

San Luis Obispo CUPA Public Portal

On-Line Hazardous Materials Business Plan Submittals Instructions for Use

Document Prepared by County of San Luis Obispo Environmental Health Services 1/4/2010

The Portal is being implemented to allow for easy submittal of HazMat Business Plans. A business can submit their information at any time. Once approved, that information is readily available for use by Emergency Responders, providing safe and efficient responses. The Portal will allow for easy verification that the CUPA has correct and updated information on the regulated facilities.







Certified Unified Program Agency (CUPA)

San Luis Obispo CUPA Public Portal On-Line Hazardous Materials Business Plan Submittals Instructions for Use

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# Good to Know Tips

- 1. Fields marked with a red asterisk \* are required fields. Forms cannot be submitted unless all of these fields have been completed.
- 2. You can start and stop your entry after completing a page. Always click on the "Save Changes" icon at the bottom of the screen before you exit the Portal. The information you entered will not be saved if you did not complete all required fields on that page.
- 3. Complete the page you are working on before saving and exiting the Portal.
- 4. It is vital that the site maps you upload are accurate and legible. It is recommended that after you scan your map (and save it to your computer for uploading), open it and check to ensure legibility.
- 5. Whenever possible, have your MSDS sheets handy when entering chemical inventory.
- 6. The Portal Chemical Information page does provide several links to websites that reference chemical information.
- 7. You can upload your facility's Emergency Plan, rather than re-entering the information into the Portal. Be sure to reference each field in the Portal to the corresponding location in your uploaded plan to ensure completeness.
- 8. The FA#, FAID and Facility Number are different names for the identification number that has been assigned by the CUPA; it is FA followed by 7 digits (FA0000123) and can be found on your inspection reports, your permit to operate, or by calling your inspector.
- 9. Each form may be printed by selecting the Print button at the bottom of each page. The Portal information will be printed out in the CUPA format used for manually submitted plans. The plan may be printed in its entirety from the Submission Home Page by clicking on the Print Summary link (once you have submitted a plan). See the screen shot, below.



Contact: HMBEP Administrator

_	Facility ID#	Created	Last Modified	Submission Status	
				Submitted 6/15/11 (ACCEPTED)	
	FA0008510	1/26/11	6/15/11	Reviewer Comments	Archives
				Print 6/15/11 Summary	

10. New facilities will not see any information when accessing their account; new facilities must enter their entire plan. Older facilities that have previously supplied business plans should find that data in their accounts and may only need to perform edits.



# Step 1. Obtain your Username and Pass Word

Start at: <u>www.ezsubmitslogov.org</u>

Or follow the links on the County or City website, which may take you directly to the Login screen (see  $2^{nd}$  screenshot on the following page).

