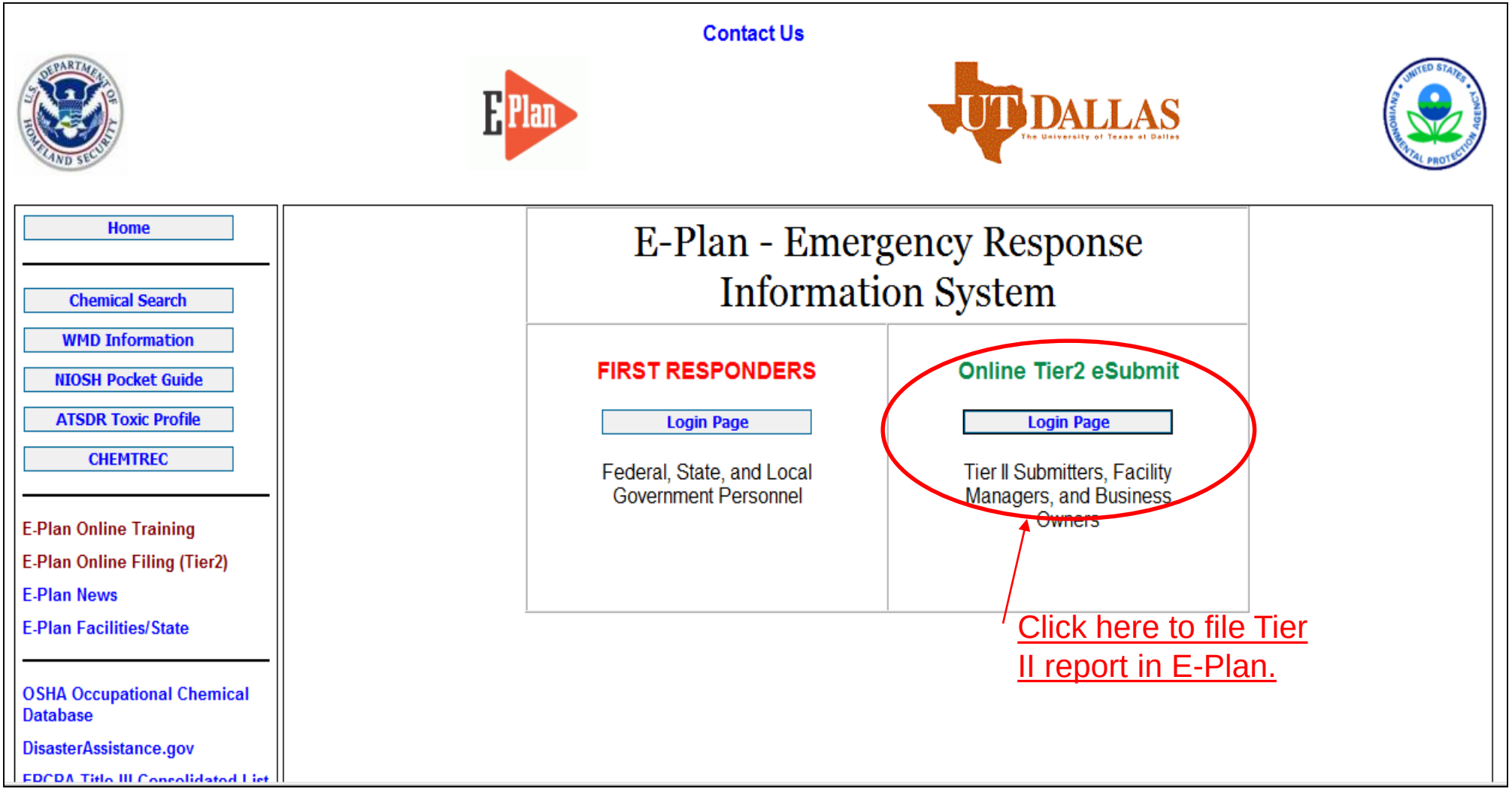
Annual E-Plan Tier II Filing Workshop

FLORIDA
S•E•R•C
STATE EMERGENCY
RESPONSE COMMISSION
FOR HAZARDOUS
MATERIALS

State of Florida Emergency Response Commission

https://erplan.net/eplan/home.htm

Getting Started



Welcome to *E-Plan's Online Tier II Reporting System*

This easy E-Plan online reporting system will allow you to create a report you can submit to your state to meet their requirement for filing of (SARA Title III) Tier II Emergency and Hazardous Chemical Inventory Reports. This system is for Tier II filing organizations to file their Tier II reports to the State each year. However, filing Tier II report via E-Plan may not fulfill the mandate per your state SERC and/or county LEPC and local fire department. Contact your State and County officials to see if they accept E-Plan as a form of electronic filing.

If you have comments or questions, please use the Contact Us button on any E-Plan website page.

