

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

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.

Florida facility fees paid by DEM

Important Notes

- For reporting year 2014, UT Dallas institutes an administrative charge for organizations that use E-Plan for creating/filing online Tier II reports. Please look at the <u>list</u> 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
- If your state accepts Tier2 Submit such as t2s or Tier2 zip file, you can create and export data via E-Plan. Please <u>Contact Us</u> to ask a question or report a problem.
- 4. What's changed in the E-Plan for filing year 2014?
 - North Carolina: Hazardous materials facility fees will begin to be collected January 1, 2015. Guidance is available on NCEM's Tier II website at https://www.nccrimecontrol.org/Index2.cfm?a=000003, 000010, 000064, 000391
 - Alabama now accepts on-line filing of Tier II reports using E-Plan.
- Please refer to your state's web site and the EPA's State Tier II Reporting Requirements and Procedures for submission details.
- 6. Facilities in Florida: The filing for 2014 will start after January 1, 2015

Sign In If you have already registered for an account, enter your Access ID and password in the boxes below and Sign In to access or update your account and data. Access ID Forgot Access ID Forgot Password Sign In New to E-Plan? Create An Account

EPlan	The Delivereity of Texas at De
	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.



Submission Home





Filing Management



nation	Facility Identific	ation	State Fields		Documents	Validate Record
					Facility Information	on
					* Fields are Federal mandatory fi ** Fields are E-Plan mandatory fi	elds elds
			Remember to press the	Save & Continue	button after updating any information	ion on this page. Otherwise, the changes will not be saved.
	Facility Details					
	Facility Name *	Pirate Paul's Ship Yard				
	Department					
	Company Name **	Pirate Paul's Ship Yard				
	Facility Email					
	Fire District					
	Report Year	2014				
	Facility Phone Number		$\hat{}$			
	Facility Notes					
	Physical Address	DL L M				
	Street 111 Walk th	e Plank Way				
	City SEBRING					

Mailing Address							
Check if Mailing Address same as Physical Address. Enter Mailing Address below if different.							
Street							
City							
State Select State V							
ZIP							
Location Lookup Lat/Long							
Latitude * 27.9981							
Longitude * -82.728100							
USNG 17R LL 30071 98195							
Manned *							
Maximum No. of Occupants * 12							
Note: Maximum No. of Occupants must be more than 0 if you select "Yes" on Manned.							
Type of Facility * O Yes Info O Yes Info O Yes Info O Yes 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 Owner/Operator's authorized representative	OR			
Signature *	Pirate Paul, Captain				
		Save & Continue	Reset	Cancel	



Street	Mailing Address □ Check if Mailing Address same as Physical Address. Enter Mailing Address below if different.								
	Street								
City	City								
State Select State V	State Select State V								
ZIP	ZIP								

Location Lookup Lat/Long	Validate Lat/Long
Latitude * 27.9	9981
Longitude *	.728100
USNG 17R	R LL 30071 98195
Manned *	Yes O No
Maximum No. of Occupants * 12	
Note: Maximum No. of Occupants parst be mor	ore 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 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 * Pirate Paul, Captain Save & Continue Reset Cancel

Facility Information	Facility Identification State	Fields	Document	S	Validate	Record
		Facili	ity Iden	tificatio	on	
	* Report a	NAICS code and E Oun and Bradstree)un and Bra t: Non-busine	dstreet numb ess entities m	er (Federal ay enter "N	requirement) /A'')
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		Florida Facility ID	37865		Edit Delete	e
		SIC	5511		Edit Delete	9
		NAICS	44111		Edit Delete	9
	ID Type	Selec	t Type	~		
	ID Value					
	Description					
	Add		Rese	et		Next

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To find your NAICS code go here:

http://www.naics.com/search/

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



Submission come Filing Management Validate Record Invoice for 2	2014 Invoice History	Manage Submission Logout
	CURRENT FACILITY CONTACT LIST CHEMICAL LIST ADD NEW FACILITY ADD NEW CONTACT ADD NEW CHEMICAL Pirate Paul's Ship Yard (FacID: 4486887) soit delete 111 Walk the Plank Way SEBRING, FL 33875, USA	
Facility Information Facility Identification	State Fields Documents	Validate Record
	Document Upload	
	Document ID File Name File Type File Category File Description Download Note: Please upload site plans / MSDS documents 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 Image: Category File Image: Category MSDS Image: Category MSDS Image: Category File Image: Category Max file size 9 Mb Image: Category File Description Image: Category Upload Upload	Uploading a site map or MSDS document is optional. Either browse your files and Upload or click Filing Management
	Contact Us FAQ E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE	

