DELAWARE RISK MANAGEMENT PLAN (RMP) REGISTRATION

Background

The Accidental Release Prevention Regulation became effective January 11, 1999. This regulation replaced in its entirety the Regulation for the Management of Extremely Hazardous Substances that had been effective since September 1990. The new regulation incorporates the federal 112(r) rule into Section 5 and maintains some of the more restrictive features of the old Regulation for the Management of Extremely Hazardous Substances in (non federally enforceable) Section 6. Delaware continues to have a funded program based upon quantities of hazardous substances. A substance or process can be subject to either Section 5 or Section 6. (One Section or the other but not both). However, a facility can be subject to Section 5 for one substance or process and Section 6 for another substance or process. Incorporating the federal 112(r) rule into Delaware's new Accidental Release Prevention Regulation allows the Department of Natural Resources and Environmental Control's (DNREC) Accident Release Prevention Group to apply for delegation of the federal 112(r) rule.

Which Section of Delaware's ARP Regulation applies?

Potentially hazardous substances are regulated under the State of Delaware Accidental Release Prevention Regulation. A process having a regulated substance present in threshold quantities as listed in Section 5, Table 1 (toxics) or Table 2 (flammables) must implement the appropriate Federal risk management program. A Risk Management Plan must be registered with the EPA prior to June 21, 1999. The EPA and the Delaware Accidental Release Prevention website offer guidance and forms (RMP*Submit) for federal registration.

If the process is NOT regulated under Section 5, the owner or operator of the process must also check Section 6 - Table 4 (toxics), Table 5 (flammables), and Table 6 (explosives) to determine if the maximum potential release quantity (PRQ) is greater or equal to the sufficient quantity (SQ). The owner or operator of a facility that has substances or processes regulated under Section 6 must implement the appropriate risk management program and register the appropriate risk management plan with the State of Delaware Department of Natural Resources and Environmental Control (DNREC).

How do I determine the maximum potential release quantity (PRQ) for my process under Section 6?

If you are not subject to Section 5, select the scenario that gives the maximum PRQ in accordance with Section 6.50. This will generally involve severing the largest liquid line in the process. Use the appropriate release rate (RR) equation (gas, flashing liquid, or liquid) from Section 6.50 and calculate the PRQ. If the PRQ is equal to or greater than the (SQ), the process is regulated and must be registered in Delaware.

Note: Table 5 (flammables) is a list of typical substances. All flammable gases could be regulated depending on the whether there is a sufficient quantity present. Highly flammable chemicals with low boiling points not found in the list should have a sufficient quantity calculated using the equation in Section 6.60. Table 4 is a list of toxic substances and sufficient quantities that are regulated. Table 6 is a list of regulated explosive substances with threshold quantities.

How do I register and submit a Delaware Risk Management Plan?

If a chemical is regulated by Delaware but not on the federal 112 (r) list, the procedure for registering an RMP in Delaware only:

Fill out the available Delaware RMP in electronic form or paper form. The Delaware RMP is available for downloading from the internet (from Delaware Accidental Release Prevention Group webpage) or directly from the Accidental Release Prevention Group.

Fill out the Delaware RMP Registration form and submit the registration to Delaware Accidental Release Prevention Group (ARPG) .

Where do I send the Delaware Risk Management Plan?

To register in Delaware send completed Delaware RMP forms to:

Accidental Release Prevention Group
Risk Management Plan
DNREC
715 Grantham Lane
New Castle, DE 19720

When is the Delaware Risk Management Plan registration due?

Section 6.60 states that the initial registration is due June 21, 1999. Companies already registered in the Delaware Accidental Release Prevention Program must check for Section 5 or Section 6 applicability and resubmit an updated registration as outlined above. A facility can be subject to Section 5 for one substance or process and Section 6 for another.

How can I get help completing my Delaware Risk Management Plan?