Important Notes

1. **E-Plan webinar for Tier II Submitters (REGISTER**
   - ~~1/5/2017 10:00 AM EST (FULL),~~
   - ~~1/24/2017 1:00 PM EST (FULL),~~
   - 2/2/2017 10:00 AM EST,
   - 2/13/2017 1:00 PM EST, and
   - 2/22/2017 10:00 AM EST
2. Completed Tier II forms for reporting year 2016 are due by **March 1, 2017.**
3. For reporting year 2016, **UT Dallas** institutes **an administrative charge** for organizations that use E-Plan for creating/filing online Tier II reports. Please look at the **list** to see if a charge for creating/filing applies to each facility. Detailed instructions including how and where to pay online payment are available. Please view this step-by-step **guide**
4. For the 2016 reporting year, nine States (**i.e., Alabama, Florida, Georgia, Mississippi, Montana, New York, North Carolina, South Carolina, and Tennessee**) and several Counties (**i.e., Warren County (OH), Chesapeake City (VA), Hopewell City (VA), Patrick County (VA), Pittsylvania County (VA), Richmond City (VA), Smyth County (VA), Virginia Beach City (VA), and Waynesboro City (VA)**) accept E-Plan as an electronic form of Tier II reports.
5. If your State SERC and/or County LEPC's accept Tier2 Submit such as .t2s or Tier2 zip file electronically, you can create and export data via E-Plan. Please **Contact Us** to ask a question or report a problem.
6. Please refer to your state's web site and the **EPA's State Tier II Reporting Requirements and Procedures** for submission details.
7. E-Plan online Tier II training video. Click **here** to watch.

Admin fee paid by State of Florida

Sign In

have already registered for an
enter your Access ID and
l in the boxes below and Sign
ess or update your account
ta.

Access ID

Forgot Access ID

••••••••

Forgot Password

Sign In

New to E-Plan? Create An Account

Please Note

Do not create a new account if your company filed last year.

E-Plan Online Facility Filing

A new Access ID will be generated in the next page for your submission. For confidentiality purposes please provide a password for this Submission. This password will protect your submission against unauthorized access.

Password:

Confirm Password:

Name of Submitter:

Email address

Please enter the below verification code (characters are case sensitive)

w4@D-

Continue

| Contact Us | FAQ | E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE

Fill out above information and a unique Access ID will be sent to the email provided.

E-Plan Online Filing Submission Management

Access ID: 1043644 (Firefly Shipworks, LTD., Hera)

Florida filers don't click on this tab.

EPCRA 312 (Tier2) | EPCRA 302

ENTER NEW DATA/ RETRIEVE OLD DATA

Use this function to enter data for a new year or make changes to data of an year already submitted

- Select a year to file/retrieve Tier II data:
  Select Filing Year
- Currently filed Years :

  2017

Continue

COPY DATA

Use this function to copy data from a submitted year to any year up to the current filing year

Note:
Copy function will transfer all previously filed Tier II data and site plans