sion Hor	ne Filing Mar	nagement Validate Record Invoice for 2014 Invoice History					Manage Submiss
		2014 Onl	ine Filing Home				
* Fed	eral requirer	ments include: Owner / Operator (name, mail address which must be 24-hour); Tier II Infor	, phone & email); Emergency Co mation Contact (name, email & pl	ntact (r none).	name & 2	phone numbe	ers, one of
Followin Page 1 of	g is the submi	tted facility information Legend Help!	/ Co	Add ontact	Add Ne	w Facility De No of Results per	lete Facilities page : 50 ▼
NO.	ID	FACILITY NAME			STATE	FILING STATUS	DELETE
1.	4486887	 Pirate Paul's Ship Yard Contact Information 1. Jon Smith - Emergency Contact 2. Pirate Paul's Ship Yard - Owner / Operator 3. Pirate Paul - Tier II Information Contact 	Edit Dele Edit Dele Edit Dele	ete ete	FL	Not Filed	
		Chemical Information 1. Chlorine (7782-50-5)	Edit Delete Co	ру			

Submission Home Filing Management Validate	Record Invoice for 2014 Invoid	ce History			Manage Submission Logour						
Contact Information Ph	one Information	Facility Association Do	cuments	Validate Record							
Contact Information											
Jon Smith (Emergency Contact)											
* Federal requirements include: Owner / O	perator (name, mail address,	phone & email); Emergency Contact (na	me & 2 phone numbers, one of which must be 24-h	our); Tier II Information Contac	:t (name, email & phone).						
		* Fields are ma	indatory								
	Title	First Mate]								
	Last Name or Business Name *	Smith]								
	First Name	Jon]								
	Street Address *	3035 WYNSTONE DRIVE]								
	City *	SEBRING									
	County										
	State *	FL 💌									
	ZIP *	33875									
	Country *	USA									
	Email *	info@piratepaulsshipyard.com]								
	Save & Contin	Cancel									

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E Plan		UTDALLAS					
Submission Home Filing Management Validate Record Invoice for 2014 Invoi	œ History		Manage Submission Logo				
Contact Information Phone Information	Facility Association	Documents	Validate Record				
Contact Phone Information Jon Smith Emergency Contact * 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 (name, email & phone). Phone Type Phone Number Vork 987-123-4667 Edit Delete 24-hour 800-123-4667 Edit Delete							
	Phone Type	Select Phone Type					
	Phone Number Add Contact Us FAQ E	Reset Next E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE					

Submission Home Filing Management Validate Record Invoice for 2014 Invoice History	Manage Submission Logout
Contact Information Phone Information Facility Association Documents Validate Record	
Associate Contact With Facility	
Jon Smith (Emergency Contact)	
Note: You can associate "Jon Smith" with other facilities such that the contact information can be copied to the other associated facilities.	
Facility Name Contact Type Pirate Paul's Ship Yard Emergency Contact Edit Delete	
Select Facility Add Reset Next	
Contact Us FAQ E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE	

If you have <u>more than one facility</u>, you may add the same Contact person to all facilities using the drop down to select the specific facility and the drop down to select the specific contact type and then click Add.

If you only have <u>one facility</u>, click Next.



Uploading a document is optional.

Either Upload Document or click Filing Management.

Submission Home	e Filing Man	agement Validate Record	Invoice for 2014	Invoice History						Manage Submission	Logout
	2014 Online Filing Home										
* Fede	ral requirer	nents include: Owner / which	Operator (name must be 24-ho	e, mail address, phone ur); Tier II Information	e & email); Emerg Contact (name, e	gency email	Contact & phone).	(name & 2	phone number	rs, one of	
Following Page 1 of 1	is the submit	ted facility information Le	gend Help!			/ Che	Add emical	Add Ne	w Facility Dele No of Results per	ete Facilities page : 50 ▼	
NO.	ID	FACILITY NAME					V	STATE	FILING STATUS	DELETE	
1.	4486887	Pirate Paul's Ship Y Contact Information 1. Jon Smith - Emerg 2. Pirate Paul's Ship 3. Pirate Paul - Tier II Chemical Information 1. Chlorine (7782-50-	f ard gency Contact Yard - Owner / Ope I Information Contact -5)	erator et	Edit	Edit Edit Edit Delete	Delete Delete Delete	FL	Not Filed		