The Delaware Risk Management Plan Registration is based upon the federal RMP*Submit Paper Form. The numbers are the same so that the RMP*Submit™ Users Manual can be easily referred to as guidance. For further help and guidance with the Delaware Risk Management Program, Plan Registration, or Delaware Worst Case calculations contact Rich Antoff, Jay Brabson, or Bob Barrish in the Accidental Release Prevention Group office at Grantham Lane in New Castle, Delaware - 302-323-4542.

DELAWARE RISK MANAGEMENT PLAN (RMP) REGISTRATION

REGULATION FOR THE MANAGEMENT OF EXTREMELY HAZARDOUS SUBSTANCES
under Chapter 77, Title 7 Delaware Code

Submission Type:
[ ] First Time RMP Submission
[ ] Correction to Current RMP
[ ] Re-Submission

Executive Summary: (Attach separate paper if you need more space)

DELAWARE RISK MANAGEMENT PLAN (RMP) REGISTRATION

REGULATION FOR THE MANAGEMENT OF EXTREMELY HAZARDOUS SUBSTANCES
under Chapter 77, Title 7 Delaware Code

Section 1.Registration

1.1.a. Facility Name: _____

1.1.b. Parent Company #1 Name: _____

1.1.c. Parent Company #2 Name _____

1.2 EPA Identifier (12 characters) _____
(Optional)

1.3 Other EPA Systems Facility _____
Idenifier (15 characters)(Optional)

1.4 Dun and Bradstreet Numbers (DUNS – 9 characters)

1.4.a Facility DUNS _____

1.4.b Parent Company #1 DUNS _____

1.4.c Parent Company #2 DUNS _____

1.5 Facility Location

1.5.a Street: _____

1.5.b Street: _____

1.5.c _____ 1.5.d. _____ 1.5.e. _____
City State Zip Code

1.5.f. _____
County

1.5.g. Facility Latitude _____ 1.5.h. Facility Longitude _____
(Report in degrees, minutes, and seconds)

1.5.i. Method for determining Lat/Long (See RMP Users Manual) _____

1.5.j. Description of location identified by Lat/Long (See RMP Users Manual _____

1.6 Owner or Operator

1.6.a. Name: _____

1.6.b. Phone: (_____) _____

Owner or Operator Mailing Address:

1.6.c. Street: _____

1.6.d. Street: _____

1.6.e. _____ 1.6.f. _____ 1.6.g. _____
City State Zip Code

DELAWARE RISK MANAGEMENT PLAN (RMP) REGISTRATION

REGULATION FOR THE MANAGEMENT OF EXTREMELY HAZARDOUS SUBSTANCES
under Chapter 77, Title 7 Delaware Code

Section 1.Registration

1.7.a. Name of person responsible
for Delaware RMP Implementation: _____

1.7.b. Title: _____

1.8 Emergency Contact

1.8.a. Name: _____ 1.8.b. Title: _____

1.8.c. Phone: _____ 1.8.d. 24-Hour Phone: _____

1.8.e. 24-Hour Phone Extension/PIN #: _____

1.9 Optional Other Points of Contacts:
1.9.a. E-mail Address: _____

1.9.b. Facility Public Contact Phone: _____

1.9.c. Facility or Parent Company www Homepage Address: _____

1.10 Local Emergency Planning Committee (LEPC) _____

1.11 Number of full time employees on site (Optional) _____
1.12 Facility covered by: (Select all that apply)
1.12.a _____OSHA PSM
1.12.b. _____EPCRA Section 302
1.12.c. _____CAA Title V Air Operating Permit/ If covered, Permit #: _____

1.13 OSHA Star or Merit Ranking (Optional) [ ] Yes [ ] No

1.14 Last Safety Inspection (by an External Agency) Date: _____

1.15 Last Safety Inspection Performed by an External Agency (select one)
1.15.a. _____OSHA
1.15.b. _____ State Accidental Release Prevention Program
1.15.c. _____ EPA
1.15.d. _____State Environmental Agency
1.15.e. _____Fire Department
1.15.f. _____Never had one
1.15.g. _____Other, Specify: _____

