

City of Vernon – Certified Unified Program Agency (CUPA)  
 4305 S. Santa Fe Ave., Vernon, CA 90058  
**CONSOLIDATED CONTINGENCY PLAN**

## Hazardous Materials Establishment Application

FACILITY IDENTIFICATION		
BUSINESS NAME	Application Fee: \$255	
SITE ADDRESS	CITY	ZIP CODE
MAILING ADDRESS	CITY, STATE	ZIP CODE

The Consolidated Contingency Plan provides businesses a format to comply with the emergency planning requirements of the following three written hazardous materials emergency response plans required in California:

- ▶ Hazardous Materials Business Plan (HSC Chapter 6.95 Section 25504 (b) and 19 CCR Sections 2729-2732),
- ▶ Hazardous Waste Generator Contingency Plan (22 CCR Section 66264.52), and,
- ▶ Underground Storage Tank Emergency Response Plan and Monitoring Program (23 CCR Sections 2632 And 2641).

This format is designed to reduce duplication in the preparation and use of emergency response plans at the same facility, and to improve the coordination between facility response personnel and local, state and federal emergency responders during an emergency.

Beginning on January 1, 2013, all Unified Program related information must be reported electronically through the **California Environmental Reporting System (CERS)**. To enter your information and/or learn more about this system, visit the CERS website at <http://cers.calepa.ca.gov/>.

If you wish to obtain a Hazardous Materials Permit through the City of Vernon, you must do the following:

- First, obtain a CERS ID number through the CERS website and enter that number below.
- Second, enter your Unified Program related information through the CERS website.
- Third, completely fill out this form and submit it along with the application fee to the City of Vernon Health & Environmental Control Department, 4305 S. Santa Fe Ave., Vernon, CA 90058.

CERS ID Number: \_\_\_\_\_

PLAN CERTIFICATION	
<i>I certify that I have entered my Unified Program related information through the CERS website. In addition, I certify under penalty of law that I have personally examined and I am familiar with the information provided by this plan and to the best of my knowledge the information is accurate, complete, and true.</i>	
Printed Name of Owner/ Operator	Title of Owner/Operator
Signature of Owner/ Operator <b>X</b>	Date

We appreciate the effort of local businesses in completing these plans and will assist in every possible way. If you have any questions, please contact the City of Vernon Health & Environmental Control Department at (323) 583-8811 ext. 233.

Agency Use Only: Class \_\_\_\_\_

Account Number: 011-1060-410240