

# FACILITY RESPONSE PLAN

## CORE PLAN

*Prepared for*  
Holly Energy Partners – Operating, L.P.  
1602 West Main Street  
Artesia, New Mexico 88210

*Prepared by*



Austin, Texas

January 2014

## Certification

I certify that the National Oil and Hazardous Substances Pollution Contingency Plan (National Contingency Plan, or NCP) and each applicable Area Contingency Plan (ACP) have been reviewed and that this FRP is consistent with these contingency plans. The following ACPs are applicable for this FRP:

- EPA Region 6 Regional Integrated Contingency Plan
- EPA Region 7 Regional Integrated Contingency Plan
- EPA Region 8 Regional Contingency Plan
- EPA Region 9 Regional Contingency Plan
- EPA Region 10 Northwest Area Contingency Plan

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document, and that based on my inquiry of those individuals responsible for obtaining information, I believe that the submitted information is true, accurate, and complete.

Signature: \_\_\_\_\_



Name: Mark Cunningham

Title: Senior Vice President, Pipeline Operations

Date: \_\_\_\_\_

9 Jan 2014

## Regulatory Cross Reference Table – 40 CFR §112 (Non-Transportation-Related)

| Regulatory Citation | Description of Rule   | Report Section            |
|---------------------|---|---------------------------|
| §112 App. F 1.1     | Emergency Response Action Plan                              | ERAP<br>FSP Section A.1.0 |
| §112 App. F 1.2     | Facility Information  | FSP Section A.2.0         |
| §112 App. F 1.3     | Emergency Response Information                              | FSP Section A.3.0         |
| §112 App. F 1.3.1   | Notification  | FSP Section A.3.1         |
| §112 App. F 1.3.2   | Response Equipment List                                     | FSP Section A.3.2         |
| §112 App. F 1.3.3   | Response Equipment Testing/Deployment                       | FSP Section A.3.3         |
| §112 App. F 1.3.4   | Personnel   | FSP Section A.3.4         |
| §112 App. F 1.3.5   | Evacuation Plans  | FSP Section A.3.5         |
| §112 App. F 1.3.6   | Qualified individual's Duties                               | FSP Section A.3.6         |
| §112 App. F 1.4     | Hazard Evaluation   | FSP Section A.4.0         |
| §112 App. F 1.4.1   | Hazard Identification                                       | FSP Section A.4.1         |
| §112 App. F 1.4.2   | Vulnerability Analysis                                      | FSP Section A.4.2         |
| §112 App. F 1.4.3   | Analysis of the Potential for an Oil Spill                  | FSP Section A.4.3         |
| §112 App. F 1.4.4   | Facility Reportable Oil Spill History                       | FSP Section A.4.4         |
| §112 App. F 1.5     | Discharge Scenarios   | FSP Section A.5.0         |
| §112 App. F 1.5.1   | Small and Medium Discharges                                 | FSP Section A.5.1         |
| §112 App. F 1.5.2   | Worst Case Discharge  | FSP Section A.5.2         |
| §112 App. F 1.6     | Discharge Detection Systems                                 | FSP Section A.6.0         |
| §112 App. F 1.6.1   | Discharge Detection by Personnel                            | FSP Section A.6.1         |
| §112 App. F 1.6.2   | Automated Discharge Detection                               | FSP Section A.6.2         |
| §112 App. F 1.7     | Plan Implementation   | FSP Section A.7.0         |
| §112 App. F 1.7.1   | Response Resources for Small, Medium, and Worst Case Spills | FSP Section A.7.1         |
| §112 App. F 1.7.2   | Disposal Plans  | FSP Section A.7.2         |
| §112 App. F 1.7.3   | Containment and Drainage Planning                           | FSP Section A.7.3         |
| §112 App. F 1.8     | Self-Inspection, Drills/Exercises, and Response Training    | FSP Section A.8.0         |
| §112 App. F 1.8.1   | Facility Self-Inspection                                    | FSP Section A.8.1         |
| §112 App. F 1.8.2   | Facility Drills/Exercises                                   | FSP Section A.8.2         |
| §112 App. F 1.8.3   | Response Training   | FSP Section A.8.3         |
| §112 App. F 1.9     | Diagrams  | FSP Section A.9.0         |
| §112 App. F 1.10    | Security  | FSP Section A.10.0        |

## Regulatory Cross Reference Table – 49 CFR §194 (Transportation-Related)

| Regulatory Citation  | Description of Rule  | Report Section  |
|----------------------|--|---|
| §194.1               | Purpose  | N/A   |
| §194.3               | Applicability  | CP Introduction                                       |
| §194.5               | Definitions  | N/A   |
| §194.7               | Response plan required to operate                                | CP Introduction                                       |
| §194.101(a)          | Operators required to submit response plans                      | FSP Section B.1.0<br>CP Introduction                  |
| §194.101(b)          | Exceptions   | FSP Section B.1.0                                     |
| §194.103             | Identification of significant and substantial harm line sections | FSP Section B.1.0                                     |
| §194.105             | Worst case discharge   | FSP Section B.5.6.3                                   |
| §194.107             | General response plan requirements                               | ERAP, FSP, and CP                                     |
| §194.107(a)          | Procedures for responding to worst case discharge                | FSP Section B.5.9<br>CP Section 5.0                   |
| §194.107(b)          | Certify consistency with NCP and ACPs                            | CP Introduction                                       |
| §194.107(c)          | Response plan requirements                                       | ERAP, FSP, and CP                                     |
| §194.107(c)(1)       | Core plan requirements   | CP  |
| §194.107(c)(1)(i)    | Information summary  | CP Section 1.0  |
| §194.107(c)(1)(ii)   | Immediate notification procedures                                | CP Section 2.0  |
| §194.107(c)(1)(iii)  | Spill detection and mitigation procedures                        | CP Section 3.0  |
| §194.107(c)(1)(iv)   | OSRO information   | CP Section 4.0  |
| §194.107(c)(1)(v)    | Response activities and response resources                       | CP Section 5.0  |
| §194.107(c)(1)(vi)   | Federal, State, and Local agency information                     | CP Section 6.0  |
| §194.107(c)(1)(vii)  | Training procedures  | CP Section 7.0  |
| §194.107(c)(1)(viii) | Equipment testing  | CP Section 8.0  |
| §194.107(c)(1)(ix)   | Drill program  | CP Section 9.0  |
| §194.107(c)(1)(x)    | Plan review and update procedures                                | CP Section 10.0                                       |
| §194.107(c)(2)       | Response zone appendices   | FSP Part B  |
| §194.107(c)(3)       | Response management system description                           | CP Section 5.1  |
| §194.109             | Submission of state response plans                               | N/A   |
| §194.111             | Response plan retention  | CP Introduction                                       |
| §194.113(a)          | Core plan information summary requirements                       | CP Section 1.0  |
| §194.113(b)          | Response zone appendix information summary requirements          | FSP Section B.1.0                                     |
| §194.115             | Response resources   | FSP Section B.5.0<br>CP Section 5.0                   |
| §194.117             | Training   | FSP Sections B.7.0 and 9.0<br>CP Sections 7.0 and 9.0 |
| §194.119             | Submission and approval procedures                               | CP Section 10.0                                       |
| §194.121             | Response plan review and update procedures                       | CP Section 10.0                                       |

## Table of Contents

|  |           |
|--|-----------|
| Certification .....  | i         |
| Regulatory Cross Reference Table – 40 CFR §112 (Non-Transportation-Related) .....  | ii        |
| Regulatory Cross Reference Table – 49 CFR §194 (Transportation-Related) .....      | iii       |
| Table of Contents .....  | iv        |
| Appendices .....   | v         |
| Acronyms .....   | vi        |
| Introduction .....   | vii       |
| <b>1.0 Information Summary .....</b>   | <b>1</b>  |
| 1.1 Owner and Operator Information .....   | 1         |
| 1.2 Response Zones Containing Significant and Substantial Harm Line Sections ..... | 1         |
| <b>2.0 Immediate Notification Procedures .....</b>                                 | <b>5</b>  |
| <b>3.0 Spill Detection and Mitigation Procedures .....</b>                         | <b>6</b>  |
| 3.1 Spill Detection .....  | 6         |
| 3.2 Facility Self-Inspection .....   | 7         |
| 3.3 Security .....   | 7         |
| 3.4 Spill Prevention .....   | 7         |
| <b>4.0 Oil Spill Removal Organization (OSRO) Information .....</b>                 | <b>8</b>  |
| <b>5.0 Response Activities and Resources .....</b>                                 | <b>9</b>  |
| 5.1 Response Organization and Role Descriptions .....                              | 9         |
| 5.2 Communications .....   | 13        |
| 5.3 Command Post and Staging Areas .....   | 14        |
| 5.4 Evacuation Plans .....   | 14        |
| 5.5 Resource Planning .....  | 14        |
| 5.6 Response Resources .....   | 14        |
| 5.7 Discharge Scenarios .....  | 15        |
| 5.8 Response Strategies .....  | 16        |
| <b>6.0 Federal, State, and Local Agency Information .....</b>                      | <b>19</b> |
| <b>7.0 Training Procedures .....</b>   | <b>20</b> |
| 7.1 General Employee Training .....  | 20        |
| 7.2 HAZWOPER Training (29 CFR §1910.120) .....                                     | 20        |
| 7.3 Certification Levels .....   | 21        |
| 7.4 Training Records Retention .....   | 22        |
| <b>8.0 Equipment Testing .....</b>   | <b>23</b> |
| <b>9.0 Drill Program .....</b>   | <b>24</b> |
| 9.1 Spill Response Drills .....  | 24        |
| 9.2 Manned/Unmanned Pipeline Emergency Procedures .....                            | 24        |
| 9.3 Drill Program Responsibility, Implementation, and Recordkeeping .....          | 25        |
| <b>10.0 Plan Review and Update Procedures .....</b>                                | <b>26</b> |

## Appendices

- Appendix A – Crisis Management Policy
- Appendix B – Spill Response Form
- Appendix C – Tank and Secondary Containment Inspection Forms
- Appendix D – Response Drill Logs
- Appendix E – Incident Command System Forms

## Acronyms

|          |  |
|----------|--|
| ACP      | Area Contingency Plan  |
| bbbl     | Barrel (42 gallons)  |
| CFR      | Code of Federal Regulations                                      |
| CP       | Core Plan  |
| DOT      | United States Department of Transportation                       |
| EOC      | Emergency Operations Center                                      |
| EPA      | United States Environmental Protection Agency                    |
| ERAP     | Emergency Response Action Plan                                   |
| FRP      | Facility Response Plan   |
| FSP      | Facility Specific Plan   |
| HAZWOPER | Hazardous Waste Operations and Emergency Response                |
| HEP      | Holly Energy Partners – Operating, LP                            |
| HMSP     | Hazardous Materials Security Plan                                |
| IC       | Incident Commander   |
| ICS      | Incident Command System  |
| LEL      | Lower Explosive Limit  |
| LEPC     | Local Emergency Planning Committee                               |
| LFL      | Lower Flammable Limit  |
| NCP      | National Oil and Hazardous Substances Pollution Contingency Plan |
| NRC      | National Response Center   |
| NRDA     | Natural Resource Damage Assessment                               |
| OSC      | On-Scene Coordinator   |
| OSRO     | Oil Spill Removal Organization                                   |
| PHMSA    | Pipeline and Hazardous Materials Safety Administration           |
| QI       | Qualified Individual   |
| SERC     | State Emergency Response Commission                              |
| SPCC     | Spill Prevention, Control, and Countermeasure                    |
| UCS      | Unified Command Structure  |

## Introduction

This Facility Response Plan (FRP) has been produced for Holly Energy Partners (HEP) to fulfill United States Environmental Protection Agency (EPA) requirements outlined in 40 CFR §112.20 and United States Department of Transportation (DOT) requirements outlined in 49 CFR §194, for non-transportation-related and transportation-related facilities, respectively. 40 CFR §112.20(a) requires the owner or operator of non-transportation-related onshore facilities that could reasonably be expected to cause substantial harm to the environment by discharging oil into or on the navigable waters or adjoining shorelines to prepare and submit an FRP to the Regional Administrator. 49 CFR §194 requires the operator of an onshore pipeline facility to prepare and submit an FRP to the Pipeline and Hazardous Materials Safety Administration (PHMSA).

HEP operates a system of pipelines and terminals in the Southwest, Rocky Mountain, and Mid-West regions of the United States. Each terminal facility bears responsibility for response activities associated with both the non-transportation-related facilities associated with the terminal and the transportation-related facilities associated with a portion of the HEP pipeline system. Due to this organizational approach to responding to releases and to the combination of transportation-related and non-transportation-related facilities associated with each terminal facility, this FRP has been formatted to address the requirements of both the EPA and DOT. Each terminal facility has been treated as a “Complex Facility,” or a facility that incorporates both transportation-related and non-transportation-related features.

To clearly address the requirements of 40 CFR §112.20 and 49 CFR §194, the FRP has been formatted to include the following components:

- A **Core Plan (CP)** organized to directly address the requirements for a core plan as described by 49 CFR §194.107(c)(1). This plan includes response information pertinent to the pipeline system as a whole. While 49 CFR §194 applies specifically to transportation-related facilities, general information pertaining to non-transportation-related facilities operated by HEP has been incorporated into this framework for completeness.
- **Facility Specific Plans (FSPs)** for each terminal facility organized to clearly address FRP requirements associated with transportation-related (i.e. pipelines, breakout tanks, etc.) and non-transportation-related (i.e. the terminal facility) components of the facility. The FSPs are formatted to follow the format preferred by both EPA and DOT. The FSPs include detailed facility-specific information regarding response activities.
- **Emergency Response Action Plan (ERAP)** for each terminal facility that include a summary of emergency response activities to address either a release from a transportation-related or non-transportation-related features.

The term “Facility Response Plan,” or “FRP,” is used in this document to refer to the CP, FSPs, and ERAP as a whole.

HEP will retain this CP, and each terminal facility FSP and ERAP at its headquarters located in Artesia, NM. Each terminal facility and each Qualified Individual will receive a copy of the CP, FSP, and ERAP specific to that facility. The documents are accessible electronically through the Channel HFC Flashpoint interface.

**Other divisions of HEP involved in emergency response activities, such as Logistics, Finance, or Administration, should proceed directly to Section 5.0 of the CP for a summary of the command structure utilized during emergency response activities and a list of duties specific to each position within the command structure.**

## 1.0 Information Summary

### 1.1 Owner and Operator Information

Holly Energy Partners  
1602 West Main Street  
Artesia, New Mexico 88210

### 1.2 Response Zones Containing Significant and Substantial Harm Line Sections

Line sections within each response zone have been evaluated to determine exemptions as defined in 49 CFR §194.101(b) using the flow charts included as Figure 1 and Figure 2. Line sections were then evaluated to determine the potential to cause significant and substantial harm as defined in 49 CFR §194.103(c) using the flow chart included as Figure 3. Line sections that meet the criteria for significant and substantial harm are identified in the FSPs.

Figure 1: 49 CFR §194.101(b)(1) Pipeline Exemption Flow Chart

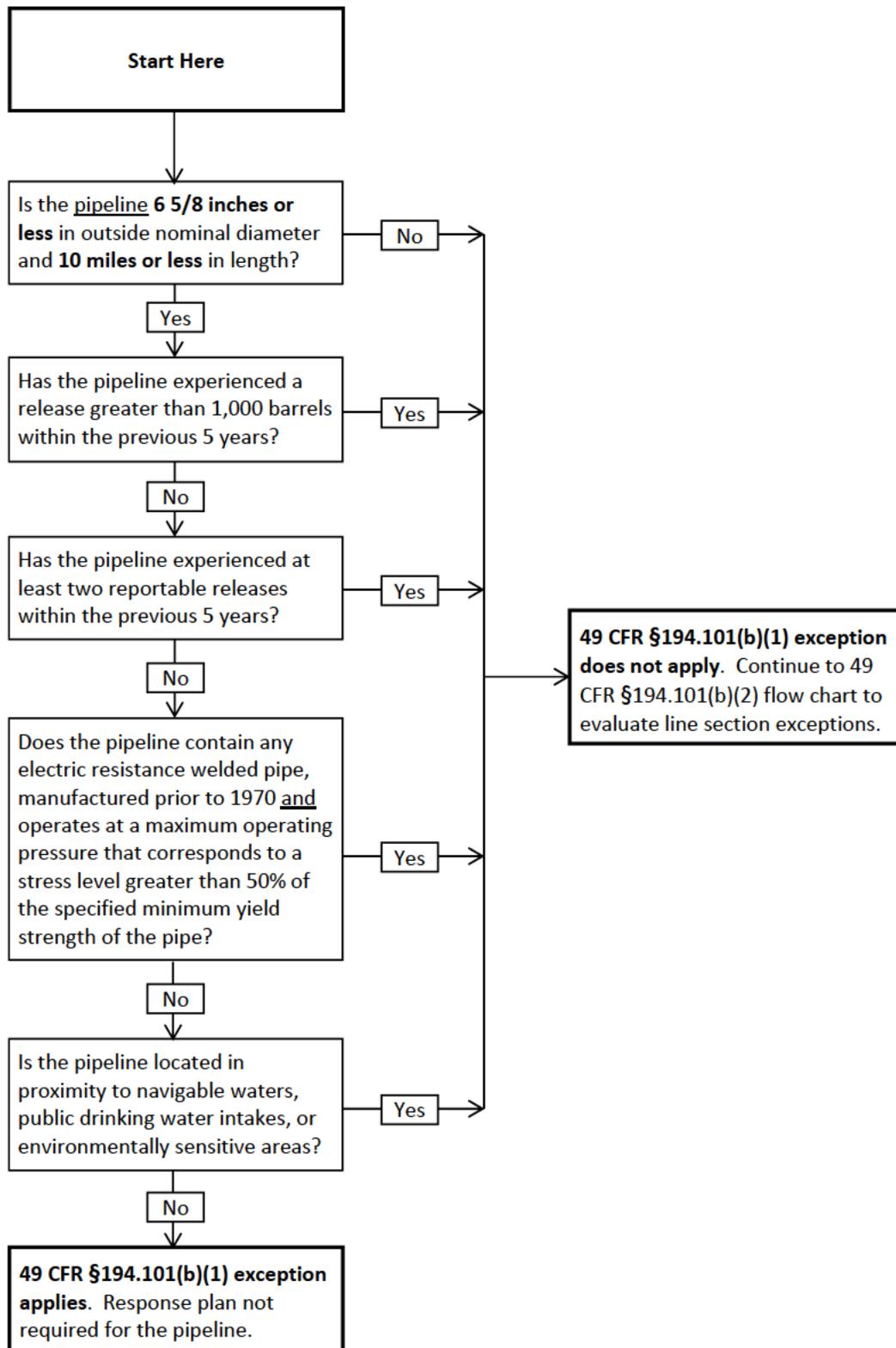


Figure 2: 49 CFR §194.101(b)(2) Line Section Exemption Flow Chart

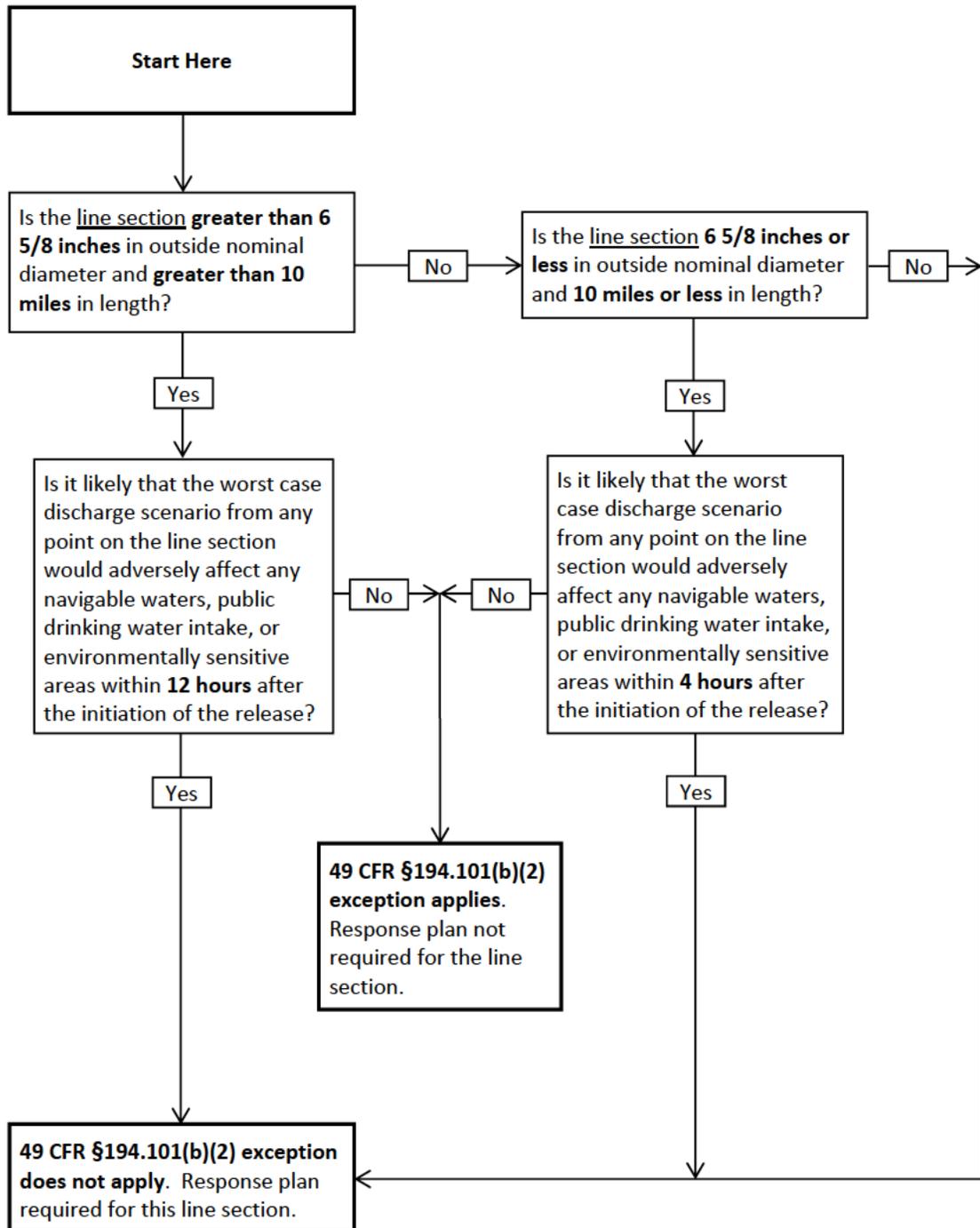
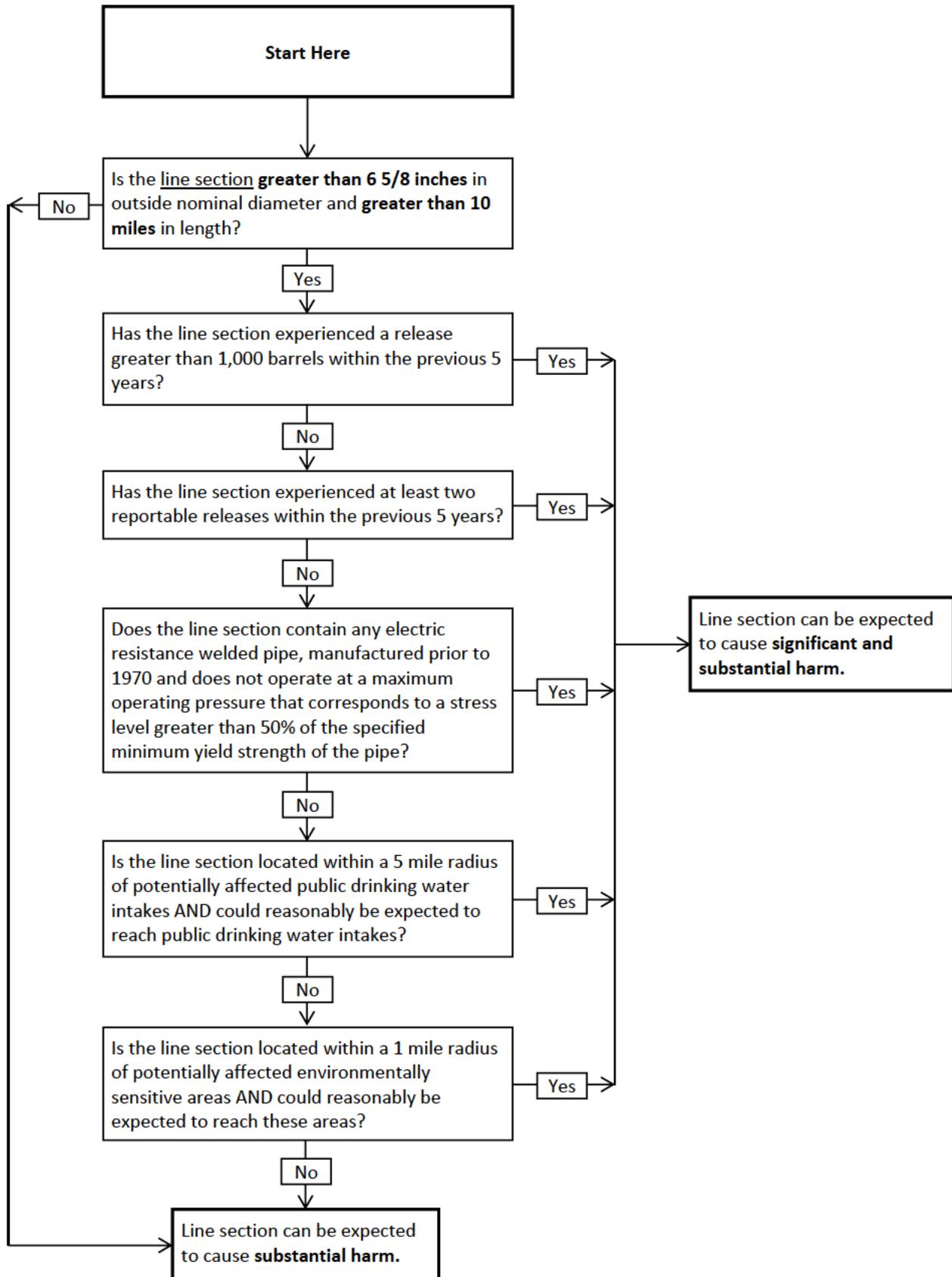


Figure 3: 49 CFR §194.103(c) Line Section Significant and Substantial Harm Flow Chart



## 2.0 Immediate Notification Procedures

A Spill Response Form is provided as Appendix B of this CP to assist with immediate spill response activities. The Spill Response Form includes immediate spill response activities and general information required for notification purposes.

In the case of a spill of petroleum product, the individual discovering the incident will function as the Incident Commander (IC) until relieved of this duty by a Qualified Individual (QI) or alternate. The IC must instruct personnel in the area to immediately begin emergency response activities, as necessary, and notify:

1. Fire and Police Departments by calling 911 (if emergency situation)
2. QI – and advise of the nature of the incident

The QI functions as the communications coordinator and he or she will assess the situation and determine which agencies, organizations, or individuals will be notified depending upon the nature of the spill, and who will make the notification calls. The determination will depend on the type and size of the spill, the time of day, day of the week, and other circumstances regarding the spill. The sequence of government notifications for a reportable spill is as follows:

1. National Response Center (NRC)
2. EPA Emergency Response Center (see FSPs for applicable EPA region)

Concurrent with these external notifications, other facility personnel or spill response contractors may be called to report to the incident as determined by the QI. In addition, state and local agencies will be notified, as needed.

A reportable spill for DOT-regulated liquid pipeline facilities is one that fits any of the following criteria:

- Causes an explosion or fire
- Causes an escape to the atmosphere of more than five barrels a day of highly volatile liquid
- Causes a death or injury
- Causes property damage exceeding \$50,000
- Causes pollution of any body of water
- Is an incident deemed significant by the operator

A reportable oil spill for EPA-regulated on-shore facilities is one that fits any of the following criteria:

- Causes a violation of applicable water quality standards
- Causes a film or sheen upon, or discoloration of the surface of water or adjoining shorelines
- Causes a sludge or emulsion to be deposited beneath the surface of the water or adjoining shorelines

Emergency Notification Phone Lists providing contact information for organizations and individuals requiring, or potentially requiring notification are included in the FSP and ERAP for each facility.

## 3.0 Spill Detection and Mitigation Procedures

### 3.1 Spill Detection

Examples of events and conditions that could pose a threat of a worst case discharge are:

- High or low line pressures
- High or low tank levels
- Abnormal readings on the cathodic protection systems
- Erosion that could affect pipeline foundations and supports

Automated discharge detection equipment aids in identifying potential events that could indicate a discharge. Aerial pilots, Operators, and other HEP personnel are trained to identify situations that indicate potential spills or leaks.

Aerial pilots, Operators, and other HEP personnel visually monitor pipelines and facilities to identify events or conditions that could pose a threat to the surrounding environment. If personnel observe an event or condition, the QI is notified via radio or phone. Examples of such events and conditions are:

- Localized dead vegetation
- Puddles of spilled or leaked material
- Corrosion
- Droplets of material on pipeline
- Discoloration
- Bowing of pipe between supports
- Evidence of material seepage from valves or seals
- Vapor clouds
- Frozen ground

It is the responsibility of Operators to identify and correct any abnormal condition before it becomes an emergency. An abnormal condition exists when:

- There are unexplainable deviations from normal operating conditions
- Operating design limits are exceeded
- Protective devices initiate, such as pressure or temperature shutdown devices
- Supervisory, control, or protective devices for the safe operation of the system are not able to perform their functions. This might be due to:
  - Communication failure to the control center
  - Power failure resulting in loss of communication
  - Malfunction of a piece of critical equipment
- Personnel errors occur such as:
  - Unintended closure of valves or shutdowns
  - Other personnel errors which could cause a hazard to persons or property
- Circumstances develop that are likely to cause emergency conditions

Should an abnormal operating condition occur, it is the responsibility of the Operator to respond to, investigate, and correct (with the assistance of technicians as appropriate) the cause of the abnormal condition as follows:

1. Decide the course of action (i.e. whether to continue pumping, slow pumping, or stop part or all operations in the system).
2. Strictly monitor all system facilities to detect any signs of other failures or an indication that an emergency is eminent.

3. Notify the supervisor and the responsible maintenance personnel of the abnormal operations.
4. Provide for correction of malfunctions as necessary.

When the abnormal condition has been addressed, the Operator will:

- Confirm the system is operating safely under normal operating conditions
- Investigate the cause and take corrective action if variations from normal operating conditions again become evident

Operations management is required to review periodically the response of Operator personnel to determine the effectiveness of the Abnormal Operations Procedures and take corrective action where deficiencies are discovered.

## 3.2 Facility Self-Inspection

Inspections of the system equipment are performed on a continual basis as part of routine operations. Corrective actions are taken as appropriate. Inspection forms located in Appendix C of this Core Plan will be completed on at least a monthly basis. Completed inspection forms are kept at the terminals and at the headquarters office in Artesia, New Mexico. The inspection records are maintained for five years.

(b) (7)(F)

## 3.4 Spill Prevention

### 3.4.1 Spill Prevention Procedures

The Operations Managers (OM) are the designated persons accountable for refined product and/or crude oil spill prevention. Spill prevention briefings for Operator personnel are conducted to ensure adequate understanding of the spill contingency plan. Spill events, malfunctioning components, and newly developed precautionary measures are discussed during these briefings.

Storage tanks in the system are equipped with secondary containment (e.g. earthen berms, metal containment structures, etc.). The volume within these containment berms is sufficient to contain the capacity of the largest aboveground oil storage tank within each storage area plus sufficient freeboard to contain a 25-year, 24-hour storm event. Accumulated storm water is removed with a vacuum truck.

Buried pipe within the system is coated to inhibit corrosion. In addition, most major sections of the system are also provided with cathodic protection. Pipe supports are properly engineered to reduce corrosion.

### 3.4.2 Containment and Drainage Planning

Storm water is managed at each facility to minimize the potential for a release of oil to the environment. Refer to the FSP for facility-specific storm water management practices.

### 3.4.3 Other Spill Prevention Measures

When piping is abandoned in-place or placed out-of-service, it is drained and then sealed at both ends with either caps or blind flanges.

Warning signs are posted, where appropriate, to warn vehicular traffic about the presence of above ground piping and/or tanks.

## 4.0 Oil Spill Removal Organization (OSRO) Information

HEP maintains current service contracts with three Oil Spill Removal Organizations (OSROs): H2O OSRO, Inc., SWS Environmental Services, LP, and Belfor Environmental, Inc. These contracts are located in the Artesia, New Mexico office. Refer to the FSPs to identify the appropriate OSRO contact information for each facility.

## 5.0 Response Activities and Resources

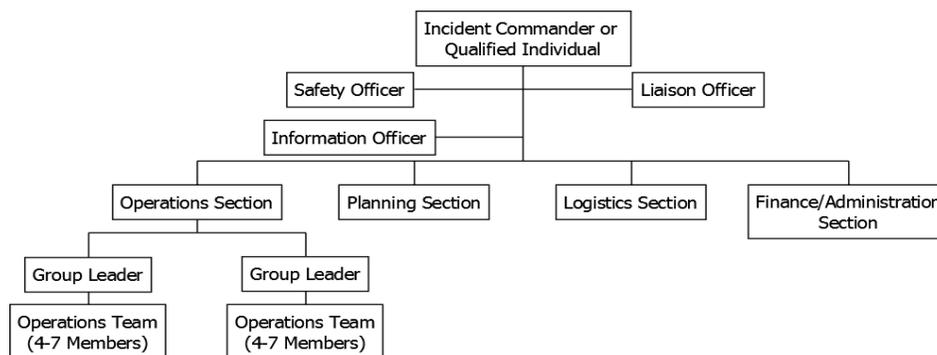
### 5.1 Response Organization and Role Descriptions

The Incident Command System (ICS) will be used as an emergency management tool to aid in mitigating all types of emergency incidents. The Incident Command System allows for Unified Command where several agencies are involved at the command level.