San Luis Obispo County CALIFORNIA       Quicklin Guicklin         Health Agency Jeff Hamm Director       > County Home Page > Health Agency Services > Environmental Health Services Public Portal       Quicklin         Swine Flu Information       Environmental Health Services Public Portal       • Mental MMSA         Alcohol and Substance Abuse       Frequently Asked Questions about the Public Portal       • Mental MMSA         • Environmental Health Services       Information about the EZSubmit Process       • Mental MMSA         • Restaurant/Grocery Store/Market Inspection Results Search       Information about the HazMat EZSubmit Business Plan Submission Portal       • MA Com	Residents and Visitors	Business	Health and Well-Being	Law and Justice	Government	Er
Health Agency Jeff Hamm       > County Home Page > Health Agency Services > Environmental Health Services Public Portal       Quicklir         Director       Environmental Health Services Public Portal       • Public Frequently Asked Questions about the Public Portal       • Public Frequently Asked Questions about the Public Portal       • MHSAF Inter Version         • Alcohol and Substance Abuse       Frequently Asked Questions about the Public Portal       • MHSAF Interven       • MHSAF Interven         • Environmental Health Services       Information about the EZSubmit Process       • HA Composition         • Restaurant/Grocery Store/Market Inspection Results Search       • Outer the HazMat EZSubmit Business Plan Submission Portal	San Luis	Obispo IFORNI	County A			
Health Agency Jeff Hamm       > County Home Page > Health Agency Services > Environmental Health Services Public Portal       Quicklir         Director       Environmental Health Services Public Portal       Public Portal       Public Portal         Swine Flu Information       Erequently Asked Questions about the Public Portal       Mental (MHSA)       Mental (MHSA)         Alcohol and Substance Abuse       Frequently Asked Questions about the Public Portal       MHSA F (Intervent)         Environmental Health Services       Information about the EZSubmit Process       MHSA F (Intervent)         Restaurant/Grocery Store/Market Inspection Results Search       Information about the HazMat EZSubmit Business Plan Submission Portal         Birth and Death Certificates       Click here to enter the HazMat EZSubmit Business Plan Submission Portal						
Director       Environmental Health Services Public Portal <ul> <li>Printer Version</li> <li>Mental I</li> <li>Alcohol and Substance Abuse</li> <li>Environmental Health Services</li> <li>Information about the EZSubmit Process</li> <li>HA Com</li> </ul> <ul> <li>Mental I</li> <li>MHSA.F</li> <li>Interversion</li> <li>MHSA.F</li> <li>MHSA.F</li> <li>Interversion</li> <li>HA com</li> </ul> <li> <li> <li>Metal Hauthout the EZSubmit Process</li> <li> <li>HA com</li> </li></li></li>	Health Agency	> <u>County Home Page</u> >	Health Agency Services > Environr	nental Health Services Public Portal		Quicklinks
<ul> <li>Swine Flu Information</li> <li>Alcohol and Substance Abuse</li> <li>Environmental Health Services</li> <li>Information about the EZSubmit Process</li> <li>Restaurant/Grocery Store/Market Inspection Results Search</li> <li>Birth and Death Certificates</li> <li>Click here to enter the HazMat EZSubmit Business Plan Submission Portal</li> </ul>	Director	Environme	ntal Health Servio	ces Public Portal		<ul> <li>Public Heal reported case</li> <li>communica</li> </ul>
<ul> <li>Alcohol and Substance Abuse</li> <li>Environmental Health Services</li> <li>Restaurant/Grocery Store/Market Inspection Results Search</li> <li>Birth and Death Certificates</li> <li>Click here to enter the HazMat EZSubmit Business Plan Submission Portal</li> </ul>	Swine Flu Information				Printer Version	Mental Hea (MHSA)
<ul> <li>Environmental Health Services</li> <li>Information about the EZSubmit Process</li> <li>HA Com</li> <li>Restaurant/Grocery Store/Market Inspection Results Search</li> <li>Birth and Death Certificates</li> <li>Click here to enter the HazMat EZSubmit Business Plan Submission Portal</li> </ul>	<ul> <li>Alcohol and Substance Abuse</li> </ul>	Frequently Asked	Questions about the Public	Portal		<ul> <li>MHSA Prev Intervention</li> </ul>
<ul> <li>Restaurant/Grocery Store/Market Inspection Results Search</li> <li>Birth and Death Certificates</li> <li>Click here to enter the HazMat EZSubmit Business Plan Submission Portal</li> </ul>	<ul> <li>Environmental Health Services</li> </ul>	Information about	the EZSubmit Process			<ul> <li>Employment</li> <li>the County</li> <li>HA Complia</li> </ul>
Birth and Death Certificates	<ul> <li>Restaurant/Grocery Store/Market Inspection Results Search</li> </ul>	New				
	<ul> <li>Birth and Death Certificates</li> </ul>	Click here to ente	r the HazMat EZSubmit Bus	iness Plan Submission Por	tal	
Food, Clothing and Shelter Agencies	<ul> <li>Food, Clothing and Shelter</li> </ul>	Agencies				

Click on the link to enter the EZSubmit Business Plan Submission Portal

This link takes you into the Portal, and the Login screen.

Before you can begin using the Portal for your Business Plan submissions, you need to request a Username and Password. Choose the link that fits your unique situation (see screen shot above), complete the required information and choose submit.

Your Username and Pass Word will be e-mailed to you once the information is verified and connected to your facility.





