CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS) CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

| A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW | | | | | | | | | |
|--|---|--|--|---|--------------------------------|---|---|--|--------------------|
| FACILITY ID # | | | 1. | CERS ID | | A1. DATE | OF PLAN PI | REPARATION/REVISION | A2. |
| BUSINESS NAME (Same as F | acility Name or DBA - | Doing Business As) | | | | | | | 3. |
| BUSINESS SITE ADDRESS | | | | | | | | | 103. |
| BUSINESS SITE CITY | | | | | 104. | CA | ZIP COD | ÞΕ | 105. |
| TYPE OF BUSINESS (e.g., Pa | inting Contractor) | | A3. | INCIDENTAL (| OPERA | TIONS (e.g., | Fleet Main | tenance) | A4. |
| THIS PLAN COVERS CHEMI | ICAL SPILLS, FIRES, | AND EARTHQUAKE | ES INVO | DLVING: (Check | all that | apply) | | | A5. |
| □ 1. HAZARDOUS MATER | IALS; 🔲 2. HAZARI | DOUS WASTES | | | | | | | |
| | | B. INTER | RNAI | RESPONS | SE | | | | |
| INTERNAL FACILITY EMER ☐ 1. CALLING PUBLIC EME ☐ 2. CALLING HAZARDOU ☐ 3. ACTIVATING IN-HOUS | ERGENCY RESPOND S WASTE CONTRAC | ERS (i.e., 9-1-1) TOR | Check al | ll that apply) | | | | | В1. |
| C. EMERG | SENCY COMN | MUNICATION | IS, PI | HONE NUN | ABE | RS AND | NOTI | FICATIONS | |
| Whenever there is an immine Emergency Coordinator is on ca 1. Activate internal facility alar 2. Notify appropriate local auth 3. Notify the California Emerge | all) shall: ms or communications orities (i.e., call 9-1-1). | systems, where applica | able, to r | | | | Coordinato | (or his/her designee wh | en the |
| Before facility operations are a Substances Control (DTSC), th with requirements to: 1. Provide for proper storage are the facility; and 2. Ensure that no material that cleanup procedures are compuNTERNAL FACILITY EMER | e local Unified Program and disposal of recovered is incompatible with to leted. GENCY COMMUNIC 2. PUI | m Agency (UPA), and I waste, contaminated s the released material is CATIONS OR ALARM BLIC ADDRESS OR II | the loca soil or so s transfe 4 NOTII | al fire department' surface water, or an erred, stored, or di | s hazard y other isposed | material that of in areas of R VIA: (Chec | Is program results from the facilities all that a EPHONE; | that the facility is in comp n an explosion, fire, or rele ty affected by the inciden pply) | oliance ease at |
| ☐ 4. PAGERS; NOTIFICATIONS TO NEIGHT ☐ 1. VERBAL WARNINGS; | BORING FACILITIES | ARM SYSTEM; THAT MAY BE AFF BLIC ADDRESS OR II | | | E RELI | 6. PORT EASE WILL 3. TELE | OCCUR B | | C2. |
| ☐ 4. PAGERS; | | ARM SYSTEM; | TTERC | OM STEM, | | ☐ 6. PORT | | DIO | |
| EMERGENCY RESPONSE | AMBULANCE, FIRI | E, POLICE AND CHP | | | | | | 9-1-1 | |
| PHONE NUMBERS: | CALIFORNIA EMEI | RGENCY MANAGEM | MENT A | GENCY (CAL/EN | MA) | | | (800) 852-7550 | |
| | NATIONAL RESPO | NSE CENTER (NRC) | | | | | | (800) 424-8802 | |
| | POISON CONTROL | CENTER | | | | | | (800) 222-1222 | |
| | LOCAL UNIFIED PI | ROGRAM AGENCY (| (UPA/CI | U PA) | | | | | C3. |
| | OTHER (Specify): | | | | | | C4. | | C5. |
| NEAREST MEDICAL FACILI | TY / HOSPITAL NAM | 1E: | | | | | C6. | | C7. |
| AGENCY NOTIFICATION PH | HONE NUMBERS: | CALIFORNIA DEPT | г. OF Т | OXIC SUBSTANC | CES CC | NTROL (D | ΓSC) | (916) 255-3545 | |
| | | REGIONAL WATEI | R QUAI | LITY CONTROL | BOARI |) | | | C8. |
| | | U.S. ENVIRONMEN | NTAL P | ROTECTION AG | ENCY (| (US EPA) | | (800) 300-2193 | |
| | | CALIFORNIA DEPT | Γ OF FIS | SH AND GAME (| DFG). | | | (916) 358-2900 | |
| | | U.S. COAST GUAR | | ` | | | | | |
| | | CAL/OSHA | | | | | | (916) 263-2800 | |
| | | STATE FIRE MARS | | | | | | (916) 445-8200 | |
| | | OTHER (Specify): | mal . | · · · · · · · · · · · · · · · · · · · | | | C9. | (3.13) 1.10 0200 | C10. |
| | | OTHER (Specify): OTHER (Specify): | | | | | C11. | | C12. |
| | | OTTILK (Specify). | | | | | | | |