Chemical Information	Storage Locations	Mixture Components	State Fields	Documents	Validate Record
		Cher	nical Information		
		* Fields	are Federal mandatory fields)	
	Remember to p	ress the Save & Continue buttor	is are E-Plan mandatory fields	page. Otherwise, the changes will not be saved.	
	Chemical Det	ails			
	CAS Number ** 77 Chemical Name * Ch	82505 Lookup Help			
Note: Only	EHS ·	Trade Secret			
certain	Days on site * 36	5			
chemicals are	Physical State	e *(Check all that apply)			
FHS Diesel	Pure Mixture				
and Cas are	Solid 🛛 Liquid	Gas			
and Gas are	Hazards *(Chec	k all that apply)			
<u>not EHS</u>	🗌 Fire 🗌 Sudden	Release of Pressure 🛛 Reactive			
<u>CHEMICALS</u> .	Health Effects	*(Chock all that apply)			٦
	Acute Chronic	(Check an that apply)			
	Quantity				
Note: The	Max Daily Amount Co	de Select Max C	ode 💌		
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listed in	Avg Daily Amount Co Average Daily Amoun	t in pounds* 12,750	ode 🔽		
	Maximum Amount in	largest container (pounds) 12,750			
pounds.	Below Reporting Thre	sholds			
		Save & Continue	Reset	Cancel	
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CURRENT FA	CONTACT LIST	CHEMICAL LIST	ADD NEW FACILITY	ADD NEW CONTACT	ADD NEW CHEMICAL			
Pirate Paul's Ship Yard (FacID: 4486887) EDIT DELETE 111 Walk the Plank Way SEBRING, FL 33875, USA								
Chemical Information Storage Locati	ons Mixture Corr	ponents	State Fields	Documer	nts	Validate Record		
Chemical Storage Locations Chlorine (CAS#: 7782505)								
Location Maximum Amount Storage/Processive/Temperature Types								
Th	e Dock 12750.0 ,	Above ground	tank / Ambient pressure	/ Ambient temperature	Edit Delete			
		<u> </u>						
S	torage Locatior	IS						
s	torage Type*		V					
P	ressure Type*	Select Pressu	те Туре 💌					
Т	emperature Type*	Select Tempe	rature type 💌					
L	ocation*			Confidentia	I			
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	Add	Re	eset	Next				

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CURR	ENT FACILITY CONTACT LIST	CHEMICAL LIST AL	D NEW FACILITY	ADD NEW CONTACT	ADD NEW CHEMICAL			
Pirate Paul's Ship Yard (FacID: 4486887) EDIT DELETE 111 Walk the Plank Way SEBRING, FL 33875, USA								
Chemical Information Storage Lo	ocations Mixture Comp	onents S	tate Fields	Documen	ts	Validate Record		
Chemical Components								
Chlorine (CAS#: 7782505)								
	Component Chemical Name CAS Number Max Code Percentage							
	Mixture Compo	nents						
	CAS Number		Lookup	Help				
	Component		Lookup					
	EHS *							
	Maximum Amount Code	Select Max Code	•					
	Percentage			Selectun	it 💌			
	Add	Res	et	Next				

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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.

Submission Home	Filing Management	Validate Record	Invoice for (2014) Invoice	History				Manage Submission	Logout
		CURRENT FACILITY	CONTACT LIST CHE	MICAL LIST	ADD NEW FACILITY	ADD NEW CONTACT	ADD NEW CHEMICAL		
			Pirate Pa	aul's Ship Ya 111 Wa SEBRIN	rd (FacID: 4486887) a alk the Plank Way IG, FL 33875, USA	EDIT DELETE			
Chemical Info	rmation Sto	orage Locations	Mixture Componer	nts 🤇	State Fields	Docume	ents	Validate Record	
	State Applicable Fields								
	Chlorine (CAS#: 7782505)								
	Update & continue Reset								
			Contact Us FA	ຊ E-PLAN	ONLINE TIER2 SUBM	IT - USER'S GUIDE			

Submission Hone Filing	Management Validate Record I	nvoice for 2014 Invoice History				Manage Submission	Logout	
	CURRENT FACILITY	CONTACT LIST CHEMICAL LIST	ADD NEW FACILITY	ADD NEW CONTACT	ADD NEW CHEMICAL			
Pirate Paul's Ship Yard (FacID: 4486887) EDIT DELETE 111 Walk the Plank Way SEBRING, FL 33875, USA								
Chemical Informatio	n Storage Locations	Mixture Components	State Fields	Documer	nts	Validate Record		
	Document Upload							
		Chlorine	(CAS#: 7782505))				
	Document ID File Name File Type File Category File Description Download							
	Upload Document							

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Uploading a document is optional.