Select 2016

From: Previous Year

To: Filing Year

Select 2017

Copy Data

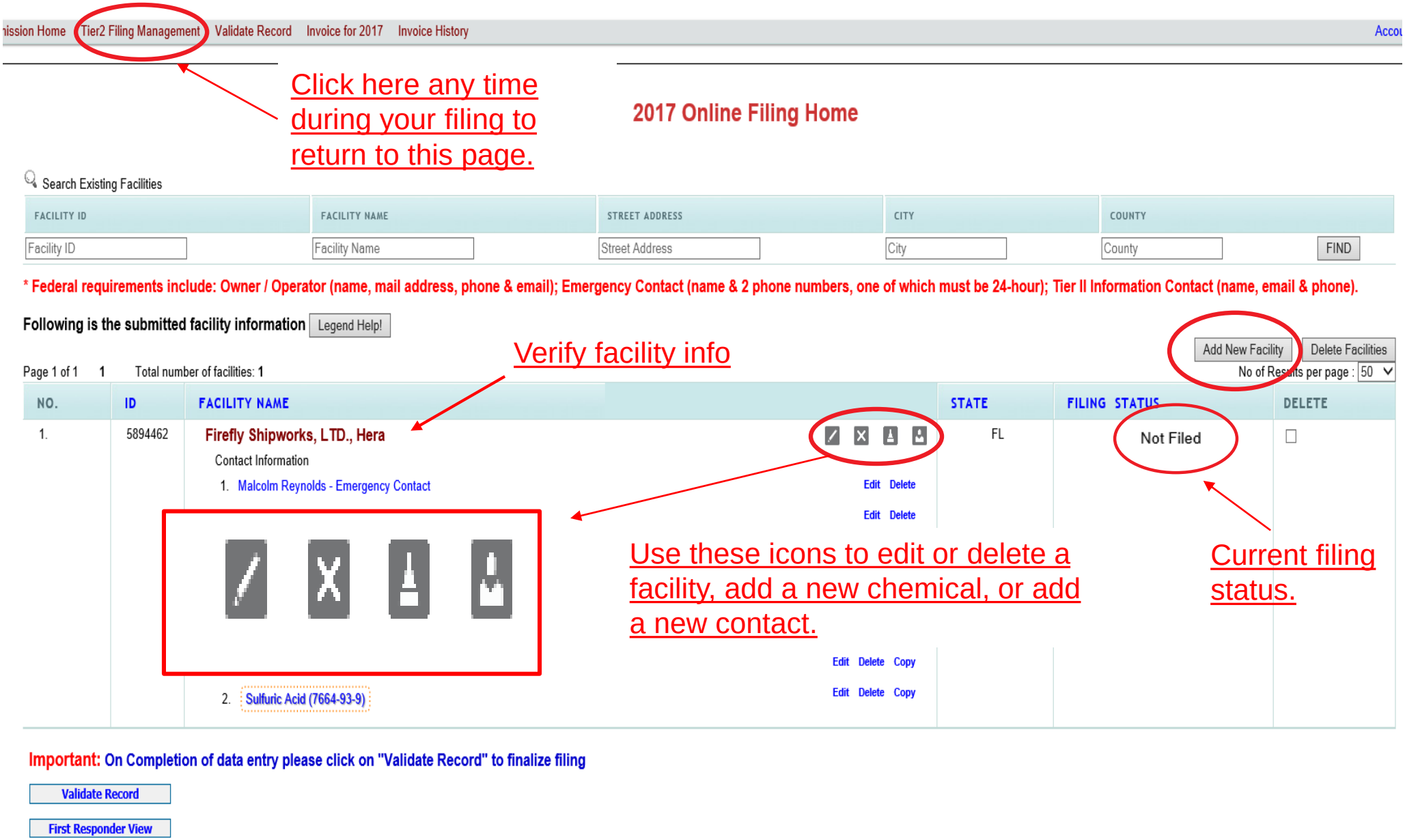
IMPORT TIER2

Use this function to import an existing Tier2 '.zip', Tier2 '.t2s', or CAMEO '.zip' file.

- Note that the Tier2 '.zip' or Tier2 '.t2s' file should contain up to ten (10) data files and CAMEO '.zip' file should contain 16 data files.
- These data files should have comma-separated values and '.mer' file extensions or xml tagged values and '.xml' file extension.

Import 'zip / t2s'

Tier II Filing Management



Confirm Facility Information

Facility Information

* Fields are Federal mandatory fields
** Fields are E-Plan mandatory fields

Remember to press the **Save & Continue** button after updating any information on this page. Otherwise, the changes will not be saved.

Facility Details

Facility Name *	Firefly Shipworks, LTD., Hera
Department	
Company Name **	Allied Spacecraft Corporation
Facility Email	
Fire District	
Report Year	2017
Facility Phone Number	850-555-5555
Facility Notes	

Copy company name to other facilities

Add to notes if facility:

1. Has been sold
2. Changed Name
3. Chemicals were removed
4. No longer operational.

Physical Address

Street *	2555 Shumard Oak Blvd.
City *	Tallahassee
State *	FL

Confirm Facility Information (cont'd.)

Mailing Address [Copy mailing address to other facilities]

☐ Check if Mailing Address same as Physical Address. Enter Mailing Address below if different.

Street	2555 Shumard Oak Blvd.
City	Tallahassee
State	FL
ZIP	32399
Country	USA

Location

[Lookup Lat/Long] [Validate Lat/Long]

Latitude *	30.3865175
Longitude *	-84.23274509999999
USNG	16R GU 65906 64866
Manned *	◉ Yes ○ No
Maximum No. of Occupants *	800

Note: Maximum No. of Occupants must be more than 0 if you select "Ye

Type of Facility *

- ◉ Yes ○ No ---- EPC
- ○ Yes ◉ No ---- EPC
- ◉ Yes ○ No ---- EPC
- ○ Yes ◉ No ---- EPC
- ○ Yes ◉ No ---- CAA

http://129.110.202.27/tier2/onlinefiling/utilities/validationMap.htm?lat=30.3865175&longitude=- - l...

http://129.110.202.27/tier2/onlinefiling/utilities/validationMap.htm?lat=30.3865175&longitude=-84.23274509999999

Click and drag the marker to correct Latitude/Longitude.

Current position: [Click to update Lat/Long]

30.3865175, -84.23274509999999

Closest matching address:

2555 Shumard Oak Blvd, Tallahassee, FL 32311, USA

Submission

I certify under penalty of law that I have p ... ed on m
responsible for obtaining the information, I belie

Name and official title of owner/operator OR
Owner/Operator's authorized representative

Signature * Wendy K Reynolds

[Save & Continue] [Reset] [Cancel]

Confirm Facility Information (cont'd.)

Mailing Address [Copy mailing address to other facilities]

☐ Check if Mailing Address same as Physical Address. Enter Mailing Address below if different.

Street	2555 Shumard Oak Blvd.
City	Tallahassee
State	FL
ZIP	32399
Country	USA

Location

[Lookup Lat/Long] [Validate Lat/Long]

Latitude *	30.3865175
Longitude *	-84.23274509999999
USNG	16R GU 65906 64866
Manned *	◉ Yes ○ No
Maximum No. of Occupants *	800

Note: Maximum No. of Occupants must be more than 0 if you select "Yes" on Manned.

Type of Facility *

- ◉ Yes ○ No ---- EPCRA 302 Facility (Emergency Planning) More Info
- ○ Yes ◉ No ---- EPCRA 311 Facility More Info
- ◉ Yes ○ No ---- EPCRA 312 Facility (Tier2) More Info
- ○ Yes ◉ No ---- EPCRA 313 Facility (TRI) More Info
- ○ Yes ◉ No ---- CAA 112 Facility (RMP-Chemical Accident Prevention) More Info

Submission

I certify under penalty of law that I have personally examined and am familiar with the information contained in this submission, and that based on my inquiry of those individuals responsible for obtaining the information, I believe the information submitted is true, accurate, and complete.