1

Here is what the Owner/Operator Login Request form looks like:

![](_page_5_Picture_0.jpeg)

Contraction Contra	nty of San Luis Obispo onmental Health Services (805)781-5544 rdous Materials Program ertified Unified Pro	gram Ager	CITY OF SAN LUIS OBIS Fire Department (805) Hazardous Materials Pro NCY (CUPA)	po 1781-7383 gram	
				<b>Owner/Operator</b>	Login Request Fo
Asterisks (*) indicate	required fields		Help i	is available by clicking o	on the highlighted field
Instructions	This form is to be completed by the business and password to access the SLO CUPA Hazard grant another individual authorization, comple you are already an authorized user, input your Administrator can access the existing account. Information as needed. The System Administr	owner or Corporate Officer ous Materials Business Pla- te this form with THAT indi current user name and pa Use the notes section to p ator will contact you within -	to request a user name n Portal. If you wish to vidual's information. If assword so the System rovide specific 4 working days.		
Request Date*	11/24/2009				
Information about th	e business				
Business Name* Facility Street Address*					
City*	State*	Zip*			
Phone*	Extension	Fax			
Information about yo	<u> </u>				
Owner/Operator Name* Mailing Address*					
City*	State*	Zi p*			
Email*	Phone*	Extension			
Other Information					

The Consultant Login Request Form 2 contains similar information as the Owner/Operator Login Request Form with the addition of the Consultant information. Consultants must also obtain an Authorization Letter from the Facility Owner Operator and upload it with their request.

**NEW FACILITIES NOTE**: You will not be able to use the Portal until your Facility Information has been entered by the CUPA. Please contact the Environmental Health Department at 805-781-5544 for further details.

![](_page_6_Picture_0.jpeg)

Step 2. Login

Start as directed in Step 1, above.

Enter the EZSubmit Business Plan Submission Portal if not taken directly to this page.

Enter the Username and Pass Word that you received in your e-mail, click on the Login button.

You will see the following screen:

	DEE ENTERPRISES	S(555 DRUREY LANE /FA0008095)	Home	Change Password   Lo
County of San Luis Obispo Environmental Health Services (805)781-5544 Hazardous Materials Program Certified Unified Pro	gram Ag	CITY OF SAN LUIS OBISDO Fire Department (805)781-7383 Hazardous Materials Program Jency (CUPA)		
submission packages				subi
Click on a submission package name to get started.				
Name				
SLO Business Emergency Plan	Ŀ	Help and FAQ		
NOTE: This site contains certain features that are disal popup windows from opening in your browser. To acce browser to allow popups on this site and disable any in with the Yahoo and Google toolbars.	bled by popup ble ss these feature istalled popup bl	ockers that prevent extra s, please configure your ockers such as those included		
General Submission Help and Instructions				

Notice that your Facility Name, Street Address and Facility ID are shown at the top of the screen.

Click on the "SLO Business Emergency Plan" link to move to this screen:

![](_page_7_Picture_0.jpeg)

		TWEDDLE DEE ENTI	ERPRISES(55	5 DRUREY LANE /FA0008	095) Home	Change Password	L
	Certified Unifie	bispo 5)781-5544	3 m Age	CITY OF San LUIS OBIS Fire Department (805) Hazardous Materials Prog ncy (CUPA)	po 781-7383 jram		
	SLO Business Emergency Plan Click on the Facility ID# to open, view or edit a To view the reviewer's comments, click on the	<u>Select a different</u> a SLO Business Emer <i>Review</i> hyperlink	<u>t package</u> rgency Plan				
-	Facility ID#         Created         Last Modified         St           FA0008095         9/3/09         9/23/09         Unf	<b>ubmission Status</b> finished					

Click on the highlighted "Facility ID" to access the business plan that the CUPA has on file for you.

![](_page_8_Picture_0.jpeg)

# Step 3. Review Current Business Plan

Clicking on the highlighted "Facility ID" brings up the information for your specific business. It is organized so that the information in the Portal corresponds to what is required on each manually submitted form.

Business Plan information always opens with the **Business Activities Declaration** page open; this form is highlighted in orange on the left side of the screen. A To go through your entire plan, simply go down the menu on the left side of the screen, in order from first (top) to last (bottom).

