

South Adams County Fire Department

6050 Syracuse Street, Commerce City, CO 80022

Phone: 303-288-0835 www.sacfd.org

Hazardous Materials Management Plan

Section 1: Facility Description

Business Name:			Phone:					
Address:								
Person Responsi	ible for the	Business:						
Name		Title		Phone				
L								
Emergency Con	tacts:							
Name	Title	Title		umber	Work Number			
Person Responsi	ible for the	Application	/ Principal (Contact:				
Name		Title		Phone				
Principal Busine	ess Activity	:						

fumber of Employees:
fumber of Shifts:
Number of Employees per Shift:
fours of Operation:

Facility Description:	

General Facility Site Plan

- a. Provide a site plan on $8\frac{1}{2}$ by 11-inch paper, showing the locations of all buildings, structures, outdoor chemical control or storage and use areas, parking lots, internal roads, storm and sanitary sewers, wells and adjacent property uses.
- b. Indicate the approximate scale, northern direction and date the drawing was completed.

Facility Storage Map Site Plan (please provide the following):

- c. Provide a floor plan of each building identified on the site plan containing hazardous materials on an 8 ½ inch by 11-inch paper.
 - i. Identifying the northern direction and showing the location of each storage and use area.
- d. Identify storage and use areas, including hazard waste storage areas.
- e. Show the following:
 - i. Accesses to each storage and use area.
 - ii. Location of Emergency equipment.
 - iii. Location where liaison will meet emergency responders.
 - iv. Facility evacuation meeting point locations.
 - v. The general purpose of other areas within the building.
 - vi. Location of all aboveground and underground tanks to include sumps, vaults, below-grade treatment systems, piping etc.
 - vii. Show Hazard classes in each area.
 - viii. Show locations of all Group H occupancies, control areas, and exterior storage and use areas.
 - ix. Show emergency exits.

Hazardous Materials Inventory Statement Summary Report¹ (Storage² Conditions)⁴

IBC/IFC Hazard		ventory Amo		IBC/IFC Maximum Allowable Quantity ⁴					
Class	Solid (lb)	Liquid (gal)	Gas (cu ft, gal, lb)	Solid (lb)	Liquid (gal)	Gas (cu ft, gal, lb)			

¹Complete a summary report for each control area and Group H occupancy.

Storage = storage+ use-closed+ use-open systems.
 Separate Reports are required for use-closed and use-open systems.
 Include increases for sprinklers or storage in cabinets, if applicable.

Storage Tank Form

Storage Tank Form (Description of each tank on site)										
	Contents	Size in Gallons	Installation Date	Steel or Fiberglass	Single or Double Wall					
Tank 1			Date	Proceguess	Double Wall					
Tank 2										
Tank 3										
Tank 4										
Tank 5										
Tank 6										
Tank 7										
Tank 8										
Describe tank le	 eak detection, me	thod and frequency	<u> </u>							
Describe piping	system's leak det	tection, method and	frequency:							

Hazardous Materials Inventory Statement Report

Product Name (components) ¹	Location ²	Container >55 Gal ³	Haz Class 1	Haz Class 2	Haz Class 3	Stored (lbs)	Stored (gal)	Stored (gas) ⁴	Closed (lbs)	Closed (gal)	Closed (gas)	Open (lbs)	Open (gal)

Revised 6/21

¹ Specify percentages of main component if available.

² Identify the control area or, if it is a Group H occupancy, provide the classification, such as H-1, H-2 etc.

³ If the product container, vessel or tank could exceed 55 gallons, indicate yes in the column.

⁴ In cubic feet, gallons or pounds.