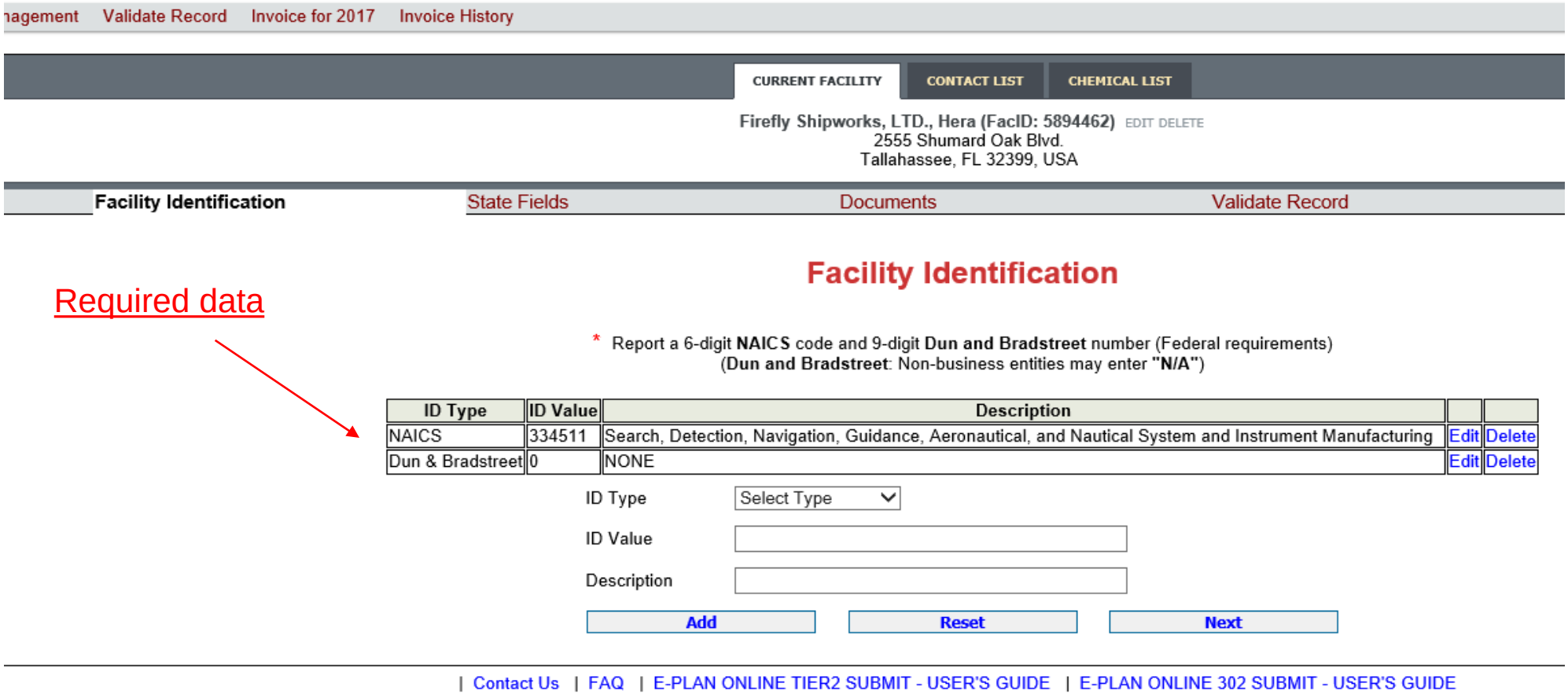
Name and official title of owner/operator OR
Owner/Operator's authorized representative

Signature * Wendy K Reynolds

Signing the Tier II report

[Save & Continue] [Reset] [Cancel]

Confirm Facility Information (cont'd.)



Required data

To find your Dun and Bradstreet number go here:
http://mycredit.dnb.com/search-for-duns-number/

To find your 6-digit NAICS code go here:
http://www.naics.com/search/

Confirm Facility Information (cont'd.)

Validate Record Invoice for 2017 Invoice History

CURRENT FACILITY | CONTACT LIST | CHEMICAL LIST

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

Facility Identification | State Fields | Documents | Validate Record

State Applicable Fields

Does your facility have a written emergency response plan? Yes

Does your facility have a hazardous materials response team? Yes

Does your local fire department have an up-to-date pre-plan for your facility? Yes

Update & Continue | Reset

| Contact Us | FAQ | E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE | E-PLAN ONLINE 302 SUBMIT - USER'S GUIDE

Confirm Facility Information (cont'd.)

Document Upload

* Fields are Federal mandatory fields

- ☐ I have submitted a site plan.
- ☐ I have attached a description of dikes and other safeguard measures.
- ☐ I have attached a list of site coordinate abbreviations.

No.	Document ID	File Name	File Type	File Category	File Description	Download	

File types: PDF, DOC, JPG are only allowed.
If entering a link, choose File type as Link
and put the link as http://somewebsite in the description field.

All Fields are Mandatory

File Type: File

File Category: SDS

File: Browse... Max file size 9 Mb

File Description

Upload | Next (Add Contact)

Please upload a site drawing. You may also add SDSs, SODs, and other documents.

Confirm Contact Information

	FACILITY NAME	STREET ADDRESS	CITY	COUNTY
	Facility Name	Street Address	City	County

clude: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of which must be 24-hour); Tier II Information Conta

d facility information Legend Help!