	TWEDDLE DEE ENTERPRISE	S(555 DRUREY LANE /FA0008095)	Home   Change Password   Logou
Certified	Unified Program A	CITY OF SAN LUIS OBISDO Fire Department (805)781-7383 Hazardous Materials Program gency (CUPA)	
Step 1 of 3 Step 1: Complete the	forms Step 2: Add a cover sheet Step 3: Sub	mit your package Help and FAQ	Submission Log Submission Home
Click on the <i>Save Changes</i> Button to save the form. After	Business Activit (1)		Help
saving the form, click on the inks below to complete ALL the forms in your submission package	Asterisks (*) indicate required fields	Help is available by	clicking on the highlighted field label
<ul> <li>Business Activities Declaration</li> <li>Business Owner Operator (Form S)</li> <li>Chemical Inventory (Form I)</li> <li>Emergency Response Plan (Form E)</li> <li>Employee Training Program (Form T)</li> <li>Facility Maps</li> </ul>	I. Facility Identification Facility ID ≠* FA0008095 TWEDDLE DEE ENTERPRISES 555 DRUREY LANE SAN LUIS OBISPO CA 93401 Is the Business Name (DBA) or site address incorrect? Notify your agency by completing a Suggestion/Comment Form. EPA ID# CAL00055555	Laguno Lake Pork 1440 mark 1440 mark	Map Sat Hyb
<ul> <li><u>Change in Facility Owner /</u> <u>DBA / Address</u></li> <li>Tips</li> <li>Click on the Save Changes</li> <li>Button frequently. You will be</li> </ul>	Latitude* 35.259747 Longitude* -120.651195 Refresh	Data @2009 MXTEQ	©2009 Vahoo! Inc.
ogged out of the system after	Note: If you check any of the items below, y	you must submit a Business Owner/Operat	or Identification Form

Business Activities Declaration has two sections; Identification (and location) and Activities Declaration.

If the latitude and longitude fields have not been filled out, you must complete them before submitting your plan (see page 15 on ways to locate that information).

![](_page_9_Picture_0.jpeg)

	TWEDDLE DEE ENTERPRISES(555 D	RUREY LANE /FA0008095)	Home   Change Password   Logo
County of San Environmental Health Se Hazardous Materials Prog Certified	Luis Obispo rvices (805)781-5544 S gram Agen	Ity of an luis obispo Fire Department (805)781-7383 Hazardous Materials Program cy (CUPA)	
Step 1 of 3 Step 1: Complete the	forms Step 2: Add a cover sheet Step 3: Submit your	package Help and FAQ	Submission Log Submission Home
Click on the <i>Save Changes</i> Button to save the form. After saving the form, click on the	Business Owner O (1)		Help
links below to complete ALL the forms in your submission package	Asterisks (*) indicate required fields	Help is available by c	licking on the highlighted field label
Business Activities Declaration     Business Owner Operator     (Form S)     Chemical Inventory (Form	Facility ID#* FA0008095 Business TWEDDLE DEE ENTERPRISES Name* Site Address* 555 DRUREY LANE SAN LUIS OBIEPO CA 93401	I. IDENTIFICATION	
1) - <u>Emergency Response Plan</u> <u>(Form E)</u> - <u>Employee Training</u> Program (Form T)	Beginning         01/01/2005           Business         8057815544           Phone <sup>a</sup> 8555555555	Ending 12/31/2005 Date	
- Facility Maps     - Change in Facility Owner /     DBA / Address Tips     - Click on the Save Changes	Dun S Bradstreet Business Operator Name <sup>8</sup> Business Busines		
Button frequently. You will be logged out of the system after extended inactivity and any unsaved channes may be lost	Phone* Business Email		]

The next portion is the **Business Owner Operator** (Form S). **B** Note that this form is now highlighted in orange on the left side of your screen.

This is the gateway to all other forms in your business plan. You must be at the Business Owner Operator (Form S) before you gain the ability to open Chemical Inventory (Form I), Emergency Response Plan (Form E), Employee Training Program (Form T) and the Facility Maps.

The Business Owner Operator form has six sections:

- I. Identification (which is shown in the screen shot above). *Please note that the Beginning Date and Ending Date are the first and last days of the year for which you are submitting the plan.*
- II. Mailing Information, or the billing address. *This information cannot be changed in the Portal, it must be changed by the CUPA; if this information is incorrect please notify your inspector.*
- III. Business Owner. When the owner name or address has changed, be sure to submit the "Change in Facility Owner/DBA/Address" form, and notify your inspector.
- IV. Environmental Contact
- V. Emergency Contacts (primary and secondary contacts)
- VI. Certification

B

![](_page_10_Picture_0.jpeg)