Either Upload Document or click Filing Management.

2014	Online	Filing	Home

* 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 (name, email & phone).

Following is the submitted facility information Legend Help!

Page 1 of	11	Total number of facilities: 1		Add Ne	No of Results per p	ete Facilities bage : 50 💌
NO.	ID	FACILITY NAME		STATE	FILING STATUS	DELETE
1.	4486887	 Pirate Paul's Ship Yard Contact Information 1. Jon Smith - Emergency Contact 2. Pirate Paul's Ship Yard - Owner / Operator 3. Pirate Paul - Tier II Information Contact Chemical Information 1. Chlorine (7782-50-5) 	Image: Non-StateImage: Non-StateImage: Non-StateEditDeleteDeleteEditDeleteDeleteEditDeleteCopy	FL 🤇	Not Filed	

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

Validate Record

First Responder View



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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.

E Plan				DALLAS		UNTED STATES		
Submission Home	Filing Management	Validate Record	Invoice for 2014 Invoice History			Manage Submission Logout		
Submission Report for Access ID 1026371								
		<mark>Notes:</mark> Errors indic E-Plan requ	ated on this page identify required fields not co irements provide extremely needed information	mpleted. While Federal and State n to first responders in emergency	requirements are mandatory, scenarios.			
Validation Time	e : Fri Jan 03 20	0:38:35 UTC 201	4					
FacID 4486887 Facili	FacID 4486887 : Pirate Paul's Ship Yard Facility Passed all Checks							
CONGRATULATIONE <u>III Your report has passed</u> ALL submission tests for filing year 2013. Click Upload Data to E-Plan to complete the Tier II submission.								
		Exporting Tie	r II report to: Tier2 zip file	.t2s File	PDF file			
	Contact Us FAQ E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE							

EPI		ų	DALLA	S		۲
utornalium Horna	Filing Management Waldate Record Invoice for 2010 Invoice Haloy					Manage Submission Logist
	Sul	mit F	acility Infor	mation		
	 Select the Facilities which you would like to earned to the E-Pan database. Once you submit 1 (i) If you have already third the Facility information with E-Pan (satus whom as Find) and make automating would be the first fleepower with the Satus Hitsen. However, you will not 3) Facilities in Rearing. The well-site Box for 2013 with exclusion after Descender 3), 2013 Facilities in other states. The well-site Box for 2013 with exclusion after Descender 3), 2013 Facilities of the states. The well-site for the 2013 with exclusion after Descender 3), 2013 Facilities to other states. The well-site Box for 2013 with an answer of the Descender 3), 2013 The weighted box will not be whom if (b) A basitity in Brited with A invoice, 3). Thing State 	ene facilitar ety futher i a sotterna	Notes: a and their information changes to the Pacity for the data for the change or (2) Validation, status	el de available to the Frait R Contact Chamical Information as. To prot the changed info ue "Net Paris"	exponders through the S-Plan system. Is you DO KOT have to re-spland the information. At charges stratton, clock on Print PDP Surface.	
	Acc	ess ID:	: 1026371 (P	irate Paul)		
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ubmission Hor	e Filing Management Validate Record Isvoice fo 2014 musice h	istory				Manage Submission Logis
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	 Select the Facilities which you would like to submit to the E-Plan datab through the E-Ptan system. If you have already filed the Facility information with E-Plan (status sho to re-uplot dithe information. All changes are automatically wailable to To print the shanged information, stick on Print PDF button Facilities in Florida: The selection Box for 2013 will be activated after D Facilities in other status: The selection Box for 2013 will be activated after Pacifities in other status: The selection Box for 2013 will be activated after the selection box will not be shown if (1). A facility in linked with a two 	sse. Once the Sirst F scember or Docen lice. (2) 1	Flotes: e you submit, thee ed) and make any Responders and 1 34, 2013 her 18, 2013 filing Status in "F	e facilities and their in Auther changes to the he State officials. How left" or (3) Validation	formation will be available to the First Respon- Facility/Contact/Chemical information, you DD ever, you will not get a confirmation email for th statum in "Not Pees".	sers NOT have he changes
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	Reporting Authority Emails (Up to 3 cc emails)				* *	
	Induka		1	Debut DDV		



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Submission Home	Filing Management	Validate Record	Invoice for (2014 In	nvoice History			Manage Submission	Logout
FLORI	DA STATE EI	MERGENCY	RESPONSE	COMMISSION	(SERC) CONSOLIDATE	D ANNUAL REGISTRA	TION FORM	
				Owner/Operato	r Information			
			Filing Y	Year	2014			
			Company	Name *	Pirate Paul's Ship Yard			
		Bus	iness Mailing Address	s (Street or P.O. Box) *	3035 Wynstone Dr.			
			City	*	Sebring			
			State	e *	FL 💌			
			Zip	*	33815			
		F	ederal Employer Iden	tification (FEI) No. *				
			SIC Co	de *	4911			
			NAICS C	Code *	221118			
			Telepho	one *				
			Contact P	erson *				
			Title	*				

Completely fill out Consolidated Registration Form & scroll down.