ıber of facilities: 1

FACILITY NAME	STATE	FILING STATUS
Firefly Shipworks, LTD., Hera	FL	Not Filed

Contact Information

1. Malcolm Reynolds - Emergency Contact — Edit Delete
2. Zoe Washburn - Fac. Emergency Coordinator — Edit Delete
3. Firefly Shipworks, LTD., Hera - Facility Phone — Edit Delete
4. Allied Spacecraft Corporation - Owner / Operator — Edit Delete
5. Kaylee Frye - Tier II Information Contact — Edit Delete

Chemical Information

1. Lead (7439-92-1) — Edit Delete Copy
2. Sulfuric Acid (7664-93-9) — Edit Delete Copy

Click on name or edit to access contact info.

Confirm Contact Information (cont'd.)

Contact Information

Malcolm Reynolds (Emergency Contact)

*** Federal requirements include: Owner / Operator (name, mail address, phone & email)**
Emergency Contact (title, name & 2 phone numbers, one of which must be 24-hour)
Tier II Information Contact (title, name, email & phone).

* Fields are mandatory

Required data

Title *	Captain
Last Name or Business Name *	Reynolds
First Name *	Malcolm
Street Address	
City	
County	
State	Select State
ZIP	
Country	USA
Email *	m.reynolds@alliedspacecraftcorp.com

Save & Continue | Cancel

Confirm Contact Information (cont'd.)

Minimum Federal requirements.

Contact Phone Information

Malcolm Reynolds (Emergency Contact)

***Federal requirements include: Owner / Operator (name, mail address, phone & email)**
Emergency Contact (title, name & 2 phone numbers, one of which must be 24-hour)
Tier II Information Contact (title, name, email & phone).

Phone Type	Phone Number	
Work	850-555-5555	Edit Delete
24-hour	850-555-5500	Edit Delete

Phone Type [Select Phone Type]

Phone Number [ ]

[Add] [Reset] [Next]

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Confirm Contact Information (cont'd.)

CURRENT FACILITY | CONTACT LIST | CHEMICAL LIST

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

Facility Association | Documents | Validate Record

Associate Contact With Facility

Malcolm Reynolds (Emergency Contact)

Note: You can associate "**Malcolm Reynolds**" with other facilities such that the contact information can be copied to the other associated facilities.

Facility Name	Contact Type		
(FacID:5894462) Firefly Shipworks, LTD., Hera	Emergency Contact	Edit	Delete

☐ Select All Facilities and Contact Type Select Contact Type

☐ (FacID:5894462) Firefly Shipworks, LTD., Hera (Current facility)

Add | Reset | Next

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If you have more than one facility, you may add the same Contact person by selecting specific facilities and the drop down to select the specific contact type and then click Add.

If you only have one facility, click Next.

Confirm Chemical Information

2017 Online Filing Home

isting Facilities

	FACILITY NAME	STREET ADDRESS	CITY	COUNTY
	Facility Name	Street Address	City	County

equirements include: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of which must be 24-hour); Tier II Information Contact (name, email &

is the submitted facility information Legend Help!

Add New Facility

1 Total number of facilities: 1

No of Results p

ID	FACILITY NAME	STATE	FILING STATUS	DELE
5894462	Firefly Shipworks, LTD., Hera	FL	Not Filed	

Contact Information

1. Malcolm Reynolds - Emergency Contact — Edit Delete
2. Zoe Washburn - Fac. Emergency Coordinator — Edit Delete
3. Firefly Shipworks, LTD., Hera - Facility Phone — Edit Delete
4. Allied Spacecraft Corporation - Owner / Operator — Edit Delete
5. Kaylee Frye - Tier II Information Contact — Edit Delete

Chemical Information

1. Lead (7439-92-1) — Edit Delete Copy
2. Sulfuric Acid (7664-93-9) — Edit Delete Copy

Click on either link to access chemical information.

Confirm Chemical Information (cont'd.)

Chemical Information

* Fields are Federal mandatory fields
** Fields are E-Plan mandatory fields

Remember to press the **Save & Continue** button after updating any information on this page. Otherwise, the changes will not be saved.

Chemical Details

CAS Number ** 7664939 Lookup Help

Chemical Name * Sulfuric Acid Lookup EHS

☑ EHS * ☐ Trade Secret

Days on site * 365

Chemical information identical to previous year ☐

Note that sulfuric acid is an extremely hazardous substance

Physical State *(Check all that apply)

☐ Pure ☑ Mixture

☐ Solid ☑ Liquid ☐ Gas

Confirm Chemical Information (cont'd.)

Physical Hazards *(Check all that apply)

Copy chemical hazards to other chemicals

- [ ] Explosive
- [ ] Flammable (gases, aerosols, liquids, or solids)
- [x] Oxidizer (liquid, solid or gas)
- [x] Self-reactive
- [ ] Pyrophoric (liquid or solid)
- [ ] Pyrophoric Gas
- [ ] Self-heating
- [ ] Organic peroxide
- [x] Corrosive to metal
- [ ] Gas under pressure (compressed gas)
- [ ] In contact with water emits flammable gas
- [ ] Combustible Dust

Confirm Chemical Information (cont'd.)

Health Hazards *(Check all that apply)

- [x] Acute toxicity (any route of exposure)
- [x] Skin corrosion or irritation
- [x] Serious eye damage or eye irritation
- [ ] Respiratory or skin sensitization
- [ ] Germ cell mutagenicity
- [ ] Carcinogenicity
- [ ] Reproductive toxicity
- [ ] Specific target organ toxicity (single or repeated exposure)
- [ ] Aspiration hazard
- [ ] Simple Asphyxiant

- [ ] Hazard Not Otherwise Classified

Confirm Chemical Information (cont'd.)