The ICS is made up of Functional Response Teams who provide expert, specialized services to support a response operation. The teams are prepared to handle any or all of their responsibilities.

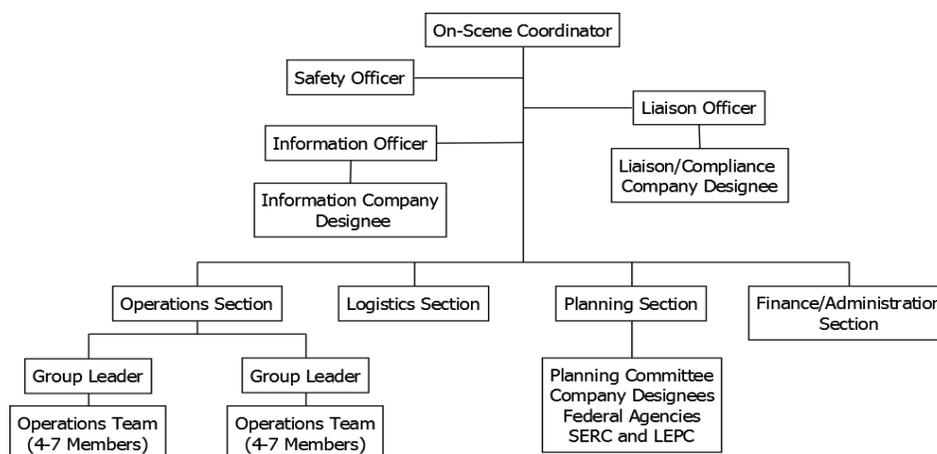
The ICS, depicted in Figure 4, establishes who is in command during emergency incidents. This system is readily adaptable to very small emergency incidents as well as more significant or complex emergencies. This system will be utilized during the initial stages of a spill response and may continue through the entire response unless coordination with community/public emergency response personnel is required making a Unified Command Structure (UCS) necessary. The QI will act as IC, until relieved by the individual listed as IC in the ERAP and FSP. Forms for documentation of ICS response decisions, activities, and costs are located in Appendix E of this CP.

**Figure 4: Incident Command System (ICS)**



The UCS, depicted in Figure 5, is implemented when multiple regulatory agencies are present and elect to participate in the response effort.

**Figure 5: Unified Command Structure (UCS)**



#### 5.1.1 On Scene Coordinator (OSC)

- Will serve as IC under the UCS.
- Will coordinate with the QI.

- Will direct federal response as per subpart D of the National Contingency Plan (40 CFR part 300).

### 5.1.2 Qualified Individual (QI)

- Activate internal alarms and hazard communication systems to notify all system personnel.
- Notify appropriate response personnel, as needed.
- Identify the character, exact source, amount, and extent of the release, as well as other items needed for notification (refer to Spill Response Form included as Appendix B).
- As appropriate, notify and provide necessary information to the Federal, State, and local authorities with designated response roles, including the NRC, the Federal On-Scene Coordinator (OSC), State Emergency Response Commission (SERC), and Local Emergency Planning Committee (LEPC).
- Assess the interaction of the discharged substance with water and/or other substances stored at the facility and notify response personnel at the scene of that assessment.
- Assess the possible hazards to human health and the environment due to the release. This assessment must consider both the direct and indirect effects of the release (i.e., the effects of any toxic, irritating, or asphyxiating gases that may be generated or the effects of any hazardous surface water runoffs from water or chemical agents used to control fire and heat-induced explosion).
- Assess and implement prompt removal actions to contain and remove the substance released.
- Coordinate rescue and response actions as previously arranged with all response personnel.
- Use authority to immediately access HEP funding to initiate cleanup activities.
- Direct cleanup activities until properly relieved of this responsibility.

### 5.1.3 Incident Commander (IC)

- Assume responsibility of on-scene activities from QI.
- Assess magnitude of emergency, proximity to public and other conditions such as wind, terrain and physical properties of the situation.
- Ensure that all required and necessary public agencies are notified.
- Begin assigning ICS roles as resources become available.
- Assign a Liaison Officer, as necessary.
- Conduct overall supervision of safety and mitigation.
- Communicate with pipeline control center or operations personnel to reroute or shutdown lines as necessary.
- Notify the Pipeline Operator and the One Call Center, as applicable.
- Determine need for evacuation, and establish an Evacuation Plan if necessary.
- Determine need for rescue, and establish a Rescue Plan if necessary.
- Determine safety of rescue operations and whether rescue should be delayed until additional resources can arrive.
- Maintain the cause and event log.
- Establish a Command Post in a safe location and a safe distance from the incident.
- Establish a staging area away from the Command Post, up-wind, up-hill, and away from the incident and identify a Staging Unit Leader as necessary.
- Determine need for confinement.
- Establish control lines.
- Constantly re-evaluate situation.

- Establish an effective system for communication (e.g. establish radio frequency and communicate location of Command Post).
- Re-confirm notification of all necessary public agencies.
- Identify all hazardous substances present.
- Ensure creation of the required site-specific Health and Safety Plan before beginning clean-up operations.
- Evaluate the need for additional resources, and, if needed, request them as soon as possible.
- Ensure that backup personnel are standing by with equipment ready to provide assistance or rescue.
- Ensure that personal protective equipment worn is appropriate for the hazards to be encountered.
- Notify management as required.
- Ensure that safety precautions, FRP, and incident conditions are discussed with crews.

#### 5.1.4 Safety Officer

- **Reports directly to the IC.** The Safety person is the primary safety eyes and ears of the IC.
- Develop the Health and Safety Plan and ensure that all safety procedures are adhered to at the emergency site.
- Report all observations of importance to the IC.
- Assist IC in establishing Evacuation Plan, Rescue Plan, Action Plan and site-specific Health and Safety Plan.
- Aggressively make safety observation needs known to Operations Chief and Group Leaders, as well as the IC.
- Assist Liaison Officer with communications with public agency safety officer.
- Work with the Environmental Department to ensure toxicological monitoring is performed as appropriate and ensure results are properly recorded in the event log.
- Ensure appropriate personal protective equipment and clothing are on site and readily available as needed.
- Establish a general Hazard Zone around the area of the release (or any location exceeding 10% of the lower explosive limit [LEL]). Ensure adequate lighting, approved for use in flammable atmospheres, is used in the Hazard Zone.
- Ensure only radios designed and approved for use in flammable atmospheres are used in the Hazard Zone.
- Ensure proper trenching and shoring safety procedures are adhered to during excavation process.
- Inform personnel that at no time will employees be allowed into the Hazard Zone when the atmosphere is at or greater than 25% of the lower flammable limit (LFL).
- Inform personnel that under no circumstances will any powered equipment or any other part containing any electrical contacts be operated inside the Hazard Zone.
- Inform personnel that excavated soils that may contain hydrocarbon liquids or vapor are to be placed downwind wherever possible, or handled in a manner that prohibits migration of the vapors back into the work area. Soils are to be placed on plastic sheeting whenever possible to prevent further migration of liquids to the ground.
- Confirm that all rectifiers providing cathodic protection at the affected portion of the pipeline system are turned off for at least 30 minutes, if possible, prior to the start of work to allow time for the imposed electrical charge to drain.

### 5.1.5 Information Officer

- **Reports directly to the IC.**
- Ascertain facts as soon as possible and consult with IC for initial statement.
- Implement any Pre-Communications Plan.
- Maintain communications with the media, public, local politicians and governmental agencies not participating in the response, as necessary.
- Coordinate with ICS staff on providing information to the public and to senior management (Refer to the Crisis Management Policy included as Appendix A).

### 5.1.6 Liaison Officer

- **Reports directly to the IC.**
- Ensure that all emergency operations are in compliance with local, state and federal laws, regulations and guidelines as well as corporate policy.
- Maintain a detailed activity log.
- As resources arrive, provide interface between on-site response and public and private agencies participating in or with regulatory authority over response activities.
- Assist as liaison with private contractors until relieved of this interaction by a Group Leader.
- Ensure and verify that all persons involved in emergency operations are Hazardous Waste Operations and Emergency Response Standard (HAZWOPER) trained to the required levels.
- Arrange to provide site HAZWOPER or other required training as necessary.
- Ensure that loss reports contain the information required.
- Ensure that no soils with significant hydrocarbons (i.e., those with a concentration of total petroleum hydrocarbons in excess of 5%) are left in place without storm water runoff controls.
- Ensure that spill sites are remediated in accordance with applicable standards with confirmation sampling.

### 5.1.7 Operations Section Chief

- **Reports directly to the IC.**
- Manage overall spill operations, as well as oversee pipeline repair and environmental.
- Appoint staff as needed.
- Coordinate operation with ICS staff.
- Maintain a detailed activity log.
- Assist in preparing Action Plan with IC and Planning Chief.
- Determine the needs for additional resources and communicate those needs to the Logistics Chief.
- Keep IC apprised of conditions.
- Obtain progress reports from all assigned staff.
- Review the status of control/or response operations with the Operations Team Group Leaders as necessary.
- Continue to evaluate the effectiveness of current actions and order additional resources as needed from Logistics.
- Interface with oil spill cooperative managers as they are activated and request Logistics to implement mutual aid agreements with other entities, if necessary.
- Arrange for the transport of recovered product and oily wastes to the nearest appropriate tank in our system.

- Supervise any post-cleanup inspection and direct remediation.

#### 5.1.8 Planning Section Chief

- **Reports directly to the IC.**
- Track incident status information and develops action and contingency plans with IC and Operations Chief.
- Track use of resources (people and equipment).
- Provide technical assistance.
- Help evaluate situation and conditions (weather, traffic).

#### 5.1.9 Logistics Section Chief

- **Reports directly to the IC.**
- Provide response equipment and material.
- Inform IC of response equipment and personnel needs.
- Direct resources for support and services.

#### 5.1.10 Finance/Administration Section Chief

- **Reports directly to the IC.**
- Manage all cost of response efforts.

#### 5.1.11 Group Leaders

- Report directly to the Functional Response Team (i.e. Operations, Logistics, Planning, Finance/Administration) Chief.
- Implement response actions as directed by the Functional Response Team Chief.
- Direct Functional Response Team members regarding tasks to be completed.
- Communicate material and personnel needs to Functional Response Team Chief.

#### 5.1.12 Contractor Personnel Roles and Responsibilities

- Contractor personnel will assist the Operations Team in overall spill mitigation, necessary repair and clean-up efforts.

## 5.2 Communications

Effective communication is key to quickly respond to a release. Types of communication used in response activities will include:

- Cell phones.
- Portable hand-held radios.
- Satellite phones.
- Telephone to maintain communication with off-site personnel or outside agencies.
- A fax machine to receive data from off-site that may be useful when responding to a release.
- Pagers may also be available.

Communication will be maintained at all times with personnel in response vehicles via portable two-way radios and/or cellular phones. Portable, hand-held radios are available for communication purposes in the event of failure of the telephone system.

For methods of communication specific to each facility, refer to the FSPs.

**The Liaison Officer will coordinate communication between the ICS and government response agencies. The Liaison Officer will maintain ongoing communication with the QI and governmental response agencies.**

### 5.3 Command Post and Staging Areas

The IC, with assistance from the Planning Section, will establish an emergency response communications center at the site to serve as a Command Post. This center will be equipped with radios, weather surveillance equipment, telephones and computer equipment. A facility with sufficient space and equipment to maintain communication with the Command Post will be set up near the spill site to serve as an Emergency Operations Center (EOC). The EOC will also serve as the Joint Information Center where the integration of public information officers from local, state and federal response organizations can be managed.

A site-specific Health and Safety Plan would be developed at the spill site. The Safety Officer will determine the zone areas as follows:

- The “Cold” zone is in an area where no danger to public or surrounding environment is present. This area has unrestricted access and is the only zone in which non-response personnel are authorized.
- The “Warm” zone is an area where staging and decontamination take place. This would be the incident command center where the FRP is implemented and outside communication is established.
- The “Hot” zone is where the emergency response activity takes place. Access is strictly controlled to HAZWOPER trained responders equipped with adequate personal protection equipment, using only equipment safe for the hazards present.

### 5.4 Evacuation Plans

In the event an evacuation is necessary, the IC will prepare an evacuation plan and routes based on site conditions and circumstance. Evacuees will remain upwind, uphill, and/or upstream of the incident, where possible. Pre-established evacuation routes specific to each facility are included in the FSPs.

### 5.5 Resource Planning

In addition to on-site response equipment and personnel, HEP can make use of local contractors and off-site HEP equipment and personnel when responding to a release of product. HEP also maintains current service contracts with H2O OSRO, Inc. and SWS Environmental Services, LP. These contracts are located in the Artesia, New Mexico headquarters office. The specified response resources are available in case of the discharge scenarios listed below.

### 5.6 Response Resources

Refer to the FSPs for detailed information regarding response times for spill response resources. HEP, the OSRO, and additional contract personnel can be available to maintain seven days of operational support. Crews will be rotated every eight hours in order to maintain 24-hour cleanup operations. The QI or Alternate will determine the response activities involving crew rotation, and the level of spill response required. Response resources will be available per the response time requirements listed in 49 CFR §194.115(b) and 40 CFR §112 Appendix E. HEP personnel and area contractors will handle the initial response within 12 hours per the Tier I response resources requirement. Additional personnel, equipment and supplies can be available within 36 hours per Tier II response resources requirement. All equipment and personnel required to contain a worst case discharge are available within 60 hours of discovery per the Tier III response resources requirement.

Specific response resources for the worst-case discharge are determined on a per-facility basis due to the unique characteristics of each facility. Refer to the FSPs for response resources available to each facility.

## 5.7 Discharge Scenarios

The following sections describe general actions to be taken to respond to a release from HEP facilities:

### 5.7.1 Minor Spill Scenario (2,100 gallons [50 barrels (bbls)] or less)

Example scenario: A small leak is discovered during a routine inspection of the pipeline. The leak is discovered and stopped before a significant amount of product has spilled.

- Stop product flow
- Call QI who will activate on-site personnel
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- Repair equipment
- Remove free product with vacuum truck
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

### 5.7.2 Medium Spill Scenario (2,100 - 36,000 gallons [50 – 857 bbls])

Example scenario: A pipeline failure occurs. The leak is quickly discovered and measures are taken to stop product flow.

- Stop product flow
- Call QI who will activate on-site personnel, members of Spill Response Team, and external resources, as needed
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
  - Off-site HEP equipment and personnel
  - OSRO
- Begin containment by diking area of spill
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- QI will call local contractor and request earthmoving equipment, as needed
- Remove free product with vacuum trucks
- Begin by using on-site equipment; call for additional resources as needed
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

### 5.7.3 Worst Case Discharge Scenario (Refer to FSPs for volume)

Example scenario: A large tank catastrophically fails while full of oil.

- Stop product flow
- Call QI who will activate on-site personnel, Spill Response Team, OSRO, LEPC, and local contractors, as needed
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
  - Off-site HEP equipment and personnel
  - OSRO
  - SERC – (can provide support through the Area Committee, Local Response Team, Fire Marshall, and LEPCs)
- Begin containment by diking area of spill
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- QI will call other resources as needed
- QI will activate the spill management Incident Command Structure (ICS)
- Remove free product with vacuum trucks
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Spill Response Team and contractor personnel will keep spill diverted from environmentally sensitive areas
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

## 5.8 Response Strategies

### 5.8.1 General Response Strategies (Covering all Types of Spills)

#### First Response to a Spill

Anyone observing a spill should immediately take action or contact the necessary qualified person to take emergency action to stop flow at the source safely. Examples of such action are:

- Stop necessary pumps.
- Close block valves to stop line leaks.
- Stop fuel pumps to minimize leakage from fuel lines.

Upon notification of a spill, the QI will assume command and take control of the response to the incident and will initiate mitigating action and ensure that appropriate government agencies are notified.

#### Preventing Fire and Explosion

Fire and explosion are potential dangers during petroleum product spills. Although flammability varies dramatically with the type of spilled product and the circumstances of the spill, it is essential that all reasonable steps be taken, as soon as possible, to minimize the chance of accidental ignition of the spilled product(s). Examples of such steps are:

- Extinguish open flames, such as welding torches, immediately.
- Cease all operations involving arc welders, grinders, and other sources of sparks.
- Cease all operations that vent oxygen or enriched oxygen mixtures.
- Shut off electric circuits that might create a fire hazard, if possible. This includes rectifiers. Under some circumstances, even a simple switch or electric motor can cause a dangerous spark.

Remember that fans, blowers, electric lights, and electric pumps all have switches and/or electric motors.

- Extinguish smoking materials.

### **Removal of Spilled Product**

Physical removal of the product is the preferred action in almost all cases. Containment and recovery should be attempted. Spills remaining within the confines of the facility and not reaching the water will be cleaned up using materials such as vacuum trucks, backhoes, and sorbents to contain and pick up any spilled product. Oil soaked absorbents, and other contaminated debris will be disposed of at an approved site.

### **5.8.2 Specific Response Strategies**

The specific strategies taken to control, contain, and clean up a spill will vary with the type of product spilled, the location, the amount, and various other factors. Spill containment strategies initiated vary depending on the location of the spill and the affected environment. Environmentally sensitive areas and endangered/threatened species have been identified in the FSPs. Additional precautions will be taken, as necessary, during the response containment and recovery of spills to protect sensitive species. Potential wetlands are listed in "Basis for Operator's Determination of Significant and Substantial Harm" for each response zone.

All spills are subject to the Natural Resources Damage Assessment (NRDA). This assessment is implemented by federal and state agencies. The NRDA determines the total economic and environmental impacts of the spill. The NRDA process determines final restoration. In the event NRDA is implemented, the company will follow all criteria as dictated by the assessment.

#### **Spills Confined to Land**

- If the spill is contained on land and is threatening groundwater, drainage, or populated areas and can be contained or diverted by using heavy equipment, then dispatch heavy equipment and vacuum trucks to divert, contain, and clean up the spill. If it cannot be contained or diverted by using heavy equipment, then dispatch manpower to contain and clean up.
- If the spill is contained on land and not threatening groundwater, drainage, or populated areas, then contain and clean up.

#### **Spills Threatening or Entering Navigable Waters**

If the spill has not reached navigable waters, then divert, contain, and clean up. If the spill is threatening to enter or has entered navigable waters, then dispatch boom and heavy equipment to stop flow from spreading. Use skimmers, vacuum trucks, and sorbents to clean up.

#### **Cleanup Key for Shallow Waters and Shorelines**

- Deploy boom, skimmers, vacuum trucks, pumps, absorbents, transport trucks, and personnel to begin containment and cleanup. Place boom downstream of spill. Utilize vacuum trucks, pumps, skimmers, and sorbents to remove contaminated water. Continue procedure until analysis determines water to be at pre-spill state. Contaminated water will be pumped into transport trucks and transported to a treatment facility with agency approval.
- If 1) the substrata type is sand, gravel, cobble, mud flat, or mud bank; 2) there is medium to high levels of contamination; and 3) the shoreline sediment can be removed without causing erosion of beaches; then mechanized cleaning techniques may be used. If shoreline sediment removal would cause erosion of beaches but sediment could be replaced if removed, then mechanized cleaning techniques may be used. If the sediment cannot be replaced or removed, then manual recovery will be used.
- If the substrata type is boulder, rock cliff, rock bench, or man-made structures, then methods that will be used for cleanup are high or low temperature high pressure flushing (determined by

presence or non-presence of living animals and algae), manual scraping, steam cleaning, or sandblasting. For large pools of oil on flat surfaces, vacuum trucks and sorbents will be used.

## 6.0 Federal, State, and Local Agency Information

Federal, State, and local agencies will vary based on the specific facility and jurisdiction of a release. Refer to the FSPs for a comprehensive list of pertinent agencies.

## 7.0 Training Procedures

### 7.1 General Employee Training

All personnel are required to complete internet-based training courses that cover hazard response procedures, hazardous material recognition and evaluation including instruction on the United States DOT Emergency Response Guidebook, emergency preparedness, hazardous material characteristics, use of respirators, and use of firefighting equipment. These courses are customized to HEP transportation facilities. To complete a course successfully, personnel must pass an exam at the end of each course with a minimum score of 80%. Personnel are required to take part in ongoing training. Personnel are required annually to take part in field exercises using proper air respirator techniques. In addition, personnel take part in firefighting training and other specialized training courses.

Each new employee is required to undergo on the job training under a trained supervisor. This training includes job-specific training; instruction in hazards and safety issues related to the job; normal and abnormal situations; emergency procedures; facility malfunctions and appropriate corrective actions; and instruction in controlling any discharge to minimize the potential for fire, explosion, toxicity or environmental damage. Annual evaluations are made of the training program to ensure that personnel and supervisors maintain a thorough knowledge of any updates or revisions in operations. A copy of the plan and training records are maintained in the Artesia, New Mexico headquarters office.

Initial and periodic review discussions on FRP procedures for personnel will take place during tabletop drills and cover the following:

- Their responsibilities under the FRP
- The name and the procedure for contacting the QI on a 24-hour basis
- Operator's 24-hour telephone number

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with reporting personnel and will cover the following:

- The content of the information summary of the FRP
- The toll-free telephone number of the NRC
- The notification process

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with personnel engaged in response activities attending and will cover the following:

- The characteristics and hazards of the oil discharged
- The conditions that are likely to worsen emergencies, including the consequences of facility malfunctions and their appropriate corrective actions
- The steps necessary to control any accidental discharge of oil and to minimize the potential for fire, explosion, toxicity, or environmental damage
- The proper fire-fighting procedures and the use of equipment, fire suits, and breathing apparatus

### 7.2 HAZWOPER Training (29 CFR §1910.120)

Personnel receive HAZWOPER training and certification by going through the training procedure. Personnel shall receive annual refresher training of sufficient content and duration to maintain their competencies, or shall demonstrate competency in those areas at least yearly.

Non-United States Coast Guard (USCG) classified OSRO responders are required to complete training per 29 CFR §1910.120 and provide documentation of the training to HEP. The Regulatory Coordinator maintains these records.

## 7.3 Certification Levels

### 7.3.1 First Responder Awareness Level

Personnel are certified at the First Responder Awareness level when they complete sufficient training to ensure:

- An understanding of what hazardous substances are, and the risks associated with them in an incident
- An understanding of the potential outcomes associated with an emergency created when hazardous substances are present
- The ability to recognize the presence of hazardous substances in an emergency
- The ability to identify the hazardous substances, if possible
- An understanding of the role of the First Responder Awareness level individual in the ERAP including site security and control and the DOT Emergency Response Guidebook
- The ability to recognize the need for additional resources, and to make appropriate notifications to the communication center

### 7.3.2 First Responder Operations Level

Personnel are certified at the First Responder Operations level upon completion of at least eight hours of training or have had the sufficient experience to demonstrate objective competency in the following areas in addition to those listed for the First Responder Awareness level:

- Knowledge of the basic hazard and risk assessment techniques
- Know how to select and use proper personal protective equipment provided to the First Responder Operations level
- An understanding of basic hazardous materials terms
- Know how to perform basic control, containment and/or confinement operations within the capabilities of the resources and personal protective equipment available with their unit
- Know how to implement basic decontamination procedures
- An understanding of the relevant standard operating procedures and termination procedures

### 7.3.3 Hazardous Materials Technician

Personnel are certified at the Hazardous Materials Technician level when they have received at least 24 hours of training equal to the first responder operations level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Know the classification, identification and verification of known and unknown materials by using field survey instruments and equipment
- Be able to function within an assigned role in the ICS
- Know how to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Technician
- Understand hazard and risk assessment techniques
- Be able to perform advance control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available with the unit
- Understand and implement decontamination procedures
- Understand termination procedures
- Understand basic chemical and toxicological terminology and behavior

### 7.3.4 Hazardous Materials Specialist

Personnel will be certified at the Hazardous Materials Specialist level when they have received at least 24 hours of training equal to the technician level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Understand classification, identification and verification of known and unknown materials by using advanced survey instruments and equipment
- Knowledge of the state emergency response plan
- Be able to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Specialist
- Understand in-depth hazard and risk techniques
- Be able to perform specialized control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available
- Be able to determine and implement decontamination procedures
- Have the ability to develop a site-specific Health and Safety Plan
- Understand chemical, radiological and toxicological terminology and behavior

### 7.3.5 Incident Commander

Personnel are certified at the Incident Commander level when they have received at least 24 hours of training equal to the first responder operations level and have competency in the following areas:

- Know and be able to implement the ICS
- Know how to implement the ERAP
- Know and understand the hazards and risks associated with employees working in chemical protective clothing
- Know how to implement the local emergency response plan
- Knowledge of the state emergency response plan and of the Federal Regional Response Team
- Know and understand the importance of decontamination procedures

## 7.4 Training Records Retention

All training records for HEP personnel and contractor personnel listed in the CP, as well as records on instructors and/or training organizations that provide training, are kept at the headquarters office in Artesia, New Mexico and will be maintained as long as individuals are assigned duties under this FSP.

## 8.0 Equipment Testing

Multiple entities involved with spill response actions are responsible for equipment inspections and testing. Response equipment testing and deployment drill logs for HEP-owned resources are maintained in Appendix B of the FSPs. Certification that OSROs have performed applicable equipment testing and deployment drills are provided in Appendix G of the FSPs.

## 9.0 Drill Program

### 9.1 Spill Response Drills

Numerous spill response drills are performed in order to ensure that HEP personnel are familiar with spill response procedures. The following table describes the types and frequency of drills performed. Drill logs have been included in Appendix D of this CP. Copies of completed Drill Logs will be maintained in Appendix D of the FSPs to document drills conducted at each facility. Refer to Appendix D of the FSPs for the latest logs.

| Drill/Exercise                                | Description   |
|---|---|
| Qualified Individual (QI) Notification Drills | Four drills will be conducted annually to exercise communication between facility personnel and QI.   |
| Internal Tabletop Drills                      | Two drills will be conducted annually with at least one every three years involving a worst case discharge scenario that will demonstrate the Response Team's ability to organize, communicate and make strategic decisions regarding population and environmental protection during a drill. The designated Spill Emergency Response Team members and QI for each area will meet to pose this drill.   |
| Operator Equipment Deployment Drills          | Two drills will be conducted annually to demonstrate the deployment and operation of equipment (company-owned and/or OSRO) listed in the plan into its intended operating environment.  |
| Triennial Cycle of Exercising the Entire FRP  | Every three years all components of the entire FRP will be exercised to ensure that all components of the plan function adequately for response to an oil or hazardous spill.   |
| Government Unannounced Drills (External)      | An Area Exercise will be conducted when scheduled by the government. This exercise will include a full test of the FRP with government involvement. The Unified Command System for the area will be tested. A scenario will be developed by the lead plan holder (HEP), in consultation with the exercise design team (comprised of representatives from Federal, State and local Government, environmentalists and industry).The scenario will involve equipment deployment. The extent of equipment deployment shall be determined by the lead plan holder in consultation with the exercise design team. |

### 9.2 Manned/Unmanned Pipeline Emergency Procedures

In addition to the drills listed above, HEP personnel take part in initial and ongoing training on the procedures for manned and unmanned pipeline emergencies. Operator personnel have the ability to shut down the line from the Operations Control Center. Operator and field personnel go through practice procedures that prepare them to recognize normal and abnormal situations, what constitutes an emergency, emergency shutdown procedures, and proper notification procedures. All pipeline personnel

know where block valves are located in the event manual shutdown is necessary. Manned/unmanned pipeline emergency procedures are conducted quarterly.

### **9.3 Drill Program Responsibility, Implementation, and Recordkeeping**

The Regulatory and Environmental, Health, and Safety Divisions have responsibility for the drill program implementation, execution, monitoring, and recordkeeping. Documentation and records of drills are kept at the office in Artesia, New Mexico for three years and are available to government agencies. Post-drill and post-incident evaluations are completed following the drill or incident. The Regulatory Division incorporates lessons learned and agency recommendations into subsequent FRP revisions.

## 10.0 Plan Review and Update Procedures

The FRP will be reviewed at least every five years from the last approval date and resubmitted to the DOT and the EPA. In the event of any of the following changes, the plan will be revised within 60 days and submitted to DOT and EPA, (DOT and EPA facility identification will be provided):

- A change in the facility's configuration that materially alters the information included in the FRP
- A change in the type of oil handled, stored, or transferred that materially alters the required response resources
- A material change in capabilities of the OSRO(s) that provides equipment and personnel to respond to discharges of oil
- A material change in the facility's spill prevention and response equipment or emergency response procedures
- Any other changes that materially affect the implementation of the FRP
- Amendments to personnel and telephone number lists included in the FRP and a change in the OSRO(s) that does not result in a material change in support capabilities do not require approval by the EPA Regional Administrator as the revisions occur
- The owner or operator of a facility that submits changes to FRP shall provide the EPA-issued facility identification number (where one has been assigned) with the changes
- The owner or operator shall review relevant portions of the NCP and applicable ACPs annually and, if necessary, revise the FRP to ensure consistency with these plans

This FRP (CP, FSPs, and ERAPs) includes facility operations (and expansions) active as of July 2013. This FRP will be revised when changes in system design, construction, operation, or maintenance are made that affect the systems potential to discharge oil. Such amendments will be implemented no later than six months after such change occurs.

Per 49 CFR §194.119, HEP will submit two electronic copies of this FRP to:

Pipeline and Hazardous Materials Safety Administration  
 Department of Transportation  
 PHP 80  
 1200 New Jersey Avenue, SE  
 Washington, DC 20590-0001

Per 40 CFR §112.20(d), HEP will submit two electronic copies of this FRP to one of the following, depending on the location of the site and whether a facility is expected to cause substantial harm to the environment:

SPCC/FRP Coordinator  
 U.S. EPA, Region VI (6SF-RO)  
 1445 Ross Ave.  
 Dallas, TX 75202-2733  
 (214) 665-6489

SPCC/FRP Coordinator  
 U.S. EPA, Region VII  
 11201 Renner Blvd.  
 Lenexa, KS 66219  
 (913) 551-7647

Oil Program Coordinator  
U.S. EPA, Region VIII (8EPR-SA)  
999 18th Street, Suite 500  
Denver, CO 80202-2466  
(303) 312-6839

Oil Team/SPCC Coordinator  
U.S. EPA, Region IX (SFD1-4)  
75 Hawthorne St.  
San Francisco, CA 94105  
(415) 972-3075

SPCC/FRP Coordinator  
U.S. EPA, Region X (ECL-116)  
1200 6th Avenue  
Seattle, WA 98101  
(206) 553-1671

**Appendix A:  
Crisis Management Policy**

|   |           |  |            |
|---|-----------|--|------------|
|  |           | <b>ENVIRONMENTAL HEALTH &amp; SAFETY<br/>POLICY MANUAL</b> |            |
|   |           | <b>Crisis Management Policy</b>                            |            |
| <b>Original Issue Date:</b>   | 3/15/2010 | <b>Last Revision Date:</b>                                 | 08/15/2011 |
| <b>Revision Nr:</b>   | 2         | <b>Document Nr:</b>  | 202        |

## 1.0 PURPOSE

To ensure that HollyFrontier Corporation (Company) resources are directed effectively and efficiently in response to any crisis that occurs within a business unit in a manner that supports the onsite response. The standard also provides a framework to ensure that crisis events are managed so as to minimize their impact and protect the interests of the Company, its shareholders and the public.

## 2.0 SCOPE

This policy applies to all Company owned or operated divisions and facilities, including, but not limited to, refining, pipeline/terminals, asphalt, trucking, aviation and corporate offices. This policy is not intended to replace existing business unit site emergency plans, incident response plans, integrated response plans, etc; each such plan should be reviewed against this policy to ensure consistency and conformity.

## 3.0 DEFINITIONS

- 3.1 Crisis is any significant incident that is likely to harm the Company's reputation or draw media and/or public attention.
- 3.2 Crisis Management includes the immediate response to a crisis where priorities are the preservation of life, property protection, event containment and public relations, as well as addressing the longer term strategic issues potentially generated such as providing business continuity and responding to customer, shareholder and public concerns.
- 3.3 Significant Incidents include any incident that results in:
- 3.3.1 Death (employee or contractor)
  - 3.3.2 Days-away-from-work injury (employee only)
  - 3.3.3 Fire, explosion spill or release that:
    - 3.3.3.1 Requires a response by any emergency response team (e.g., hazmat, fire department or brigade, oil spill response team, etc.), or
    - 3.3.3.2 Causes >\$25,000 of direct damage cost. or
    - 3.3.3.3 Meets the definition of a Tier 1 Process Safety Event as defined by *API 754 - Process Safety Performance Indicators for the Refining and Petrochemicals Industries*.

## 4.0 RESPONSIBILITIES

- 4.1 The Vice President of EHS shall develop and maintain a Corporate Crisis Management Plan consistent with this policy. He shall also schedule and coordinate annual exercises to test this plan.
- 4.2 The Chief Operating Officer shall ensure that necessary resources are provided to implement the Company Crisis Management Plan and that it is periodically tested to ensure its efficacy.
- 4.3 The Leadership Council shall review the Company Crisis Management Plan on an annual basis to ensure it is accurate and current.
- 4.4 Local management at each facility or operation impacted by this policy shall develop a site specific crisis management plan that supports this Company policy. Such plans may be part of other facility emergency response and/or contingency plans.