| D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES | |
|--|----------------|
| SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spi fires or explosions; and preventing and mitigating associated harm to persons, property, and the environment.) | lls, releases, |
| □ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.; □ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls); □ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows); □ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS; □ 5. BUILT-IN BERM IN WORK / STORAGE AREA; □ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM; □ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane); □ 8. STOP PROCESSES AND/OR OPERATIONS; □ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM; □ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE; □ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID; □ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS; □ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL; □ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM; □ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE; □ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR; □ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOS APPROPRIATE; □ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOS APPROPRIATE; | DI. |
| ☐ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE; | |
| ☐ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE; ☐ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES; ☐ 21. OTHER (Specify): | D2. |
| E. FACILITY EVACUATION | |
| THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): 1. BELLS; 2. HORNS/SIRENS; 3. VERBAL (I.E., SHOUTING); 4. OTHER (Specify): THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) | E2. E3. |
| Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation. □ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be promine. | E4. |
| throughout the facility in locations where it will be visible to employees and visitors. F. ARRANGEMENTS FOR EMERGENCY SERVICES | |
| Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should | be made as |
| appropriate for your facility. You may determine that such arrangements are not necessary. | |
| ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) | F1. |
| □ 1. HAVE BEEN DETERMINED NOT NECESSARY; or □ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify): | F2. |
| | |

G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., \boxtimes CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

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|----------------|--|---|--------------------------------|
| TYPE | EQUIPMENT AVAILABLE G1. | LOCATION G2. | CAPABILITY (If applicable) G3. |
| Safety and | 1. CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS | | |
| First Aid | 2. CHEMICAL PROTECTIVE GLOVES | G4. | G5. |
| | 3. CHEMICAL PROTECTIVE BOOTS | G6. | G7. |
| | 4. SAFETY GLASSES / GOGGLES / SHIELDS | G8. | G9. |
| | 5. HARD HATS | G10. | G11. |
| | 6. CARTRIDGE RESPIRATORS | G12. | G13. |
| | 7. SELF-CONTAINED BREATHING APPARATUS | G14. | G15. |
| | (SCBA) 8. FIRST AID KITS / STATIONS | G16. | G17. |
| | 9. PLUMBED EYEWASH FOUNTAIN / SHOWER | G18. | G19. |
| | 10. PORTABLE EYEWASH KITS | G20. | G21. |
| | 11. OTHER | G22. | G23. |
| | 12. OTHER | G24. | G25. |
| Fire | 13. PORTABLE FIRE EXTINGUISHERS | G26. | G27. |
| Fighting | 14. FIXED FIRE SYSTEMS / SPRINKLERS / | G28. | G29. |
| | FIRE HOSES 15. FIRE ALARM BOXES OR STATIONS | G30. | G31. |
| | 16. ☐ OTHER | G32. | G33. |
| Spill | 17. ALL-IN-ONE SPILL KIT | G34. | G35. |
| Control and | 18. ABSORBENT MATERIAL | G36. | G37. |
| Clean-Up | 19. ☐ CONTAINER FOR USED ABSORBENT | G38. | G39. |
| | 20. BERMING / DIKING EQUIPMENT | G40. | G41. |
| | 21. BROOM | G42. | G43. |
| | 22. SHOVEL | G44. | G45. |
| | 23. SHOP VAC | G46. | G47. |
| | 24. ☐ EXHAUST HOOD | G48. | G49. |
| | 25. EMERGENCY SUMP / HOLDING TANK | G50. | G51. |
| | 26. CHEMICAL NEUTRALIZERS | G52. | G53. |
| | 27. GAS CYLINDER LEAK REPAIR KIT | G54. | G55. |
| | 28. SPILL OVERPACK DRUMS | G56. | G57. |
| | 29. OTHER | G58. | G59. |
| Communi- | 30. TELEPHONES (Includes cellular) | G60. | G61. |
| cations | 31. ☐ INTERCOM / PA SYSTEM | G62. | G63. |
| and Alarm | 32. PORTABLE RADIOS | G64. | G65. |
| Systems | 33. AUTOMATIC ALARM CHEMICAL | G66. | G67. |
| Other | MONITORING EQUIPMENT 34. OTHER | G68. | G69. |
| Other | | | |
| | 35. ☐ OTHER | G70. | G71. |
| | | | |

