME – If applicable, enter the name of another agency requiring notification (e.g., Regional or local agencies not otherwise included).
- C8. OTHER AGENCY PHONE – If applicable, enter the phone number of the agency named in C7.
- C9. OTHER AGENCY NAME – If applicable, enter the name of another agency requiring notification (e.g., Regional or local agencies not otherwise included).
- C10. OTHER AGENCY PHONE – If applicable, enter the phone number of the agency named in C9.
- C11. INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA – Check one or more of the boxes to indicate how internal emergency communication and/or alarm notification will occur.
- C12. NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY – Check one or more of the boxes to indicate how neighboring facilities will be notified of actual or threatened off-site releases.C13.
- C13. EMERGENCY COORDINATOR CONTACT INFORMATION – Provide appropriate contact information for large quantity hazardous waste generators.
- D1. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES – Check all applicable boxes to identify procedures and resources used by your facility to contain, prevent, and/or mitigate a release or emergency.
- D2. OTHER (SPECIFY) – Briefly specify other spill prevention, containment, and cleanup procedures if you checked Box 21.
- E1. THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY – Check all applicable boxes to indicate how facility evacuation will be communicated.
- E2. OTHER (SPECIFY) – Briefly specify other evacuation signals if you checked Box 4.
- E3. THE FOLLOWING LOCATION(S) WILL BE USED FOR AN EMERGENCY ASSEMBLY AREA(S) – Briefly describe the evacuation assembly area(s).
- E4. EVACUATION ROUTES AND ALTERNATE EVACUATION ROUTES ARE DESCRIBED AS FOLLOWS: – Check the applicable box or boxes to indicate how evacuation routes are described.
- E5. OTHER (SPECIFY) – Briefly specify other options for describing evacuation routes if you checked Box 3.
- F1. ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES – Check the appropriate box to indicate if advance arrangements have been made or if they have been determined not to be necessary.
- F2. ADVANCE ARRANGEMENTS (SPECIFY) – If you checked Box 2, briefly describe the advance arrangements.
- G1. EQUIPMENT AVAILABLE – Check all applicable boxes in the second column of the table to identify emergency equipment available at your facility.
- G2. LOCATION – Briefly describe the location(s) where the emergency equipment is kept. Repeat for other rows in table.
- G3. CAPABILITY –If applicable, briefly describe the capability of the emergency equipment. Repeat for other rows in table.
- H1. VULNERABLE AREAS – Check all applicable boxes to identify areas at risk for hazardous materials releases or spills due to earthquakes.
- H2. LOCATIONS – If you checked Box 1-4, briefly describe the location in the corresponding row. Repeat for each row, if applicable.
- H3. VULNERABLE SYSTEMS AND/OR EQUIPMENT – Check all applicable boxes to identify systems and/or equipment vulnerable to hazardous materials releases or spills due to earthquakes.
- H4. LOCATIONS – If you checked Box 1-6, briefly describe the location in the corresponding row. Repeat for each row, if applicable.
- I1. INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED – Check all applicable boxes to identify how your employee training program is administered.
- I2. OTHER (SPECIFY) – If you checked Box 5, briefly describe the other ways training is administered.
- I3. Check this box if a separate employee training plan is used and uploaded to CERS as a PDF document.
- I4. Check this box if an employee training plan is maintained onsite in addition to the above referenced training plan content.
- J1. ATTACHMENTS – Check this box to indicate that no additional pages and/or documents are attached.
- J2. DOCUMENTS ATTACHED (SPECIFY) – Check this box to indicate that attachments are provided and list the attachments in the section.