## 5.0 PROCEDURE

- 5.1 Crisis Management Plans shall include the following elements:
  - Crisis team structure, including specific job titles
  - Specific Roles & Responsibilities for each team member
  - Emergency Contact list
  - Outline of initial actions to be taken during a crisis, including notification protocols
  - Media relations guidelines
  - Procedures to provide support to employees, their families and/or area residents directly impacted by the crisis
  - Periodic drills and exercises to evaluate crisis management capabilities and identify areas for improvement.
  - Provisions to audit and review crisis management plans at least annually.
- 5.2 All press releases shall be approved by the President, General Counsel or Vice President of Investor Relations prior to release.
- 5.3 Each site shall designate a public information officer or spokesperson(s) who will be the only personnel authorized to speak to the media.
- 5.4 All photographs taken on Company property (film or digital) are the property of the Company; employees shall not transmit photographs of any Company incidents to 3<sup>rd</sup> party sources.

## 6.0 TRAINING

- 6.1 All personnel who are members of a crisis management team shall be trained on this Company policy as well as general media relations training.
- 6.2 All employees shall be informed of the restrictions on media communications.

## 7.0 REFERENCES

- 7.1 *Exhibit A: HollyFrontier Corporation Crisis Management Plan*
- 7.2 OSHA Standard 29CFR1910.38 - Emergency Action Plans
- 7.3 OSHA Standard 29CFR1910.120 – Hazardous Waste Operations and Emergency Response
- 7.4 EPA Standard 40CFR355 – Emergency Planning and Notification
- 7.5 EPA Standard 40CFR 68 – Risk Management Plans

## 8.0 RECORDS

- 8.1 Records shall be maintained of drills and exercises conducted to test the efficacy of such plans including any resultant improvements implemented. Records must also be maintained of all actual incidents that cause site or facility crisis management or emergency management plans to be activated.
- 8.2 Records of training will be created and retained in accordance with the Company records retention policy.

## EXHIBIT A

**HOLLYFRONTIER CORPORATION  
CRISIS MANAGEMENT PLAN**

The procedures detailed in this plan should serve as guidelines for handling a crisis situation involving any Company facility. Any crisis will involve circumstances that are inherently unique and unanticipated; therefore, this plan does not attempt to plan for or anticipate every situation, but rather to establish a protocol that can be adapted for any situation.

**Crisis Team – Roles & Responsibilities**

The Crisis Team Coordinator is responsible for evaluating all information, determining the extent/seriousness of the event, crisis or potential crisis, and choosing appropriate strategies and actions. The specific Coordinator is based on the part of the Company affected by the Crisis, eg, refining, asphalt, etc. The Crisis Team members are Company Officers who will be selected on an as-need basis by the Crisis Team Coordinator.

The Crisis Team Coordinator's responsibilities include:

- assembling team members,
- making notifications, eg, investment community, company officers, etc.
- gathering and assessing information,
- coordinating all immediate actions at the Corporate level,
- providing support to the impacted facility, eg, financial, legal, technical, etc., and
- developing and issuing press releases, including follow-up with the media,

**Crisis Team – Structure**

One of the following will be the Team Coordinator in the event of a Company crisis:

- Dave Lamp, Chief Operating Officer (COO), : For Navajo and Tulsa Refining issues & matters
- Jim Stump, Sr. Vice President, Refining: For El Dorado, Cheyenne and Woods Cross refining issues & matters
- Mark Cunningham, Vice President, Holly Logistics Services: For all Holly Energy Partners (HEP) issues & matters
- David Blair, Vice President, NK Asphalt Partners: For all NK Asphalt Partners issues & matters
- Tom Creery, Vice President, Crude Supply: For all Holly Transportation issues & matters
- Dave Lamp, COO: For any matters unrelated to the above 3 areas

A Crisis Team will be formed that may include the following, as necessary:

- Dave Lamp, COO
- George Damiros, Sr. Vice President
- Jim Stump, Sr. Vice President
- Mark Cunningham, Vice President, Holly Logistics Services, L.L.C.
- David Blair, Vice President, NK Asphalt Partners
- Tom Creery, Vice President, Crude Supply
- Denise McWatters, General Counsel
- Neale Hickerson, Vice President, Investor Relations
- David Jelmini, Vice President, Environmental, Health & Safety
- Nancy Hartmann, Vice President, Human Relations
- Joele Frank, Wilkinson Brimmer Katcher (“JFWBK”), outside public and investor relations advisor

Additional team members may be added at the discretion of the Team Coordinator.

## Responding to a Crisis: Initial Actions

It is anticipated that the initial notification to the Crisis Team Coordinator will come from senior business unit leaders from various facilities and assets. However, notifications may come through other sources, such as news media reporters, customers, governmental officials, local law enforcement, etc. Regardless of origin of the initial notification, it is crucial that the appropriate Crisis Team Coordinator be reached in person – either day or night.

The Coordinator shall contact and assemble the necessary team members to help manage the crisis from the Corporate office. The following initial actions should be considered for each event.

- Collect the facts
  - Get as much specific information as quickly as possible to help determine the severity of the situation. Identify facts vs. speculation and rumors.
- Determine the strategy before acting
  - When deciding on a communications strategy, considerations include (but are not limited to):
    - Legal and regulatory requirements and employee, customer and shareholder concerns;
    - Right to privacy rules and regulations;
    - The level of the company’s responsibility/involvement;
    - The number of individuals affected and/or potentially affected;

- Whether outreach is necessary to correct harmful inaccuracies.

- Reactive Communications Strategy

Discuss a verbal response, prepare a statement, but do not release a statement or make any comments until contacted by the media. There is no reason to make news. Ensure that only designated spokespeople talk to the media. Remember, issuing a press release or statement is irrevocable.

- Proactive Communications Strategy

Consider releasing a statement proactively to the press if:

- the situation affects a great number of people and the Company would be perceived as covering something up if it didn't release a statement;
- a health hazard exists; or
- a message needs to be released immediately to prevent inaccurate or potentially damaging information from being disseminated.

- Communication Dissemination within Company

As information is released to the public, it is important the same information be disseminated across the company to the appropriate extent. This allows employees to note (if contacted) that the company has issued a public communication, and can refer the inquiry to those communications.

- Reach out to appropriate audiences

Identify the audiences and determine how to communicate with them. Address concerns group by group and assign people, by name, to communicate with each audience. Customize responses, but be consistent – remember that messages in media statements, Q&A's, talking points, letters and other support materials must be consistent across all constituencies. Appropriate audiences may include:

- Management
- Employees
- Media
- Shareholders and analysts
- Customers
- Suppliers
- Government agencies and other public officials

- Additional media outreach

It may be necessary to call reporters who have not contacted you if you know they are or will be writing a story to make sure they get the Company's side of the story or alternatively to mitigate interest in a story. Calls can be referred to

JFWBK and JFWBK can be tasked with media outreach on the company's behalf.

- Anticipate and prepare for next day stories

Monitor Day One stories; be prepared to respond to new issues. Continue to emphasize the Day One response and messages. Do not make new news – just because it is another day does not mean you need a brand new statement. Be aware of future events, such as court dates, that could trigger renewed interest in the story.

- Monitor the situation aggressively

Continue to update internal and external audiences in the days following the crisis with new information, as available.

**NOTE:** *All emails related to a crisis or potential crisis matters should be addressed to Denise McWatters (General Counsel) with cc: to other necessary individuals in order to preserve attorney-client privilege. Emails should NOT include speculation about the crisis situation – just the facts.*

## Dealing with the Media

In a crisis, news media are likely to approach employees at Company facilities seeking comment. The following outlines procedures for employees at an affected facility if they are “approached” by a television crew or a reporter.

If a Reporter or Camera Crew Show Up:

- Alert the appropriate Crisis Team Coordinator
- Send the public information officer or designated spokesperson to meet the reporter/camera crew outside the gates of the facility. Remember that the Company’s facilities are not open to the public and reporters should not be granted access to the building/facility.
- Get the full name, title, organization, and phone number of the reporter.
- Only the public information officer or designated spokesperson may comment on behalf of the Company. If a non-authorized employee is asked for a comment, avoid using the term, “no comment”. Instead say, *“I’m not authorized to comment on behalf of the company in matters such as this. It is company policy to direct all press inquiries to [NAME], our Public Information Officer, [if one exists for this asset / location], or Neale Hickerson at our corporate headquarters.”*
- Do not speculate about the incident, state only the basic facts. Never release the names of injured personnel.
- Get as much information as possible about what the camera crew/reporter are covering, including: how the reporter found out about the incident, where it occurred, when it occurred, the name of the person(s) involved in the incident, whether the reporter intends to publish or broadcast something about the incident and whether they will be mentioning the company, and what the deadline is for a response.
- All Press Releases must be approved by the Company COO, Vice President-Investor Relations or General Counsel.
- While not required, JFWKB can provide assistance in preparing press release. (This would not eliminate the above requirement of internal approval for any press release or written public statement.

## Template Press Release

### FOR IMMEDIATE RELEASE

#### [HollyFrontier Corporation / Holly Energy Partners, L.P.] Issues Statement

DALLAS, [DATE] – [HollyFrontier Corporation (NYSE: HFC / Holly Energy Partners L.P. (NYSE: HEP))] today issued the following statement regarding the [INSERT INCIDENT DESCRIPTION] that occurred at the company's [NAME] [refinery / facility] located at [STREET ADDRESS] in [CITY, STATE] on [DAY, DATE].

Include details about the incident that have been confirmed. This could include the cause of the incident, how operations are affected, when operations are expected to return to normal. Do not include names of potential injured parties, speculation on cause or optimistic predictions of outcomes.]

[INSERT QUOTE (IF APPROPRIATE)], said DESIGNATED SPOKESPERSON].

Add other specific details if warranted.

[USE IF HFC RELATED]

About HollyFrontier Corporation:

HollyFrontier Corporation, headquartered in Dallas, Texas, is an independent petroleum refiner and marketer that produces high value light products such as gasoline, diesel fuel and jet fuel. HollyFrontier operates through its subsidiaries a 100,000 barrel per stream day ("bpsd") refinery located in Artesia, New Mexico, a 52,000 bpsd refinery located in Cheyenne, Wyoming, a 135,000 bpsd refinery located in El Dorado, Kansas, a 125,000 bpsd refinery located in Tulsa, Oklahoma and a 31,000 bpsd refinery in Woods Cross, Utah. HollyFrontier also owns a 34% interest (including the general partner interest) in Holly Energy Partners, L.P. (NYSE "HEP"), which through subsidiaries owns or leases approximately 2,500 miles of petroleum product pipelines in Texas, New Mexico and Oklahoma and petroleum product terminals in several Southwest and Rocky Mountain states.

[USE IF HEP RELATED]

About Holly Energy Partners, L.P.:

Holly Energy Partners, L.P., headquartered in Dallas, Texas, provides petroleum product and crude oil transportation, tankage and terminal services to the petroleum industry, including HollyFrontier Corporation, which currently owns a 34% interest (which includes a 2% general partner interest) in the Partnership. The Partnership owns and operates petroleum product and crude pipelines, tankage, terminals and loading facilities located in Texas, New Mexico, Arizona, Oklahoma, Washington, Idaho and Utah. In addition, the Partnership owns a 25% interest in SLC Pipeline LLC, a transporter of crude oil in the Salt Lake City area.

**Contact:**

M. Neale Hickerson  
Vice President, Investor Relations  
HollyFrontier Corporation  
(214) 871-3555

OR (If using JFWBK for contact purposes):

Andrew Siegel  
Joele Frank, Wilkinson Brimmer Katcher  
(212) 355-4449

## Emergency Contact List

### HollyFrontier Corporation:

- **Dave Lamp, Chief Operating Officer**  
Office: 214-871-3531 Cell: 214-738-0321
- **George Damiris, Sr. Vice President**  
Office: 214-871-3442 Cell: 214-934-9952
- **Jim Stump, Sr. Vice President**  
Office: 303-714-0109 Cell 316-734-9371
- **Tom Creery, Vice President, Crude Supply**  
Office: 214-871-3528 Cell: 214-725-4681
- **Denise McWatters, General Counsel**  
Office: 214-871-3480 Cell: 214-534-9980
- **Neale Hickerson, Vice President, Investor Relations**  
Office: 214-871-3572 Cell: 214-529-6908
- **David Jelmini, Vice President, Environmental, Health & Safety**  
Office: 801-294-4569 Cell: 801-554-6036
- **Nancy Hartmann, Vice President, Human Relations**  
Office: 214-871-3503 Cell: 214-683-5651

### Cheyenne

- **Kevin Burke, Vice President, Refinery Manager**  
Office: 307-771-8915 Cell: 307-630-6770
- **Don Finley, Public Information Officer (Back up)**  
Office: 307-771-8865 Cell: 307-631-8865

### El Dorado:

- **Josh Goodmanson, Vice President, Refinery Manager (Back up PIO)**  
Office: 316-321-8467 Cell: 316-734-0629
- **Bill Kloeblen, Public Information Officer**  
Office: 316-321-8306 Cell: 316-734-9368

### Navajo:

- **Michael McKee, Vice President, Refinery Manager**  
Office: 575-748-6743 Cell: 575-308-4028
- **Johnny Lackey, Public Information Officer**  
Office: 575-746-5490 Cell: 972-261-8075
- **Doug Price, Public Information Officer (Back up)**  
Office: 575-746-5294 Cell: 575-703-5168

**Tulsa:**

- **Jim Resinger, Vice President, Refinery Manager**  
Office: 918-594-6262 Cell: 918-605-2767
- **Kim Little, Public Information Officer**  
Office: 918-588-1115 Cell: 918-519-0615
- **Andrew Haar, Public Information Officer (Back up)**  
Office: 918-594-6284 Cell: 918-830-1679

**Woods Cross:**

- **Lynn Keddington, Vice President, Refinery Manager**  
Office: 801-299-6605 Cell: 801-554-7324
- **Mike Astin, Public Information Officer**  
Office: 801-299-6625 Cell: 801-550-8405
- **Conrad Jenson, Public Information Officer (Back up)**  
Office: 801-299-6683 Cell: 801-554-6235

**Holly Energy Partners:**

- **Mark Cunningham, Vice President, Holly Logistics Services, L.L.C.**  
Office: 214-871-3846 Cell: 214-208-1931

**NK Asphalt Partners:**

- **David Blair, Vice President, NK Asphalt Partners**  
Office: 480-256-1999 Cell: 214-206-5826
- **Charlie Rodriguez, Senior Manager, NK Asphalt Partners**  
Office: 623-385-3663 Cell: 623-695-6501

**Outside Contacts:**

- **Andrew Siegel, Corporate Communications Consultant,**  
**Joele Frank, Wilkinson Brimmer Katcher**  
Office: 212-355-4449 x127 Cell: 917-885-6010
- **Aaron Palash**  
**Joele Frank, Wilkinson Brimmer Katcher**  
Office: (212) 895-8603 Cell: (646) 675-4103
- **Zurich – Insurance claims (24/7)**  
Office: 800-987-3373 Email: [USZ\\_CareCenter@zurichna.com](mailto:USZ_CareCenter@zurichna.com)
- **Chris Moss, Taylor Risk Consulting (Insurance)**  
Office: 972-447-2053 Cell: 214-850-2401

**Appendix B:  
Spill Response Form**

**SPILL RESPONSE FORM****Immediate Response Actions**

- Evaluate if an evacuation is needed.
- Prevent flame or spark and do not operate a cell phone.
- If it is safe to do so, extinguish any flames.
- If it is safe to do so, move quickly to stop the discharge by closing any open valves or shutting off pumps, as necessary.
- If it is safe to do so, eliminate any potential ignitions sources (motors or electrical circuits).
- If there are significant injuries notify the local 911 and Company Safety Representative.
- Alert the Control Center (1-877-748-4464) and your Supervisor immediately of the release and system involved within 30 Minutes.

**Operational Response Actions**

- Seek assistance from other HEP personnel.
- Dike flow path to limit the downhill flow.
- Place Sorbents, Pads and Booms, as necessary.
- Call for a Vacuum Truck to remove fluids, as directed by your Supervisor.
- Call for Excavation Equipment, as directed by your Supervisor.
- Outline impact area with marking paint. Remove as much impacted soil as possible and place on plastic.
- Use safety tape, cones, fencing, or barriers to secure excavation.

**1. Reporter Information**

Reporter's Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Position: \_\_\_\_\_

Phone Numbers: Day (\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_ Evening (\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_

Company: \_\_\_\_\_

Organization Type: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**2. Incident Description**

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ AM/PM

Weather Conditions: \_\_\_\_\_

Incident Address/Location: \_\_\_\_\_

Nearest City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Distance from City: \_\_\_\_\_ Units of Measure: \_\_\_\_\_ Direction from City: \_\_\_\_\_

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Borough: \_\_\_\_\_

**If tank**, Container Type: \_\_\_\_\_

Tank Oil Storage Capacity: \_\_\_\_\_ Units of Measure: \_\_\_\_\_

Facility Oil Storage Capacity: \_\_\_\_\_ Units of Measure: \_\_\_\_\_

**If pipeline**, Name of Pipeline: \_\_\_\_\_

Location (Valve/Sump/Line/Tank/Mile Post): \_\_\_\_\_

Latitude: \_\_\_\_\_ Degrees \_\_\_\_\_ Minutes \_\_\_\_\_ Seconds

Longitude: \_\_\_\_\_ Degrees \_\_\_\_\_ Minutes \_\_\_\_\_ Seconds

Were Materials Discharged? \_\_\_\_\_ (Y/N) Confidential? \_\_\_\_\_ (Y/N)

Source and/or Cause of Incident:

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### 3. Material

| CHRIS Code | Discharged Quantity | Unit of Measure | Material Discharged to Water? | Quantity to Water | Unit of Measure |
|------------|---------------------|-----------------|-------------------------------|-------------------|-----------------|
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |

### 4. Response Action

Actions Taken to Correct, Control or Mitigate Incident:

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### 5. Impact

Number of Injuries: \_\_\_\_\_ Number of Deaths: \_\_\_\_\_

Were there Evacuations? \_\_\_\_\_ (Y/N) Number Evacuated: \_\_\_\_\_

Was there any Damage? \_\_\_\_\_ (Y/N)

Damage in Dollars (approximate): \_\_\_\_\_

Medium Affected: \_\_\_\_\_

Description: \_\_\_\_\_

More Information about Medium: \_\_\_\_\_

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**6. Caller Notifications (Refer to ERAP or FSP for required notifications)**

| Entity | Contact Number | Date/Time Contacted |
|--------|----------------|---------------------|
| NRC    | 1-800-424-8802 |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |

**7. Disposal Information**

| Material | Disposal Facility | Location | RCRA Permit/Manifest No. |
|----------|-------------------|----------|--------------------------|
|          |                   |          |                          |
|          |                   |          |                          |
|          |                   |          |                          |
|          |                   |          |                          |

**8. Additional Information**

Any information about the incident not recorded elsewhere in the report:

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**Appendix C:**  
**Tank and Secondary Containment Inspection Forms**



**Appendix D:**  
**Response Drill Logs**









**Appendix E:**  
**Incident Command System (ICS) Forms**

**NATIONAL INCIDENT MANAGEMENT SYSTEM  
INCIDENT COMMAND SYSTEM**

**ICS FORMS BOOKLET  
FEMA 502-2**

**September 2010**

## INTRODUCTION TO ICS FORMS

The National Incident Management System (NIMS) Incident Command System (ICS) Forms Booklet, FEMA 502-2, is designed to assist emergency response personnel in the use of ICS and corresponding documentation during incident operations. This booklet is a companion document to the NIMS ICS Field Operations Guide (FOG), FEMA 502-1, which provides general guidance to emergency responders on implementing ICS. This booklet is meant to complement existing incident management programs and does not replace relevant emergency operations plans, laws, and ordinances. These forms are designed for use within the Incident Command System, and are not targeted for use in Area Command or in multiagency coordination systems.

These forms are intended for use as tools for the creation of Incident Action Plans (IAPs), for other incident management activities, and for support and documentation of ICS activities. Personnel using the forms should have a basic understanding of NIMS, including ICS, through training and/or experience to ensure they can effectively use and understand these forms. These ICS Forms represent an all-hazards approach and update to previously used ICS Forms. While the layout and specific blocks may have been updated, the functionality of the forms remains the same. It is recommended that all users familiarize themselves with the updated forms and instructions.

A general description of each ICS Form's purpose, suggested preparation, and distribution are included immediately after the form, including block-by-block completion instructions to ensure maximum clarity on specifics, or for those personnel who may be unfamiliar with the forms.

The ICS organizational charts contained in these forms are examples of how an ICS organization is typically developed for incident response. However, the flexibility and scalability of ICS allow modifications, as needed, based on experience and particular incident requirements.

These forms are designed to include the essential data elements for the ICS process they address. The use of these standardized ICS Forms is encouraged to promote consistency in the management and documentation of incidents in the spirit of NIMS, and to facilitate effective use of mutual aid. In many cases, additional pages can be added to the existing ICS Forms when needed, and several forms are set up with this specific provision. The section after the ICS Forms List provides details on adding appendixes or fields to the forms for jurisdiction- or discipline-specific needs.

It may be appropriate to compile and maintain other NIMS-related forms with these ICS Forms, such as resource management and/or ordering forms that are used to support incidents. Examples of these include the following Emergency Management Assistance Compact (EMAC) forms: REQ-A (Interstate Mutual Aid Request), Reimbursement Form R-1 (Interstate Reimbursement Form), and Reimbursement Form R-2 (Intrastate Reimbursement Form).

## ICS FORMS LIST

This table lists all of the ICS Forms included in this publication.

### Notes:

- In the following table, the ICS Forms identified with an asterisk (\*) are typically included in an IAP.
- Forms identified with two asterisks (\*\*) are additional forms that could be used in the IAP.
- The other ICS Forms are used in the ICS process for incident management activities, but are not typically included in the IAP.
- The date and time entered in the form blocks should be determined by the Incident Command or Unified Command. Local time is typically used.

| ICS Form #:  | Form Title:   | Typically Prepared by:                             |
|--|---|--|
| ICS 201  | <b>Incident Briefing</b>  | Initial Incident Commander                         |
| *ICS 202   | <b>Incident Objectives</b>  | Planning Section Chief                             |
| *ICS 203   | <b>Organization Assignment List</b>   | Resources Unit Leader                              |
| *ICS 204   | <b>Assignment List</b>  | Resources Unit Leader and Operations Section Chief |
| *ICS 205   | <b>Incident Radio Communications Plan</b>   | Communications Unit Leader                         |
| **ICS 205A   | <b>Communications List</b>  | Communications Unit Leader                         |
| *ICS 206   | <b>Medical Plan</b>   | Medical Unit Leader (reviewed by Safety Officer)   |
| ICS 207  | <b>Incident Organization Chart</b><br><i>(wall-mount size, optional 8½" x 14")</i>      | Resources Unit Leader                              |
| **ICS 208  | <b>Safety Message/Plan</b>  | Safety Officer                                     |
| ICS 209  | <b>Incident Status Summary</b>  | Situation Unit Leader                              |
| ICS 210  | <b>Resource Status Change</b>   | Communications Unit Leader                         |
| ICS 211  | <b>Incident Check-In List</b><br><i>(optional 8½" x 14" and 11" x 17")</i>              | Resources Unit/Check-In Recorder                   |
| ICS 213  | <b>General Message</b> <i>(3-part form)</i>   | Any Message Originator                             |
| ICS 214  | <b>Activity Log</b> <i>(optional 2-sided form)</i>                                      | All Sections and Units                             |
| ICS 215  | <b>Operational Planning Worksheet</b><br><i>(optional 8½" x 14" and 11" x 17")</i>      | Operations Section Chief                           |
| ICS 215A   | <b>Incident Action Plan Safety Analysis</b>   | Safety Officer                                     |
| ICS 218  | <b>Support Vehicle/Equipment Inventory</b><br><i>(optional 8½" x 14" and 11" x 17")</i> | Ground Support Unit                                |
| ICS 219-1 to ICS 219-8, ICS 219-10<br><i>(Cards)</i> | <b>Resource Status Card (T-Card)</b><br><i>(may be printed on cardstock)</i>            | Resources Unit                                     |
| ICS 220  | <b>Air Operations Summary Worksheet</b>   | Operations Section Chief or Air Branch Director    |
| ICS 221  | <b>Demobilization Check-Out</b>   | Demobilization Unit Leader                         |
| ICS 225  | <b>Incident Personnel Performance Rating</b>  | Supervisor at the incident                         |

## ICS FORM ADAPTION, EXTENSION, AND APPENDIXES

The ICS Forms in this booklet are designed to serve all-hazards, cross-discipline needs for incident management across the Nation. These forms include the essential data elements for the ICS process they address, and create a foundation within ICS for complex incident management activities. However, the flexibility and scalability of NIMS should allow for needs outside this foundation, so the following are possible mechanisms to add to, extend, or adapt ICS Forms when needed.

Because the goal of NIMS is to have a consistent nationwide approach to incident management, jurisdictions and disciplines are encouraged to use the ICS Forms as they are presented here – unless these forms do not meet an organization’s particular incident management needs for some unique reason. If changes are needed, the focus on essential information elements should remain, and as such the spirit and intent of particular fields or “information elements” on the ICS Forms should remain intact to maintain consistency if the forms are altered. Modifications should be clearly indicated as deviations from or additions to the ICS Forms. The following approaches may be used to meet any unique needs.

### ICS Form Adaptation

When agencies and organizations require specialized forms or information for particular kinds of incidents, events, or disciplines, it may be beneficial to utilize the essential data elements from a particular ICS Form to create a more localized or field-specific form. When this occurs, organizations are encouraged to use the relevant essential data elements and ICS Form number, but to clarify that the altered form is a specific organizational adaptation of the form. For example, an altered form should clearly indicate in the title that it has been changed to meet a specific need, such as “ICS 215A, Hazard Risk Analysis Worksheet, Adapted for Story County Hazmat Program.”

### Extending ICS Form Fields

Particular fields on an ICS Form may need to include further breakouts or additional related elements. If such additions are needed, the form itself should be clearly labeled as an adapted form (see above), and the additional sub-field numbers should be clearly labeled as unique to the adapted form. Letters or other indicators may be used to label the new sub-fields (if the block does not already include sub-fields).

Examples of possible field additions are shown below for the ICS 209:

- Block 2: Incident Number.
  - Block 2A (adapted): Full agency accounting cost charge number for primary authority having jurisdiction.
- Block 29: Primary Materials or Hazards Involved (hazardous chemicals, fuel types, infectious agents, radiation, etc.).
  - Block 29A (adapted): Indicate specific wildland fire fuel model number.

### Creating ICS Form Appendixes

Certain ICS Forms may require appendixes to include additional information elements needed by a particular jurisdiction or discipline. When an appendix is needed for a given form, it is expected that the jurisdiction or discipline will determine standardized fields for such an appendix and make the form available as needed.

Any ICS Form appendixes should be clearly labeled with the form name and an indicator that it is a discipline- or jurisdiction-specific appendix. Appendix field numbering should begin following the last identified block in the corresponding ICS Form.





## INCIDENT BRIEFING (ICS 201)

|  |                            |   |
|--|----------------------------|---|
| <b>1. Incident Name:</b>   | <b>2. Incident Number:</b> | <b>3. Date/Time Initiated:</b><br>Date: _____ Time: _____ |
| <b>9. Current Organization (fill in additional organization as appropriate):</b>   |                            |   |
| <pre> graph TD     IC[Incident Commander(s)] --- LO[Liaison Officer]     IC --- SO[Safety Officer]     IC --- PIO[Public Information Officer]     IC --- PSC[Planning Section Chief]     IC --- OSC[Operations Section Chief]     IC --- FASC[Finance/Administration Section Chief]     IC --- LSC[Logistics Section Chief] </pre> |                            |   |
|  |                            |   |
| <b>6. Prepared by: Name:</b> _____ <b>Position/Title:</b> _____ <b>Signature:</b> _____  |                            |   |
| <b>ICS 201, Page 3</b>   | <b>Date/Time:</b> _____    |   |



## ICS 201 Incident Briefing

**Purpose.** The Incident Briefing (ICS 201) provides the Incident Commander (and the Command and General Staffs) with basic information regarding the incident situation and the resources allocated to the incident. In addition to a briefing document, the ICS 201 also serves as an initial action worksheet. It serves as a permanent record of the initial response to the incident.

**Preparation.** The briefing form is prepared by the Incident Commander for presentation to the incoming Incident Commander along with a more detailed oral briefing.

**Distribution.** Ideally, the ICS 201 is duplicated and distributed before the initial briefing of the Command and General Staffs or other responders as appropriate. The “Map/Sketch” and “Current and Planned Actions, Strategies, and Tactics” sections (pages 1–2) of the briefing form are given to the Situation Unit, while the “Current Organization” and “Resource Summary” sections (pages 3–4) are given to the Resources Unit.

### Notes:

- The ICS 201 can serve as part of the initial Incident Action Plan (IAP).
- If additional pages are needed for any form page, use a blank ICS 201 and repaginate as needed.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Incident Number</b>  | Enter the number assigned to the incident.  |
| 3            | <b>Date/Time Initiated</b> <ul style="list-style-type: none"> <li>• Date, Time</li> </ul>   | Enter date initiated (month/day/year) and time initiated (using the 24-hour clock).   |
| 4            | <b>Map/Sketch</b> (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment)  | Show perimeter and other graphics depicting situational status, resource assignments, incident facilities, and other special information on a map/sketch or with attached maps. Utilize commonly accepted ICS map symbology.<br><br>If specific geospatial reference points are needed about the incident's location or area outside the ICS organization at the incident, that information should be submitted on the Incident Status Summary (ICS 209).<br><br>North should be at the top of page unless noted otherwise. |
| 5            | <b>Situation Summary and Health and Safety Briefing</b> (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards. | Self-explanatory.   |
| 6            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul>   | Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).  |
| 7            | <b>Current and Planned Objectives</b>   | Enter the objectives used on the incident and note any specific problem areas.  |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 8            | <b>Current and Planned Actions, Strategies, and Tactics</b> <ul style="list-style-type: none"> <li>• Time</li> <li>• Actions</li> </ul>  | Enter the current and planned actions, strategies, and tactics and time they may or did occur to attain the objectives. If additional pages are needed, use a blank sheet or another ICS 201 (Page 2), and adjust page numbers accordingly.  |
| 9            | <b>Current Organization</b> (fill in additional organization as appropriate) <ul style="list-style-type: none"> <li>• Incident Commander(s)</li> <li>• Liaison Officer</li> <li>• Safety Officer</li> <li>• Public Information Officer</li> <li>• Planning Section Chief</li> <li>• Operations Section Chief</li> <li>• Finance/Administration Section Chief</li> <li>• Logistics Section Chief</li> </ul> | <ul style="list-style-type: none"> <li>• Enter on the organization chart the names of the individuals assigned to each position.</li> <li>• Modify the chart as necessary, and add any lines/spaces needed for Command Staff Assistants, Agency Representatives, and the organization of each of the General Staff Sections.</li> <li>• If Unified Command is being used, split the Incident Commander box.</li> <li>• Indicate agency for each of the Incident Commanders listed if Unified Command is being used.</li> </ul> |
| 10           | <b>Resource Summary</b>  | Enter the following information about the resources allocated to the incident. If additional pages are needed, use a blank sheet or another ICS 201 (Page 4), and adjust page numbers accordingly.   |
|              | • Resource   | Enter the number and appropriate category, kind, or type of resource ordered.  |
|              | • Resource Identifier  | Enter the relevant agency designator and/or resource designator (if any).  |
|              | • Date/Time Ordered  | Enter the date (month/day/year) and time (24-hour clock) the resource was ordered.   |
|              | • ETA  | Enter the estimated time of arrival (ETA) to the incident (use 24-hour clock).   |
|              | • Arrived  | Enter an "X" or a checkmark upon arrival to the incident.  |
|              | • Notes (location/assignment/status)   | Enter notes such as the assigned location of the resource and/or the actual assignment and status.   |





## ICS 202

### Incident Objectives

**Purpose.** The Incident Objectives (ICS 202) describes the basic incident strategy, incident objectives, command emphasis/priorities, and safety considerations for use during the next operational period.

**Preparation.** The ICS 202 is completed by the Planning Section following each Command and General Staff meeting conducted to prepare the Incident Action Plan (IAP). In case of a Unified Command, one Incident Commander (IC) may approve the ICS 202. If additional IC signatures are used, attach a blank page.

**Distribution.** The ICS 202 may be reproduced with the IAP and may be part of the IAP and given to all supervisory personnel at the Section, Branch, Division/Group, and Unit levels. All completed original forms must be given to the Documentation Unit.