Quantity

Always enter amounts in pounds

Max Daily Amount Code	Select Max Code
Maximum Daily Amount in pounds*	8,000
Avg Daily Amount Code	Select Avg Code
Average Daily Amount in pounds*	8,000
Maximum Amount in largest container (pounds)	
Below Reporting Thresholds †	

† Note: Voluntary reporting of amounts below reporting requirement thresholds. **(This checkbox does not apply to most submissions.)**
By checking this box, you are certifying that this chemical is not of a reportable quantity under **Section 312 of the Emergency Planning and Community Right to Know Act of 1986**
chemicals, only check this box if the quantity is below the TPQ or 500 lbs., whichever is less. (For a list of EHS chemicals and TPQs, please reference the EPA's **Consolidated List o**
hazardous substances (anything with a MSDS), only check this box if the quantity is below 10,000 lbs. In addition, this box may be checked if the chemical you are reporting is grantec
exemption from Tier II reporting under 40 CFR 370.10-13.

Save & Continue | **Reset** | **Cancel**

Confirm Chemical Information (cont'd.)

CURRENT FACILITY | CONTACT LIST | CHEMICAL LIST

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

Mixture Components | State Fields | Documents

Chemical Storage Locations

Existing location

Sulfuric Acid (CAS#: 7664939)

Location	Maximum Amount	Storage/Pressure/Temperature Types	
Warehouse	8000.0 , pounds	Battery / Ambient pressure / Ambient temperature	Edit Delete

Storage Locations

Storage Type* Select Storage Type

Pressure Type* Select Pressure Type

Temperature Type* Select Temperature Type

Location* ☐ Confidential

Maximum amount at Location Select unit

Add | Reset | Next

Can add multiple locations as needed

| Contact Us | FAQ | E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE | E-PLAN ONLINE 302 SUBMIT - USER'S GUIDE

Confirm Chemical Information (cont'd.)

CURRENT FACILITY | CONTACT LIST | CHEMICAL LIST

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

xture Components | State Fields | Documents

Chemical Components

Sulfuric Acid (CAS#: 7664939)

Component Chemical Name	CAS Number	Max Code	Percentage	

Mixture Components

CAS Number [ ] Lookup
Help

Component [ ] Lookup
EHS

EHS * ☐

Physical State ☐ Gas ☐ Liquid ☐ Solid

Maximum Amount Code Select Max Code

Percentage [ ] [ ]

Add | Reset | Next

Adding a Mixture Component is optional.

Either Add the Mixture Component by entering the necessary fields and clicking Add or if there is no Mixture Component, click Next.

Confirm Chemical Information (cont'd.)

CURRENT FACILITY | CONTACT LIST | CHEMICAL LIST

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

mponents | State Fields | Documents

State Applicable Fields

Sulfuric Acid (CAS#: 7664939)

Frequency of Shipments: Annually

Mode of Shipments (Check all that apply):

- Highway ☐
- Rail ☐
- Pipeline ☐
- Ship or Barge ☐
- Other ☑

Update & continue | Reset

| FAQ | E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE | E-PLAN ONLINE 302 SUBMIT - U

Frequency and Mode of Shipments refers to how often chemicals are shipped to the site.

Validate Record

2017 Online Filing Home

Search Existing Facilities

FACILITY ID	FACILITY NAME	STREET ADDRESS	CITY	COUNTY
Facility ID	Facility Name	Street Address	City	County

* Federal requirements include: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of which must be 24-hour); Tier II Information Contact (nam

Following is the submitted facility information Legend Help!

Add New

Page 1 of 1 **1** Total number of facilities: **1**

NO.	ID	FACILITY NAME	STATE	FILING STATUS
1.	5894462	**Firefly Shipworks, LTD., Hera** Contact Information 1. Malcolm Reynolds - Emergency Contact — Edit Delete 2. Zoe Washburn - Fac. Emergency Coordinator — Edit Delete 3. Firefly Shipworks, LTD., Hera - Facility Phone — Edit Delete 4. Allied Spacecraft Corporation - Owner / Operator — Edit Delete 5. Kaylee Frye - Tier II Information Contact — Edit Delete Chemical Information 1. Lead (7439-92-1) — Edit Delete Copy 2. Sulfuric Acid (7664-93-9) — Edit Delete Copy	FL	Not Filed