1.16 Will this RMP involve Predictive Filing? (Optional) [ ] Yes [ ] No

DELAWARE RISK MANAGEMENT PLAN (RMP) REGISTRATION

REGULATION FOR THE MANAGEMENT OF EXTREMELY HAZARDOUS SUBSTANCES
under Chapter 77, Title 7 Delaware Code

Facility Name: _____

Section 1.Registration

1.17 Process Specific Information. For each covered process, fill in this page. If you are reporting more than one process, make a photocopy of this page and report each process on a SEPARATE SHEET.
Process ID # (Optional for facility reference) _____

Process Description: (Optional for your reference only)

1.17.a. **Program Level (select one): [ ] 1 [ ] 2 [ ] 3**

1.17.b. NAICS Code(s) for regulated processes (five or six digits)

_____ _____ _____

1.17.c. Chemical(s) (regulated substances)

1.17.c.1 Name	1.17.c.2 CAS Number	1.17.c.3 Actual Quantity (lbs)

Actual Quantity (AQ) means the sum of all the physical quantities of a regulated substance listed in either Section 6.20, 6.30, 6.40 in whatever form at the maximum design capacity of the process considering administrative controls.

DELAWARE RISK MANAGEMENT PLAN (RMP)
WORST CASE

FACILITY NAME: _____

If the substance or process is NOT regulated under Section 5, the owner or operator must also check Section 6 - Table 4 (toxics), Table 5 (flammables), and Table 6 (explosives) to determine if the maximum potential release quantity (PRQ) is greater or equal to the sufficient quantity (SQ). The owner or operators of facilities regulated under Section 6 must implement the appropriate risk management program and register the appropriate risk management plan with the State of Delaware Department of Natural Resources and Environmental Control (DNREC)

A substance or process can be subject to Section 5 or Section 6. (One Section or the other but not both).

Note: All flammable gases, flammable and combustible liquids that are held at or above their atmospheric boiling point, and flammable and combustible liquids which are held below ambient temperatures through refrigeration, but whose vapor pressures at 86 ° F is greater than one atmosphere are regulated. Table 5 is a list of common flammable substances. For flammables not listed the equation in 6.30(d) must be used to determine the sufficient quantity.

1. Name of Substance: _____

2. CAS Number: _____

3. Toxic _____, Flammable _____, or Explosive _____ .

Determine the sufficient quantity (SQ) from table 4 (toxics), table 5 (flammables – if not listed may need to determine SQ using the equation provided in 6.30(d)), or table 6 (explosives).

4. SQ = _____ lbs/hour for toxics or,
lbs/minute for flammables or,
lbs for explosives.

You must determine your release rate (RR) for toxics and flammables using Section 6.50(b)(8)(vi) equations or graphs for release rates of gas, flashing liquids and pool vaporization rates. If the release is from a hose or pipe, the release rate (RR) must be doubled where it is possible to get flow from both ends of the breakage; otherwise the release rate (RR) equals the potential release quantity (PRQ).

5. PRQ = _____ lbs/hour for toxics or,
lbs/minute for flammables or,
lbs for explosives.

If the PRQ is equal to or greater than the SQ, the owner or operator must develop and implement a risk management program and submit a risk management plan.

DELAWARE RISK MANAGEMENT PLAN (RMP)
WORST CASE

Worst-case release analysis is estimation of the greatest distance in any direction to endpoint resulting from an accidental release of regulated toxic of flammable substance, or detonation of an explosive substance. The owner or operator shall use the parameters defined in Section 6.50(b) to determine the distance to the endpoints. Methodology provided in the RMP Off-site Consequence Analysis Guidance can be used or any commercially or publicly available air dispersion modeling techniques, provided the techniques account for the modeling conditions and are recognized by industry as applicable as part of current practices. Proprietary models that account for the modeling conditions may by used provided the owner or operator allows the Department, local emergency planners and the public access to the model upon request. The owner may also use the look-up tables (Tables 7, 8 and 9) to determine the distance to the endpoint (where PRQ/SQ represents the ratio of the actual quantity of a regulated substance contained in a process to the sufficient quantity for that substance - Note regulation has typo of AQ/SQ, should be PRQ/SQ).