#### Notes:

- The ICS 202 is part of the IAP and can be used as the opening or cover page.
- If additional pages are needed, use a blank ICS 202 and repaginate as needed.

| Block Number | Block Title  | Instructions  |
|--------------|--|---|
| 1            | <b>Incident Name</b>   | Enter the name assigned to the incident. If needed, an incident number can be added.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul> | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Objective(s)</b>  | Enter clear, concise statements of the objectives for managing the response. Ideally, these objectives will be listed in priority order. These objectives are for the incident response for this operational period as well as for the duration of the incident. Include alternative and/or specific tactical objectives as applicable.<br><br>Objectives should follow the SMART model or a similar approach:<br><b><u>S</u>pecific</b> – Is the wording precise and unambiguous?<br><b><u>M</u>easurable</b> – How will achievements be measured?<br><b><u>A</u>ction-oriented</b> – Is an action verb used to describe expected accomplishments?<br><b><u>R</u>ealistic</b> – Is the outcome achievable with given available resources?<br><b><u>T</u>ime-sensitive</b> – What is the timeframe? |
| 4            | <b>Operational Period Command Emphasis</b>   | Enter command emphasis for the operational period, which may include tactical priorities or a general weather forecast for the operational period. It may be a sequence of events or order of events to address. This is not a narrative on the objectives, but a discussion about where to place emphasis if there are needs to prioritize based on the Incident Commander's or Unified Command's direction. Examples: Be aware of falling debris, secondary explosions, etc.  |
|              | General Situational Awareness  | General situational awareness may include a weather forecast, incident conditions, and/or a general safety message. If a safety message is included here, it should be reviewed by the Safety Officer to ensure it is in alignment with the Safety Message/Plan (ICS 208).  |
| 5            | <b>Site Safety Plan Required?</b><br>Yes <input type="checkbox"/> No <input type="checkbox"/>                                | Safety Officer should check whether or not a site safety plan is required for this incident.  |
|              | <b>Approved Site Safety Plan(s) Located At</b>   | Enter the location of the approved Site Safety Plan(s).   |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 6            | <p><b>Incident Action Plan</b> (the items checked below are included in this Incident Action Plan):</p> <p><input type="checkbox"/> ICS 202</p> <p><input type="checkbox"/> ICS 203</p> <p><input type="checkbox"/> ICS 204</p> <p><input type="checkbox"/> ICS 205</p> <p><input type="checkbox"/> ICS 205A</p> <p><input type="checkbox"/> ICS 206</p> <p><input type="checkbox"/> ICS 207</p> <p><input type="checkbox"/> ICS 208</p> <p><input type="checkbox"/> Map/Chart</p> <p><input type="checkbox"/> Weather Forecast/<br/>Tides/Currents</p> <p><u>Other Attachments:</u></p> | <p>Check appropriate forms and list other relevant documents that are included in the IAP.</p> <p><input type="checkbox"/> ICS 202 – Incident Objectives</p> <p><input type="checkbox"/> ICS 203 – Organization Assignment List</p> <p><input type="checkbox"/> ICS 204 – Assignment List</p> <p><input type="checkbox"/> ICS 205 – Incident Radio Communications Plan</p> <p><input type="checkbox"/> ICS 205A – Communications List</p> <p><input type="checkbox"/> ICS 206 – Medical Plan</p> <p><input type="checkbox"/> ICS 207 – Incident Organization Chart</p> <p><input type="checkbox"/> ICS 208 – Safety Message/Plan</p> |
| 7            | <p><b>Prepared by</b></p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> </ul>  | <p>Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).</p>  |
| 8            | <p><b>Approved by Incident Commander</b></p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Signature</li> <li>• Date/Time</li> </ul>  | <p>In the case of a Unified Command, one IC may approve the ICS 202. If additional IC signatures are used, attach a blank page.</p>  |

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

|   |                |  |  |
|---|----------------|--|--|
| <b>1. Incident Name:</b>  |                | <b>2. Operational Period:</b> Date From: _____ Date To: _____<br>Time From: _____ Time To: _____ |  |
| <b>3. Incident Commander(s) and Command Staff:</b>                        |                | <b>7. Operations Section:</b>  |  |
| IC/UCs  |                | Chief  |  |
|   |                | Deputy   |  |
|   |                |  |  |
| Deputy  |                | Staging Area   |  |
| Safety Officer  |                | <b>Branch</b>  |  |
| Public Info. Officer  |                | Branch Director  |  |
| Liaison Officer   |                | Deputy   |  |
| <b>4. Agency/Organization Representatives:</b>                            |                | Division/Group   |  |
| Agency/Organization   | Name           | Division/Group   |  |
|   |                | <b>Branch</b>  |  |
|   |                | Branch Director  |  |
|   |                | Deputy   |  |
| <b>5. Planning Section:</b>   |                | Division/Group   |  |
| Chief   |                | Division/Group   |  |
| Deputy  |                | Division/Group   |  |
| Resources Unit  |                | Division/Group   |  |
| Situation Unit  |                | Division/Group   |  |
| Documentation Unit  |                | <b>Branch</b>  |  |
| Demobilization Unit   |                | Branch Director  |  |
| Technical Specialists   |                | Deputy   |  |
|   |                | Division/Group   |  |
|   |                | Division/Group   |  |
|   |                | Division/Group   |  |
| <b>6. Logistics Section:</b>  |                | Division/Group   |  |
| Chief   |                | Division/Group   |  |
| Deputy  |                | <b>Air Operations Branch</b>   |  |
| <b>Support Branch</b>   |                | Air Ops Branch Dir.  |  |
| Director  |                |  |  |
| Supply Unit   |                |  |  |
| Facilities Unit   |                | <b>8. Finance/Administration Section:</b>  |  |
| Ground Support Unit   |                | Chief  |  |
| <b>Service Branch</b>   |                | Deputy   |  |
| Director  |                | Time Unit  |  |
| Communications Unit   |                | Procurement Unit   |  |
| Medical Unit  |                | Comp/Claims Unit   |  |
| Food Unit   |                | Cost Unit  |  |
| <b>9. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____ |                |  |  |
| ICS 203   | IAP Page _____ | Date/Time: _____   |  |



**ICS 203****Organization Assignment List**

**Purpose.** The Organization Assignment List (ICS 203) provides ICS personnel with information on the units that are currently activated and the names of personnel staffing each position/unit. It is used to complete the Incident Organization Chart (ICS 207) which is posted on the Incident Command Post display. An actual organization will be incident or event-specific. **Not all positions need to be filled.** Some blocks may contain more than one name. The size of the organization is dependent on the magnitude of the incident, and can be expanded or contracted as necessary.

**Preparation.** The Resources Unit prepares and maintains this list under the direction of the Planning Section Chief. Complete only the blocks for the positions that are being used for the incident. If a trainee is assigned to a position, indicate this with a "T" in parentheses behind the name (e.g., "A. Smith (T)").

**Distribution.** The ICS 203 is duplicated and attached to the Incident Objectives (ICS 202) and given to all recipients as part of the Incident Action Plan (IAP). All completed original forms must be given to the Documentation Unit.

**Notes:**

- The ICS 203 serves as part of the IAP.
- If needed, more than one name can be put in each block by inserting a slash.
- If additional pages are needed, use a blank ICS 203 and repaginate as needed.
- ICS allows for organizational flexibility, so the Intelligence/Investigations Function can be embedded in several different places within the organizational structure.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>  | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Incident Commander(s) and Command Staff</b> <ul style="list-style-type: none"> <li>• IC/UCs</li> <li>• Deputy</li> <li>• Safety Officer</li> <li>• Public Information Officer</li> <li>• Liaison Officer</li> </ul>                                | Enter the names of the Incident Commander(s) and Command Staff. Label Assistants to Command Staff as such (for example, "Assistant Safety Officer").<br><br>For all individuals, use at least the first initial and last name.<br><br>For Unified Command, also include agency names.   |
| 4            | <b>Agency/Organization Representatives</b> <ul style="list-style-type: none"> <li>• Agency/Organization</li> <li>• Name</li> </ul>  | Enter the agency/organization names and the names of their representatives. For all individuals, use at least the first initial and last name.  |
| 5            | <b>Planning Section</b> <ul style="list-style-type: none"> <li>• Chief</li> <li>• Deputy</li> <li>• Resources Unit</li> <li>• Situation Unit</li> <li>• Documentation Unit</li> <li>• Demobilization Unit</li> <li>• Technical Specialists</li> </ul> | Enter the name of the Planning Section Chief, Deputy, and Unit Leaders after each position title. List Technical Specialists with an indication of specialty.<br><br>If there is a shift change during the specified operational period, list both names, separated by a slash.<br><br>For all individuals, use at least the first initial and last name. |

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 6            | <b>Logistics Section</b> <ul style="list-style-type: none"> <li>• Chief</li> <li>• Deputy</li> </ul> <b>Support Branch</b> <ul style="list-style-type: none"> <li>• Director</li> <li>• Supply Unit</li> <li>• Facilities Unit</li> <li>• Ground Support Unit</li> </ul> <b>Service Branch</b> <ul style="list-style-type: none"> <li>• Director</li> <li>• Communications Unit</li> <li>• Medical Unit</li> <li>• Food Unit</li> </ul> | <p>Enter the name of the Logistics Section Chief, Deputy, Branch Directors, and Unit Leaders after each position title.</p> <p>If there is a shift change during the specified operational period, list both names, separated by a slash.</p> <p>For all individuals, use at least the first initial and last name.</p>  |
| 7            | <b>Operations Section</b> <ul style="list-style-type: none"> <li>• Chief</li> <li>• Deputy</li> <li>• Staging Area</li> </ul> <b>Branch</b> <ul style="list-style-type: none"> <li>• Branch Director</li> <li>• Deputy</li> <li>• Division/Group</li> </ul> <b>Air Operations Branch</b> <ul style="list-style-type: none"> <li>• Air Operations Branch Director</li> </ul>   | <p>Enter the name of the Operations Section Chief, Deputy, Branch Director(s), Deputies, and personnel staffing each of the listed positions. For Divisions/Groups, enter the Division/Group identifier in the left column and the individual's name in the right column.</p> <p>Branches and Divisions/Groups may be named for functionality or by geography. For Divisions/Groups, indicate Division/Group Supervisor. Use an additional page if more than three Branches are activated.</p> <p>If there is a shift change during the specified operational period, list both names, separated by a slash.</p> <p>For all individuals, use at least the first initial and last name.</p> |
| 8            | <b>Finance/Administration Section</b> <ul style="list-style-type: none"> <li>• Chief</li> <li>• Deputy</li> <li>• Time Unit</li> <li>• Procurement Unit</li> <li>• Compensation/Claims Unit</li> <li>• Cost Unit</li> </ul>   | <p>Enter the name of the Finance/Administration Section Chief, Deputy, and Unit Leaders after each position title.</p> <p>If there is a shift change during the specified operational period, list both names, separated by a slash.</p> <p>For all individuals, use at least the first initial and last name.</p>   |
| 9            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul>   | <p>Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).</p>  |

## ASSIGNMENT LIST (ICS 204)

|   |                |   |   |  |
|---|----------------|---|---|--|
| <b>1. Incident Name:</b> _____  |                | <b>2. Operational Period:</b><br>Date From: _____ Date To: _____<br>Time From: _____ Time To: _____ |   | <b>3.</b><br><b>Branch:</b> _____<br><b>Division:</b> _____<br><b>Group:</b> _____<br><b>Staging Area:</b> _____ |
| <b>4. Operations Personnel:</b> <u>Name</u> _____ <u>Contact Number(s)</u> _____<br>Operations Section Chief: _____<br>Branch Director: _____<br>Division/Group Supervisor: _____   |                |   |   |  |
| <b>5. Resources Assigned:</b>   |                | <b># of<br/>Persons</b>   | Contact (e.g., phone, pager, radio frequency, etc.) |  |
| Resource Identifier   | Leader         |   |   |  |
|   |                |   |   | Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information                                  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
|   |                |   |   |  |
| <b>6. Work Assignments:</b><br><br><br><br><br><br><br><br><br><br>   |                |   |   |  |
| <b>7. Special Instructions:</b><br><br><br><br><br><br><br><br><br><br>   |                |   |   |  |
| <b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment):<br>Name/Function _____ Primary Contact: indicate cell, pager, or radio (frequency/system/channel) _____<br>_____/ _____<br>_____/ _____<br>_____/ _____<br>_____/ _____ |                |   |   |  |
| <b>9. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____   |                |   |   |  |
| ICS 204   | IAP Page _____ | Date/Time: _____  |   |  |



## ICS 204 Assignment List

**Purpose.** The Assignment List(s) (ICS 204) informs Division and Group supervisors of incident assignments. Once the Command and General Staffs agree to the assignments, the assignment information is given to the appropriate Divisions and Groups.

**Preparation.** The ICS 204 is normally prepared by the Resources Unit, using guidance from the Incident Objectives (ICS 202), Operational Planning Worksheet (ICS 215), and the Operations Section Chief. It must be approved by the Incident Commander, but may be reviewed and initialed by the Planning Section Chief and Operations Section Chief as well.

**Distribution.** The ICS 204 is duplicated and attached to the ICS 202 and given to all recipients as part of the Incident Action Plan (IAP). In some cases, assignments may be communicated via radio/telephone/fax. All completed original forms must be given to the Documentation Unit.

### Notes:

- The ICS 204 details assignments at Division and Group levels and is part of the IAP.
- Multiple pages/copies can be used if needed.
- If additional pages are needed, use a blank ICS 204 and repaginate as needed.

| Block Number     | Block Title   | Instructions  |
|------------------|---|---|
| 1                | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2                | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>  | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3                | <b>Branch</b><br><b>Division</b><br><b>Group</b><br><b>Staging Area</b>   | This block is for use in a large IAP for reference only.<br><br>Write the alphanumeric abbreviation for the Branch, Division, Group, and Staging Area (e.g., "Branch 1," "Division D," "Group 1A") in large letters for easy referencing.   |
| 4                | <b>Operations Personnel</b> <ul style="list-style-type: none"> <li>• Name, Contact Number(s) <ul style="list-style-type: none"> <li>– Operations Section Chief</li> <li>– Branch Director</li> <li>– Division/Group Supervisor</li> </ul> </li> </ul> | Enter the name and contact numbers of the Operations Section Chief, applicable Branch Director(s), and Division/Group Supervisor(s).  |
| 5                | <b>Resources Assigned</b>   | Enter the following information about the resources assigned to the Division or Group for this period:  |
|                  | • Resource Identifier   | The identifier is a unique way to identify a resource (e.g., ENG-13, IA-SCC-413). If the resource has been ordered but no identification has been received, use TBD (to be determined).   |
|                  | • Leader  | Enter resource leader's name.   |
|                  | • # of Persons  | Enter total number of persons for the resource assigned, including the leader.  |
|                  | • Contact (e.g., phone, pager, radio frequency, etc.)   | Enter primary means of contacting the leader or contact person (e.g., radio, phone, pager, etc.). Be sure to include the area code when listing a phone number.   |
| 5<br>(continued) | • Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information   | Provide special notes or directions specific to this resource. If required, add notes to indicate: (1) specific location/time where the resource should report or be dropped off/picked up; (2) special equipment and supplies that will be used or needed; (3) whether or not the resource received briefings; (4) transportation needs; or (5) other information. |

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 6            | <b>Work Assignments</b>   | Provide a statement of the tactical objectives to be achieved within the operational period by personnel assigned to this Division or Group.   |
| 7            | <b>Special Instructions</b>   | Enter a statement noting any safety problems, specific precautions to be exercised, dropoff or pickup points, or other important information.  |
| 8            | <b>Communications</b> (radio and/or phone contact numbers needed for this assignment) <ul style="list-style-type: none"> <li>• Name/Function</li> <li>• Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</li> </ul> | <p>Enter specific communications information (including emergency numbers) for this Branch/Division/Group.</p> <p>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).</p> <p>Phone and pager numbers should include the area code and any satellite phone specifics.</p> <p>In light of potential IAP distribution, use sensitivity when including cell phone number.</p> <p>Add a secondary contact (phone number or radio) if needed.</p> |
| 9            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul>   | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).   |



**ICS 205****Incident Radio Communications Plan**

**Purpose.** The Incident Radio Communications Plan (ICS 205) provides information on all radio frequency or trunked radio system talkgroup assignments for each operational period. The plan is a summary of information obtained about available radio frequencies or talkgroups and the assignments of those resources by the Communications Unit Leader for use by incident responders. Information from the Incident Radio Communications Plan on frequency or talkgroup assignments is normally placed on the Assignment List (ICS 204).

**Preparation.** The ICS 205 is prepared by the Communications Unit Leader and given to the Planning Section Chief for inclusion in the Incident Action Plan.

**Distribution.** The ICS 205 is duplicated and attached to the Incident Objectives (ICS 202) and given to all recipients as part of the Incident Action Plan (IAP). All completed original forms must be given to the Documentation Unit. Information from the ICS 205 is placed on Assignment Lists.

**Notes:**

- The ICS 205 is used to provide, in one location, information on all radio frequency assignments down to the Division/Group level for each operational period.
- The ICS 205 serves as part of the IAP.

| Block Number | Block Title  | Instructions  |
|--------------|--|---|
| 1            | <b>Incident Name</b>   | Enter the name assigned to the incident.  |
| 2            | <b>Date/Time Prepared</b>  | Enter date prepared (month/day/year) and time prepared (using the 24-hour clock).   |
| 3            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul> | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 4            | <b>Basic Radio Channel Use</b>   | Enter the following information about radio channel use:  |
|              | Zone Group   |   |
|              | Channel Number   | Use at the Communications Unit Leader's discretion. Channel Number (Ch #) may equate to the channel number for incident radios that are programmed or cloned for a specific Communications Plan, or it may be used just as a reference line number on the ICS 205 document.   |
|              | Function   | Enter the Net function each channel or talkgroup will be used for (Command, Tactical, Ground-to-Air, Air-to-Air, Support, Dispatch).  |
|              | Channel Name/Trunked Radio System Talkgroup  | Enter the nomenclature or commonly used name for the channel or talkgroup such as the National Interoperability Channels which follow DHS frequency Field Operations Guide (FOG).   |
|              | Assignment   | Enter the name of the ICS Branch/Division/Group/Section to which this channel/talkgroup will be assigned.   |
|              | RX (Receive) Frequency (N or W)  | Enter the Receive Frequency (RX Freq) as the mobile or portable subscriber would be programmed using xxx.xxx out to four decimal places, followed by an "N" designating narrowband or a "W" designating wideband emissions.<br><br>The name of the specific trunked radio system with which the talkgroup is associated may be entered across all fields on the ICS 205 normally used for conventional channel programming information. |
|              | RX Tone/NAC  | Enter the Receive Continuous Tone Coded Squelch System (CTCSS) subaudible tone (RX Tone) or Network Access Code (RX NAC) for the receive frequency as the mobile or portable subscriber would be programmed.  |

| Block Number            | Block Title   | Instructions   |
|-------------------------|---|--|
| <b>4</b><br>(continued) | TX (Transmit) Frequency (N or W)  | Enter the Transmit Frequency (TX Freq) as the mobile or portable subscriber would be programmed using xxx.xxxx out to four decimal places, followed by an "N" designating narrowband or a "W" designating wideband emissions.                                    |
|                         | TX Tone/NAC   | Enter the Transmit Continuous Tone Coded Squelch System (CTCSS) subaudible tone (TX Tone) or Network Access Code (TX NAC) for the transmit frequency as the mobile or portable subscriber would be programmed.   |
|                         | Mode (A, D, or M)   | Enter "A" for analog operation, "D" for digital operation, or "M" for mixed mode operation.  |
|                         | Remarks   | Enter miscellaneous information concerning repeater locations, information concerning patched channels or talkgroups using links or gateways, etc.   |
| <b>5</b>                | <b>Special Instructions</b>   | Enter any special instructions (e.g., using cross-band repeaters, secure-voice, encoders, private line (PL) tones, etc.) or other emergency communications needs). If needed, also include any special instructions for handling an incident within an incident. |
| <b>6</b>                | <b>Prepared by</b><br>(Communications Unit Leader) <ul style="list-style-type: none"> <li>• Name</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name and signature of the person preparing the form, typically the Communications Unit Leader. Enter date (month/day/year) and time prepared (24-hour clock).  |



## ICS 205A Communications List

**Purpose.** The Communications List (ICS 205A) records methods of contact for incident personnel. While the Incident Radio Communications Plan (ICS 205) is used to provide information on all radio frequencies down to the Division/Group level, the ICS 205A indicates all methods of contact for personnel assigned to the incident (radio frequencies, phone numbers, pager numbers, etc.), and functions as an incident directory.

**Preparation.** The ICS 205A can be filled out during check-in and is maintained and distributed by Communications Unit personnel. This form should be updated each operational period.

**Distribution.** The ICS 205A is distributed within the ICS organization by the Communications Unit, and posted as necessary. All completed original forms must be given to the Documentation Unit. If this form contains sensitive information such as cell phone numbers, it should be clearly marked in the header that it contains sensitive information and is not for public release.

### Notes:

- The ICS 205A is an optional part of the Incident Action Plan (IAP).
- This optional form is used in conjunction with the ICS 205.
- If additional pages are needed, use a blank ICS 205A and repaginate as needed.

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.   |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>                    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.   |
| 3            | <b>Basic Local Communications Information</b>   | Enter the communications methods assigned and used for personnel by their assigned ICS position.   |
|              | • Incident Assigned Position  | Enter the ICS organizational assignment.   |
|              | • Name  | Enter the name of the assigned person.   |
|              | • Method(s) of Contact (phone, pager, cell, etc.)   | For each assignment, enter the radio frequency and contact number(s) to include area code, etc. If applicable, include the vehicle license or ID number assigned to the vehicle for the incident (e.g., HAZMAT 1, etc.). |
| 4            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).   |

**MEDICAL PLAN (ICS 206)**

| <b>1. Incident Name:</b>   |  | <b>2. Operational Period:</b> Date From: _____ Date To: _____<br>Time From: _____ Time To: _____ |   |                  |  |  |  |
|--|--|--|---|------------------|--|--|--|
| <b>3. Medical Aid Stations:</b>  |  |  |   |                  |  |  |  |
| Name   | Location                                 | Contact Number(s)/Frequency  | Paramedics on Site?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                  |  |  |  |
|  |  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No                        |                  |  |  |  |
|  |  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No                        |                  |  |  |  |
|  |  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No                        |                  |  |  |  |
|  |  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No                        |                  |  |  |  |
|  |  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No                        |                  |  |  |  |
| <b>4. Transportation (indicate air or ground):</b>   |  |  |   |                  |  |  |  |
| Ambulance Service  | Location                                 | Contact Number(s)/Frequency  | Level of Service<br><input type="checkbox"/> ALS <input type="checkbox"/> BLS   |                  |  |  |  |
|  |  |  | <input type="checkbox"/> ALS <input type="checkbox"/> BLS                       |                  |  |  |  |
|  |  |  | <input type="checkbox"/> ALS <input type="checkbox"/> BLS                       |                  |  |  |  |
|  |  |  | <input type="checkbox"/> ALS <input type="checkbox"/> BLS                       |                  |  |  |  |
| <b>5. Hospitals:</b>   |  |  |   |                  |  |  |  |
| Hospital Name  | Address, Latitude & Longitude if Helipad | Contact Number(s)/ Frequency   | Travel Time   |                  | Trauma Center<br><input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No | Burn Center<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | Helipad<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|  |  |  | Air   | Ground           |  |  |  |
|  |  |  |   |                  | <input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No            |
|  |  |  |   |                  | <input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No            |
|  |  |  |   |                  | <input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No            |
|  |  |  |   |                  | <input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No            |
|  |  |  |   |                  | <input type="checkbox"/> Yes<br>Level: _____<br><input type="checkbox"/> No                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No            |
| <b>6. Special Medical Emergency Procedures:</b>  |  |  |   |                  |  |  |  |
| <input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations. |  |  |   |                  |  |  |  |
| <b>7. Prepared by (Medical Unit Leader):</b> Name: _____ Signature: _____  |  |  |   |                  |  |  |  |
| <b>8. Approved by (Safety Officer):</b> Name: _____ Signature: _____   |  |  |   |                  |  |  |  |
| <b>ICS 206</b>   |  | <b>IAP Page</b> _____  |   | Date/Time: _____ |  |  |  |

## ICS 206 Medical Plan

**Purpose.** The Medical Plan (ICS 206) provides information on incident medical aid stations, transportation services, hospitals, and medical emergency procedures.

**Preparation.** The ICS 206 is prepared by the Medical Unit Leader and reviewed by the Safety Officer to ensure ICS coordination. If aviation assets are utilized for rescue, coordinate with Air Operations.

**Distribution.** The ICS 206 is duplicated and attached to the Incident Objectives (ICS 202) and given to all recipients as part of the Incident Action Plan (IAP). Information from the plan pertaining to incident medical aid stations and medical emergency procedures may be noted on the Assignment List (ICS 204). All completed original forms must be given to the Documentation Unit.

### Notes:

- The ICS 206 serves as part of the IAP.
- This form can include multiple pages.

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 1            | <b>Incident Name</b>   | Enter the name assigned to the incident.   |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul> | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies. |
| 3            | <b>Medical Aid Stations</b>  | Enter the following information on the incident medical aid station(s):  |
|              | • Name   | Enter name of the medical aid station.   |
|              | • Location   | Enter the location of the medical aid station (e.g., Staging Area, Camp Ground).   |
|              | • Contact Number(s)/Frequency  | Enter the contact number(s) and frequency for the medical aid station(s).  |
|              | • Paramedics on Site?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | Indicate (yes or no) if paramedics are at the site indicated.  |
| 4            | <b>Transportation</b> (indicate air or ground)   | Enter the following information for ambulance services available to the incident:  |
|              | • Ambulance Service  | Enter name of ambulance service.   |
|              | • Location   | Enter the location of the ambulance service.   |
|              | • Contact Number(s)/Frequency  | Enter the contact number(s) and frequency for the ambulance service.   |
|              | • Level of Service<br><input type="checkbox"/> ALS <input type="checkbox"/> BLS  | Indicate the level of service available for each ambulance, either ALS (Advanced Life Support) or BLS (Basic Life Support).                          |

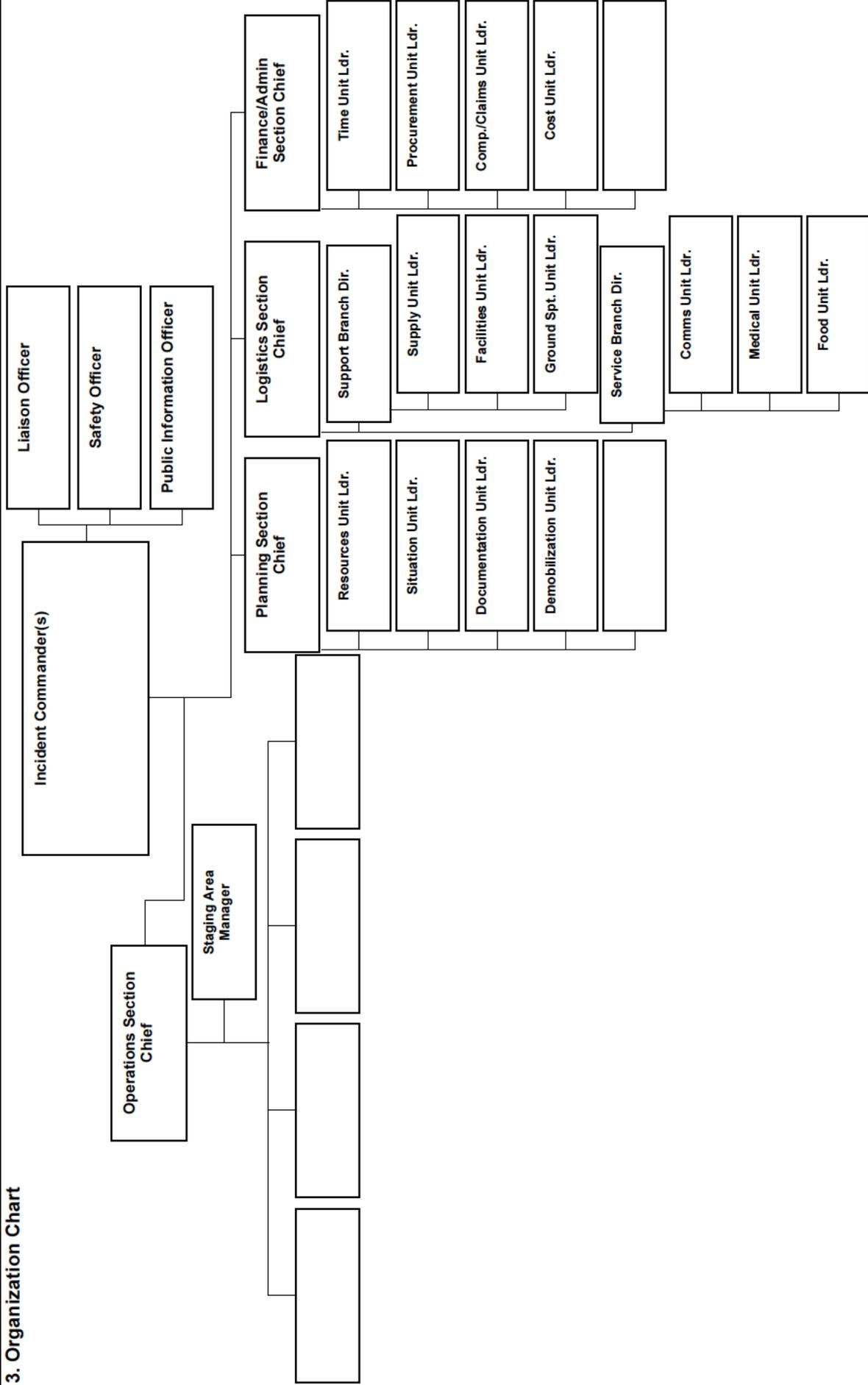
| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 5            | <b>Hospitals</b>   | Enter the following information for hospital(s) that could serve this incident:  |
|              | • Hospital Name  | Enter hospital name and identify any predesignated medivac aircraft by name a frequency.   |
|              | • Address, Latitude & Longitude if Helipad   | Enter the physical address of the hospital and the latitude and longitude if the hospital has a helipad.   |
|              | • Contact Number(s)/ Frequency   | Enter the contact number(s) and/or communications frequency(s) for the hospital.   |
|              | • Travel Time<br>• Air<br>• Ground   | Enter the travel time by air and ground from the incident to the hospital.   |
|              | • Trauma Center<br><input type="checkbox"/> Yes Level: _____   | Indicate yes and the trauma level if the hospital has a trauma center.   |
|              | • Burn Center<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | Indicate (yes or no) if the hospital has a burn center.  |
|              | • Helipad<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | Indicate (yes or no) if the hospital has a helipad.<br>Latitude and Longitude data format need to compliment Medical Evacuation Helicopters and Medical Air Resources  |
| 6            | <b>Special Medical Emergency Procedures</b>  | Note any special emergency instructions for use by incident personnel, including (1) who should be contacted, (2) how should they be contacted; and (3) who manages an incident within an incident due to a rescue, accident, etc. Include procedures for how to report medical emergencies. |
|              | <input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations. | Self explanatory. Incident assigned aviation assets should be included in ICS 220.   |
| 7            | <b>Prepared by</b> (Medical Unit Leader)<br>• Name<br>• Signature  | Enter the name and signature of the person preparing the form, typically the Medical Unit Leader. Enter date (month/day/year) and time prepared (24-hour clock).   |
| 8            | <b>Approved by</b> (Safety Officer)<br>• Name<br>• Signature<br>• Date/Time  | Enter the name of the person who approved the plan, typically the Safety Officer. Enter date (month/day/year) and time reviewed (24-hour clock).   |

# INCIDENT ORGANIZATION CHART (ICS 207)

1. Incident Name:

2. Operational Period: Date From: \_\_\_\_\_ Date To: \_\_\_\_\_  
Time From: \_\_\_\_\_ Time To: \_\_\_\_\_

3. Organization Chart



ICS 207 IAP Page

4. Prepared by: Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date/Time: \_\_\_\_\_

## ICS 207 Incident Organization Chart

**Purpose.** The Incident Organization Chart (ICS 207) provides a **visual wall chart** depicting the ICS organization position assignments for the incident. The ICS 207 is used to indicate what ICS organizational elements are currently activated and the names of personnel staffing each element. An actual organization will be event-specific. The size of the organization is dependent on the specifics and magnitude of the incident and is scalable and flexible. Personnel responsible for managing organizational positions are listed in each box as appropriate.

**Preparation.** The ICS 207 is prepared by the Resources Unit Leader and reviewed by the Incident Commander. Complete only the blocks where positions have been activated, and add additional blocks as needed, especially for Agency Representatives and all Operations Section organizational elements. For detailed information about positions, consult the NIMS ICS Field Operations Guide. The ICS 207 is intended to be used as a wall-size chart and printed on a plotter for better visibility. A chart is completed for each operational period, and updated when organizational changes occur.

**Distribution.** The ICS 207 is intended to be **wall mounted** at Incident Command Posts and other incident locations as needed, and is not intended to be part of the Incident Action Plan (IAP). All completed original forms must be given to the Documentation Unit.

### Notes:

- The ICS 207 is intended to be **wall mounted** (printed on a plotter). Document size can be modified based on individual needs.
- Also available as 8½ x 14 (legal size) chart.
- ICS allows for organizational flexibility, so the Intelligence/Investigative Function can be embedded in several different places within the organizational structure.
- Use additional pages if more than three branches are activated. Additional pages can be added based on individual need (such as to distinguish more Division/Groups and Branches as they are activated).

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Print the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>                    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Organization Chart</b>   | <ul style="list-style-type: none"> <li>• Complete the incident organization chart.</li> <li>• For all individuals, use at least the first initial and last name.</li> <li>• List agency where it is appropriate, such as for Unified Commanders.</li> <li>• If there is a shift change during the specified operational period, list both names, separated by a slash.</li> </ul> |
| 4            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).  |

**SAFETY MESSAGE/PLAN (ICS 208)**

|  |   |                      |
|--|---|----------------------|
| 1. Incident Name:  | 2. Operational Period: Date From:<br>Time From: | Date To:<br>Time To: |
| 3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:  |   |                      |
| 4. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/><br>Approved Site Safety Plan(s) Located At: |   |                      |
| 5. Prepared by: Name: _____ Position/Title: _____ Signature: _____   |   |                      |
| ICS 208  | IAP Page _____                                  | Date/Time: _____     |

## ICS 208

### Safety Message/Plan

**Purpose.** The Safety Message/Plan (ICS 208) expands on the Safety Message and Site Safety Plan.

**Preparation.** The ICS 208 is an optional form that may be included and completed by the Safety Officer for the Incident Action Plan (IAP).

**Distribution.** The ICS 208, if developed, will be reproduced with the IAP and given to all recipients as part of the IAP. All completed original forms must be given to the Documentation Unit.