		DRUREY LANE /FA0008095) Home   Change Password   Lo				
County of San Luis Obispo Environmental Health Services (805)781-5544 Hazardous Materials Program Certified Unified Program Agency (CUPA)						
Step 1 of 3 Step 1: Complete the s	forms Step 2: Add a cover sheet Step 3: Submit you	ur package Help and FAQ Submission Log Submission Hom				
Click on the <i>Save Changes</i> Button to save the form. After saving the form, click on the links below to complete <i>ALL</i> the forms in your submission package	Chemical Invento (2) Chemical Name	Help Expand Table View Expand Form V Chemical location				
Business Activities Declaration     Business Owner Operator     (Form S)     Chemical Inventory	oxygen Propane	chemical storeroom ground floor Southwest corner of property				
<ul> <li>(Form I)</li> <li>Emergency Response Plan (Form E)</li> <li>Employee Training</li> </ul>	Asterisks (*) indicate required fields	Help is available by clicking on the highlighted field label				
Program (Form T) - Facility Maps Change in Facility Owner / DBA / Address Tips • Click on the Save Changes Button frequently. You will be logged out of the system after extended inactivity and any	I. Facility Information Business TWEDDLE DEE ENTERPRISES Name* Facility ID=* FA0008095 Latitude 35.259747 Chemical storeroom ground Location Description	Longitue -120.651195				

Next in line is the **Chemical Inventory** (form I). **C** Note that this form name is now highlighted in orange on the left side of your screen.

There will be one Chemical Inventory form for each chemical. There is a grid at the top of this form that shows each chemical name. When you choose a chemical in the grid, the corresponding chemical details fill the form below the grid. *You can expand the form view if you don't want to see the grid of chemicals by selecting the "Expand Form View" button at the top right of the page*.

![](_page_11_Picture_0.jpeg)

	TWEDDLE DEE ENT	ERPRISES(555 DRUP	REY LANE /FA0008095)	Home	Change Password   Lo
County of San Environmental Health Ser Hazardous Materials Prog Certified	Luis Obispo vices (805)781-5544 ram Unified Progra	CIty San Fire Haza m Agency	y Of LUIS OBISPO Department (805)781-7 rdous Materials Program r (CUPA)	383	
Step 1 of 3 Step 1: Complete the	forms Step 2: Add a cover sheet <mark>St</mark>	ep 3: Submit your pacl	age Help and FAQ	Submission	Log Submission Hon
Click on the Save Changes	Emergency Respon., (1)				
Button to save the form. After	<u></u>				
saving the form, click on the links below to complete ALL the forms in your submission package	Asterisks (*) indicate required	fields	Help is available	by clicking on th	e highlighted field label
	I-A. BUSINESS IDENTIFICATI	ON DATA			
<u>Business Activities Declaration</u> - <u>Business Owner Operator</u> <u>(Form S)</u> - <u>Chemical Inventory (Form</u>	Business Name* TWEDDLE D <u>Site Address</u> 555 DRURE Facility ID FA0008095	DEE ENTERPRISES 🔹 EY LANE 🔹			
D - Emergency Response Plan (Form E) - Employee Training	If your business has Hazardous Materials Underground Storane	a license or permit from	any of the following agencie Air Pollution Control District	es, please indicate 9-203	the document number.
Program (Form T) - Eacility Maps  Change in Facility Owner / DBA / Address	Hazardous Waste NW-TD Generator		Responding Fire Dept CC Permit	D-VV	
Tips • Click on the Save Changes Button frequently. You will be	Please provide the following in companies in the event of an personnel in responding to a h company.	formation as it pertains amergency. This inform azardous materials en	to your business and its ation is provided for your ergency at your facility. Li	location. You are reference and to st the name and	e not required to notify th assist emergency respond phone number of the ut
logged out of the system after extended inactivity and any unsaved changes may be lost	Service* pge		Telephone* 55	5-5555	

**D** corresponds to the **Emergency Response Plan** (form E). This form is divided into several sections:

- I. A. Business Identification data and related permits
  - B. Owner Certification of data

II. Emergency Response Plans and Procedures

![](_page_12_Picture_0.jpeg)