6. Model used:
   ____ Delaware Table 7
   ____ Delaware Table 8
   ____ Delaware Table 9
   ____ EPA's RMP*Comp™
   ____ Other Model – Please list model name and give description including wind speed, atmospheric class, and topography used (attach vendor information as appropriate:

   Rural or Urban _____ Temperature of release _____

   End Point used _____

   _____

7. Distance to endpoint (miles): _____

8. Estimated population within distance to endpoint: _____

9. Public Receptors: _____

   _____

   _____
   (List all Schools, Residences, Hospitals, Prison/Correctional Facilities, Recreational Areas, Commercial, Office, or Industrial areas)

10. Passive Mitigation considered: _____

    _____
    (List all Dikes, Enclosures, Berms, Drains, Sumps, or Other)

DELAWARE RISK MANAGEMENT PLAN (RMP)
Five Year Accident History

(Taken from federal RMP*Submit form Section 6) Facility Name:_____

Would you like to certify that your facility did not have any reportable accidents in the past 5 years? _____ Yes, leave the rest of this section blank
_____ No, make the appropriate photocopies of pages 9 and 10 and fill out this section for each accident

6.1 Date and time of Accident: _____ 6.2 Time _____AM/PM

6.3 NAICS code of process involved (five or six digits): _____

6.4 Release duration: _____ (hours and minutes)
6.5 Chemical(s) released:

6.5.a.i. Name	6.5.a.ii.CAS Number	6.5.b.Quantity released (lbs)	6.5.c. Percent weight of chemical if in a mixture (toxics only)
			%
			%
			%

6.6 Release event: [ ] Gas release [ ] Fire
[ ] Liquid spill/evaporation [ ] Explosion

6.7 Release Source (Select at least one)
[ ] Storage vessel [ ] Valve
[ ] Piping [ ] Pump
[ ] Process vessel [ ] Joint
[ ] Transfer Hose [ ] Other (specify) _____

6.8 Weather Conditions at time of the event
a.i. Wind speed _____ a.ii. Wind direction __] __] __]
b. Temperature (°F) _____ c. Atmospheric Stability class (A-F) __]
d. Precipitation Present ? ___
e. Unknown weather conditions (check if a-d are all unknown) [ ]

6.9 On-site impacts:
a. Deaths (enter numbers):
Employees or contractors _____
Public responders _____
Public _____

b. Injuries (enter numbers)
Employees or contractors _____
Public responders _____
Public _____

c. Property Damage $ _____

DELAWARE RISK MANAGEMENT PLAN (RMP)
Five Year Accident History

(Taken from federal RMP*Submit form Section 6) Facility Name: _____

6.10 Known off-site impacts (enter numbers)

a. Deaths _____ d. Evacuated _____
b. Hospitalizations _____ e. Sheltered-in-place _____
c. Other medical treatments _____ f. Property damage $ _____

6.10.g. Environmental damage (select all that apply):

[ ] Fish or animal kills
[ ] Tree, lawn, shrub, or crop damage
[ ] Water contamination
[ ] Soil contamination
[ ] Other (specify): _____

6.11 Initiating event (select one):

[ ] Equipment Failure [ ] Natural (weather conditions, earthquake)
[ ] Human error [ ] Unknown

6.12 Contributing factors (select all that apply)

[ ] Equipment failure [ ] Process design failure
[ ] Human error [ ] Unsuitable equipment
[ ] Improper procedure [ ] Management error
[ ] Overpressurization [ ] Unusual weather conditions
[ ] Upset conditions [ ] Other (specify) _____
[ ] By-pass condition
[ ] Maintenance activity _____