**Notes:**

- The ICS 208 may serve (optionally) as part of the IAP.
- Use additional copies for continuation sheets as needed, and indicate pagination as used.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>                    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan</b>  | Enter clear, concise statements for safety message(s), priorities, and key command emphasis/decisions/directions. Enter information such as known safety hazards and specific precautions to be observed during this operational period. If needed, additional safety message(s) should be referenced and attached. |
| 4            | <b>Site Safety Plan Required?</b><br>Yes <input type="checkbox"/> No <input type="checkbox"/>   | Check whether or not a site safety plan is required for this incident.  |
|              | <b>Approved Site Safety Plan(s) Located At</b>  | Enter where the approved Site Safety Plan(s) is located.  |
| 5            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).  |

## INCIDENT STATUS SUMMARY (ICS 209)

|  |  |  |                                 |   |
|--|--|--|---------------------------------|---|
| <b>*1. Incident Name:</b>  |  | <b>2. Incident Number:</b>                                     |                                 |   |
| <b>*3. Report Version</b> (check one box on left):<br><input type="checkbox"/> Initial      Rpt #<br><input type="checkbox"/> Update      (if used):<br><input type="checkbox"/> Final |  | <b>*4. Incident Commander(s) &amp; Agency or Organization:</b> |                                 | <b>5. Incident Management Organization:</b><br><br><b>*6. Incident Start Date/Time:</b><br>Date: _____<br>Time: _____<br>Time Zone: _____ |
| <b>7. Current Incident Size or Area Involved</b> (use unit label – e.g., “sq mi,” “city block”):   |  | <b>8. Percent (%) Contained</b><br><br>Completed _____         | <b>*9. Incident Definition:</b> | <b>10. Incident Complexity Level:</b><br><br><b>*11. For Time Period:</b><br>From Date/Time: _____<br>To Date/Time: _____                 |

### Approval & Routing Information

|  |  |  |
|--|--|--|
| <b>*12. Prepared By:</b><br>Print Name: _____ ICS Position: _____<br>Date/Time Prepared: _____ |  | <b>*13. Date/Time Submitted:</b><br><br>Time Zone: _____       |
| <b>*14. Approved By:</b><br>Print Name: _____ ICS Position: _____<br>Signature: _____          |  | <b>*15. Primary Location, Organization, or Agency Sent To:</b> |

### Incident Location Information

|  |  |  |
|--|--|--|
| <b>*16. State:</b>   | <b>*17. County/Parish/Borough:</b>     | <b>*18. City:</b>  |
| <b>19. Unit or Other:</b>  | <b>*20. Incident Jurisdiction:</b>     | <b>21. Incident Location Ownership</b> (if different than jurisdiction): |
| <b>22. Longitude</b> (indicate format):<br><b>Latitude</b> (indicate format):  | <b>23. US National Grid Reference:</b> | <b>24. Legal Description</b> (township, section, range):                 |
| <b>*25. Short Location or Area Description</b> (list all affected areas or a reference point):   |  | <b>26. UTM Coordinates:</b>  |
| <b>27. Note any electronic geospatial data included or attached</b> (indicate data format, content, and collection time information and labels): |  |  |

### Incident Summary

|  |                                       |                             |              |                |
|--|---------------------------------------|-----------------------------|--------------|----------------|
| <b>*28. Significant Events for the Time Period Reported</b> (summarize significant progress made, evacuations, incident growth, etc.):   |                                       |                             |              |                |
| <b>29. Primary Materials or Hazards Involved</b> (hazardous chemicals, fuel types, infectious agents, radiation, etc.):  |                                       |                             |              |                |
| <b>30. Damage Assessment Information</b> (summarize damage and/or restriction of use or availability to residential or commercial property, natural resources, critical infrastructure and key resources, etc.): | A. Structural Summary                 | B. # Threatened (72 hrs)    | C. # Damaged | D. # Destroyed |
|  | E. Single Residences                  |                             |              |                |
|  | F. Nonresidential Commercial Property |                             |              |                |
|  | Other Minor Structures                |                             |              |                |
|  | Other                                 |                             |              |                |
| ICS 209, Page 1 of ____  |                                       | * Required when applicable. |              |                |

## INCIDENT STATUS SUMMARY (ICS 209)

|                           |                            |
|---------------------------|----------------------------|
| <b>*1. Incident Name:</b> | <b>2. Incident Number:</b> |
|---------------------------|----------------------------|

### Additional Incident Decision Support Information

| <b>*31. Public Status Summary:</b>  | A. # This Reporting Period | B. Total # to Date | <b>*32. Responder Status Summary:</b>                   | A. # This Reporting Period | B. Total # to Date |                          |  |
|---|----------------------------|--------------------|---|----------------------------|--------------------|--------------------------|--|
| <i>C. Indicate Number of Civilians (Public) Below:</i>  |                            |                    | <i>C. Indicate Number of Responders Below:</i>          |                            |                    |                          |  |
| D. Fatalities   |                            |                    | D. Fatalities   |                            |                    |                          |  |
| E. With Injuries/Illness  |                            |                    | E. With Injuries/Illness                                |                            |                    |                          |  |
| F. Trapped/In Need of Rescue  |                            |                    | F. Trapped/In Need of Rescue                            |                            |                    |                          |  |
| G. Missing (note if estimated)  |                            |                    | G. Missing  |                            |                    |                          |  |
| H. Evacuated (note if estimated)  |                            |                    | H. Sheltering in Place                                  |                            |                    |                          |  |
| I. Sheltering in Place (note if estimated)  |                            |                    | I. Have Received Immunizations                          |                            |                    |                          |  |
| J. In Temporary Shelters (note if est.)   |                            |                    | J. Require Immunizations                                |                            |                    |                          |  |
| K. Have Received Mass Immunizations   |                            |                    | K. In Quarantine  |                            |                    |                          |  |
| L. Require Immunizations (note if est.)   |                            |                    |   |                            |                    |                          |  |
| M. In Quarantine  |                            |                    |   |                            |                    |                          |  |
| <i>N. Total # Civilians (Public) Affected:</i>  |                            |                    | <i>N. Total # Responders Affected:</i>                  |                            |                    |                          |  |
| <b>33. Life, Safety, and Health Status/Threat Remarks:</b>  |                            |                    | <b>*34. Life, Safety, and Health Threat Management:</b> |                            |                    |                          |  |
| 35. Weather Concerns (synopsis of current and predicted weather; discuss related factors that may cause concern):   |                            |                    | A. Check if Active                                      |                            |                    |                          |  |
|   |                            |                    | A. No Likely Threat                                     |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | B. Potential Future Threat                              |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | C. Mass Notifications in Progress                       |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | D. Mass Notifications Completed                         |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | E. No Evacuation(s) Imminent                            |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | F. Planning for Evacuation                              |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | G. Planning for Shelter-in-Place                        |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | H. Evacuation(s) in Progress                            |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | I. Shelter-in-Place in Progress                         |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | J. Repopulation in Progress                             |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | K. Mass Immunization in Progress                        |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | L. Mass Immunization Complete                           |                            |                    | <input type="checkbox"/> |  |
|   |                            |                    | M. Quarantine in Progress                               |                            |                    | <input type="checkbox"/> |  |
| N. Area Restriction in Effect   |                            |                    | <input type="checkbox"/>                                |                            |                    |                          |  |
|   |                            |                    | <input type="checkbox"/>                                |                            |                    |                          |  |
|   |                            |                    | <input type="checkbox"/>                                |                            |                    |                          |  |
|   |                            |                    | <input type="checkbox"/>                                |                            |                    |                          |  |
|   |                            |                    | <input type="checkbox"/>                                |                            |                    |                          |  |
| <b>36. Projected Incident Activity, Potential, Movement, Escalation, or Spread</b> and influencing factors during the next operational period and in 12-, 24-, 48-, and 72-hour timeframes: |                            |                    |   |                            |                    |                          |  |
| 12 hours:   |                            |                    |   |                            |                    |                          |  |
| 24 hours:   |                            |                    |   |                            |                    |                          |  |
| 48 hours:   |                            |                    |   |                            |                    |                          |  |
| 72 hours:   |                            |                    |   |                            |                    |                          |  |
| Anticipated after 72 hours:   |                            |                    |   |                            |                    |                          |  |
| <b>37. Strategic Objectives</b> (define planned end-state for incident):  |                            |                    |   |                            |                    |                          |  |
|   |                            |                    |   |                            |                    |                          |  |

## INCIDENT STATUS SUMMARY (ICS 209)

|                           |                            |
|---------------------------|----------------------------|
| <b>*1. Incident Name:</b> | <b>2. Incident Number:</b> |
|---------------------------|----------------------------|

**Additional Incident Decision Support Information** (continued)

|  |   |
|--|---|
| <p><b>38. Current Incident Threat Summary and Risk Information in 12-, 24-, 48-, and 72-hour timeframes and beyond.</b> Summarize primary incident threats to life, property, communities and community stability, residences, health care facilities, other critical infrastructure and key resources, commercial facilities, natural and environmental resources, cultural resources, and continuity of operations and/or business. Identify corresponding incident-related potential economic or cascading impacts.</p> <p><b>12 hours:</b></p> <p><b>24 hours:</b></p> <p><b>48 hours:</b></p> <p><b>72 hours:</b></p> <p><b>Anticipated after 72 hours:</b></p> |   |
| <p><b>39. Critical Resource Needs</b> in 12-, 24-, 48-, and 72-hour timeframes and beyond to meet critical incident objectives. List resource category, kind, and/or type, and amount needed, in priority order:</p> <p><b>12 hours:</b></p> <p><b>24 hours:</b></p> <p><b>48 hours:</b></p> <p><b>72 hours:</b></p> <p><b>Anticipated after 72 hours:</b></p>   |   |
| <p><b>40. Strategic Discussion: Explain the relation of overall strategy, constraints, and current available information to:</b></p> <ol style="list-style-type: none"> <li>1) critical resource needs identified above,</li> <li>2) the Incident Action Plan and management objectives and targets,</li> <li>3) anticipated results.</li> </ol> <p><b>Explain major problems and concerns such as operational challenges, incident management problems, and social, political, economic, or environmental concerns or impacts.</b></p>  |   |
| <p><b>41. Planned Actions for Next Operational Period:</b></p>   |   |
| <p><b>42. Projected Final Incident Size/Area</b> (use unit label – e.g., “sq mi”):</p>   |   |
| <p><b>43. Anticipated Incident Management Completion Date:</b></p>   |   |
| <p><b>44. Projected Significant Resource Demobilization Start Date:</b></p>  |   |
| <p><b>45. Estimated Incident Costs to Date:</b></p>  |   |
| <p><b>46. Projected Final Incident Cost Estimate:</b></p>  |   |
| <p><b>47. Remarks</b> (or continuation of any blocks above – list block number in notation):</p>   |   |
| <p>ICS 209, Page 3 of ____</p>   | <p><i>* Required when applicable.</i></p> |



## ICS 209 Incident Status Summary

**Purpose.** The ICS 209 is used for reporting information on significant incidents. It is not intended for every incident, as most incidents are of short duration and do not require scarce resources, significant mutual aid, or additional support and attention. The ICS 209 contains basic information elements needed to support decisionmaking at all levels above the incident to support the incident. Decisionmakers may include the agency having jurisdiction, but also all multiagency coordination system (MACS) elements and parties, such as cooperating and assisting agencies/organizations, dispatch centers, emergency operations centers, administrators, elected officials, and local, tribal, county, State, and Federal agencies. Once ICS 209 information has been submitted from the incident, decisionmakers and others at all incident support and coordination points may transmit and share the information (based on its sensitivity and appropriateness) for access and use at local, regional, State, and national levels as it is needed to facilitate support.

Accurate and timely completion of the ICS 209 is necessary to identify appropriate resource needs, determine allocation of limited resources when multiple incidents occur, and secure additional capability when there are limited resources due to constraints of time, distance, or other factors. The information included on the ICS 209 influences the priority of the incident, and thus its share of available resources and incident support.

The ICS 209 is designed to provide a “snapshot in time” to effectively move incident decision support information where it is needed. It should contain the most accurate and up-to-date information available at the time it is prepared. However, readers of the ICS 209 may have access to more up-to-date or real-time information in reference to certain information elements on the ICS 209. Coordination among communications and information management elements within ICS and among MACS should delineate authoritative sources for more up-to-date and/or real-time information when ICS 209 information becomes outdated in a quickly evolving incident.

**Reporting Requirements.** The ICS 209 is intended to be used when an incident reaches a certain threshold where it becomes significant enough to merit special attention, require additional resource support needs, or cause media attention, increased public safety threat, etc. Agencies or organizations may set reporting requirements and, therefore, ICS 209s should be completed according to each jurisdiction or discipline’s policies, mobilization guide, or preparedness plans. It is recommended that consistent ICS 209 reporting parameters be adopted and used by jurisdictions or disciplines for consistency over time, documentation, efficiency, trend monitoring, incident tracking, etc.

For example, an agency or MAC (Multiagency Coordination) Group may require the submission of an initial ICS 209 when a new incident has reached a certain predesignated level of significance, such as when a given number of resources are committed to the incident, when a new incident is not completed within a certain timeframe, or when impacts/threats to life and safety reach a given level.

Typically, ICS 209 forms are completed either once daily or for each operational period – in addition to the initial submission. Jurisdictional or organizational guidance may indicate frequency of ICS 209 submission for particular definitions of incidents or for all incidents. This specific guidance may help determine submission timelines when operational periods are extremely short (e.g., 2 hours) and it is not necessary to submit new ICS 209 forms for all operational periods.

Any plans or guidelines should also indicate parameters for when it is appropriate to stop submitting ICS 209s for an incident, based upon incident activity and support levels.

**Preparation.** When an Incident Management Organization (such as an Incident Management Team) is in place, the Situation Unit Leader or Planning Section Chief prepares the ICS 209 at the incident. On other incidents, the ICS 209 may be completed by a dispatcher in the local communications center, or by another staff person or manager. This form should be completed at the incident or at the closest level to the incident.

The ICS 209 should be completed with the best possible, currently available, and verifiable information at the time it is completed and signed.

This form is designed to serve incidents impacting specific geographic areas that can easily be defined. It also has the flexibility for use on ubiquitous events, or those events that cover extremely large areas and that may involve many jurisdictions and ICS organizations. For these incidents, it will be useful to clarify on the form exactly which portion of the larger incident the ICS 209 is meant to address. For example, a particular ICS 209 submitted during a statewide outbreak of mumps may be relevant only to mumps-related activities in Story County, Iowa. This can be indicated in both the incident name, Block 1, and in the Incident Location Information section in Blocks 16–26.

While most of the “Incident Location Information” in Blocks 16–26 is optional, the more information that can be submitted, the better. Submission of multiple location indicators increases accuracy, improves interoperability, and increases information sharing between disparate systems. Preparers should be certain to follow accepted protocols or standards when entering location information, and clearly label all location information. As with other ICS 209 data, geospatial information may be widely shared and utilized, so accuracy is essential.

If electronic data is submitted with the ICS 209, do not attach or send extremely large data files. Incident geospatial data that is distributed with the ICS 209 should be in simple incident geospatial basics, such as the incident perimeter, point of origin, etc. Data file sizes should be small enough to be easily transmitted through dial-up connections or other limited communications capabilities when ICS 209 information is transmitted electronically. Any attached data should be clearly labeled as to format content and collection time, and should follow existing naming conventions and standards.

**Distribution.** ICS 209 information is meant to be completed at the level as close to the incident as possible, preferably at the incident. Once the ICS 209 has been submitted outside the incident to a dispatch center or MACS element, it may subsequently be transmitted to various incident supports and coordination entities based on the support needs and the decisions made within the MACS in which the incident occurs.

Coordination with public information system elements and investigative/intelligence information organizations at the incident and within MACS is essential to protect information security and to ensure optimal information sharing and coordination. There may be times in which particular ICS 209s contain sensitive information that should not be released to the public (such as information regarding active investigations, fatalities, etc.). When this occurs, the ICS 209 (or relevant sections of it) should be labeled appropriately, and care should be taken in distributing the information within MACS.

All completed and signed original ICS 209 forms MUST be given to the incident’s Documentation Unit and/or maintained as part of the official incident record.

**Notes:**

- To promote flexibility, only a limited number of ICS 209 blocks are typically required, and most of those are required only when applicable.
- Most fields are optional, to allow responders to use the form as best fits their needs and protocols for information collection.
- For the purposes of the ICS 209, responders are those personnel who are assigned to an incident or who are a part of the response community as defined by NIMS. This may include critical infrastructure owners and operators, nongovernmental and nonprofit organizational personnel, and contract employees (such as caterers), depending on local/jurisdictional/discipline practices.
- For additional flexibility only pages 1–3 are numbered, for two reasons:
  - Possible submission of additional pages for the Remarks Section (Block 47), and
  - Possible submission of additional copies of the fourth/last page (the “Incident Resource Commitment Summary”) to provide a more detailed resource summary.

| Block Number | Block Title   | Instructions  |
|--------------|---------------|---|
| *1           | Incident Name | <p><b>REQUIRED BLOCK.</b></p> <ul style="list-style-type: none"> <li>• Enter the full name assigned to the incident.</li> <li>• Check spelling of the full incident name.</li> <li>• For an incident that is a Complex, use the word “Complex” at the end of the incident name.</li> <li>• If the name changes, explain comments in Remarks, Block 47.</li> <li>• Do not use the same incident name for different incidents in the same calendar year.</li> </ul> |

| Block Number       | Block Title   | Instructions  |
|--------------------|---|---|
| 2                  | <b>Incident Number</b>  | <ul style="list-style-type: none"> <li>• Enter the appropriate number based on current guidance. The incident number may vary by jurisdiction and discipline.</li> <li>• Examples include:               <ul style="list-style-type: none"> <li>○ A computer-aided dispatch (CAD) number.</li> <li>○ An accounting number.</li> <li>○ A county number.</li> <li>○ A disaster declaration number.</li> <li>○ A combination of the State, unit/agency ID, and a dispatch system number.</li> <li>○ A mission number.</li> <li>○ Any other unique number assigned to the incident and derived by means other than those above.</li> </ul> </li> <li>• Make sure the number entered is correct.</li> <li>• Do not use the same incident number for two different incidents in the same calendar year.</li> <li>• Incident numbers associated with host jurisdictions or agencies and incident numbers assigned by agencies represented in Unified Command should be listed, or indicated in Remarks, Block 47.</li> </ul> |
| *3                 | <b>Report Version</b> (check one box on left)   | <p><b>REQUIRED BLOCK.</b></p> <ul style="list-style-type: none"> <li>• This indicates the current version of the ICS 209 form being submitted.</li> <li>• If only one ICS 209 will be submitted, check BOTH “Initial” and “Final” (or check only “Final”).</li> </ul>   |
|                    | <input type="checkbox"/> Initial  | Check “Initial” if this is the first ICS 209 for this incident.   |
|                    | <input type="checkbox"/> Update   | Check “Update” if this is a subsequent report for the same incident. These can be submitted at various time intervals (see “Reporting Requirements” above).   |
|                    | <input type="checkbox"/> Final  | <ul style="list-style-type: none"> <li>• Check “Final” if this is the last ICS 209 to be submitted for this incident (usually when the incident requires only minor support that can be supplied by the organization having jurisdiction).</li> <li>• Incidents may also be marked as “Final” if they become part of a new Complex (when this occurs, it can be indicated in Remarks, Block 47).</li> </ul>   |
| Report # (if used) | Use this optional field if your agency or organization requires the tracking of ICS 209 report numbers. Agencies may also track the ICS 209 by the date/time submitted. |   |
| *4                 | <b>Incident Commander(s) &amp; Agency or Organization</b>   | <p><b>REQUIRED BLOCK.</b></p> <ul style="list-style-type: none"> <li>• Enter both the first and last name of the Incident Commander.</li> <li>• If the incident is under a Unified Command, list all Incident Commanders by first initial and last name separated by a comma, including their organization. For example:               <ul style="list-style-type: none"> <li>L. Burnett – Minneapolis FD, R. Domanski – Minneapolis PD,</li> <li>C. Taylor – St. Paul PD, Y. Martin – St. Paul FD,</li> <li>S. McIntyre – U.S. Army Corps, J. Hartl – NTSB</li> </ul> </li> </ul>  |
| 5                  | <b>Incident Management Organization</b>   | Indicate the incident management organization for the incident, which may be a Type 1, 2, or 3 Incident Management Team (IMT), a Unified Command, a Unified Command with an IMT, etc. This block should not be completed unless a recognized incident management organization is assigned to the incident.  |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| *6           | <b>Incident Start Date/Time</b>  | <b>REQUIRED.</b><br>This is always the start date and time of the incident (not the report date and time or operational period).   |
|              | Date   | Enter the start date (month/day/year).   |
|              | Time   | Enter the start time (using the 24-hour clock).  |
|              | Time Zone  | Enter the time zone of the incident (e.g., EDT, PST).  |
| 7            | <b>Current Incident Size or Area Involved</b> (use unit label – e.g., “sq mi,” “city block”) | <ul style="list-style-type: none"> <li>Enter the appropriate incident descriptive size or area involved (acres, number of buildings, square miles, hectares, square kilometers, etc.).</li> <li>Enter the total area involved for incident Complexes in this block, and list each sub-incident and size in Remarks (Block 47).</li> <li>Indicate that the size is an estimate, if a more specific figure is not available.</li> <li>Incident size may be a population figure rather than a geographic figure, depending on the incident definition and objectives.</li> <li>If the incident involves more than one jurisdiction or mixed ownership, agencies/organizations may require listing a size breakdown by organization, or including this information in Remarks (Block 47).</li> <li>The incident may be one part of a much larger event (refer to introductory instructions under “Preparation”). Incident size/area depends on the area actively managed within the incident objectives and incident operations, and may also be defined by a delegation of authority or letter of expectation outlining management bounds.</li> </ul> |
| 8            | <b>Percent (%) Contained or Completed</b> (circle one)                                       | <ul style="list-style-type: none"> <li>Enter the percent that this incident is completed or contained (e.g., 50%), with a % label.</li> <li>For example, a spill may be 65% contained, or flood response objectives may be 50% met.</li> </ul>   |
| *9           | <b>Incident Definition</b>   | <b>REQUIRED BLOCK.</b><br>Enter a general definition of the incident in this block. This may be a general incident category or kind description, such as “tornado,” “wildfire,” “bridge collapse,” “civil unrest,” “parade,” “vehicle fire,” “mass casualty,” etc.   |
| 10           | <b>Incident Complexity Level</b>   | Identify the incident complexity level as determined by Unified/Incident Commanders, if available or used.   |
| *11          | <b>For Time Period</b>   | <b>REQUIRED BLOCK.</b> <ul style="list-style-type: none"> <li>Enter the time interval for which the form applies. This period should include all of the time since the last ICS 209 was submitted, or if it is the initial ICS 209, it should cover the time lapsed since the incident started.</li> <li>The time period may include one or more operational periods, based on agency/organizational reporting requirements.</li> </ul>  |
|              | From Date/Time   | <ul style="list-style-type: none"> <li>Enter the start date (month/day/year).</li> <li>Enter the start time (using the 24-hour clock).</li> </ul>  |
|              | To Date/Time   | <ul style="list-style-type: none"> <li>Enter the end date (month/day/year).</li> <li>Enter the end time (using the 24-hour clock).</li> </ul>  |

| Block Number   | Block Title  | Instructions   |
|--|--|--|
| <b>APPROVAL &amp; ROUTING INFORMATION</b>  |  |  |
| *12  | <b>Prepared By</b>                                       | <b>REQUIRED BLOCK.</b><br>When an incident management organization is in place, this would be the Situation Unit Leader or Planning Section Chief at the incident. On other incidents, it could be a dispatcher in the local emergency communications center, or another staff person or manager.  |
|  | Print Name   | Print the name of the person preparing the form.   |
|  | ICS Position   | The ICS title of the person preparing the form (e.g., "Situation Unit Leader").  |
|  | Date/Time Prepared                                       | Enter the date (month/day/year) and time (using the 24-hour clock) the form was prepared. Enter the time zone if appropriate.  |
| *13  | <b>Date/Time Submitted</b>                               | <b>REQUIRED.</b><br>Enter the submission date (month/day/year) and time (using the 24-hour clock).   |
|  | <b>Time Zone</b>   | Enter the time zone from which the ICS 209 was submitted (e.g., EDT, PST).   |
| *14  | <b>Approved By</b>                                       | <b>REQUIRED.</b><br>When an incident management organization is in place, this would be the Planning Section Chief or Incident Commander at the incident. On other incidents, it could be the jurisdiction's dispatch center manager, organizational administrator, or other manager.  |
|  | Print Name   | Print the name of the person approving the form.   |
|  | ICS Position   | The position of the person signing the ICS 209 should be entered (e.g., "Incident Commander").   |
|  | Signature  | Signature of the person approving the ICS 209, typically the Incident Commander. The original signed ICS 209 should be maintained with other incident documents.   |
| *15  | <b>Primary Location, Organization, or Agency Sent To</b> | <b>REQUIRED BLOCK.</b><br>Enter the appropriate primary location or office the ICS 209 was sent to apart from the incident. This most likely is the entity or office that ordered the incident management organization that is managing the incident. This may be a dispatch center or a MACS element such as an emergency operations center. If a dispatch center or other emergency center prepared the ICS 209 for the incident, indicate where it was submitted initially. |
| <b>INCIDENT LOCATION INFORMATION</b>   |  |  |
| <ul style="list-style-type: none"> <li>• Much of the "Incident Location Information" in Blocks 16–26 is optional, but completing as many fields as possible increases accuracy, and improves interoperability and information sharing between disparate systems.</li> <li>• As with all ICS 209 information, accuracy is essential because the information may be widely distributed and used in a variety of systems. Location and/or geospatial data may be used for maps, reports, and analysis by multiple parties outside the incident.</li> <li>• Be certain to follow accepted protocols, conventions, or standards where appropriate when submitting location information, and clearly label all location information.</li> <li>• Incident location information is usually based on the point of origin of the incident, and the majority of the area where the incident jurisdiction is.</li> </ul> |  |  |
| *16  | <b>State</b>   | <b>REQUIRED BLOCK WHEN APPLICABLE.</b> <ul style="list-style-type: none"> <li>• Enter the State where the incident originated.</li> <li>• If other States or jurisdictions are involved, enter them in Block 25 or Block 44.</li> </ul>  |
| *17  | <b>County / Parish / Borough</b>                         | <b>REQUIRED BLOCK WHEN APPLICABLE.</b> <ul style="list-style-type: none"> <li>• Enter the county, parish, or borough where the incident originated.</li> <li>• If other counties or jurisdictions are involved, enter them in Block 25 or Block 47.</li> </ul>   |

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| *18          | City  | <p><b>REQUIRED BLOCK WHEN APPLICABLE.</b></p> <ul style="list-style-type: none"> <li>• Enter the city where the incident originated.</li> <li>• If other cities or jurisdictions are involved, enter them in Block 25 or Block 47.</li> </ul>   |
| 19           | Unit or Other   | <p>Enter the unit, sub-unit, unit identification (ID) number or code (if used), or other information about where the incident originated. This may be a local identifier that indicates primary incident jurisdiction or responsibility (e.g., police, fire, public works, etc.) or another type of organization. Enter specifics in Block 25.</p>  |
| *20          | Incident Jurisdiction   | <p><b>REQUIRED BLOCK WHEN APPLICABLE.</b></p> <p>Enter the jurisdiction where the incident originated (the entry may be general, such as Federal, city, or State, or may specifically identify agency names such as Warren County, U.S. Coast Guard, Panama City, NYPD).</p>  |
| 21           | Incident Location Ownership (if different than jurisdiction)                      | <ul style="list-style-type: none"> <li>• When relevant, indicate the ownership of the area where the incident originated, especially if it is different than the agency having jurisdiction.</li> <li>• This may include situations where jurisdictions contract for emergency services, or where it is relevant to include ownership by private entities, such as a large industrial site.</li> </ul>  |
| 22           | <p>22. Longitude (indicate format):</p> <p>Latitude (indicate format):</p>        | <ul style="list-style-type: none"> <li>• Enter the longitude and latitude where the incident originated, if available and normally used by the authority having jurisdiction for the incident.</li> <li>• Clearly label the data, as longitude and latitude can be derived from various sources. For example, if degrees, minutes, and seconds are used, label as "33 degrees, 45 minutes, 01 seconds."</li> </ul>  |
| 23           | US National Grid Reference  | <ul style="list-style-type: none"> <li>• Enter the US National Grid (USNG) reference where the incident originated, if available and commonly used by the agencies/jurisdictions with primary responsibility for the incident.</li> <li>• Clearly label the data.</li> </ul>  |
| 24           | Legal Description (township, section, range)                                      | <ul style="list-style-type: none"> <li>• Enter the legal description where the incident originated, if available and commonly used by the agencies/jurisdictions with primary responsibility for the incident.</li> <li>• Clearly label the data (e.g., N 1/2 SE 1/4, SW 1/4, S24, T32N, R18E).</li> </ul>  |
| *25          | Short Location or Area Description (list all affected areas or a reference point) | <p><b>REQUIRED BLOCK.</b></p> <ul style="list-style-type: none"> <li>• List all affected areas as described in instructions for Blocks 16–24 above, OR summarize a general location, OR list a reference point for the incident (e.g., "the southern third of Florida," "in ocean 20 miles west of Catalina Island, CA," or "within a 5 mile radius of Walden, CO").</li> <li>• This information is important for readers unfamiliar with the area (or with other location identification systems) to be able to quickly identify the general location of the incident on a map.</li> <li>• Other location information may also be listed here if needed or relevant for incident support (e.g., base meridian).</li> </ul> |
| 26           | UTM Coordinates   | <p>Indicate Universal Transverse Mercator reference coordinates if used by the discipline or jurisdiction.</p>  |

| Block Number            | Block Title   | Instructions   |
|-------------------------|---|--|
| 27                      | <b>Note any electronic geospatial data included or attached</b> (indicate data format, content, and collection time information and labels) | <ul style="list-style-type: none"> <li>• Indicate whether and how geospatial data is included or attached.</li> <li>• Utilize common and open geospatial data standards.</li> <li>• <b>WARNING:</b> Do not attach or send extremely large data files with the ICS 209. Incident geospatial data that is distributed with the ICS 209 should be simple incident geospatial basics, such as the incident perimeter, origin, etc. Data file sizes should be small enough to be easily transmitted through dial-up connections or other limited communications capabilities when ICS 209 information is transmitted electronically.</li> <li>• <b>NOTE:</b> Clearly indicate data content. For example, data may be about an incident perimeter (such as a shape file), the incident origin (a point), a point and radius (such as an evacuation zone), or a line or lines (such as a pipeline).</li> <li>• <b>NOTE:</b> Indicate the data format (e.g., .shp, .kml, .kmz, or .gml file) and any relevant information about projection, etc.</li> <li>• <b>NOTE:</b> Include a hyperlink or other access information if incident map data is posted online or on an FTP (file transfer protocol) site to facilitate downloading and minimize information requests.</li> <li>• <b>NOTE:</b> Include a point of contact for getting geospatial incident information, if included in the ICS 209 or available and supporting the incident.</li> </ul> |
| <b>INCIDENT SUMMARY</b> |   |  |
| *28                     | <b>Significant Events for the Time Period Reported</b> (summarize significant progress made, evacuations, incident growth, etc.)            | <p><b>REQUIRED BLOCK.</b></p> <ul style="list-style-type: none"> <li>• Describe significant events that occurred during the period being reported in Block 6. Examples include: <ul style="list-style-type: none"> <li>○ Road closures.</li> <li>○ Evacuations.</li> <li>○ Progress made and accomplishments.</li> <li>○ Incident command transitions.</li> <li>○ Repopulation of formerly evacuated areas and specifics.</li> <li>○ Containment.</li> </ul> </li> <li>• Refer to other blocks in the ICS 209 when relevant for additional information (e.g., "Details on evacuations may be found in Block 33"), or in Remarks, Block 47.</li> <li>• Be specific and detailed in reference to events. For example, references to road closures should include road number and duration of closure (or include further detail in Block 33). Use specific metrics if needed, such as the number of people or animals evacuated, or the amount of a material spilled and/or recovered.</li> <li>• This block may be used for a single-paragraph synopsis of overall incident status.</li> </ul>  |
| 29                      | <b>Primary Materials or Hazards Involved</b> (hazardous chemicals, fuel types, infectious agents, radiation, etc.)                          | <ul style="list-style-type: none"> <li>• When relevant, enter the appropriate primary materials, fuels, or other hazards involved in the incident that are leaking, burning, infecting, or otherwise influencing the incident.</li> <li>• Examples include hazardous chemicals, wildland fuel models, biohazards, explosive materials, oil, gas, structural collapse, avalanche activity, criminal activity, etc.</li> </ul>   |
|                         | Other   | Enter any miscellaneous issues which impacted Critical Infrastructure and Key Resources.   |