	TWEDDLE DEE ENTERPRISES(555 DRUREY LANE /FA0008095) Home   Change Password   Lo
Certified	Luis Obispo ervices (805)781-5544 Ogram Clty Of San Luis OBISPO Fire Department (805)781-7383 Hazardous Materials Program Unified Program Agency (CUPA)
Step 1 of 3 Step 1: Complete th	e forms Step 2: Add a cover sheet Step 3: Submit your package Help and FAQ Submission Log Submission Hom
Click on the Save Changes Button to save the form. After saving the form, click on the links below to complete ALL the forms in your submission package Business Activities Declaration - Business Owner Operator (Form S) - Chemical Inventory (Form 1) - Emergency Response Plan	Employee Trainin (0)  Asterisks (*) indicate required fields  Facility ID* FA0008095  Business TWEDDLE DEE ENTERPRISES  Name*  Site 93401  Address*  Site Zip* 555 DRUREY LANE  Date*  Date*  Date
(Form E) - Employee Training Program (Form T) - Eacility Maps - Change in Facility Owner / DBA / Address	A. Describe the safety training for all employees in the event of a release or threatened release of hazardous     materials. This training shall include, but not be limited to the following: new employee training, annual training,     and safety meetings which cover familiarization with the facility's hazard communication program and Emergency     Response Plan/Contingency Plan.     Summarize the training for all employees that work with or come in contact with hazardous materials/hazardous     wastes. Describe how these employees are trained to avoid exposure.
Tips Oligitation the Court Changes	

The **Employee Training Program** (Form T) follows the Emergency Response Plan. It is divided into three sections. Section A is the most comprehensive, asking for specific training information. Section B requests information regarding the trainer; and Section C requests information regarding the location of the training records.

E

![](_page_13_Picture_0.jpeg)

	TWEDDLE DEE E	ENTERPRISES(555 DRUREY L	ANE /FA0008095)	Home	Change Password   Lo
County of San Environmental Health Se Hazardous Materials Prog Certified	Luis Obispo rvices (805)781-5544 rram Unified Progra	CIty o san lu Fire Depar Hazardous am Agency (	f "" IIS OBISPO tment (805)781-7383 Materials Program CUPA)		
Step 1 of 3 Step 1: Complete the	forms Step 2: Add a cover sheet	t Step 3: Submit your package	Help and FAQ	Submission L	og Submission Hom
Click on the Save Changes Button to save the form. After saving the form, click on the links below to complete ALL the forms in your submission package	Facility Maps (4)		Map Upload	Expand Ta	ble View Expand Form V
□ Business Activities Declaration - Business Owner Operator (Form S) - Chemical Inventory (Form I)	map 1				
- Emergency Response Plan (Form E) - Employee Training Program (Form T) - Facility Maps	Asterisks (*) indicate require <b>GUIDELINES</b> • Site maps are require during an emergence response plans. For	ed fields red to assist emergency respons y, assist you in the training of e larger sites, provide a general it	Help is available by e crews in locating haza mployees and assist you ayout.	clicking on the rdous materia u in drafting yo	highlighted field label Is, appraise the risk pur emergency

**Facility Maps** is the final portion of the business plan submittal. A facility may have more than one map, so this area has a grid (or table) to show multiple maps, just like with the Chemical Inventory section. *You can expand the form view if you don't want to see the table of maps by selecting the "Expand Form View" button at the top right of the page*.

[

![](_page_14_Picture_0.jpeg)

# Step 4. Submit New Business Plan

In addition to allowing ease of review of your Business Plan, the Portal will provide for submittal of a new, or an updated plan.

As in Step 3, the information will be accessed stepwise, A - F.

		TWEDDLE DEE ENTERPRISES	S(555 DRUREY LANE /FA0008095)	Home   Change Password   Logou
	Certified	Luis Obispo vices (805)781-5544 ram Unified Program Ag	CITY OF SAN LUIS OBISDO Fire Department (805)781-7383 Hazardous Materials Program Jency (CUPA)	
	Step 1 of 3 Step 1: Complete the	forms Step 2: Add a cover sheet Step 3: Subm	it your package Help and FAQ	Submission Log Submission Home
	Click on the <i>Save Changes</i> Button to save the form. After	Business Activit (1)		Help
	inks below to complete <i>ALL</i> the forms in your submission package	Asterisks (*) indicate required fields	Help is available by c	licking on the highlighted field label
Α	Business Activities	I. Facility Identification		
	Declaration       - Business Owner Operator (Form S)       C       - Chemical Inventory (Form I)	Facility ID =* FA0008095 TWEDDLE DEE ENTERPRISES 555 DRUREY LANE SAN LUIS OBISPO CA 93401	Laguna Laguna	Map Sat Hyb
	- Emergency Response Plan (Form E) - Employee Training	Is the Business Name (DBA) or site address Dincorrect? Notify your agency by completing a Suggestion/Comment Form.	Matomatine 2	
	Program (Form T) - Facility Maps - Change in Facility Owner (	CAL00055555	San Luis Ob McChean 22mi	spolo
	DBA / Address	Latitude* 35.259747	Data @2009 MAYIEQ	y ©2009 vanoo: Inc.
	Tips • Click on the Save Changes	Longitude* -120.651195 Refresh		
	Button frequently. You will be ogged out of the system after	II. <u>Activities Declaration</u> Note: If you check any of the items below, yo	ou must submit a Business Owner/Operato	r Identification Form