Registration Fee











Submission Home Filing Management Validate Record Invoice for 2014 Invoice History

2014 Online Filing Home * 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 (name, email & phone). Following is the submitted facility information Legend Help! Add New Facility Delete Facilities Page 1 of 1 1 No of Results per page : 50 💂 Total number of facilities: 1 FILING NO. ID FACILITY NAME STATE DELETE STATUS A 2 Pirate Paul's Ship Yard 1 × Filed 1. 4486887 FL Contact Information Edit Delete 1. Jon Smith - Emergency Contact 2. Pirate Paul's Ship Yard - Owner / Operator Edit Delete 3. Pirate Paul - Tier II Information Contact Edit Delete Chemical Information Edit Delete Copy 1. Chlorine (7782-50-5)

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



Manage Submission Logout

Tier2 EPCRA 302 Notification		
ENTER NEW DATA/ RETRIEVE OLD DATA	COPY DATA	IMPORT TIER2
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 : 2014 2013 2012 2011	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 From: Previous Year ♥ To: Filing Year ♥	 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 nine (9) data files and CAMEO '.zip' file should contain 16 data files. These data files should have commaseparated values and '.mer' file extensions.
Continue	Copy Data	Import 'zip / t2s'

E	lan					The U	DALLAS			- Strymonites	PROTECTION
Submis	sion Hom	e 3	02 Filing Management	302 Invoice	Invoice History					Manage Submissior	n Logout
F	EPCRA 302 Online Notification Home (2014) Following is the submitted facility information Legend Help! Add 302 Facility Delete 302 Facilities										
	NO.	ID	FACILITY NAME	STATE	FILING ST	TATUS	VALIDATION STATU	IS	INVOICE STATUS	DELETE	
Upload Data to E-Plan											
Contact Us FAQ						E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE					

I. Facility	/ Information
* Fields a	are mandatory fields
Remember to press the Save & Continue button after	r updating any information on this page. Otherwise, the changes will not be saved.
Facility Details	
Facility Name *	Department
Company Name	Facility Email
City * State * Select State County * All Note: The 'county name' is the 'city name' when there is no associated county.	Address. Enter Mailing Address below if different. Street * City * d State * Select State V
ZIP * USA USA	ZIP *
Location Lookup Lat/Long Validate Lat/Long	Facility Identification NAICS Dun & Bradstreet
Longitude	State Facility ID

Completely fill out 302 form & scroll down.

		Last Name	*		
Position		E-Mail			
Phone Number *	Select Phone Typ	pe 🗸			
2nd Phone Number(optio	nal) Select Phone Typ	pe 🗸			
III.	Hazardou	ıs Materi	ials Infor	mation	
	Cli	ick HERE for EHS Ch	nemical List		
lo. Ehs Chemical Name	CAS Number	* Maximum	Storage type *	Location *	Optior
lo. Ehs Chemical Name ୍ୱ	* CAS Number ୍ୱ	* Maximum amount * (pounds)	Storage type *	Location *	Optior
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Submission Home 302 Filing Management 302 Invoice Invoice History

Manage Submission Logout



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State Facility Representatives

Planning Manager: Sam Brackett 850-413-9928 Sam.Brackett@em.myflorida.com Call for general questions

Mary Green	Henry Turner
850-413-9926	850-413-9918
<u>Mary.Green@em.myflorida.com</u>	<u>Henry.Turner@em.myflorida.com</u>
Call if your company starts with	Call if your company starts with
the letter: D, J, O, R, S, U, V, W	the letter: C, E, L, M, N, P, T
Priscilla Knight	Sam Brackett
850-413-9916	850-413-9928
<u>Priscilla.Knight@em.myflorida.com</u>	<u>Sam.Brackett@em.myflorida.com</u>
Call if your company starts with	Call if your company starts with
the letter: A, B, F, G, H, Q, XYZ	the letter: I, K