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 30           | <b>Damage Assessment Information</b> (summarize damage and/or restriction of use or availability to residential or commercial property, natural resources, critical infrastructure and key resources, etc.) | <ul style="list-style-type: none"> <li>• Include a short summary of damage or use/access restrictions/limitations caused by the incident for the reporting period, and cumulatively.</li> <li>• Include if needed any information on the facility status, such as operational status, if it is evacuated, etc. when needed.</li> <li>• Include any critical infrastructure or key resources damaged/destroyed/impacted by the incident, the kind of infrastructure, and the extent of damage and/or impact and any known cascading impacts.</li> <li>• Refer to more specific or detailed damage assessment forms and packages when they are used and/or relevant.</li> </ul> |
|              | <b>A. Structural Summary</b>  | Complete this table as needed based on the definitions for 30B–F below. Note in table or in text block if numbers entered are estimates or are confirmed. Summaries may also include impact to Shoreline and Wildlife, etc.   |
|              | B. # Threatened (72 hrs)  | Enter the number of structures potentially threatened by the incident within the next 72 hours, based on currently available information.   |
|              | C. # Damaged  | Enter the number of structures damaged by the incident.   |
|              | D. # Destroyed  | Enter the number of structures destroyed beyond repair by the incident.   |
|              | E. Single Residences  | Enter the number of single dwellings/homes/units impacted in Columns 30B–D. Note any specifics in the text block if needed, such as type of residence (apartments, condominiums, single-family homes, etc.).  |
|              | F. Nonresidential Commercial Properties   | Enter the number of buildings or units impacted in Columns 30B–D. This includes any primary structure used for nonresidential purposes, excluding Other Minor Structures (Block 30G). Note any specifics regarding building or unit types in the text block.  |
|              | Other Minor Structures  | Enter any miscellaneous structures impacted in Columns 30B–D not covered in 30E–F above, including any minor structures such as booths, sheds, or outbuildings.   |
|              | Other   | Enter any miscellaneous issues which impacted Critical Infrastructure and Key Resources.  |

| Block Number   | Block Title                                    | Instructions  |
|--|--|---|
| <b>ADDITIONAL INCIDENT DECISION SUPPORT INFORMATION (PAGE 2)</b> |  |   |
| *31  | <b>Public Status Summary</b>                   | <ul style="list-style-type: none"> <li>• This section is for summary information regarding incident-related injuries, illness, and fatalities for civilians (or members of the public); see 31C–N below.</li> <li>• Explain or describe the nature of any reported injuries, illness, or other activities in Life, Safety, and Health Status/Threat Remarks (Block 33).</li> <li>• Illnesses include those that may be caused through a biological event such as an epidemic or an exposure to toxic or radiological substances.</li> <li>• <b>NOTE:</b> <i>Do not estimate any fatality information.</i></li> <li>• <b>NOTE:</b> Please use caution when reporting information in this section that may be on the periphery of the incident or change frequently. This information should be reported as accurately as possible as a snapshot in time, as much of the information is subject to frequent change.</li> <li>• <b>NOTE:</b> Do not complete this block if the incident covered by the ICS 209 is <i>not directly responsible</i> for these actions (such as evacuations, sheltering, immunizations, etc.) <i>even if they are related to the incident.</i> <ul style="list-style-type: none"> <li>○ Only the authority having jurisdiction should submit reports for these actions, to mitigate multiple/conflicting reports.</li> <li>○ For example, if managing evacuation shelters is part of the incident operation itself, do include these numbers in Block 31J with any notes in Block 33.</li> </ul> </li> <li>• <b>NOTE:</b> When providing an estimated value, denote in parenthesis: "est."</li> </ul> <p><b><u>Handling Sensitive Information</u></b></p> <ul style="list-style-type: none"> <li>• Release of information in this section should be carefully coordinated within the incident management organization to ensure synchronization with public information and investigative/intelligence actions.</li> <li>• Thoroughly review the "Distribution" section in the introductory ICS 209 instructions for details on handling sensitive information. Use caution when providing information in any situation involving fatalities, and verify that appropriate notifications have been made prior to release of this information. Electronic transmission of any ICS 209 may make information available to many people and networks at once.</li> <li>• Information regarding fatalities should be cleared with the Incident Commander and/or an organizational administrator prior to submission of the ICS 209.</li> </ul> |
|  | A. # This Reporting Period                     | Enter the total number of individuals impacted in each category for this reporting period (since the previous ICS 209 was submitted).   |
|  | B. Total # to Date                             | <ul style="list-style-type: none"> <li>• Enter the total number of individuals impacted in each category for the entire duration of the incident.</li> <li>• This is a cumulative total number that should be adjusted each reporting period.</li> </ul>  |
|  | C. Indicate Number of Civilians (Public) Below | <ul style="list-style-type: none"> <li>• For lines 31D–M below, enter the number of civilians affected for each category.</li> <li>• Indicate if numbers are estimates, for those blocks where this is an option.</li> <li>• Civilians are those members of the public who are affected by the incident, but who are not included as part of the response effort through Unified Command partnerships and those organizations and agencies assisting and cooperating with response efforts.</li> </ul>  |
|  | D. Fatalities                                  | <ul style="list-style-type: none"> <li>• Enter the number of <i>confirmed</i> civilian/public fatalities.</li> <li>• See information in introductory instructions ("Distribution") and in Block 31 instructions regarding sensitive handling of fatality information.</li> </ul>  |
|  | E. With Injuries/Illness                       | Enter the number of civilian/public injuries or illnesses directly related to the incident. Injury or illness is defined by the incident or jurisdiction(s).  |

| Block Number       | Block Title                                       | Instructions   |
|--------------------|---|--|
| *31<br>(continued) | F. Trapped/In Need of Rescue                      | Enter the number of civilians who are trapped or in need of rescue due to the incident.  |
|                    | G. Missing (note if estimated)                    | Enter the number of civilians who are missing due to the incident. Indicate if an estimate is used.  |
|                    | H. Evacuated (note if estimated)                  | Enter the number of civilians who are evacuated due to the incident. These are likely to be best estimates, but indicate if they are estimated.  |
|                    | I. Sheltering-in-Place (note if estimated)        | Enter the number of civilians who are sheltering in place due to the incident. Indicate if estimates are used.   |
|                    | J. In Temporary Shelters (note if estimated)      | Enter the number of civilians who are in temporary shelters as a direct result of the incident, noting if the number is an estimate.   |
|                    | K. Have Received Mass Immunizations               | Enter the number of civilians who have received mass immunizations due to the incident and/or as part of incident operations. Do not estimate.   |
|                    | L. Require Mass Immunizations (note if estimated) | Enter the number of civilians who require mass immunizations due to the incident and/or as part of incident operations. Indicate if it is an estimate.   |
|                    | M. In Quarantine                                  | Enter the number of civilians who are in quarantine due to the incident and/or as part of incident operations. Do not estimate.  |
|                    | N. Total # Civilians (Public) Affected            | Enter sum totals for Columns 31A and 31B for Rows 31D–M.   |
| *32                | <b>Responder Status Summary</b>                   | <ul style="list-style-type: none"> <li>• This section is for summary information regarding incident-related injuries, illness, and fatalities for responders; see 32C–N.</li> <li>• Illnesses include those that may be related to a biological event such as an epidemic or an exposure to toxic or radiological substances directly in relation to the incident.</li> <li>• Explain or describe the nature of any reported injuries, illness, or other activities in Block 33.</li> <li>• <b>NOTE:</b> Do not estimate any fatality information or responder status information.</li> <li>• <b>NOTE:</b> Please use caution when reporting information in this section that may be on the periphery of the incident or change frequently. This information should be reported as accurately as possible as a snapshot in time, as much of the information is subject to frequent change.</li> <li>• <b>NOTE:</b> Do not complete this block if the incident covered by the ICS 209 is <i>not directly responsible</i> for these actions (such as evacuations, sheltering, immunizations, etc.) even if they are related to the incident. Only the authority having jurisdiction should submit reports for these actions, to mitigate multiple/conflicting reports.</li> </ul> <p><b>Handling Sensitive Information</b></p> <ul style="list-style-type: none"> <li>• Release of information in this section should be carefully coordinated within the incident management organization to ensure synchronization with public information and investigative/intelligence actions.</li> <li>• Thoroughly review the “Distribution” section in the introductory ICS 209 instructions for details on handling sensitive information. Use caution when providing information in any situation involving fatalities, and verify that appropriate notifications have been made prior to release of this information. Electronic transmission of any ICS 209 may make information available to many people and networks at once.</li> <li>• Information regarding fatalities should be cleared with the Incident Commander and/or an organizational administrator prior to submission of the ICS 209.</li> </ul> |

| Block Number       | Block Title   | Instructions   |
|--------------------|---|--|
| *32<br>(continued) | A. # This Reporting Period                            | Enter the total number of responders impacted in each category for this reporting period (since the previous ICS 209 was submitted).   |
|                    | B. Total # to Date                                    | <ul style="list-style-type: none"> <li>Enter the total number of individuals impacted in each category for the <i>entire duration</i> of the incident.</li> <li>This is a <i>cumulative</i> total number that should be adjusted each reporting period.</li> </ul>   |
|                    | C. Indicate Number of Responders Below                | <ul style="list-style-type: none"> <li>For lines 32D–M below, enter the number of responders relevant for each category.</li> <li>Responders are those personnel included as part of Unified Command partnerships and those organizations and agencies assisting and cooperating with response efforts.</li> </ul>   |
|                    | D. Fatalities   | <ul style="list-style-type: none"> <li>Enter the number of <i>confirmed</i> responder fatalities.</li> <li>See information in introductory instructions (“Distribution”) and for Block 32 regarding sensitive handling of fatality information.</li> </ul>   |
|                    | E. With Injuries/Illness                              | <ul style="list-style-type: none"> <li>Enter the number of incident responders with serious injuries or illnesses due to the incident.</li> <li><i>For responders, serious injuries or illness are typically those in which the person is unable to continue to perform in his or her incident assignment, but the authority having jurisdiction may have additional guidelines on reporting requirements in this area.</i></li> </ul>   |
|                    | F. Trapped/In Need Of Rescue                          | Enter the number of incident responders who are in trapped or in need of rescue due to the incident.   |
|                    | G. Missing  | Enter the number of incident responders who are missing due to incident conditions.  |
|                    | H.  | (BLANK; use however is appropriate.)   |
|                    | I. Sheltering in Place                                | Enter the number of responders who are sheltering in place due to the incident. Once responders become the victims, this needs to be noted in Block 33 or Block 47 and handled accordingly.  |
|                    | J.  | (BLANK; use however is appropriate.)   |
|                    | L. Require Immunizations                              | Enter the number of responders who require immunizations due to the incident and/or as part of incident operations.  |
|                    | M. In Quarantine                                      | Enter the number of responders who are in quarantine as a direct result of the incident and/or related to incident operations.   |
|                    | N. Total # Responders Affected                        | Enter sum totals for Columns 32A and 32B for Rows 32D–M.   |
| 33                 | <b>Life, Safety, and Health Status/Threat Remarks</b> | <ul style="list-style-type: none"> <li>Enter any details needed for Blocks 31, 32, and 34. Enter any specific comments regarding illness, injuries, fatalities, and threat management for this incident, such as whether estimates were used for numbers given in Block 31.</li> <li>This information should be reported as accurately as possible as a snapshot in time, as much of the information is subject to frequent change.</li> <li>Evacuation information can be very sensitive to local residents and officials. Be accurate in the assessment.</li> <li>Clearly note primary responsibility and contacts for any activities or information in Blocks 31, 32, and 34 that may be caused by the incident, but that are being managed and/or reported by other parties.</li> <li>Provide additional explanation or information as relevant in Blocks 28, 36, 38, 40, 41, or in Remarks (Block 47).</li> </ul> |

| Block Number | Block Title                                       | Instructions  |
|--------------|---|---|
| <b>*34</b>   | <b>Life, Safety, and Health Threat Management</b> | Note any details in Life, Safety, and Health Status/Threat Remarks (Block 33), and provide additional explanation or information as relevant in Blocks 28, 36, 38, 40, 41, or in Remarks (Block 47). Additional pages may be necessary for notes.   |
|              | A. Check if Active                                | Check any applicable blocks in 34C–P based on currently available information regarding incident activity and potential.  |
|              | B. Notes  | Note any specific details, or include in Block 33.  |
|              | C. No Likely Threat                               | Check if there is no likely threat to life, health, and safety.   |
|              | D. Potential Future Threat                        | Check if there is a potential future threat to life, health, and safety.  |
|              | E. Mass Notifications In Progress                 | <ul style="list-style-type: none"> <li>• Check if there are any mass notifications in progress regarding emergency situations, evacuations, shelter in place, or other public safety advisories related to this incident.</li> <li>• These may include use of threat and alert systems such as the Emergency Alert System or a “reverse 911” system.</li> <li>• Please indicate the areas where mass notifications have been completed (e.g., “mass notifications to ZIP codes 50201, 50014, 50010, 50011,” or “notified all residents within a 5-mile radius of Gatlinburg”).</li> </ul> |
|              | F. Mass Notifications Completed                   | Check if actions referred to in Block 34E above have been completed.  |
|              | G. No Evacuation(s) Imminent                      | Check if evacuations are not anticipated in the near future based on current information.   |
|              | H. Planning for Evacuation                        | Check if evacuation planning is underway in relation to this incident.  |
|              | I. Planning for Shelter-in-Place                  | Check if planning is underway for shelter-in-place activities related to this incident.   |
|              | J. Evacuation(s) in Progress                      | Check if there are active evacuations in progress in relation to this incident.   |
|              | K. Shelter-In-Place in Progress                   | Check if there are active shelter-in-place actions in progress in relation to this incident.  |
|              | L. Repopulation in Progress                       | Check if there is an active repopulation in progress related to this incident.  |
|              | M. Mass Immunization in Progress                  | Check if there is an active mass immunization in progress related to this incident.   |
|              | N. Mass Immunization Complete                     | Check if a mass immunization effort has been completed in relation to this incident.  |
|              | O. Quarantine in Progress                         | Check if there is an active quarantine in progress related to this incident.  |
|              | P. Area Restriction in Effect                     | Check if there are any restrictions in effect, such as road or area closures, especially those noted in Block 28.   |

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 35           | <b>Weather Concerns</b><br>(synopsis of current and predicted weather; discuss related factors that may cause concern)  | <ul style="list-style-type: none"> <li>• Complete a short synopsis/discussion on significant weather factors that could cause concerns for the incident when relevant.</li> <li>• Include current and/or predicted weather factors, and the timeframe for predictions.</li> <li>• Include relevant factors such as:               <ul style="list-style-type: none"> <li>○ Wind speed (label units, such as mph).</li> <li>○ Wind direction (clarify and label where wind is coming from and going to in plain language – e.g., “from NNW,” “from E,” or “from SW”).</li> <li>○ Temperature (label units, such as F).</li> <li>○ Relative humidity (label %).</li> <li>○ Watches.</li> <li>○ Warnings.</li> <li>○ Tides.</li> <li>○ Currents.</li> </ul> </li> <li>• Any other weather information relative to the incident, such as flooding, hurricanes, etc.</li> </ul> |
| 36           | <b>Projected Incident Activity, Potential, Movement, Escalation, or Spread</b> and influencing factors during the next operational period and in 12-, 24-, 48-, and 72-hour timeframes<br><b>12 hours</b><br><b>24 hours</b><br><b>48 hours</b><br><b>72 hours</b><br><b>Anticipated after 72 hours</b> | <ul style="list-style-type: none"> <li>• Provide an estimate (when it is possible to do so) of the direction/scope in which the incident is expected to spread, migrate, or expand during the next indicated operational period, or other factors that may cause activity changes.</li> <li>• Discuss incident potential relative to values at risk, or values to be protected (such as human life), and the potential changes to those as the incident changes.</li> <li>• Include an estimate of the acreage or area that will likely be affected.</li> <li>• If known, provide the above information in 12-, 24-, 48- and 72-hour timeframes, and any activity anticipated after 72 hours.</li> </ul>   |
| 37           | <b>Strategic Objectives</b><br>(define planned end-state for incident)  | Briefly discuss the desired outcome for the incident based on currently available information. Note any high-level objectives and any possible strategic benefits as well (especially for planned events).   |

| Block Number   | Block Title  | Instructions   |
|--|--|--|
| <b>ADDITIONAL INCIDENT DECISION SUPPORT INFORMATION (continued) (PAGE 3)</b> |  |  |
| 38   | <p><b>Current Incident Threat Summary and Risk Information in 12-, 24-, 48-, and 72-hour timeframes and beyond.</b></p> <p>Summarize primary incident threats to life, property, communities and community stability, residences, health care facilities, other critical infrastructure and key resources, commercial facilities, natural and environmental resources, cultural resources, and continuity of operations and/or business. Identify corresponding incident-related potential economic or cascading impacts.</p> <p><b>12 hours</b></p> <p><b>24 hours</b></p> <p><b>48 hours</b></p> <p><b>72 hours</b></p> <p><b>Anticipated after 72 hours</b></p> | <p>Summarize major or significant threats due to incident activity based on currently available information. Include a breakdown of threats in terms of 12-, 24-, 48-, and 72-hour timeframes.</p> |

| Block Number | Block Title  | Instructions  |
|--------------|--|---|
| 39           | <p><b>Critical Resource Needs</b> in 12-, 24-, 48-, and 72-hour timeframes and beyond to meet critical incident objectives. List resource category, kind, and/or type, and amount needed, in priority order:</p> <p><b>12 hours</b><br/> <b>24 hours</b><br/> <b>48 hours</b><br/> <b>72 hours</b><br/> <b>Anticipated after 72 hours</b></p>  | <ul style="list-style-type: none"> <li>• List the specific critical resources and numbers needed, in order of priority. <i>Be specific as to the need.</i></li> <li>• Use plain language and common terminology for resources, and indicate resource category, kind, and type (if available or known) to facilitate incident support.</li> <li>• If critical resources are listed in this block, there should be corresponding orders placed for them through appropriate resource ordering channels.</li> <li>• Provide critical resource needs in 12-, 24-, 48- and 72-hour increments. List the most critical resources needed for each timeframe, if needs have been identified for each timeframe. Listing critical resources by the time they are needed gives incident support personnel a “heads up” for short-range planning, and assists the ordering process to ensure these resources will be in place when they are needed.</li> <li>• More than one resource need may be listed for each timeframe. For example, a list could include: <ul style="list-style-type: none"> <li>○ <u>24 hrs</u>: 3 Type 2 firefighting helicopters, 2 Type I Disaster Medical Assistance Teams</li> <li>○ <u>48 hrs</u>: Mobile Communications Unit (Law/Fire)</li> <li>○ <u>After 72 hrs</u>: 1 Type 2 Incident Management Team</li> </ul> </li> <li>• Documentation in the ICS 209 can help the incident obtain critical regional or national resources through outside support mechanisms including multiagency coordination systems and mutual aid. <ul style="list-style-type: none"> <li>○ Information provided in other blocks on the ICS 209 can help to support the need for resources, including Blocks 28, 29, 31–38, and 40–42.</li> <li>○ Additional comments in the Remarks section (Block 47) can also help explain what the incident is requesting and why it is critical (for example, “Type 2 Incident Management Team is needed in three days to transition command when the current Type 2 Team times out”).</li> </ul> </li> <li>• Do not use this block for noncritical resources.</li> </ul> |
| 40           | <p><b>Strategic Discussion: Explain the relation of overall strategy, constraints, and current available information to:</b></p> <p>1) critical resource needs identified above,<br/> 2) the Incident Action Plan and management objectives and targets,<br/> 3) anticipated results.</p> <p><b>Explain major problems and concerns such as operational challenges, incident management problems, and social, political, economic, or environmental concerns or impacts.</b></p> | <ul style="list-style-type: none"> <li>• Wording should be consistent with Block 39 to justify critical resource needs, which should relate to planned actions in the Incident Action Plan.</li> <li>• Give a short assessment of the likelihood of meeting the incident management targets, given the current management strategy and currently known constraints.</li> <li>• Identify when the chosen management strategy will succeed given the current constraints. Adjust the anticipated incident management completion target in Block 43 as needed based on this discussion.</li> <li>• Explain major problems and concerns as indicated.</li> </ul>  |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 41           | <b>Planned Actions for Next Operational Period</b>                         | <ul style="list-style-type: none"> <li>• Provide a short summary of actions planned for the next operational period.</li> <li>• Examples:               <ul style="list-style-type: none"> <li>○ “The current Incident Management Team will transition out to a replacement IMT.”</li> <li>○ “Continue to review operational/ engineering plan to facilitate removal of the partially collapsed west bridge supports.”</li> <li>○ “Continue refining mapping of the recovery operations and damaged assets using GPS.”</li> <li>○ “Initiate removal of unauthorized food vendors.”</li> </ul> </li> </ul>                        |
| 42           | <b>Projected Final Incident Size/Area</b> (use unit label – e.g., “sq mi”) | <ul style="list-style-type: none"> <li>• Enter an estimate of the total area likely to be involved or affected over the course of the incident.</li> <li>• Label the estimate of the total area or population involved, affected, or impacted with the relevant units such as acres, hectares, square miles, etc.</li> <li>• Note that total area involved may not be limited to geographic area (see previous discussions regarding incident definition, scope, operations, and objectives). Projected final size may involve a population rather than a geographic area.</li> </ul>  |
| 43           | <b>Anticipated Incident Management Completion Date</b>                     | <ul style="list-style-type: none"> <li>• Enter the date (month/day/year) at which time it is expected that incident objectives will be met. This is often explained similar to incident containment or control, or the time at which the incident is expected to be closed or when significant incident support will be discontinued.</li> <li>• Avoid leaving this block blank if possible, as this is important information for managers.</li> </ul>   |
| 44           | <b>Projected Significant Resource Demobilization Start Date</b>            | Enter the date (month/day/year) when initiation of significant resource demobilization is anticipated.   |
| 45           | <b>Estimated Incident Costs to Date</b>                                    | <ul style="list-style-type: none"> <li>• Enter the estimated total incident costs to date for the entire incident based on currently available information.</li> <li>• Incident costs include estimates of all costs for the response, including all management and support activities per discipline, agency, or organizational guidance and policy.</li> <li>• This does not include damage assessment figures, as they are impacts from the incident and not response costs.</li> <li>• If costs decrease, explain in Remarks (Block 47).</li> <li>• If additional space is required, please add as an attachment.</li> </ul> |
| 46           | <b>Projected Final Incident Cost Estimate</b>                              | <ul style="list-style-type: none"> <li>• Enter an estimate of the total costs for the incident once all costs have been processed based on current spending and projected incident potential, per discipline, agency, or organizational guidance and policy. This is often an estimate of daily costs combined with incident potential information.</li> <li>• This does not include damage assessment figures, as they are impacts from the incident and not response costs.</li> <li>• If additional space is required, please add as an attachment.</li> </ul>  |

| Block Number   | Block Title  | Instructions   |
|--|--|--|
| 47   | <b>Remarks</b> (or continuation of any blocks above – list block number in notation) | <ul style="list-style-type: none"> <li>• Use this block to expand on information that has been entered in previous blocks, or to include other pertinent information that has not been previously addressed.</li> <li>• List the block number for any information continued from a previous block.</li> <li>• Additional information may include more detailed weather information, specifics on injuries or fatalities, threats to critical infrastructure or other resources, more detailed evacuation site locations and number of evacuated, information or details regarding incident cause, etc.</li> <li>• For Complexes that include multiple incidents, list all sub-incidents included in the Complex.</li> <li>• List jurisdictional or ownership breakdowns if needed when an incident is in more than one jurisdiction and/or ownership area. Breakdown may be: <ul style="list-style-type: none"> <li>○ By size (e.g., 35 acres in City of Gatlinburg, 250 acres in Great Smoky Mountains), and/or</li> <li>○ By geography (e.g., incident area on the west side of the river is in jurisdiction of City of Minneapolis; area on east side of river is City of St. Paul jurisdiction; river is joint jurisdiction with USACE).</li> </ul> </li> <li>• Explain any reasons for incident size reductions or adjustments (e.g., reduction in acreage due to more accurate mapping).</li> <li>• This section can also be used to list any additional information about the incident that may be needed by incident support mechanisms outside the incident itself. This may be basic information needed through multiagency coordination systems or public information systems (e.g., a public information phone number for the incident, or the incident Web site address).</li> <li>• Attach additional pages if it is necessary to include additional comments in the Remarks section.</li> </ul> |
| <b>INCIDENT RESOURCE COMMITMENT SUMMARY (PAGE 4)</b>   |  |  |
| <ul style="list-style-type: none"> <li>• This last/fourth page of the ICS 209 can be copied and used if needed to accommodate additional resources, agencies, or organizations. Write the actual page number on the pages as they are used.</li> <li>• Include only resources that have been assigned to the incident and that have arrived and/or been checked in to the incident. Do not include resources that have been ordered but have <i>not</i> yet arrived.</li> </ul> <p><u>For summarizing:</u></p> <ul style="list-style-type: none"> <li>• When there are large numbers of responders, it may be helpful to group agencies or organizations together. Use the approach that works best for the multiagency coordination system applicable to the incident. For example, <ul style="list-style-type: none"> <li>○ Group State, local, county, city, or Federal responders together under such headings, or</li> <li>○ Group resources from one jurisdiction together and list only individual jurisdictions (e.g., list the public works, police, and fire department resources for a city under that city's name).</li> </ul> </li> <li>• On a large incident, it may also be helpful to group similar categories, kinds, or types of resources together for this summary.</li> </ul> |  |  |

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 48           | <b>Agency or Organization</b>   | <ul style="list-style-type: none"> <li>• List the agencies or organizations contributing resources to the incident as responders, through mutual aid agreements, etc.</li> <li>• List agencies or organizations using clear language so readers who may not be from the discipline or host jurisdiction can understand the information.</li> <li>• Agencies or organizations may be listed individually or in groups.</li> <li>• When resources are grouped together, individual agencies or organizations may be listed below in Block 53.</li> <li>• Indicate in the rows under Block 49 how many resources are assigned to the incident under each resource identified. <ul style="list-style-type: none"> <li>○ These can listed with the number of resources on the top of the box, and the number of personnel associated with the resources on the bottom half of the box.</li> <li>○ For example: <ul style="list-style-type: none"> <li>▪ <i>Resource:</i> Type 2 Helicopters... 3/8 (indicates 3 aircraft, 8 personnel).</li> <li>▪ <i>Resource:</i> Type 1 Decontamination Unit... 1/3 (indicates 1 unit, 3 personnel).</li> </ul> </li> </ul> </li> <li>• Indicate in the rows under Block 51 the total number of personnel assigned for each agency listed under Block 48, including both individual overhead and those associated with other resources such as fire engines, decontamination units, etc.</li> </ul>   |
| 49           | <b>Resources</b> (summarize resources by category, kind, and/or type; show # of resources on top ½ of box, show # of personnel associated with resource on bottom ½ of box) | <ul style="list-style-type: none"> <li>• List resources using clear language when possible – so ICS 209 readers who may not be from the discipline or host jurisdiction can understand the information. <ul style="list-style-type: none"> <li>○ Examples: Type 1 Fire Engines, Type 4 Helicopters</li> </ul> </li> <li>• Enter total numbers in columns for each resource by agency, organization, or grouping in the proper blocks. <ul style="list-style-type: none"> <li>○ These can listed with the number of resources on the top of the box, and the number of personnel associated with the resources on the bottom half of the box.</li> <li>○ For example: <ul style="list-style-type: none"> <li>▪ <i>Resource:</i> Type 2 Helicopters... 3/8 (indicates 3 aircraft, 8 personnel).</li> <li>▪ <i>Resource:</i> Type 1 Decontamination Unit... 1/3 (indicates 1 unit, 3 personnel).</li> </ul> </li> </ul> </li> <li>• <b>NOTE:</b> One option is to group similar resources together when it is sensible to do so for the summary. <ul style="list-style-type: none"> <li>○ For example, do not list every type of fire engine – rather, it may be advisable to list two generalized types of engines, such as “structure fire engines” and “wildland fire engines” in separate columns with totals for each.</li> </ul> </li> <li>• <b>NOTE:</b> It is not advisable to list individual overhead personnel individually in the resource section, especially as this form is intended as a summary. These personnel should be included in the Total Personnel sums in Block 51.</li> </ul> |
| 50           | <b>Additional Personnel</b> not assigned to a resource  | List the number of <i>additional</i> individuals (or overhead) that are not assigned to a specific resource by agency or organization.  |
| 51           | <b>Total Personnel</b> (includes those associated with resources – e.g., aircraft or engines – and individual overhead)   | <ul style="list-style-type: none"> <li>• Enter the total personnel for each agency, organization, or grouping in the Total Personnel column.</li> <li>• <b>WARNING:</b> Do not simply add the numbers across!</li> <li>• The number of Total Personnel for each row should include <u>both</u>: <ul style="list-style-type: none"> <li>○ The total number of personnel assigned to each of the resources listed in Block 49, and</li> <li>○ The total number of additional individual overhead personnel from each agency, organization, or group listed in Block 50.</li> </ul> </li> </ul>  |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 52           | <b>Total Resources</b>   | Include the sum total of resources for each column, including the total for the column under Blocks 49, 50, and 51. This should include the total number of <i>resources</i> in Block 49, as personnel totals will be counted under Block 51.  |
| 53           | <b>Additional Cooperating and Assisting Organizations Not Listed Above</b> | <ul style="list-style-type: none"><li>• List all agencies and organizations that are not directly involved in the incident, but are providing support.</li><li>• Examples may include ambulance services, Red Cross, DHS, utility companies, etc.</li><li>• Do not repeat any resources counted in Blocks 48–52, unless explanations are needed for groupings created under Block 48 (Agency or Organization).</li></ul> |



## ICS 210

### Resource Status Change

**Purpose.** The Resource Status Change (ICS 210) is used by the Incident Communications Center Manager to record status change information received on resources assigned to the incident. This information could be transmitted with a General Message (ICS 213). The form could also be used by Operations as a worksheet to track entry, etc.

**Preparation.** The ICS 210 is completed by radio/telephone operators who receive status change information from individual resources, Task Forces, Strike Teams, and Division/Group Supervisors. Status information could also be reported by Staging Area and Helibase Managers and fixed-wing facilities.

**Distribution.** The ICS 210 is maintained by the Communications Unit and copied to Resources Unit and filed by Documentation Unit.

**Notes:**

- The ICS 210 is essentially a message form that can be used to update Resource Status Cards or T-Cards (ICS 219) for incident-level resource management.
- If additional pages are needed, use a blank ICS 210 and repaginate as needed.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>                    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Resource Number</b>  | Enter the resource identification (ID) number (this may be a letter and number combination) assigned by either the sending unit or the incident.  |
| 4            | <b>New Status</b> (Available, Assigned, Out of Service)   | Indicate the current status of the resource: <ul style="list-style-type: none"> <li>• Available – Indicates resource is available for incident use immediately.</li> <li>• Assigned – Indicates resource is checked in and assigned a work task on the incident.</li> <li>• Out of Service – Indicates resource is assigned to the incident but unable to respond for mechanical, rest, or personnel reasons. If space permits, indicate the estimated time of return (ETR). It may be useful to indicate the reason a resource is out of service (e.g., "O/S – Mech" (for mechanical issues), "O/S – Rest" (for off shift), or "O/S – Pers" (for personnel issues).</li> </ul> |
| 5            | <b>From</b> (Assignment and Status)   | Indicate the current location of the resource (where it came from) and the status. When more than one Division, Staging Area, or Camp is used, identify the specific location (e.g., Division A, Staging Area, Incident Command Post, Western Camp).  |
| 6            | <b>To</b> (Assignment and Status)   | Indicate the assigned incident location of the resource and status. When more than one Division, Staging Area, or Camp is used, identify the specific location.   |
| 7            | <b>Time and Date of Change</b>  | Enter the time and location of the status change (24-hour clock). Enter the date as well if relevant (e.g., out of service).  |
| 8            | <b>Comments</b>   | Enter any special information provided by the resource or dispatch center. This may include details about why a resource is out of service, or individual identifying designators (IDs) of Strike Teams and Task Forces.  |
| 9            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).  |

# INCIDENT CHECK-IN LIST (ICS 211)

|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|--|-------------------------------------|---|-------------------------------------|---|--|---|-----------------------------|--------------------------------|---------------------------------|--|
| <b>1. Incident Name:</b>   | <b>2. Incident Number:</b>          | <b>3. Check-In Location (complete all that apply):</b><br><input type="checkbox"/> Base <input type="checkbox"/> Staging Area <input type="checkbox"/> ICP <input type="checkbox"/> Helibase <input type="checkbox"/> Other |                                     |   | <b>4. Start Date/Time:</b><br>Date: _____<br>Time: _____ |   |                             |                                |                                 |  |
| <b>Check-in Information (use reverse of form for remarks or comments)</b>  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
| <b>5. List single resource personnel (overhead) by agency and name, OR list resources by the following format:</b> | State                               | Agency  | Category                            | Kind                                    | Type   | Resource Name or Identifier               | ST or TF                    |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
| <b>6. Order Request #</b>  | <b>7. Date/Time Check-in</b>        | <b>8. Leader's Name</b>   | <b>9. Total Number of Personnel</b> | <b>10. Incident Contact Information</b> | <b>11. Home Unit or Agency</b>                           | <b>12. Departure Point, Date and Time</b> | <b>13. Method of Travel</b> | <b>14. Incident Assignment</b> | <b>15. Other Qualifications</b> | <b>16. Data Provided to Resources Unit</b> |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
|  |                                     |   |                                     |   |  |   |                             |                                |                                 |  |
| <b>ICS 211</b>   | <b>17. Prepared by: Name:</b> _____ |   |                                     | <b>Position/Title:</b> _____            |  | <b>Signature:</b> _____                   |                             | <b>Date/Time:</b> _____        |                                 |  |

## ICS 211 Incident Check-In List

**Purpose.** Personnel and equipment arriving at the incident can check in at various incident locations. Check-in consists of reporting specific information, which is recorded on the Check-In List (ICS 211). The ICS 211 serves several purposes, as it: (1) records arrival times at the incident of all overhead personnel and equipment, (2) records the initial location of personnel and equipment to facilitate subsequent assignments, and (3) supports demobilization by recording the home base, method of travel, etc., for resources checked in.