Please ensure that Latitude and Longitude are entered in decimals. If you need assistance for determining your lat/long, it can be obtained free online at:

<u>http://www.mashupsoft.com/maps/latlonlocator</u> or you can download Google Earth from:

http://earth.goggle.com/

Remember to check the appropriate boxes that correspond to your current business activities.

![](_page_15_Picture_0.jpeg)

**B** Your Business Owner Operator Form should be checked for accuracy and updated as needed Please keep the following in mind as you complete this information:

- I. Identification. Please note that the Beginning Date and Ending Date are the first and last days of the year for which you are submitting the plan.
- II. Mailing Information, or the billing address. This information cannot be changed in the Portal, it must be changed by the CUPA; if this information is incorrect please notify your inspector.
- III. Business Owner. When the owner name or address has changed, be sure to submit the "Change in Facility Owner/DBA/Address" form, or notify your inspector.
- IV. Environmental Contact
- V. Emergency Contacts (primary and secondary contacts)
- VI. Certification

Each chemical must have its own Chemical Inventory form. Please check the grid for a list of the chemicals currently listed in your business plan.

When you need to add chemical information, or delete chemicals, please see the appropriate buttons on the bottom of the Chemical Inventory screen.

vity and any es may be lost. hstalled popup ery form in the	Other Container Storage Pressure* Storage Temperature*
o the <u>Cover</u> extra notes, or <u>bmission</u> .	Finished? Go to the <u>Cover Sheet</u> to send extra notes, or <u>confirm your submission</u> . Print Save Changes Cancel Changes Add Chemical Inven Delete

(Remember, you can print the information you have submitted by selecting the Print button at the bottom of each page.)

An MSDS can be uploaded for each chemical; use the Upload button on each chemical page.

The Chemical Inventory form has fields for Map # and Grid # for the location of the selected chemical. It is recommended that you double check your maps to be sure that this information is accurate.

![](_page_16_Picture_0.jpeg)

The Emergency Response plan provides the option of uploading your existing emergency response plan in this section of the Portal by utilizing the Upload link provided.

Please be sure to reference each field required in the Portal with the corresponding page number where that information is found in your plan, so that we can easily compare the two for completeness.

Upload existing emergency response procedures

Upload

If you have **acutely hazardous materials above threshold planning quantities**, list (by name and address) adjacent neighboring businesses and residences, schools, hospitals, etc. **Include sensitive facilities (schools, hospitals and rest homes) within 1,000 feet (straight-line distance from your property line).** List telephone numbers for all businesses; fo apartment buildings, list manager's phone. Do not list telephone numbers for private residences.

Please check to be sure that your Employee Training Program accurately describes the training that is required for the business activities. Make any changes as appropriate.

You may have more than one facility map, each showing varying degrees of detail; please be sure to number each one appropriately. Maps must be labeled with the Facility Name, Address, FA# and date. Please utilize Form M Instructions to ensure your maps provide all necessary information; ensuring complete information will eliminate one possible reason for plan rejection.

To upload your map, please follow the Upload Instructions provided in the Portal. These instructions are based on the map existing as a PDF or JPG file, already on your computer. The map file may have any name on your computer, but it is very important that you follow the naming procedure outlined in step 1, below, for the uploaded map name (the two names should match).

If you need to upload more than one map, please be sure to "Save Changes" <u>after</u> each upload <u>and before</u> selecting "Add Facility Maps."