6.13 Off-site responders notified: [ ] Notified only [ ] No, not notified
[ ] Notified and responded [ ] Unknown

6.14 Changes introduce as a result of the accident (select at least one)

[ ] Improved/upgraded equipment [ ] Changed process
[ ] Revised maintenance [ ] Reduced inventory
[ ] Revised training [ ] None
[ ] Revised operating instructions
[ ] New process controls
[ ] New mitigation systems
[ ] Revised emergency response plan
[ ] Other (specify): _____

_____

_____

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 3

(Taken from federal RMP*Submit form Section 7) Facility Name: _____

(If you need to report more than one process prevention program, make a photocopy of Section 7)

7. Prevention Program Description:

7.1 NAICS Code for process: _____

7.2 Chemical name(s): _____

_____

_____

7.3 Date on which safety information was last reviewed or revised: _____

7.4 Process Hazards Analysis (PHA):

7.4.a Date of last PHA or PHA update: _____

7.4.b. Technique used:

[ ] What if
[ ] Checklist
[ ] What if /Checklist combined
[ ] HAZOP
[ ] Failure Mode & Effects Analysis
[ ] Fault Tree Analysis
[ ] Other, Specify: _____

7.4.c. Expected or actual date of completion of all changes resulting from last PHA or PHA update: _____

7.4.d Major Hazards identified (select at least one):

[ ] Toxic release
[ ] Fire
[ ] Explosion
[ ] Runaway reaction
[ ] Polymerization
[ ] Overpressurization
[ ] Other (specify): _____
[ ] Corrosion
[ ] Overfilling
[ ] Contamination
[ ] Equipment Failure
[ ] Loss of cooling, heating, or electricity, instrument air
[ ] Tornado
[ ] Earthquakes
[ ] Floods (flood plain)
[ ] Hurricanes

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 3

(Taken from federal RMP*Submit form Section 7) Facility Name:_____

7.4.e. Process controls in use (select at least one):

[ ] Vents	[ ] Interlocks	[ ] Inhibitor addition
[ ] Relief valves	[ ] Alarms and Procedures	[ ] Rupture disks
[ ] Check valves	[ ] Keyed bypass	[ ] Excess flow device
[ ] Scrubbers	[ ] Emergency air supply	[ ] Quench system
[ ] Flares	[ ] Emergency power	[ ] Purge system
[ ] Manual shutoffs	[ ] Backup pump	[ ] None
[ ] Automatic shutoffs	[ ] Grounding equipment	
[ ] Other (specify):		

_____

7.4.f. Mitigation systems in use (select at least one):

[ ] Sprinkler system	[ ] Dikes	[ ] Fire Walls
[ ] Blast Walls	[ ] Deluge System	[ ] Water curtain
[ ] Enclosure	[ ] Neutralization	[ ] None
[ ] Other (specify):		

_____

7.4.g. Monitoring/detection systems in use (select at least one):

[ ] Process area detectors	[ ] Perimeter Monitors	[ ] None
[ ] Other (specify):		

_____

7.4.h. Changes since the last PHA or PHA update (select at least one):

[ ] Reduction in chemical inventory	[ ] Increase in chemical inventory
[ ] Change in process parameters	[ ] Installation of process controls
[ ] Installation of process detection systems	[ ] Installation of mitigation systems
[ ] Installation of perimeter monitoring systems	[ ] None recommended
[ ] None	
[ ] Other (specify):	

_____

7.5 Date of most recent review or revision of operating procedures: _____

7.6 Training:

7.6.a. Date of most recent review or revision or training programs: _____

7.6.b. Type of Training provided: [ ] Classroom [ ] On the job
[ ] Other: _____

7.6.c. Type of competency testing used (select at least one):

[ ] Written tests [ ] Oral tests [ ] Demonstration
[ ] Observation [ ] Other: _____

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 3

(Taken from federal RMP*Submit form Section 7) Facility Name:_____

7.7 Maintenance:

7.7.a. Date of most recent review or revision of maintenance procedures: _____

7.7.b. Date of most recent process equipment inspection or test: _____

7.7.c. Equipment most recently inspected or tested (list equipment):

