

# LEPC - EHS Facility Emergency Response Plan CHECKLIST

FACILITY <span style="float: right;">Plan #</span>		LEPC		State EHS Planner		KERC Planning	
		Y	N	Y	N	Y	N
County _____		New Plan ____		Existing Plan With Technical Change ____			
<b>Section 1: EHS Facility Emergency Response Plan</b>							
1. Is the Plan Number provided on the plan?							
2. Has the Most Hazardous Chemical Location Latitude/Longitude been verified? (decimal format)							
3. Is the Facility Emergency Coordinator (FEC) and Alternate FEC listed along with two contact numbers, one of which must be 24-hour number?							
4. Are the FEC and Alternate FEC different people?							
<b>Section 2: Hazardous Chemicals</b>							
1. Is a detailed description of health hazards given for <b>each</b> EHS?							
<b>Section 3: Facility Map</b>							
1. Is a legible floorplan of the facility included in the plan? (blueprint or aerial view)							
2. Are the locations of chemicals on site labeled?							
3. Are access roads surrounding the facility labeled?							
4. Does the map include a legend with a north directional arrow and symbols with their labels?							
5. Does the map indicate main entrances and loading docks?							
<b>Section 4: Facility Response Point and Alternate</b>							
1. Is the Facility Response Point identified, including the address or directions to the area?							
2. Is the Alternate Facility Response Point identified, or are there plans for determining an alternate location?							
3. Is the Staging Area identified, including the address or directions to the area?							
4. Is the Alternate Staging Area identified, or are there plans for determining an alternate location?							
5. Is the Staging Area and Alternate Staging Area located outside of the Vulnerable Zone (VZ)?							
<b>Section 5: Transportation Routes and Modes of Transportation</b>							
1. Are modes of EHS transport listed in the plan?							
2. Are the routes of EHS transport listed from the county line to the facility?							
3. Are the handling procedures of the EHS listed in the plan?							
4. Is the frequency of shipping for the EHS listed in the plan?							
<b>Section 6: EHS Supplier</b>							
1. Is the Primary EHS Supplier's name, address, and phone number listed in the plan?							
<b>Section 7: Worst Credible Release/Vulnerable Zone</b>							
1. Is the procedure used to select the Worst Credible Release identified?							
2. Is the Worst Credible Release identified? (Fire, Transport, etc.)							
3. Is the type and quantity of chemical used to determine the VZ identified?							

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4. Is the radius of the VZ identified?						
5. Is a map identifying the VZ provided?						
<b>Section 8: Special Facilities Likely To Be Affected</b>						
1. Are the Special Facilities within the VZ listed?						
<b>Section 9: Protective Actions</b>						
1. Are the processes for Shelter in Place (SIP) and Evacuation of on-site and off-site populations discussed?						
2. Are the processes for alerting/warning the public and Special Facilities discussed?						
3. Are officials who may authorize Exit SIP and re-entry of an evacuated area identified?						
<b>Section 10: Emergency Equipment On Hand / Training / Exercising</b>						
<b>Facility</b>						
1. Does the plan describe the emergency response equipment available at the facility?						
2. Does the plan describe training level(s) of facility response personnel?						
3. Does the plan discuss the facility's exercise program?						
<b>Community Response</b>						
4. Does the plan describe the emergency response equipment available in the community?						
5. Does the plan describe training level(s) of community response personnel?						
6. Does the plan discuss the community's exercise program?						
<b>Section 11: Medical Capabilities</b>						
1. Does the plan provide a name, address, and a statement of capability for the primary hospital or medical facility for patient transport?						
2. Does the plan provide a name, address, and a statement of capability for an alternate hospital or medical facility for patient transport?						
<b>Section 12: Spill Containment / Clean-Up / Disposal</b>						
1. Are procedures provided for containment of released substance?						
2. Are procedures provided for clean-up of released substance?						
3. Does the facility provide released substance disposal procedures?						

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### Section 13: Emergency Notification

1. Does the Emergency Notification list have all persons/phone numbers required?						
2. Have the contact phone numbers been verified as current and correct?						

### Section 14: REVIEWED AND APPROVED BY

<b>Signature of LEPC Chair:</b>	<b>DATE:</b>
<b>Signature of State EHS Planner:</b>	<b>DATE:</b>
<b>Signature of KERC Planning Committee Chair:</b>	<b>DATE:</b>