![](_page_17_Picture_0.jpeg)

UPLOADING A MAP	
For each map to be included in Hazardous Material Business Plan:	
<ol> <li>Input a name for the map. Map name must include Facility ID, site address, city, map # (Facility Name)(date of map) as in the following example: FA1234567, 9854 Johnson Ave, SLO, map 3 (Downtown Chevron) (2008)</li> <li>Click on the View (Unload button)</li> </ol>	
<ul> <li>A form will appear that allows you to upload a map from your computer. Follow the instruction on that form. When the upload is complete, you will return to this form.</li> <li>Click on the Save Changes button to save this form and it's associated map.</li> <li>For additional maps, click on Add button. Repeat as needed.</li> <li>Business TWEDDLE DEE ENTERPRISES</li> <li>Mame*</li> <li>Map Name*</li> <li>FA0008095, 555 DRUREY LA, SLO, MAP 3 (TWEDDLE DEE ENTERPRISE</li> <li>Map Upload* Once 1</li> </ul>	III
Finished? Go to the <u>Cover Sheet</u> to send extra notes, or <u>confirm your submission</u> . Print Save Changes Cancel Changes Add Facility Maps Dele	×

When you click on the Map Upload Open button, the following is a screen shot of what you will see. Follow the instructions to successfully upload your maps.

			delete
	Step	Action	Instructions
1	Select a File	Browse	Select a file from your computer by clicking on the Browse button. The name of the selected file will appear in the box.
2	Upload the File	Upload	Upload the selected file by clicking on the Upload button. Please limit attachments to 2 MByte in size. Images uploaded successfully will display at the top of the page. Other attachment types will indicate "File Uploaded".
3	Close This Window	Close	Click on the Close button to close this window and return to the form containing the uploaded attachment. MAKE SURE TO CLICK ON THE FORM'S SUBMIT AND/OR SAVE CHANGES BUTTON

The system allows you to add as many maps as needed; each map should be no more than 6MB in size.

As map numbers and grids are used for chemical locations on the chemical inventory form, please double check this information to ensure accuracy.

![](_page_18_Picture_0.jpeg)

When you have completed all information for your Business Plan and are ready to submit, follow the directions at the bottom left (in white) or bottom middle (blue) of the screen.

Finished? Go to the <u>Cover</u> <u>Sheet</u> to send extra notes, or <u>confirm your submission</u>.

Finished? Go to the <u>Cover Sheet</u> to send extra notes, or <u>confirm your submission</u>.

Step 2 of 3	Step 1: Complete the forms Step 2: Add a cover sheet Step 3: Submit your package Help and FAQ Submission Log Sub	omissi				
	Submission Cover Sheet: HMBP					
	Cover Sheet Instructions					
	Sometimes you may wish to send extra notes regarding the forms being submitted, but can find no place on the forms themselves for such notes. The "Submitter's Comments" field, on this cover sheet, provides a place for such notes. The cover sheet is submitted at the same time as the forms, and is stored together with the archived forms. Additional comments are not required for a submittal. Save your additional comments by clicking on the Save Comments button. To finish your submittal, click on the Submit button at the bottom of this page.					
	I. Attached Comments					
	Cover Page Comments					
	Save Comments and Submit					

This is the area where you may want to enter any comments or other information about your business. This cover sheet may also be left blank in the event there is nothing more you want to add. By clicking on "Submit" you will finish your submittal.

Prior to submission, it is a good idea to review the form contents of your submission to be sure that all completed forms are included. See screen shot below.

![](_page_19_Picture_0.jpeg)

Out and a star the set of the set					
. Submission Identification					
Submission Contents:	НМВР				
rom:	TWEDDLE	DEE ENTERPR	ISES(555 DRU	REY LANE /FA	0008095)
·o:	HMBEP Adı	ministrator			
Cover Sheet:					
T Fauna Cambanda					
1. Form Contents					
Form Name	Num	ber of Copies			
Business Activities Declaration	1				
Business Owner Operator (Form S	) 1				
Change in Facility Owner / DBA / A	Address 0				
Chemical Inventory (Form I)	2				
Emergency Response Plan (Form E	) 1				
Employee Training Program (Form	T) 0				
Facility Maps	4				

If the forms listed above correct, Confirm Submission by clicking on the button. You have successfully completed your electronic filing.

You will be notified via e-mail regarding acceptance or rejection of your Business Plan.

If your plan is rejected, you will receive notification of why it was rejected so that the errors may be corrected. You will only need to change those forms that are indicated in your rejection notice, as the work that you have completed remains in the Portal.