_____

_____

_____

7.8 Management of Change:

7.8.a. Date of most recent change that triggered management of change procedures: _____

7.8.b. Date of most recent review or revision of management of change procedures: _____

7.9 Date of most recent pre-startup review: _____

7.10 Compliance Audits

7.10.a. Date of most recent compliance audit: _____

7.10.b. Expected or actual date of completion of all changes resulting from the compliance audit: _____

7.11 Incident Investigation:

7.11.a. Date of most recent incident investigation (if any): _____

7.11.b. Expected or actual date of completion of all changes resulting from the incident investigation: _____

7.12 Date of most recent review or revision of employee participation plans:_____

7.13 Date of most recent review or revision of hot work permit procedures: _____

7.14 Date of most recent review or revision of contractor safety procedures: _____

7.15 Date of most recent evaluation of contractor safety performance: _____

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 2

(Taken from federal RMP*Submit form Section 8) Facility Name:_____

8. Prevention Program Description:

8.1 NAICS Code for process: _____

8.2 Chemical name(s): _____

_____

8.3.a. Date of most recent review or revision of safety information: _____

8.3.b. Federal/state regulations or industry-specific design codes an standards used to Demonstrate compliance with the safety information requirement (select at least one):

[ ] NFPA 58 [ ] OSHA (29 CFR 1910.111) [ ] ASTM Standards
[ ] ANSI Standards [ ] ASME Standards [ ] None
[ ] Other (specify):

_____

[ ] Comments:

_____

8.4 Hazard Review:

8.4.a. Date of completion of most resent hazard review or update: _____

8.4.b. Expected or actual date of completion of all changes resulting from the hazard review: _____

8.4.c. Major hazards identified (select at least one):

[ ] Toxic release [ ] Corrosion [ ] Contamination
[ ] Fire [ ] Overfilling [ ] Equipment Failure
[ ] Explosion [ ] Earthquakes [ ] Floods (flood plain)
[ ] Runaway reaction [ ] Tornado [ ] Hurricanes
[ ] Polymerization [ ] Loss of cooling, heating, or electricity, instrument air
[ ] Overpressurization
[ ] Other (specify):_____

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 2

(Taken from federal RMP*Submit form Section 8) Facility Name:_____

8.4.d. Process controls in use (select at least one):

[ ] Vents	[ ] Relief valves	[ ] Check valves
[ ] Scrubbers	[ ] Flares	[ ] Manual shutoffs
[ ] Interlocks	[ ] Alarms and procedures	[ ] Keyed bypass
[ ] Automatic shutoffs	[ ] Emergency air supply	[ ] Emergency power
[ ] Backup pump	[ ] Grounding equipment	[ ] Inhibitor addition
[ ] Rupture disks	[ ] Excessive flow device	[ ] Quench system
[ ] Purge system	[ ] None	

[ ] Other (specify): _____

8.4.e. Mitigation systems in use (select at least one):

[ ] Sprinkler system	[ ] Dikes	[ ] Fire Walls
[ ] Blast Walls	[ ] Deluge System	[ ] Water curtain
[ ] Enclosure	[ ] Neutralization	[ ] None

[ ] Other (specify):

_____

8.4.f. Monitoring/detection systems in use (select at least one):

[ ] Process area detectors [ ] Perimeter Monitors [ ] None

[ ] Other (specify):

_____

8.4.g. Changes since the last hazard review or hazard review update (select at least one):

[ ] Reduction in chemical inventory	[ ] Increase in chemical inventory
[ ] Change in process parameters	[ ] Installation of process controls
[ ] Installation of process detection systems	[ ] Installation of mitigation systems
[ ] Installation of perimeter monitoring systems	[ ] None recommended
[ ] Other (specify):	[ ] None