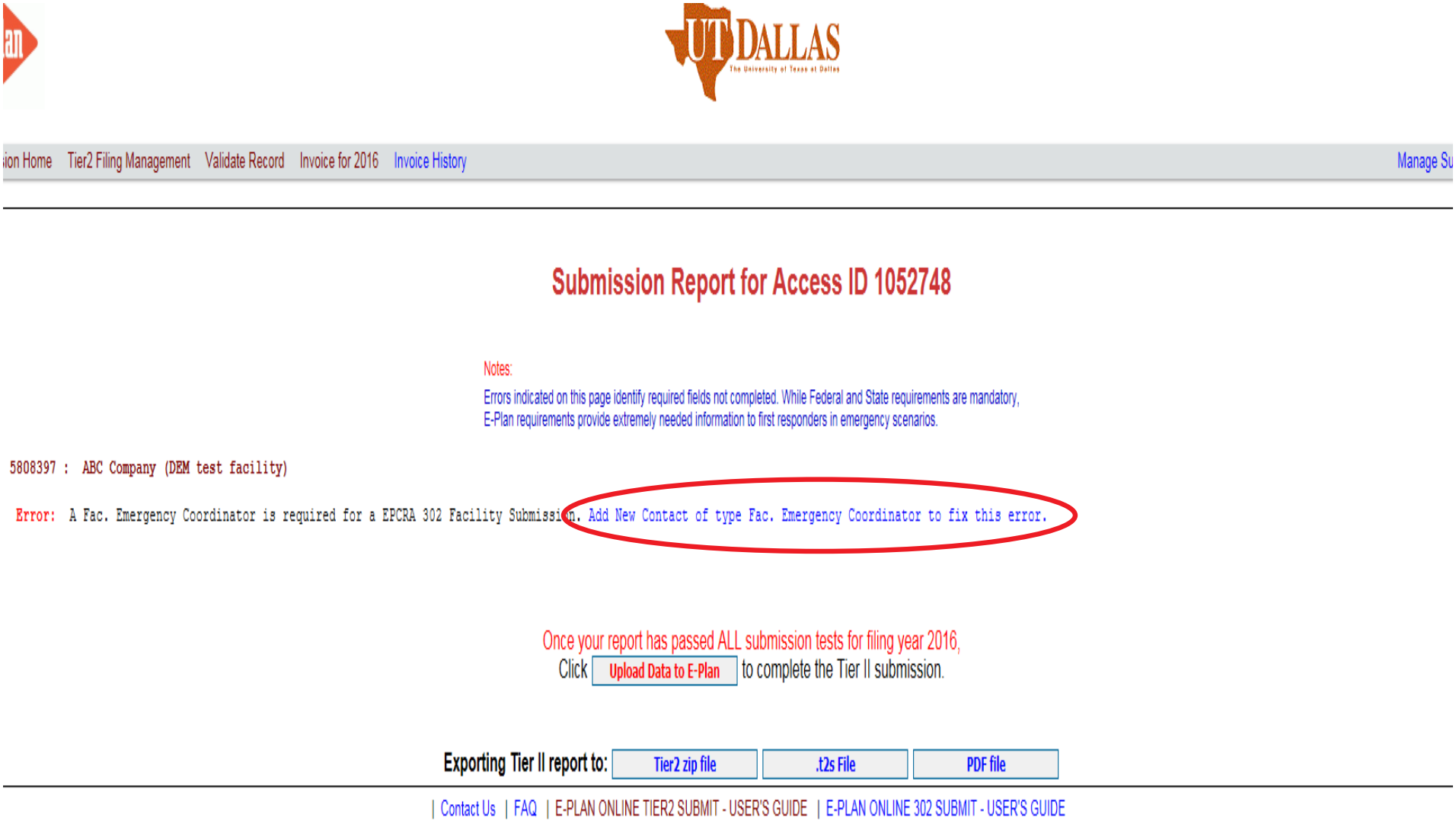
Current filing status

Important: On Completion of data entry please click on "Validate Record" to finalize filing

Validate Record

First Responder View

Validate Record (cont'd.)



If an error message occurs, click the blue link next to the requirement. This will bring you to the page necessary to satisfy the requirement.

Validate Record (cont'd.)

Submission Report for Access ID 1043644

Notes:
Errors indicated on this page identify required fields not completed. While Federal and State requirements are mandatory, E-Plan requirements provide extremely needed information to first responders in emergency scenarios.

:62 : Firefly Shipworks, LTD., Hera

ıical : Sulfuric Acid(7664939)
Error: At least one hazard must be checked for Chemical Submission. Edit chemical and check at least one hazard to fix this error (See below).

Physical Hazards:

- ☐ Explosive
- ☐ Flammable (gases, aerosols, liquids, or solids)
- ☐ Oxidizer (liquid, solid or gas)
- ☐ Self-reactive
- ☐ Pyrophoric (liquid or solid)
- ☐ Pyrophoric Gas
- ☐ Self-heating
- ☐ Organic peroxide
- ☐ Corrosive to metal
- ☐ Gas under pressure (compressed gas)
- ☐ In contact with water emits flammable gas
- ☐ Combustible Dust

Health Hazards:

- ☐ Acute toxicity (any route of exposure)
- ☐ Skin corrosion or irritation
- ☐ Serious eye damage or eye irritation
- ☐ Respiratory or skin sensitization
- ☐ Germ cell mutagenicity
- ☐ Carcinogenicity
- ☐ Reproductive toxicity
- ☐ Specific target organ toxicity (single or repeated exposure
- ☐ Aspiration hazard
- ☐ Simple Asphyxiant

You will also get an error if you do not select hazards. This can be corrected ON THIS PAGE and it will live update the record.

Validate Record (cont'd.)

Submission Report for Access ID 1043644

Notes:

Errors indicated on this page identify required fields not completed. While Federal and State requirements are mandatory, E-Plan requirements provide extremely needed information to first responders in emergency scenarios.

FacID 5894462 : Firefly Shipworks, LTD., He

Facility Passed all Checks

Once your report has passed ALL submission tests for filing year 2017,
Click Upload Data to E-Plan to complete the Tier II submission.

Exporting Tier II report to: Tier2 zip file | .t2s File | PDF file

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With all errors corrected, the Tier II data can be uploaded to E-Plan.

Validate Record (cont'd.)