**Preparation.** The ICS 211 is initiated at a number of incident locations including: Staging Areas, Base, and Incident Command Post (ICP). Preparation may be completed by: (1) overhead at these locations, who record the information and give it to the Resources Unit as soon as possible, (2) the Incident Communications Center Manager located in the Communications Center, who records the information and gives it to the Resources Unit as soon as possible, (3) a recorder from the Resources Unit during check-in to the ICP. As an option, the ICS 211 can be printed on colored paper to match the designated Resource Status Card (ICS 219) colors. The purpose of this is to aid the process of completing a large volume of ICS 219s. The ICS 219 colors are:

- 219-1: Header Card – Gray (used only as label cards for T-Card racks)
- 219-2: Crew/Team Card – Green
- 219-3: Engine Card – Rose
- 219-4: Helicopter Card – Blue
- 219-5: Personnel Card – White
- 219-6: Fixed-Wing Card – Orange
- 219-7: Equipment Card – Yellow
- 219-8: Miscellaneous Equipment/Task Force Card – Tan
- 219-10: Generic Card – Light Purple

**Distribution.** ICS 211s, which are completed by personnel at the various check-in locations, are provided to the Resources Unit, Demobilization Unit, and Finance/Administration Section. The Resources Unit maintains a master list of all equipment and personnel that have reported to the incident.

### Notes:

- Also available as 8½ x 14 (legal size) or 11 x 17 chart.
- Use reverse side of form for remarks or comments.
- If additional pages are needed for any form page, use a blank ICS 211 and repaginate as needed.
- Contact information for sender and receiver can be added for communications purposes to confirm resource orders. Refer to 213RR example (Appendix B)

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.   |
| 2            | <b>Incident Number</b>  | Enter the number assigned to the incident.   |
| 3            | <b>Check-In Location</b><br><input type="checkbox"/> Base<br><input type="checkbox"/> Staging Area<br><input type="checkbox"/> ICP<br><input type="checkbox"/> Helibase<br><input type="checkbox"/> Other | Check appropriate box and enter the check-in location for the incident. Indicate specific information regarding the locations under each checkbox. ICP is for Incident Command Post.<br><br>Other may include... |
| 4            | <b>Start Date/Time</b><br>• Date<br>• Time  | Enter the date (month/day/year) and time (using the 24-hour clock) that the form was started.  |

| Block Number | Block Title  | Instructions  |
|--------------|--|---|
|              | <b>Check-In Information</b>  | Self explanatory.   |
| 5            | <b>List single resource personnel (overhead) by agency and name, OR list resources by the following format</b> <ul style="list-style-type: none"> <li>• State</li> <li>• Agency</li> <li>• Category</li> <li>• Kind</li> <li>• Type</li> <li>• Resource Name or Identifier</li> <li>• ST or TF</li> </ul>  | Enter the following information for resources:<br>OPTIONAL: Indicate if resource is a single resource versus part of Strike Team or Task Force. Fields can be left blank if not necessary.  |
|              | Use this section to list the home State for the resource.  |   |
|              | Use this section to list agency name (or designator), and individual names for all single resource personnel (e.g., ORC, ARL, NYPD).   |   |
|              | Use this section to list the resource category based on NIMS, discipline, or jurisdiction guidance.  |   |
|              | Use this section to list the resource kind based on NIMS, discipline, or jurisdiction guidance.  |   |
|              | Use this section to list the resource type based on NIMS, discipline, or jurisdiction guidance.  |   |
|              | Use this section to enter the resource name or unique identifier. If it is a Strike Team or a Task Force, list the unique Strike Team or Task Force identifier (if used) on a single line with the component resources of the Strike Team or Task Force listed on the following lines. For example, for an Engine Strike Team with the call sign "XLT459" show "XLT459" in this box and then in the next five rows, list the unique identifier for the five engines assigned to the Strike Team. |   |
|              | Use ST or TF to indicate whether the resource is part of a Strike Team or Task Force. See above for additional instructions.   |   |
| 6            | <b>Order Request #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline, since several incident numbers may be used for the same incident.  |
| 7            | <b>Date/Time Check-In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| 8            | <b>Leader's Name</b>   | <ul style="list-style-type: none"> <li>• For equipment, enter the operator's name.</li> <li>• Enter the Strike Team or Task Force leader's name.</li> <li>• Leave blank for single resource personnel (overhead).</li> </ul>  |
| 9            | <b>Total Number of Personnel</b>   | Enter total number of personnel associated with the resource. Include leaders.  |
| 10           | <b>Incident Contact Information</b>  | Enter available contact information (e.g., radio frequency, cell phone number, etc.) for the incident.  |
| 11           | <b>Home Unit or Agency</b>   | Enter the home unit or agency to which the resource or individual is normally assigned (may not be departure location).   |
| 12           | <b>Departure Point, Date and Time</b>  | Enter the location from which the resource or individual departed for this incident. Enter the departure time using the 24-hour clock.  |
| 13           | <b>Method of Travel</b>  | Enter the means of travel the individual used to bring himself/herself to the incident (e.g., bus, truck, engine, personal vehicle, etc.).  |
| 14           | <b>Incident Assignment</b>   | Enter the incident assignment at time of dispatch.  |
| 15           | <b>Other Qualifications</b>  | Enter additional duties (ICS positions) pertinent to the incident that the resource/individual is qualified to perform. Note that resources should not be reassigned on the incident without going through the established ordering process. This data may be useful when resources are demobilized and remobilized for another incident. |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 16           | <b>Data Provided to Resources Unit</b>   | Enter the date and time that the information pertaining to that entry was transmitted to the Resources Unit, and the initials of the person who transmitted the information. |
| 17           | <b>Prepared by</b> <ul style="list-style-type: none"><li>• Name</li><li>• Position/Title</li><li>• Signature</li><li>• Date/Time</li></ul> | Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).                           |

**GENERAL MESSAGE (ICS 213)**

|   |                  |                |
|---|------------------|----------------|
| <b>1. Incident Name</b> (Optional):                                       |                  |                |
| <b>2. To</b> (Name and Position):   |                  |                |
| <b>3. From</b> (Name and Position):                                       |                  |                |
| <b>4. Subject:</b>  | <b>5. Date:</b>  | <b>6. Time</b> |
| <b>7. Message:</b>  |                  |                |
| <b>8. Approved by:</b> Name: _____ Signature: _____ Position/Title: _____ |                  |                |
| <b>9. Reply:</b>  |                  |                |
| <b>10. Replied by:</b> Name: _____ Position/Title: _____ Signature: _____ |                  |                |
| <b>ICS 213</b>  | Date/Time: _____ |                |

## ICS 213

### General Message

**Purpose.** The General Message (ICS 213) is used by the incident dispatchers to record incoming messages that cannot be orally transmitted to the intended recipients. The ICS 213 is also used by the Incident Command Post and other incident personnel to transmit messages (e.g., resource order, incident name change, other ICS coordination issues, etc.) to the Incident Communications Center for transmission via radio or telephone to the addressee. This form is used to send any message or notification to incident personnel that requires hard-copy delivery.

**Preparation.** The ICS 213 may be initiated by incident dispatchers and any other personnel on an incident.

**Distribution.** Upon completion, the ICS 213 may be delivered to the addressee and/or delivered to the Incident Communication Center for transmission.

#### Notes:

- The ICS 213 is a three-part form, typically using carbon paper. The sender will complete Part 1 of the form and send Parts 2 and 3 to the recipient. The recipient will complete Part 2 and return Part 3 to the sender.
- A copy of the ICS 213 should be sent to and maintained within the Documentation Unit.
- Contact information for the sender and receiver can be added for communications purposes to confirm resource orders. Refer to 213RR example (Appendix B)

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 1            | <b>Incident Name</b> (Optional)  | Enter the name assigned to the incident. This block is optional.   |
| 2            | <b>To</b> (Name and Position)  | Enter the name and position the General Message is intended for. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.           |
| 3            | <b>From</b> (Name and Position)  | Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last name. For Unified Command, include agency names. |
| 4            | <b>Subject</b>   | Enter the subject of the message.  |
| 5            | <b>Date</b>  | Enter the date (month/day/year) of the message.  |
| 6            | <b>Time</b>  | Enter the time (using the 24-hour clock) of the message.   |
| 7            | <b>Message</b>   | Enter the content of the message. Try to be as concise as possible.  |
| 8            | <b>Approved by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Signature</li> <li>• Position/Title</li> </ul>                     | Enter the name, signature, and ICS position/title of the person approving the message.   |
| 9            | <b>Reply</b>   | The intended recipient will enter a reply to the message and return it to the originator.  |
| 10           | <b>Replied by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24-hour clock).                                  |





## ICS 214 Activity Log

**Purpose.** The Activity Log (ICS 214) records details of notable activities at any ICS level, including single resources, equipment, Task Forces, etc. These logs provide basic incident activity documentation, and a reference for any after-action report.

**Preparation.** An ICS 214 can be initiated and maintained by personnel in various ICS positions as it is needed or appropriate. Personnel should document how relevant incident activities are occurring and progressing, or any notable events or communications.

**Distribution.** Completed ICS 214s are submitted to supervisors, who forward them to the Documentation Unit. All completed original forms must be given to the Documentation Unit, which maintains a file of all ICS 214s. It is recommended that individuals retain a copy for their own records.

### Notes:

- The ICS 214 can be printed as a two-sided form.
- Use additional copies as continuation sheets as needed, and indicate pagination as used.

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.   |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>                    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.   |
| 3            | <b>Name</b>   | Enter the title of the organizational unit or resource designator (e.g., Facilities Unit, Safety Officer, Strike Team).  |
| 4            | <b>ICS Position</b>   | Enter the name and ICS position of the individual in charge of the Unit.   |
| 5            | <b>Home Agency (and Unit)</b>   | Enter the home agency of the individual completing the ICS 214. Enter a unit designator if utilized by the jurisdiction or discipline.   |
| 6            | <b>Resources Assigned</b>   | Enter the following information for resources assigned:  |
|              | <ul style="list-style-type: none"> <li>• Name</li> </ul>  | Use this section to enter the resource's name. For all individuals, use at least the first initial and last name. Cell phone number for the individual can be added as an option.  |
|              | <ul style="list-style-type: none"> <li>• ICS Position</li> </ul>  | Use this section to enter the resource's ICS position (e.g., Finance Section Chief).   |
|              | <ul style="list-style-type: none"> <li>• Home Agency (and Unit)</li> </ul>  | Use this section to enter the resource's home agency and/or unit (e.g., Des Moines Public Works Department, Water Management Unit).  |
| 7            | <b>Activity Log</b> <ul style="list-style-type: none"> <li>• Date/Time</li> <li>• Notable Activities</li> </ul>                                 | <ul style="list-style-type: none"> <li>• Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date as well if the operational period covers more than one day.</li> <li>• Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, etc.</li> <li>• This block can also be used to track personal work habits by adding columns such as "Action Required," "Delegated To," "Status," etc.</li> </ul> |
| 8            | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).   |

# OPERATIONAL PLANNING WORKSHEET (ICS 215)

| 1. Incident Name:                               |  | 2. Operational Period:     |  |  |  |  |  |  | Date To:<br>Time To:                  |  |  |  |  |
|---|--|----------------------------|--|--|--|--|--|--|---------------------------------------|--|--|--|--|
| 3. Branch                                       |  | Date From:<br>Time From:   |  |  |  |  |  |  | 8. Special<br>Equipment &<br>Supplies |  |  |  |  |
| 4. Division, Group,<br>or Other                 |  | 7. Overhead<br>Position(s) |  |  |  |  |  |  | 9. Reporting<br>Location              |  |  |  |  |
| 5. Work Assignment<br>& Special<br>Instructions |  | 6. Resources               |  |  |  |  |  |  | 10. Requested<br>Arrival Time         |  |  |  |  |
|   |  | Req.                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Have                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Need                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Req.                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Have                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Need                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Req.                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Have                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Need                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Req.                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Have                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Need                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Req.                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Have                       |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Need                       |  |  |  |  |  |  |                                       |  |  |  |  |
| <b>11. Total Resources<br/>Required</b>         |  |                            |  |  |  |  |  |  |                                       |  |  |  |  |
| <b>12. Total Resources<br/>Have on Hand</b>     |  |                            |  |  |  |  |  |  |                                       |  |  |  |  |
| <b>13. Total Resources<br/>Need To Order</b>    |  |                            |  |  |  |  |  |  |                                       |  |  |  |  |
| <b>14. Prepared by:</b>                         |  |                            |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Name: _____                |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Position/Title: _____      |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Signature: _____           |  |  |  |  |  |  |                                       |  |  |  |  |
|   |  | Date/Time: _____           |  |  |  |  |  |  |                                       |  |  |  |  |

## ICS 215 Operational Planning Worksheet

**Purpose.** The Operational Planning Worksheet (ICS 215) communicates the decisions made by the Operations Section Chief during the Tactics Meeting concerning resource assignments and needs for the next operational period. The ICS 215 is used by the Resources Unit to complete the Assignment Lists (ICS 204) and by the Logistics Section Chief for ordering resources for the incident.

**Preparation.** The ICS 215 is initiated by the Operations Section Chief and often involves logistics personnel, the Resources Unit, and the Safety Officer. The form is shared with the rest of the Command and General Staffs during the Planning Meeting. It may be useful in some disciplines or jurisdictions to prefill ICS 215 copies prior to incidents.

**Distribution.** When the Branch, Division, or Group work assignments and accompanying resource allocations are agreed upon, the form is distributed to the Resources Unit to assist in the preparation of the ICS 204. The Logistics Section will use a copy of this worksheet for preparing requests for resources required for the next operational period.

### Notes:

- This worksheet can be made into a wall mount.
- Also available as 8½ x 14 (legal size) and 11 x 17 chart.
- If additional pages are needed, use a blank ICS 215 and repaginate as needed.

| Block Number | Block Title  | Instructions  |
|--------------|--|---|
| 1            | <b>Incident Name</b>   | Enter the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul> | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Branch</b>  | Enter the Branch of the work assignment for the resources.  |
| 4            | <b>Division, Group, or Other</b>   | Enter the Division, Group, or other location (e.g., Staging Area) of the work assignment for the resources.   |
| 5            | <b>Work Assignment &amp; Special Instructions</b>  | Enter the specific work assignments given to each of the Divisions/Groups and any special instructions, as required.  |
| 6            | <b>Resources</b>   | Complete resource headings for category, kind, and type as appropriate for the incident. The use of a slash indicates a single resource in the upper portion of the slash and a Strike Team or Task Force in the bottom portion of the slash. |
|              | • Required   | Enter, for the appropriate resources, the number of resources by type (engine, squad car, Advanced Life Support ambulance, etc.) required to perform the work assignment.   |
|              | • Have   | Enter, for the appropriate resources, the number of resources by type (engines, crew, etc.) available to perform the work assignment.   |
|              | • Need   | Enter the number of resources needed by subtracting the number in the "Have" row from the number in the "Required" row.   |
| 7            | <b>Overhead Position(s)</b>  | List any supervisory and nonsupervisory ICS position(s) not directly assigned to a previously identified resource (e.g., Division/Group Supervisor, Assistant Safety Officer, Technical Specialist, etc.).                                    |
| 8            | <b>Special Equipment &amp; Supplies</b>  | List special equipment and supplies, including aviation support, used or needed. This may be a useful place to monitor span of control.   |
| 9            | <b>Reporting Location</b>  | Enter the specific location where the resources are to report (Staging Area, location at incident, etc.).   |
| 10           | <b>Requested Arrival Time</b>  | Enter the time (24-hour clock) that resources are requested to arrive at the reporting location.  |

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 11           | <b>Total Resources Required</b>   | Enter the total number of resources required by category/kind/type as preferred (e.g., engine, squad car, ALS ambulance, etc.). A slash can be used again to indicate total single resources in the upper portion of the slash and total Strike Teams/ Task Forces in the bottom portion of the slash. |
| 12           | <b>Total Resources Have on Hand</b>   | Enter the total number of resources on hand that are assigned to the incident for incident use. A slash can be used again to indicate total single resources in the upper portion of the slash and total Strike Teams/Task Forces in the bottom portion of the slash.                                  |
| 13           | <b>Total Resources Need To Order</b>  | Enter the total number of resources needed. A slash can be used again to indicate total single resources in the upper portion of the slash and total Strike Teams/Task Forces in the bottom portion of the slash.  |
| 14           | <b>Prepared by</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Position/Title</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).   |

## INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

| <b>1. Incident Name:</b>  |                  | <b>2. Incident Number:</b>   |  |
|---|------------------|--|--|
| <b>3. Date/Time Prepared:</b><br>Date: _____ Time: _____                    |                  | <b>4. Operational Period:</b> Date From: _____ Date To: _____<br>Time From: _____ Time To: _____ |  |
| 5. Incident Area  | 6. Hazards/Risks | 7. Mitigations   |  |
|   |                  |  |  |
|   |                  |  |  |
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| <b>8. Prepared by (Safety Officer):</b> Name: _____ Signature: _____        |                  |  |  |
| <b>Prepared by (Operations Section Chief):</b> Name: _____ Signature: _____ |                  |  |  |
| <b>ICS 215A</b>   |                  | Date/Time: _____   |  |

**ICS 215A****Incident Action Plan Safety Analysis**

**Purpose.** The purpose of the Incident Action Plan Safety Analysis (ICS 215A) is to aid the Safety Officer in completing an operational risk assessment to prioritize hazards, safety, and health issues, and to develop appropriate controls. This worksheet addresses communications challenges between planning and operations, and is best utilized in the planning phase and for Operations Section briefings.

**Preparation.** The ICS 215A is typically prepared by the Safety Officer during the incident action planning cycle. When the Operations Section Chief is preparing for the tactics meeting, the Safety Officer collaborates with the Operations Section Chief to complete the Incident Action Plan Safety Analysis. This worksheet is closely linked to the Operational Planning Worksheet (ICS 215). Incident areas or regions are listed along with associated hazards and risks. For those assignments involving risks and hazards, mitigations or controls should be developed to safeguard responders, and appropriate incident personnel should be briefed on the hazards, mitigations, and related measures. Use additional sheets as needed.

**Distribution.** When the safety analysis is completed, the form is distributed to the Resources Unit to help prepare the Operations Section briefing. All completed original forms must be given to the Documentation Unit.

**Notes:**

- This worksheet can be made into a wall mount, and can be part of the IAP.
- If additional pages are needed, use a blank ICS 215A and repaginate as needed.

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.   |
| 2            | <b>Incident Number</b>  | Enter the number assigned to the incident.   |
| 3            | <b>Date/Time Prepared</b>   | Enter date (month/day/year) and time (using the 24-hour clock) prepared.   |
| 4            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>  | Enter the start date (month/day/year) and time (24-hour clock) and end date and time for the operational period to which the form applies.   |
| 5            | <b>Incident Area</b>  | Enter the incident areas where personnel or resources are likely to encounter risks. This may be specified as a Branch, Division, or Group.  |
| 6            | <b>Hazards/Risks</b>  | List the types of hazards and/or risks likely to be encountered by personnel or resources at the incident area relevant to the work assignment.  |
| 7            | <b>Mitigations</b>  | List actions taken to reduce risk for each hazard indicated (e.g., specify personal protective equipment or use of a buddy system or escape routes).                                   |
| 8            | <b>Prepared by</b> (Safety Officer and Operations Section Chief) <ul style="list-style-type: none"> <li>• Name</li> <li>• Signature</li> <li>• Date/Time</li> </ul> | Enter the name of both the Safety Officer and the Operations Section Chief, who should collaborate on form preparation. Enter date (month/day/year) and time (24-hour clock) reviewed. |

# SUPPORT VEHICLE/EQUIPMENT INVENTORY (ICS 218)

| 1. Incident Name:                       | 2. Incident Number: | 3. Date/Time Prepared:<br>Date: _____ Time: _____ | 4. Vehicle/Equipment Category: |                                       |                               |                              |                          |                           |                     |                              |                                |
|---|---------------------|---|--------------------------------|---------------------------------------|-------------------------------|------------------------------|--------------------------|---------------------------|---------------------|------------------------------|--------------------------------|
| <b>5. Vehicle/Equipment Information</b> |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
| Order Request Number                    | Incident ID No.     | Vehicle or Equipment Classification               | Vehicle or Equipment Make      | Category/Kind/Type, Capacity, or Size | Vehicle or Equipment Features | Agency or Owner              | Operator Name or Contact | Vehicle License or ID No. | Incident Assignment | Incident Start Date and Time | Incident Release Date and Time |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
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|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
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|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
|   |                     |   |                                |                                       |                               |                              |                          |                           |                     |                              |                                |
| <b>ICS 218</b>                          |                     | <b>6. Prepared by: Name:</b> _____                |                                |                                       |                               | <b>Position/Title:</b> _____ |                          | <b>Signature:</b> _____   |                     |                              |                                |

## ICS 218

### Support Vehicle/Equipment Inventory

**Purpose.** The Support Vehicle/Equipment Inventory (ICS 218) provides an inventory of all transportation and support vehicles and equipment assigned to the incident. The information is used by the Ground Support Unit to maintain a record of the types and locations of vehicles and equipment on the incident. The Resources Unit uses the information to initiate and maintain status/resource information.

**Preparation.** The ICS 218 is prepared by Ground Support Unit personnel at intervals specified by the Ground Support Unit Leader.

**Distribution.** Initial inventory information recorded on the form should be given to the Resources Unit. Subsequent changes to the status or location of transportation and support vehicles and equipment should be provided to the Resources Unit immediately.

#### Notes:

- If additional pages are needed, use a blank ICS 218 and repaginate as needed.
- Also available as 8½ x 14 (legal size) and 11 x 17 chart.

| Block Number | Block Title                              | Instructions  |
|--------------|--|---|
| 1            | <b>Incident Name</b>                     | Enter the name assigned to the incident.  |
| 2            | <b>Incident Number</b>                   | Enter the number assigned to the incident.  |
| 3            | <b>Date/Time Prepared</b>                | Enter the date (month/day/year) and time (using the 24-hour clock) the form is prepared.  |
| 4            | <b>Vehicle/Equipment Category</b>        | Enter the specific vehicle or equipment category (e.g., buses, generators, dozers, pickups/sedans, rental cars, etc.). Use a separate sheet for each vehicle or equipment category.   |
| 5            | <b>Vehicle/Equipment Information</b>     | Record the following information:   |
|              | Order Request Number                     | Enter the order request number for the resource as used by the jurisdiction or discipline, or the relevant EMAC order request number.   |
|              | Incident Identification Number           | Enter any special incident identification numbers or agency radio identifier assigned to the piece of equipment used only during the incident, if this system is used (e.g., "Decontamination Unit 2," or "Water Tender 14"). |
|              | Vehicle or Equipment Classification      | Enter the specific vehicle or equipment classification (e.g., bus, backhoe, Type 2 engine, etc.) as relevant.   |
|              | Vehicle or Equipment Make                | Enter the vehicle or equipment manufacturer name (e.g., "GMC," "International").  |
|              | Category/Kind/Type, Capacity, or Size    | Enter the vehicle or equipment category/kind/type, capacity, or size (e.g., 30-person bus, 3/4-ton truck, 50 kW generator).   |
|              | Vehicle or Equipment Features            | Indicate any vehicle or equipment features such as 2WD, 4WD, towing capability, number of axles, heavy-duty tires, high clearance, automatic vehicle locator (AVL), etc.  |
|              | Agency or Owner                          | Enter the name of the agency or owner of the vehicle or equipment.  |
|              | Operator Name or Contact                 | Enter the operator name and/or contact information (cell phone, radio frequency, etc.).   |
|              | Vehicle License or Identification Number | Enter the license plate number or another identification number (such as a serial or rig number) of the vehicle or equipment.   |
|              | Incident Assignment                      | Enter where the vehicle or equipment will be located at the incident and its function (use abbreviations per discipline or jurisdiction).   |

| Block Number     | Block Title  | Instructions   |
|------------------|--|--|
| 5<br>(continued) | Incident Start Date and Time   | Indicate start date (month/day/year) and time (using the 24-hour clock) for driver or for equipment as may be relevant.    |
|                  | Incident Release Date and Time   | Enter the date (month/day/year) and time (using the 24-hour clock) the vehicle or equipment is released from the incident. |
| 6                | <b>Prepared by</b> <ul style="list-style-type: none"><li>• Name</li><li>• Position/Title</li><li>• Signature</li></ul> | Enter the name, ICS position/title, and signature of the person preparing the form.  |

## ICS 219 Resource Status Card (T-Card)

**Purpose.** Resource Status Cards (ICS 219) are also known as “T-Cards,” and are used by the Resources Unit to record status and location information on resources, transportation, and support vehicles and personnel. These cards provide a visual display of the status and location of resources assigned to the incident.

**Preparation.** Information to be placed on the cards may be obtained from several sources including, but not limited to:

- Incident Briefing (ICS 201).
- Incident Check-In List (ICS 211).
- General Message (ICS 213).
- Agency-supplied information or electronic resource management systems.

**Distribution.** ICS 219s are displayed in resource status or “T-Card” racks where they can be easily viewed, retrieved, updated, and rearranged. The Resources Unit typically maintains cards for resources assigned to an incident until demobilization. At demobilization, all cards should be turned in to the Documentation Unit.

**Notes.** There are eight different status cards (see list below) and a header card, to be printed front-to-back on cardstock. Each card is printed on a different color of cardstock and used for a different resource category/kind/type. The format and content of information on each card varies depending upon the intended use of the card.

- 219-1: Header Card – Gray (used only as label cards for T-Card racks)
- 219-2: Crew/Team Card – Green
- 219-3: Engine Card – Rose
- 219-4: Helicopter Card – Blue
- 219-5: Personnel Card – White
- 219-6: Fixed-Wing Card – Orange
- 219-7: Equipment Card – Yellow
- 219-8: Miscellaneous Equipment/Task Force Card – Tan
- 219-10: Generic Card – Light Purple

**Acronyms.** Abbreviations utilized on the cards are listed below:

- AOV: Agency-owned vehicle
- ETA: Estimated time of arrival
- ETD: Estimated time of departure
- ETR: Estimated time of return
- O/S Mech: Out-of-service for mechanical reasons
- O/S Pers: Out-of-service for personnel reasons
- O/S Rest: Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft
- POV: Privately owned vehicle



**ICS 219-1: Header Card**

| Block Title                            | Instructions  |
|--|---|
| <b>Prepared by</b><br><b>Date/Time</b> | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock). |

|  |               |               |           |          |
|--|---------------|---------------|-----------|----------|
| ST/Unit:   |               | LDW:          | # Pers:   | Order #: |
| Agency   | Cat/Kind/Type |               | Name/ID # |          |
| <i>Front</i>   |               |               |           |          |
| Date/Time Checked In:  |               |               |           |          |
| Leader Name:   |               |               |           |          |
| Primary Contact Information:   |               |               |           |          |
| Crew/Team ID #(s) or Name(s):  |               |               |           |          |
|  |               |               |           |          |
|  |               |               |           |          |
|  |               |               |           |          |
|  |               |               |           |          |
|  |               |               |           |          |
| Manifest:  |               | Total Weight: |           |          |
| <input type="checkbox"/> Yes <input type="checkbox"/> No   |               |               |           |          |
| Method of Travel to Incident:  |               |               |           |          |
| <input type="checkbox"/> AOV <input type="checkbox"/> POV <input type="checkbox"/> Bus <input type="checkbox"/> Air <input type="checkbox"/> Other |               |               |           |          |
| Home Base:   |               |               |           |          |
| Departure Point:   |               |               |           |          |
| ETD:   |               | ETA:          |           |          |
| Transportation Needs at Incident:  |               |               |           |          |
| <input type="checkbox"/> Vehicle <input type="checkbox"/> Bus <input type="checkbox"/> Air <input type="checkbox"/> Other                          |               |               |           |          |
| Date/Time Ordered:   |               |               |           |          |
| Remarks:   |               |               |           |          |
|  |               |               |           |          |
| Prepared by:   |               |               |           |          |
| Date/Time:   |               |               |           |          |
| ICS 219-2 CREW/TEAM (GREEN)  |               |               |           |          |

|  |               |       |           |          |
|--|---------------|-------|-----------|----------|
| ST/Unit:   |               | LDW:  | # Pers:   | Order #: |
| Agency   | Cat/Kind/Type |       | Name/ID # |          |
| <i>Back</i>  |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| Status:  |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers    |               |       |           |          |
| <input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:   |               |       |           |          |
|  |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| Status:  |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers    |               |       |           |          |
| <input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:   |               |       |           |          |
|  |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| Status:  |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers    |               |       |           |          |
| <input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:   |               |       |           |          |
|  |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| Status:  |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers    |               |       |           |          |
| <input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:   |               |       |           |          |
|  |               |       |           |          |
| Prepared by:   |               |       |           |          |
| Date/Time:   |               |       |           |          |
| ICS 219-2 CREW/TEAM (GREEN)  |               |       |           |          |

## ICS 219-2: Crew/Team Card

| Block Title   | Instructions  |
|---|---|
| <b>ST/Unit</b>  | Enter the State and/or unit identifier (3–5 letters) used by the authority having jurisdiction.   |
| <b>LDW (Last Day Worked)</b>  | Indicate the last available workday that the resource is allowed to work  |
| <b># Pers</b>   | Enter total number of personnel associated with the crew/team. Include leaders.   |
| <b>Order #</b>  | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline, since several incident numbers may be used for the same incident.  |
| <b>Agency</b>   | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).  |
| <b>Cat/Kind/Type</b>  | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.   |
| <b>Name/ID #</b>  | Use this section to enter the resource name or unique identifier (e.g., 13, Bluewater, Utility 32).   |
| <b>Date/Time Checked In</b>   | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| <b>Leader Name</b>  | Enter resource leader's name (use at least the first initial and last name).  |
| <b>Primary Contact Information</b>  | Enter the primary contact information (e.g., cell phone number, radio, etc.) for the leader.<br><br>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).<br><br>Phone and pager numbers should include the area code and any satellite phone specifics. |
| <b>Crew/Team ID #(s) or Name(s)</b>   | Provide the identifier number(s) or name(s) for this crew/team (e.g., Air Monitoring Team 2, Entry Team 3).   |
| <b>Manifest</b><br><input type="checkbox"/> Yes<br><input type="checkbox"/> No  | Use this section to enter whether or not the resource or personnel has a manifest. If they do, indicate the manifest number.  |
| <b>Total Weight</b>   | Enter the total weight for the crew/team. This information is necessary when the crew/team are transported by charter air.  |
| <b>Method of Travel to Incident</b><br><input type="checkbox"/> AOV<br><input type="checkbox"/> POV<br><input type="checkbox"/> Bus<br><input type="checkbox"/> Air<br><input type="checkbox"/> Other | Check the box(es) for the appropriate method(s) of travel the individual used to bring himself/herself to the incident. AOV is "agency-owned vehicle." POV is "privately owned vehicle."  |
| <b>Home Base</b>  | Enter the home base to which the resource or individual is normally assigned (may not be departure location).   |
| <b>Departure Point</b>  | Enter the location from which the resource or individual departed for this incident.  |
| <b>ETD</b>  | Use this section to enter the crew/team's estimated time of departure (using the 24-hour clock) from their home base.   |
| <b>ETA</b>  | Use this section to enter the crew/team's estimated time of arrival (using the 24-hour clock) at the incident.  |

| Block Title  | Instructions  |
|--|---|
| <b>Transportation Needs at Incident</b><br><input type="checkbox"/> Vehicle<br><input type="checkbox"/> Bus<br><input type="checkbox"/> Air<br><input type="checkbox"/> Other  | Check the box(es) for the appropriate method(s) of transportation at the incident.  |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the crew/team was ordered to the incident.   |
| <b>Remarks</b>   | Enter any additional information pertaining to the crew/team.   |
| <b>BACK OF FORM</b>  |   |
| <b>Incident Location</b>   | Enter the location of the crew/team.  |
| <b>Time</b>  | Enter the time (24-hour clock) the crew/team reported to this location.   |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the crew/team's current status:<br><ul style="list-style-type: none"> <li>• Assigned – Assigned to the incident</li> <li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li> <li>• O/S Pers – Out-of-service for personnel reasons</li> <li>• Available – Available to be assigned to the incident</li> <li>• O/S Mech – Out-of-service for mechanical reasons</li> <li>• ETR – Estimated time of return</li> </ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the crew/team's current location or status.  |
| <b>Prepared by<br/>Date/Time</b>   | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock).   |

|                              |               |         |           |
|------------------------------|---------------|---------|-----------|
| ST/Unit:                     | LDW:          | # Pers: | Order #:  |
| Agency                       | Cat/Kind/Type |         | Name/ID # |
| <b>Front</b>                 |               |         |           |
| Date/Time Checked In:        |               |         |           |
| Leader Name:                 |               |         |           |
| Primary Contact Information: |               |         |           |
| Resource ID #(s) or Name(s): |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
| Home Base:                   |               |         |           |
| Departure Point:             |               |         |           |
| ETD:                         |               | ETA:    |           |
| Date/Time Ordered:           |               |         |           |
| Remarks:                     |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
|                              |               |         |           |
| Prepared by:                 |               |         |           |
| Date/Time:                   |               |         |           |
| ICS 219-3 ENGINE (ROSE)      |               |         |           |

|  |               |         |           |
|--|---------------|---------|-----------|
| ST/Unit:   | LDW:          | # Pers: | Order #:  |
| Agency   | Cat/Kind/Type |         | Name/ID # |
| <b>Back</b>  |               |         |           |
| Incident Location:   |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |         |           |
| Notes:   |               |         |           |
| Incident Location:   |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |         |           |
| Notes:   |               |         |           |
| Incident Location:   |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |         |           |
| Notes:   |               |         |           |
| Incident Location:   |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |         |           |
| Notes:   |               |         |           |
| Prepared by:   |               |         |           |
| Date/Time:   |               |         |           |
| ICS 219-3 ENGINE (ROSE)  |               |         |           |