_____

8.5 Date of most recent review or revision of operating procedures _____

8.6.a Date of most recent review or revision of training programs _____

8.6.b. Type of Training provided: [ ] Classroom [ ] On the job

[ ] Other: _____

8.6.c. Type of competency testing used (select at least one):

[ ] Written tests	[ ] Oral tests	[ ] Demonstration
[ ] Observation	[ ] Other: _____	

DELAWARE RISK MANAGEMENT PLAN (RMP)
PREVENTION PROGRAM: PROGRAM LEVEL 2

(Taken from federal RMP*Submit form Section 8) Facility Name:_____

8.7 Maintenance

8.7.a. Date of most resent review or revision of maintenance procedures _____

8.7.b. Date of most recent equipment inspection or test _____

8.7.c. Equipment most recently inspected or tested (list equipment):

_____

_____

_____

8.8 Compliance audits:

8.8a. Date of most recent compliance audit: _____

8.8.b. Expected or actual date of completion
of all changes resulting from the compliance audit: _____

8.9 Incident Investigation:

8.9.a. Date of most recent incident investigation (if any): _____

8.9.b. Expected or actual date of completion
of all changes resulting from the incident investigation: _____

8.10 The date of most recent change that triggered
a review or a revision of safety information, the hazard review,
operating or maintenance procedures, or training: _____

DELAWARE RISK MANAGEMENT PLAN (RMP)
EMERGENCY RESPONSE

(Taken from federal RMP*Submit form Section 9) Facility Name:_____

9.1 Written emergency response (ER) plan

9.1.a. [ ] Is your facility included in the community emergency response plan?

9.1.b. [ ] Does your facility have its own written emergency response plan?

9.2 [ ] Does your facility's ER plan include specific actions to be taken in response to accidental releases of regulated substances?

9.3 [ ] Does your facility's ER plan include procedures for informing the public and local agencies responding to accidental releases?

9.4 [ ] Does your facility's ER plan include information on emergency health care?

9.5 Date of most recent review or update of your facility's ER plan: _____

9.6 Date of most recent ER training for your facility's employees: _____

9.7 Local agency with which your facility's ER plan or response activities are coordinated

9.7.a. Name of agency _____

9.7.b. Phone number of agency _____

9.8 Facility is subject to: (select all that apply)

[ ] OSHA Regulations at 29 CFR 1910.38
[ ] OSHA Regulations at 1910.120
[ ] Clean Water Act Regulations at 40 CFR 112
[ ] RCRA Regulations at 40 CFR 264, 265, 279.52
[ ] OPA-90 Regulations at 40 CFR 112, 33 CFR 154, 49 CFR 194, 30 CFR 254
[ ] State EPCRA Rules and Laws
[ ] Other specify:

_____

CERTIFICATION

The certification statement must be signed by the owner or operator or a senior official with management responsibility for the person or (persons) completing the RMP.

Certification Statement for Program 1Process(es):

Based on the criteria for Delaware worst case in Section 6 and in Section 5.10, the distance to the specified endpoint for the Delaware worst-case accidental release scenario for the following process(es) is less than the distance to the nearest public receptor:

[insert description for first Program 1 process from executive summary]

[insert description for second Program 1 process from executive summary]

[etc.]

Within the past five years, the process(es) has (have) had no accidental release that caused offsite impacts provided in the risk management program rule (Section 5.10(b)(1)). No additional measures are necessary to prevent offsite impacts from accidental releases. In the event of fire, explosion, or a release of a regulated substance form the process(es), entry within the distance to the specified endpoints may pose a danger to public emergency responders. Therefore, public emergency responders should not enter this area except as arranged with the emergency contact indicated in the Delaware RMP. The undersigned certifies that, to the best of my knowledge, information, and belief, formed after reasonable inquiry, the information submitted is true, accurate, and complete.

Signature	Print Name
Title	Date

Certification Statement for Program 2 & 3 Processes

To the best of the undersigned's knowledge, information, and belief formed after reasonable inquiry, the information submitted is true, accurate, and complete.

Signature	Print Name
Title	Date