Submit Facility Information

d like to submit to the E-Plan database. Once you submit, these facilities and their information will be available to the First Responders through the E
information with E-Plan (status shows as Filed) and make any further changes to the Facility/Contact/Chemical information, you DO NOT have to re-
rst Responders and the State officials. However, you will not get a confirmation email for the changes. To print the changed information, click on Prin
if **(1) A facility is linked with an invoice, (2) Filing Status is "Filed"** or **(3) Validation status is "Not Pass."**
ready linked to an invoice, please click the "Invoice for 2016 " tab above.
ıt your Consolidated Annual Registration Form, please have available your **Federal Employer Identification (FEI) No.** and credit card information if

Select facilities to upload.

Access ID: 1052748 (sam brackett)

☐ Select all	Facility ID	Facility Name	State	Filing Status	Validation Status	Invoice ID
☑	5894462	Firefly Shipworks, LTD., Hera	FL	Not Filed	Pass	

Reporting Authority Emails:
(Up to 5 cc emails)

Note that you can print a draft copy Tier II report before final upload.

Submit | Print PDF

Consolidated Annual Registration Form

Note all fields are required.

FLORIDA STATE EMERGENCY RESPONSE COMMISSION (SERC) CONSOLIDATED ANNUAL REGISTRATION FORM

Owner/Operator Information

Filing Year	2017
Company Name *	
Business Mailing Address (Street or P.O. Box) *	
City *	
State *	FL
Zip *	
Federal Employer Identification (FEI) No. *	
SIC Code *	
NAICS Code *	
Telephone *	
Contact Person *	
Title *	

Fee Calculation and Payment

Registration Fee

Please answer questions below to calculate the filing fees applicable for your submission

	Is your facility a governmental body (federal, state, country or local) facility?	○ Yes	◉ No
1.	Is your facility regulated by the Department of Environmental Protection for storage tanks (Section 376.303 of the Florida Statutes)?	◉ Yes	○ No
4.	Does your facility have an extremely hazardous substance at or above threshold planning quantity?	◉ Yes	○ No
5.	Is your facility's primary function to grow crops or raise farm animals?	○ Yes	◉ No

Note the fee rate is determined by these answers.

Calculated Fees

Enter Number of employees (statewide)	0
Filing Rate	$ 10.00
Filing Fees (Minimum $25 , Maximum $2000)	$ 0

Calculate Reset

Enter # of employees, then click on "Calculate"

Click 'Submit' to pay online.

Submit

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Online Payment

Please click Here to process an online payment.

Enter Payment Information

Your account details are shown below. Please enter details of the payment you want to make, and then select **Continue** to proceed.

Enter Payment Information

Retrieved Account Details

Account Number : **1030631**

Email Address * :

Funding Source Details

Payment Method* : Card Account

Name on Card* :

Card Number* :

Expiry Date* :

(mm/yy)

Card CVV No* :

What is this?

Address Line 1* :

Address Line 2 :

City* :

State* : -Select-

Country* : USA Please enter your Country

Zip* : -

Enter Payment Details

Payment Date: **10/18/2017**

Payment Amount* :

- ○ Current Balance ($2,000.00) This is Current Balance as of today
- ○ Minimum Payment Amount Due ($2,000.00) This is the Minimum Amount Due based on your statement
- ○ Payment Amount Past Due ($0.00) This is the Past Amount Due based on your statement
- ○ Current Statement Balance Amount ($2,000.00) This is Current Statement Balance based on your statement

Your Account will not be charged until the Payment is confirmed on the next page

Cancel Continue

tory

Invoice - Wendy Reynolds (1043644)

Link to print copy of the fee form.

Florida State Filing

Download Consolidated Annual Registration Form

State Emergency Response Commission
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100

Telephone (850) 413-9970 or (800) 635-7179 (Florida only)

Email confirmation – Tier II Filed

eplan@utdcsepi.org | Brackett, Sam

E-Plan's Online Tier2 Data Submission Receipt

Tier2Facilities.pdf
15 KB

PDF copy of the Tier II Report.

Dear sam brackett:

THIS IS AN AUTOMATED RESPONSE. PLEASE DO NOT REPLY TO THIS MESSAGE.

Your Tier II data was successfully processed by the E-Plan's Online Tier II Reporting System at The University of Texas at Dallas as shown in the attached E-Plan's Online Tier2 Data Submission Report.

Following table lists the current status of your facilities created under Access ID **1052748**

Facility Id	Facility Name	State	Filing Year	Filing Status	First Submit Date
5808397	ABC Company (DEM test facility)	FL	2016	Filed	Thu Jan 05 17:52:38 UTC 2017

If you need assistance, please contact the E-Plan Admin Team via the "Contact Us" button at https://tier2.erplan.net.

Best regards,
E-Plan Admin Team

State Facility Representatives

Sam Brackett 850-815-4323 Sam.Brackett@em.myflorida.com Call if your NAICS code begins with: 62, 22, 92, 81, 21, 72	Wendy Reynolds 850-815-4317 Wendy.Reynolds@em.myflorida.com Call if your NAICS code begins with: 11, 31, 33, 44, 45, 52, 54, 55, 56, 61, 71
Trisha Tidwell 850-815-4347 Call if your NAICS code begins with: 23, 42, 51, 53, 48, 49	**Your NAICS code can be found at:** **http://www.naics.com/search/**