| H. EARTHQUAKE VULNERABILITY | | | | |
|---|--|--|--|--|
| Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection. | | | | |
| | H1. LOCATIONS (e.g., shop, outdoor shed, forensic lab) H2. H3. H4. H5. | | | |
| Identify mechanical systems vulnerable to releases / spills due to earthquake-related mo | otion. These systems require immediate isolation and inspection. | | | |
| | H6. LOCATIONS H7. H8. H9. H10. H11. | | | |
| I. EMPLOYEE | TRAINING | | | |
| Hazard communication related to health and safety; Methods for safe handling of hazardous substances; Fire hazards of materials / processes; Conditions likely to worsen emergencies; Coordination of emergency response; Notification procedures; | | | | |
| INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) 1. FORMAL CLASSROOM; 2. VIDEOS; 3. SAFETY / TAILGATE MEETINGS; 4. STUDY GUIDES / MANUALS (Specify): 5. OTHER (Specify): 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES | | | | |
| Large Quantity Generator (LQG) Training Records: Large quantity hazardous w hazardous waste per month) must retain written documentation of employee hazardous A written outline/agenda of the type and amount of both introductory and cont responsibility for the management of hazardous waste (e.g., labeling, manifesting, co The name, job title, and date of training for each hazardous waste management train A written job description for each of the above job positions that describes job dutie to the position. Current employee training records must be retained until closure of the facility. Former employee training records must be retained at least three years after terminal | waste management training sessions which includes: inuing training that will be given to persons filling each job position having ompliance with accumulation time limits, etc.). ing session given to an employee filling such a job position; and es and the skills, education, or other qualifications required of personnel assigned | | | |
| J. LIST OF ATT | | | | |
| (Check one of the following) ☐ 1. NO ATTACHMENTS ARE REQUIRED; or ☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: | J1. J2. | | | |
| K. SIGNATURE / CERTIFICATION | | | | |
| Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site. | | | | |
| SIGNATURE OF OWNER/OPERATOR | DATE SIGNED K1. | | | |
| NAME OF SIGNER (print) K2. | TITLE OF SIGNER K3. | | | |

HAZARDOUS MATERIALS RELATED EMERGENCY PROCEDURES

(HAZMAT FIRES, SPILLS, MEDICAL)

Emergency: an incident of any size that presents an immediate risk to life, the environment or property.

EVACUATE the affected areas.

STAY upwind.

DO NOT approach the involved material.

CALL 911 and report the emergency.

- Exact location of spill (building and room number).
- Name of material involved and quantity.
- Exposures or injuries.
- Areas of concern (e.g., preschool, classroom.
- Your name and call-back number.

CALL the **FACILITY EMERGENCY COORDINATOR** and report the incident. The Emergency Coordinator can be reached through Campus Security via the "Blue Phones" or by calling 242-7910, 8:00 a.m. - midnight Monday - Friday; 8:30 a.m. - 5:30 p.m. Saturday. Otherwise contact the Emergency Coordinator directly using the numbers below.

| Emergency Coordinator | | Office Phone | 24-hour Phone | |
|-----------------------|------------------|-----------------|------------------|--|
| Primary EC | Andy Brown | 242-7920 | (530) 410-1968 | |
| 1st Alternate | Lonnie Seay | 242-7912 | (530) 351-4134 | |
| 2nd Alternate | Joe Trompczynski | 242-7948 | | |
| 3rd Alternate | Craig Richie | 242-7916 | | |

The Emergency Coordinator will provide any needed Shasta College resources and will liaison with emergency responders.

Minor Emergency: an incident of a nature that does not immediately present a risk to life, environment or property but will require personal protective equipment for mitigation and clean-up.

ISOLATE the area to prevent contamination.

TRY TO CONTROL THE EMERGENCY if you are trained to do so and you can do so safely.

CALL the **FACILITY EMERGENCY COORDINATOR** and report the incident (Emergency Coordinators listed above).

EMERGENCY AGENCIES

OES State Warning Center Shasta County Environmental Health

(800) 852-7550 225-5787

This document is only a summary of emergency procedures. Refer to the Shasta College Emergency/Contingency Plan for detailed procedures.