## ICS 219-3: Engine Card

| Block Title  | Instructions  |
|--|---|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.   |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available workday that the resource is allowed to work  |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include leaders.  |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.   |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).  |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.   |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier (e.g., 13, Bluewater, Utility 32).   |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| <b>Leader Name</b>   | Enter resource leader's name (use at least the first initial and last name).  |
| <b>Primary Contact Information</b>   | Enter the primary contact information (e.g., cell phone number, radio, etc.) for the leader.<br><br>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).<br><br>Phone and pager numbers should include the area code and any satellite phone specifics.   |
| <b>Resource ID #(s) or Name(s)</b>   | Provide the identifier number(s) or name(s) for the resource(s).  |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).   |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.  |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.  |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the incident.   |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.  |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.  |
| <b>BACK OF FORM</b>  |   |
| <b>Incident Location</b>   | Enter the location of the resource.   |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.  |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"><li>• Assigned – Assigned to the incident</li><li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li><li>• O/S Pers – Out-of-service for personnel reasons</li><li>• Available – Available to be assigned to the incident</li><li>• O/S Mech – Out-of-service for mechanical reasons</li><li>• ETR – Estimated time of return</li></ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.   |

| Block Title                            | Instructions  |
|--|---|
| <b>Prepared by</b><br><b>Date/Time</b> | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock). |

|                             |               |      |           |          |
|-----------------------------|---------------|------|-----------|----------|
| ST/Unit:                    |               | LDW: | # Pers:   | Order #: |
| Agency                      | Cat/Kind/Type |      | Name/ID # |          |
| <i>Front</i>                |               |      |           |          |
| Date/Time Checked In:       |               |      |           |          |
| Pilot Name:                 |               |      |           |          |
| Home Base:                  |               |      |           |          |
| Departure Point:            |               |      |           |          |
| ETD:                        |               | ETA: |           |          |
| Destination Point:          |               |      |           |          |
| Date/Time Ordered:          |               |      |           |          |
| Remarks:                    |               |      |           |          |
| Prepared by:                |               |      |           |          |
| Date/Time:                  |               |      |           |          |
| ICS 219-4 HELICOPTER (BLUE) |               |      |           |          |

|  |               |       |           |          |
|--|---------------|-------|-----------|----------|
| ST/Unit:   |               | LDW:  | # Pers:   | Order #: |
| Agency   | Cat/Kind/Type |       | Name/ID # |          |
| <i>Back</i>  |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| <b>Status:</b>   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |       |           |          |
| Notes:   |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| <b>Status:</b>   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |       |           |          |
| Notes:   |               |       |           |          |
| Incident Location:   |               | Time: |           |          |
| <b>Status:</b>   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: ____ |               |       |           |          |
| Notes:   |               |       |           |          |
| Prepared by:   |               |       |           |          |
| Date/Time:   |               |       |           |          |
| ICS 219-4 HELICOPTER (BLUE)  |               |       |           |          |

## ICS 219-4: Helicopter Card

| Block Title  | Instructions   |
|--|--|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.  |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available workday that the resource is allowed to work.  |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include the pilot.   |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.  |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).   |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.  |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier.  |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.  |
| <b>Pilot Name:</b>   | Enter pilot's name (use at least the first initial and last name).   |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).  |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.   |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.   |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the destination point.   |
| <b>Destination Point</b>   | Use this section to enter the location at the incident where the resource has been requested to report.  |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.   |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.   |
| <b>BACK OF FORM</b>  |  |
| <b>Incident Location</b>   | Enter the location of the resource.  |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.   |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"> <li>• Assigned – Assigned to the incident</li> <li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li> <li>• O/S Pers – Out-of-service for personnel reasons</li> <li>• Available – Available to be assigned to the incident</li> <li>• O/S Mech – Out-of-service for mechanical reasons</li> <li>• ETR – Estimated time of return</li> </ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.  |
| <b>Prepared by</b><br><b>Date/Time</b>   | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock).  |

|                 |              |                        |
|-----------------|--------------|------------------------|
| <b>ST/Unit:</b> | <b>Name:</b> | <b>Position/Title:</b> |
|-----------------|--------------|------------------------|

**Front**

|  |                      |
|--|----------------------|
| <b>Date/Time Checked In:</b>   |                      |
| <b>Name:</b>   |                      |
| <b>Primary Contact Information:</b>  |                      |
| <b>Manifest:</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No   | <b>Total Weight:</b> |
| <b>Method of Travel to Incident:</b><br><input type="checkbox"/> AOV <input type="checkbox"/> POV <input type="checkbox"/> Bus <input type="checkbox"/> Air <input type="checkbox"/> Other |                      |
| <b>Home Base:</b>  |                      |
| <b>Departure Point:</b>  |                      |
| <b>ETD:</b>  | <b>ETA:</b>          |
| <b>Transportation Needs at Incident:</b><br><input type="checkbox"/> Vehicle <input type="checkbox"/> Bus <input type="checkbox"/> Air <input type="checkbox"/> Other                      |                      |
| <b>Date/Time Ordered:</b>  |                      |
| <b>Remarks:</b>  |                      |
| <b>Prepared by:</b>  |                      |
| <b>Date/Time:</b>  |                      |
| <b>ICS 219-5 PERSONNEL (WHITE CARD)</b>  |                      |

|                 |              |                        |
|-----------------|--------------|------------------------|
| <b>ST/Unit:</b> | <b>Name:</b> | <b>Position/Title:</b> |
|-----------------|--------------|------------------------|

**Back**

|   |              |
|---|--------------|
| <b>Incident Location:</b>   | <b>Time:</b> |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |              |
| <b>Notes:</b>   |              |
| <b>Incident Location:</b>   | <b>Time:</b> |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |              |
| <b>Notes:</b>   |              |
| <b>Incident Location:</b>   | <b>Time:</b> |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |              |
| <b>Notes:</b>   |              |
| <b>Incident Location:</b>   | <b>Time:</b> |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |              |
| <b>Notes:</b>   |              |
| <b>Prepared by:</b>   |              |
| <b>Date/Time:</b>   |              |
| <b>ICS 219-5 PERSONNEL (WHITE CARD)</b>   |              |

## ICS 219-5: Personnel Card

| Block Title   | Instructions  |
|---|---|
| <b>ST/Unit</b>  | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.   |
| <b>Name</b>   | Enter the individual's first initial and last name.   |
| <b>Position/Title</b>   | Enter the individual's ICS position/title.  |
| <b>Date/Time Checked In</b>   | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| <b>Name</b>   | Enter the individual's full name.   |
| <b>Primary Contact Information</b>  | Enter the primary contact information (e.g., cell phone number, radio, etc.) for the leader.<br><br>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).<br><br>Phone and pager numbers should include the area code and any satellite phone specifics. |
| <b>Manifest</b><br><input type="checkbox"/> Yes<br><input type="checkbox"/> No  | Use this section to enter whether or not the resource or personnel has a manifest. If they do, indicate the manifest number.  |
| <b>Total Weight</b>   | Enter the total weight for the crew. This information is necessary when the crew are transported by charter air.  |
| <b>Method of Travel to Incident</b><br><input type="checkbox"/> AOV<br><input type="checkbox"/> POV<br><input type="checkbox"/> Bus<br><input type="checkbox"/> Air<br><input type="checkbox"/> Other | Check the box(es) for the appropriate method(s) of travel the individual used to bring himself/herself to the incident. AOV is "agency-owned vehicle." POV is "privately owned vehicle."  |
| <b>Home Base</b>  | Enter the home base to which the resource or individual is normally assigned (may not be departure location).   |
| <b>Departure Point</b>  | Enter the location from which the resource or individual departed for this incident.  |
| <b>ETD</b>  | Use this section to enter the crew's estimated time of departure (using the 24-hour clock) from their home base.  |
| <b>ETA</b>  | Use this section to enter the crew's estimated time of arrival (using the 24-hour clock) at the incident.   |
| <b>Transportation Needs at Incident</b><br><input type="checkbox"/> Vehicle<br><input type="checkbox"/> Bus<br><input type="checkbox"/> Air<br><input type="checkbox"/> Other                         | Check the box(es) for the appropriate method(s) of transportation at the incident.  |
| <b>Date/Time Ordered</b>  | Enter date (month/day/year) and time (24-hour clock) the crew was ordered to the incident.  |
| <b>Remarks</b>  | Enter any additional information pertaining to the crew.  |
| <b>BACK OF FORM</b>   |   |
| <b>Incident Location</b>  | Enter the location of the crew.   |
| <b>Time</b>   | Enter the time (24-hour clock) the crew reported to this location.  |

| Block Title  | Instructions  |
|--|---|
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the crew's current status: <ul style="list-style-type: none"> <li>• Assigned – Assigned to the incident</li> <li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li> <li>• O/S Pers – Out-of-service for personnel reasons</li> <li>• Available – Available to be assigned to the incident</li> <li>• O/S Mech – Out-of-service for mechanical reasons</li> <li>• ETR – Estimated time of return</li> </ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the crew's current location or status.   |
| <b>Prepared by</b><br><b>Date/Time</b>   | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock).   |

|                               |               |         |           |
|-------------------------------|---------------|---------|-----------|
| ST/Unit:                      | LDW:          | # Pers: | Order #:  |
| Agency                        | Cat/Kind/Type |         | Name/ID # |
| <i>Front</i>                  |               |         |           |
| Date/Time Checked-In:         |               |         |           |
| Pilot Name:                   |               |         |           |
| Home Base:                    |               |         |           |
| Departure Point:              |               |         |           |
| ETD:                          |               | ETA:    |           |
| Destination Point:            |               |         |           |
| Date/Time Ordered:            |               |         |           |
| Manufacturer:                 |               |         |           |
| Remarks:                      |               |         |           |
| Prepared by:                  |               |         |           |
| Date/Time:                    |               |         |           |
| ICS 219-6 FIXED-WING (ORANGE) |               |         |           |

|   |               |         |           |
|---|---------------|---------|-----------|
| ST/Unit:  | LDW:          | # Pers: | Order #:  |
| Agency  | Cat/Kind/Type |         | Name/ID # |
| <i>Back</i>   |               |         |           |
| Incident Location:  |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |         |           |
| Notes:  |               |         |           |
| Incident Location:  |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |         |           |
| Notes:  |               |         |           |
| Incident Location:  |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |         |           |
| Notes:  |               |         |           |
| Incident Location:  |               | Time:   |           |
| <b>Status:</b><br><input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |         |           |
| Notes:  |               |         |           |
| Prepared by:  |               |         |           |
| Date/Time:  |               |         |           |
| ICS 219-6 FIXED-WING (ORANGE)   |               |         |           |

## ICS 219-6: Fixed-Wing Card

| Block Title  | Instructions   |
|--|--|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.  |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available workday that the resource is allowed to work.  |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include the pilot.   |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.  |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).   |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.  |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier.  |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.  |
| <b>Pilot Name:</b>   | Enter pilot's name (use at least the first initial and last name).   |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).  |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.   |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.   |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the destination point.   |
| <b>Destination Point</b>   | Use this section to enter the location at the incident where the resource has been requested to report.  |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.   |
| <b>Manufacturer</b>  | Enter the manufacturer of the aircraft.  |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.   |
| <b>BACK OF FORM</b>  |  |
| <b>Incident Location</b>   | Enter the location of the resource.  |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.   |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"> <li>• Assigned – Assigned to the incident</li> <li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li> <li>• O/S Pers – Out-of-service for personnel reasons</li> <li>• Available – Available to be assigned to the incident</li> <li>• O/S Mech – Out-of-service for mechanical reasons</li> <li>• ETR – Estimated time of return</li> </ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.  |
| <b>Prepared by</b><br><b>Date/Time</b>   | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock).  |

|                              |               |      |           |          |
|------------------------------|---------------|------|-----------|----------|
| ST/Unit:                     |               | LDW: | # Pers:   | Order #: |
| Agency                       | Cat/Kind/Type |      | Name/ID # |          |
| <i>Front</i>                 |               |      |           |          |
| Date/Time Checked In:        |               |      |           |          |
| Leader Name:                 |               |      |           |          |
| Primary Contact Information: |               |      |           |          |
| Resource ID #(s) or Name(s): |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
| Home Base:                   |               |      |           |          |
| Departure Point:             |               |      |           |          |
| ETD:                         |               | ETA: |           |          |
| Date/Time Ordered:           |               |      |           |          |
| Remarks:                     |               |      |           |          |
|                              |               |      |           |          |
|                              |               |      |           |          |
| Prepared by:                 |               |      |           |          |
| Date/Time:                   |               |      |           |          |
| ICS 219-7 EQUIPMENT (YELLOW) |               |      |           |          |

|   |               |       |           |          |
|---|---------------|-------|-----------|----------|
| ST/Unit:  |               | LDW:  | # Pers:   | Order #: |
| Agency  | Cat/Kind/Type |       | Name/ID # |          |
| <i>Back</i>   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Prepared by:  |               |       |           |          |
| Date/Time:  |               |       |           |          |
| ICS 219-7 EQUIPMENT (YELLOW)  |               |       |           |          |

## ICS 219-6: Fixed-Wing Card

| Block Title  | Instructions   |
|--|--|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.  |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available workday that the resource is allowed to work.  |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include the pilot.   |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.  |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).   |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.  |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier.  |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.  |
| <b>Pilot Name:</b>   | Enter pilot's name (use at least the first initial and last name).   |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).  |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.   |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.   |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the destination point.   |
| <b>Destination Point</b>   | Use this section to enter the location at the incident where the resource has been requested to report.  |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.   |
| <b>Manufacturer</b>  | Enter the manufacturer of the aircraft.  |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.   |
| <b>BACK OF FORM</b>  |  |
| <b>Incident Location</b>   | Enter the location of the resource.  |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.   |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"> <li>• Assigned – Assigned to the incident</li> <li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li> <li>• O/S Pers – Out-of-service for personnel reasons</li> <li>• Available – Available to be assigned to the incident</li> <li>• O/S Mech – Out-of-service for mechanical reasons</li> <li>• ETR – Estimated time of return</li> </ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.  |
| <b>Prepared by</b><br><b>Date/Time</b>   | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock).  |

|   |               |      |           |          |
|---|---------------|------|-----------|----------|
| ST/Unit:  |               | LDW: | # Pers:   | Order #: |
| Agency  | Cat/Kind/Type |      | Name/ID # |          |
| <i>Front</i>  |               |      |           |          |
| Date/Time Checked In:                                 |               |      |           |          |
| Leader Name:  |               |      |           |          |
| Primary Contact Information:                          |               |      |           |          |
| Resource ID #(s) or Name(s):                          |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
| Home Base:  |               |      |           |          |
| Departure Point:                                      |               |      |           |          |
| ETD:  |               | ETA: |           |          |
| Date/Time Ordered:                                    |               |      |           |          |
| Remarks:  |               |      |           |          |
|   |               |      |           |          |
|   |               |      |           |          |
| Prepared by:  |               |      |           |          |
| Date/Time:  |               |      |           |          |
| ICS 219-8 MISCELLANEOUS<br>EQUIPMENT/TASK FORCE (TAN) |               |      |           |          |

|   |               |       |           |          |
|---|---------------|-------|-----------|----------|
| ST/Unit:  |               | LDW:  | # Pers:   | Order #: |
| Agency  | Cat/Kind/Type |       | Name/ID # |          |
| <i>Back</i>   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Incident Location:  |               | Time: |           |          |
| Status:   |               |       |           |          |
| <input type="checkbox"/> Assigned <input type="checkbox"/> O/S Rest <input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available <input type="checkbox"/> O/S Mech <input type="checkbox"/> ETR: _____ |               |       |           |          |
| Notes:  |               |       |           |          |
|   |               |       |           |          |
| Prepared by:  |               |       |           |          |
| Date/Time:  |               |       |           |          |
| ICS 219-8 MISCELLANEOUS<br>EQUIPMENT/TASK FORCE (TAN)   |               |       |           |          |

**ICS 219-8: Miscellaneous Equipment/Task Force Card**

| <b>Block Title</b>   | <b>Instructions</b>   |
|--|---|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.   |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available work day that the resource is allowed to work.  |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include leaders.  |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.   |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).  |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.   |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier (e.g., 13, Bluewater, Utility 32).   |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| <b>Leader Name</b>   | Enter resource leader's name (use at least the first initial and last name).  |
| <b>Primary Contact Information</b>   | Enter the primary contact information (e.g., cell phone number, radio, etc.) for the leader.<br><br>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).<br><br>Phone and pager numbers should include the area code and any satellite phone specifics.   |
| <b>Resource ID #(s) or Name(s)</b>   | Provide the identifier number or name for this resource.  |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).   |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.  |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.  |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the incident.   |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.  |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.  |
| <b>BACK OF FORM</b>  |   |
| <b>Incident Location</b>   | Enter the location of the resource.   |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.  |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"><li>• Assigned – Assigned to the incident</li><li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li><li>• O/S Pers – Out-of-service for personnel reasons</li><li>• Available – Available to be assigned to the incident</li><li>• O/S Mech – Out-of-service for mechanical reasons</li><li>• ETR – Estimated time of return</li></ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.   |

| Block Title                            | Instructions  |
|--|---|
| <b>Prepared by</b><br><b>Date/Time</b> | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock). |



## ICS 219-10: Generic Card

| Block Title  | Instructions  |
|--|---|
| <b>ST/Unit</b>   | Enter the State and or unit identifier (3–5 letters) used by the authority having jurisdiction.   |
| <b>LDW (Last Day Worked)</b>   | Indicate the last available workday that the resource is allowed to work.   |
| <b># Pers</b>  | Enter total number of personnel associated with the resource. Include leaders.  |
| <b>Order #</b>   | The order request number will be assigned by the agency dispatching resources or personnel to the incident. Use existing protocol as appropriate for the jurisdiction and/or discipline since several incident numbers may be used for the same incident.   |
| <b>Agency</b>  | Use this section to list agency name or designator (e.g., ORC, ARL, NYPD).  |
| <b>Cat/Kind/Type</b>   | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance.   |
| <b>Name/ID #</b>   | Use this section to enter the resource name or unique identifier (e.g., 13, Bluewater, Utility 32).   |
| <b>Date/Time Checked In</b>  | Enter date (month/day/year) and time of check-in (24-hour clock) to the incident.   |
| <b>Leader Name</b>   | Enter resource leader's name (use at least the first initial and last name).  |
| <b>Primary Contact Information</b>   | Enter the primary contact information (e.g., cell phone number, radio, etc.) for the leader.<br><br>If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205).<br><br>Phone and pager numbers should include the area code and any satellite phone specifics.   |
| <b>Resource ID #(s) or Name(s)</b>   | Provide the identifier number(s) or name(s) for this resource.  |
| <b>Home Base</b>   | Enter the home base to which the resource or individual is normally assigned (may not be departure location).   |
| <b>Departure Point</b>   | Enter the location from which the resource or individual departed for this incident.  |
| <b>ETD</b>   | Use this section to enter the resource's estimated time of departure (using the 24-hour clock) from their home base.  |
| <b>ETA</b>   | Use this section to enter the resource's estimated time of arrival (using the 24-hour clock) at the incident.   |
| <b>Date/Time Ordered</b>   | Enter date (month/day/year) and time (24-hour clock) the resource was ordered to the incident.  |
| <b>Remarks</b>   | Enter any additional information pertaining to the resource.  |
| <b>BACK OF FORM</b>  |   |
| <b>Incident Location</b>   | Enter the location of the resource.   |
| <b>Time</b>  | Enter the time (24-hour clock) the resource reported to this location.  |
| <b>Status</b><br><input type="checkbox"/> Assigned<br><input type="checkbox"/> O/S Rest<br><input type="checkbox"/> O/S Pers<br><input type="checkbox"/> Available<br><input type="checkbox"/> O/S Mech<br><input type="checkbox"/> ETR: _____ | Enter the resource's current status:<br><ul style="list-style-type: none"><li>• Assigned – Assigned to the incident</li><li>• O/S Rest – Out-of-service for rest/recuperation purposes/guidelines, or due to operating time limits/policies for pilots, operators, drivers, equipment, or aircraft</li><li>• O/S Pers – Out-of-service for personnel reasons</li><li>• Available – Available to be assigned to the incident</li><li>• O/S Mech – Out-of-service for mechanical reasons</li><li>• ETR – Estimated time of return</li></ul> |
| <b>Notes</b>   | Enter any additional information pertaining to the resource's current location or status.   |

| Block Title                            | Instructions  |
|--|---|
| <b>Prepared by</b><br><b>Date/Time</b> | Enter the name of the person preparing the form. Enter the date (month/day/year) and time prepared (using the 24-hour clock). |

## AIR OPERATIONS SUMMARY (ICS 220)

|  |                    |   |                                |   |                            |
|--|--------------------|---|--------------------------------|---|----------------------------|
| <b>1. Incident Name:</b>   |                    | <b>2. Operational Period:</b><br>Date From: _____ Date To: _____<br>Time From: _____ Time To: _____ |                                | <b>3. Sunrise:</b> _____ <b>Sunset:</b> _____   |                            |
| <b>4. Remarks</b> (safety notes, hazards, air operations special equipment, etc.): |                    | <b>5. Ready Alert Aircraft:</b><br>Medivac: _____<br>New Incident: _____                            |                                | <b>6. Temporary Flight Restriction Number:</b><br>Altitude: _____<br>Center Point: _____                    |                            |
|  |                    | <b>8. Frequencies:</b><br>Air/Air Fixed-Wing  |                                | <b>9. Fixed-Wing</b> (category/kind/type, make/model, N#, base):<br>Air Tactical Group Supervisor Aircraft: |                            |
| <b>7. Personnel:</b>   | Name:              | Phone Number:   | AM                             | FM  |                            |
| Air Operations Branch Director   |                    |   |                                |   |                            |
| Air Support Group Supervisor   |                    |   | Command                        |   | Other Fixed-Wing Aircraft: |
| Air Tactical Group Supervisor  |                    |   | Deck Coordinator               |   |                            |
| Helicopter Coordinator   |                    |   | Take-Off & Landing Coordinator |   |                            |
| Helibase Manager   |                    |   | Air Guard                      |   |                            |
| <b>10. Helicopters</b> (use additional sheets as necessary):                       |                    |   |                                |   |                            |
| FAA N#   | Category/Kind/Type | Make/Model  | Base                           | Available   | Start                      |
|  |                    |   |                                |   | Remarks                    |
|  |                    |   |                                |   |                            |
|  |                    |   |                                |   |                            |
|  |                    |   |                                |   |                            |
|  |                    |   |                                |   |                            |
|  |                    |   |                                |   |                            |
| <b>11. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____         |                    |   |                                |   |                            |
| ICS 220, Page 1  |                    |   |                                |   |                            |



## ICS 220

### Air Operations Summary

**Purpose.** The Air Operations Summary (ICS 220) provides the Air Operations Branch with the number, type, location, and specific assignments of helicopters and air resources.

**Preparation.** The ICS 220 is completed by the Operations Section Chief or the Air Operations Branch Director during each Planning Meeting. General air resources assignment information is obtained from the Operational Planning Worksheet (ICS 215), which also is completed during each Planning Meeting. Specific designators of the air resources assigned to the incident are provided by the Air and Fixed-Wing Support Groups. If aviation assets would be utilized for rescue or are referenced on the Medical Plan (ICS 206), coordinate with the Medical Unit Leader and indicate on the ICS 206.

**Distribution.** After the ICS 220 is completed by Air Operations personnel, the form is given to the Air Support Group Supervisor and Fixed-Wing Coordinator personnel. These personnel complete the form by indicating the designators of the helicopters and fixed-wing aircraft assigned missions during the specified operational period. This information is provided to Air Operations personnel who, in turn, give the information to the Resources Unit.

#### Notes:

- If additional pages are needed for any form page, use a blank ICS 220 and repaginate as needed.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Operational Period</b> <ul style="list-style-type: none"> <li>• Date and Time From</li> <li>• Date and Time To</li> </ul>    | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.  |
| 3            | <b>Sunrise/Sunset</b>   | Enter the sunrise and sunset times.   |
| 4            | <b>Remarks</b> (safety notes, hazards, air operations special equipment, etc.)  | Enter special instructions or information, including safety notes, hazards, and priorities for Air Operations personnel.  |
| 5            | <b>Ready Alert Aircraft</b> <ul style="list-style-type: none"> <li>• Medivac</li> <li>• New Incident</li> </ul>                 | Identify ready alert aircraft that will be used as Medivac for incident assigned personnel and indicate on the Medical Plan (ICS 206). Identify aircraft to be used for new incidents within the area or new incident(s) within an incident.                      |
| 6            | <b>Temporary Flight Restriction Number</b> <ul style="list-style-type: none"> <li>• Altitude</li> <li>• Center Point</li> </ul> | Enter Temporary Flight Restriction Number, altitude (from the center point), and center point (latitude and longitude). This number is provided by the Federal Aviation Administration (FAA) or is the order request number for the Temporary Flight Restriction. |
| 7            | <b>Personnel</b> <ul style="list-style-type: none"> <li>• Name</li> <li>• Phone Number</li> </ul>                               | Enter the name and phone number of the individuals in Air Operations.   |
|              | Air Operations Branch Director  |   |
|              | Air Support Group Supervisor  |   |
|              | Air Tactical Group Supervisor   |   |
|              | Helicopter Coordinator  |   |
|              | Helibase Manager  |   |

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 8            | <b>Frequencies</b><br>• AM<br>• FM  | Enter primary air/air, air/ground (if applicable), command, deck coordinator, take-off and landing coordinator, and other radio frequencies to be used during the incident.   |
|              | Air/Air Fixed-Wing  |   |
|              | Air/Air Rotary-Wing – Flight Following  | Flight following is typically done by Air Operations.   |
|              | Air/Ground  |   |
|              | Command   |   |
|              | Deck Coordinator  |   |
|              | Take-Off & Landing Coordinator  |   |
|              | Air Guard   |   |
| 9            | <b>Fixed-Wing</b> (category/kind/type, make/model, N#, base)  | Enter the category/kind/type based on NIMS, discipline, or jurisdiction guidance, make/model, N#, and base of air assets allocated to the incident.   |
|              | Air Tactical Group Supervisor Aircraft  |   |
|              | Other Fixed-Wing Aircraft   |   |
| 10           | <b>Helicopters</b>  | Enter the following information about the helicopter resources allocated to the incident.   |
|              | FAA N#  | Enter the FAA N#.   |
|              | Category/Kind/Type  | Enter the helicopter category/kind/type based on NIMS, discipline, or jurisdiction guidance.  |
|              | Make/Model  | Enter the make and model of the helicopter.   |
|              | Base  | Enter the base where the helicopter is located.   |
|              | Available   | Enter the time the aircraft is available.   |
|              | Start   | Enter the time the aircraft becomes operational.  |
|              | Remarks   |   |
| 11           | <b>Prepared by</b><br>• Name<br>• Position/Title<br>• Signature<br>• Date/Time  | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).  |
| 12           | <b>Task/Mission/Assignment</b> (category/kind/type and function includes: air tactical, reconnaissance, personnel transport, search and rescue, etc.) | Enter the specific assignment (e.g., water or retardant drops, logistical support, or availability status for a specific purpose, support backup, recon, Medivac, etc.). If applicable, enter the primary air/air and air/ground radio frequency to be used. Mission assignments may be listed by priority. |
|              | Category/Kind/Type and Function   |   |
|              | Name of Personnel or Cargo (if applicable) or Instructions for Tactical Aircraft  |   |
|              | Mission Start   |   |
|              | Fly From  | Enter the incident location or air base the aircraft is flying from.  |
|              | Fly To  | Enter the incident location or air base the aircraft is flying to.  |



## ICS 221 Demobilization Check-Out

**Purpose.** The Demobilization Check-Out (ICS 221) ensures that resources checking out of the incident have completed all appropriate incident business, and provides the Planning Section information on resources released from the incident. Demobilization is a planned process and this form assists with that planning.

**Preparation.** The ICS 221 is initiated by the Planning Section, or a Demobilization Unit Leader if designated. The Demobilization Unit Leader completes the top portion of the form and checks the appropriate boxes in Block 6 that may need attention after the Resources Unit Leader has given written notification that the resource is no longer needed. The individual resource will have the appropriate overhead personnel sign off on any checked box(es) in Block 6 prior to release from the incident.

**Distribution.** After completion, the ICS 221 is returned to the Demobilization Unit Leader or the Planning Section. All completed original forms must be given to the Documentation Unit. Personnel may request to retain a copy of the ICS 221.

### Notes:

- Members are not released until form is complete when all of the items checked in Block 6 have been signed off.
- If additional pages are needed for any form page, use a blank ICS 221 and repaginate as needed.

| Block Number | Block Title   | Instructions  |
|--------------|---|---|
| 1            | <b>Incident Name</b>  | Enter the name assigned to the incident.  |
| 2            | <b>Incident Number</b>  | Enter the number assigned to the incident.  |
| 3            | <b>Planned Release Date/Time</b>  | Enter the date (month/day/year) and time (using the 24-hour clock) of the planned release from the incident.  |
| 4            | <b>Resource or Personnel Released</b>   | Enter name of the individual or resource being released.  |
| 5            | <b>Order Request Number</b>   | Enter order request number (or agency demobilization number) of the individual or resource being released.  |
| 6            | <b>Resource or Personnel</b><br>You and your resources are in the process of being released. Resources are not released until the checked boxes below have been signed off by the appropriate overhead and the Demobilization Unit Leader (or Planning Section representative). <ul style="list-style-type: none"> <li>• Unit/Leader/Manager/Other</li> <li>• Remarks</li> <li>• Name</li> <li>• Signature</li> </ul> | Resources are not released until the checked boxes below have been signed off by the appropriate overhead. Blank boxes are provided for any additional unit requirements as needed (e.g., Safety Officer, Agency Representative, etc.). |
|              | <b>Logistics Section</b><br><input type="checkbox"/> Supply Unit<br><input type="checkbox"/> Communications Unit<br><input type="checkbox"/> Facilities Unit<br><input type="checkbox"/> Ground Support Unit<br><input type="checkbox"/> Security Manager   | The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out.<br><br>Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.      |

| Block Number                | Block Title  | Instructions   |
|-----------------------------|--|--|
| <b>6</b><br>(continued)     | <b>Finance/Administration Section</b><br><input type="checkbox"/> Time Unit  | The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out.<br>Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.                                 |
|                             | <b>Other Section/Staff</b><br><input type="checkbox"/>   | The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out.<br>Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.                                 |
|                             | <b>Planning Section</b><br><input type="checkbox"/> Documentation Leader<br><input type="checkbox"/> Demobilization Leader   | The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out.<br>Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.                                 |
| <b>7</b>                    | <b>Remarks</b>   | Enter any additional information pertaining to demobilization or release (e.g., transportation needed, destination, etc.). This section may also be used to indicate if a performance rating has been completed as required by the discipline or jurisdiction. |
| <b>8</b>                    | <b>Travel Information</b>  | Enter the following travel information:  |
|                             | Room Overnight   | Use this section to enter whether or not the resource or personnel will be staying in a hotel overnight prior to returning home base and/or unit.  |
|                             | Estimated Time of Departure  | Use this section to enter the resource's or personnel's estimated time of departure (using the 24-hour clock).   |
|                             | Actual Release Date/Time   | Use this section to enter the resource's or personnel's actual release date (month/day/year) and time (using the 24-hour clock).   |
|                             | Destination  | Use this section to enter the resource's or personnel's destination.   |
|                             | Estimated Time of Arrival  | Use this section to enter the resource's or personnel's estimated time of arrival (using the 24-hour clock) at the destination.  |
|                             | Travel Method  | Use this section to enter the resource's or personnel's travel method (e.g., POV, air, etc.).  |
|                             | Contact Information While Traveling  | Use this section to enter the resource's or personnel's contact information while traveling (e.g., cell phone, radio frequency, etc.).   |
|                             | Manifest <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Number  | Use this section to enter whether or not the resource or personnel has a manifest. If they do, indicate the manifest number.   |
| Area/Agency/Region Notified | Use this section to enter the area, agency, and/or region that was notified of the resource's travel. List the name (first initial and last name) of the individual notified and the date (month/day/year) he or she was notified. |  |
| <b>9</b>                    | <b>Reassignment Information</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No  | Enter whether or not the resource or personnel was reassigned to another incident. If the resource or personnel was reassigned, complete the section below.  |
|                             | Incident Name  | Use this section to enter the name of the new incident to which the resource was reassigned.   |
|                             | Incident Number  | Use this section to enter the number of the new incident to which the resource was reassigned.   |
|                             | Location   | Use this section to enter the location (city and State) of the new incident to which the resource was reassigned.  |
|                             | Order Request Number   | Use this section to enter the new order request number assigned to the resource or personnel.  |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
| 10           | <b>Prepared by</b> <ul style="list-style-type: none"><li>• Name</li><li>• Position/Title</li><li>• Signature</li><li>• Date/Time</li></ul> | Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (using the 24-hour clock). |

## INCIDENT PERSONNEL PERFORMANCE RATING (ICS 225)

| THIS RATING IS TO BE USED <u>ONLY</u> FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE ON AN INCIDENT/EVENT  |                          |   |                                 |   |  |
|---|--------------------------|---|---------------------------------|---|--|
| 1. Name:  |                          | 2. Incident Name:   |                                 | 3. Incident Number:   |  |
| 4. Home Unit Name and Address:  |                          |   | 5. Incident Agency and Address: |   |  |
| 6. Position Held on Incident:   |                          | 7. Date(s) of Assignment:<br>From:                      To:   |                                 | 8. Incident Complexity Level:<br><input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5   |  |
| <b>10. Evaluation</b>   |                          |   |                                 |   |  |
| Rating Factors  | N/A                      | 1 – Unacceptable  | 2                               | 3 – Met Standards   | 4                      5 – Exceeded Expectations   |
| <b>11. Knowledge of the Job/ Professional Competence:</b><br>Ability to acquire, apply, and share technical and administrative knowledge and skills associated with description of duties. (Includes operational aspects such as marine safety, seamanship, airmanship, SAR, etc., as appropriate.) | <input type="checkbox"/> | Questionable competence and credibility. Operational or specialty expertise inadequate or lacking in key areas. Made little effort to grow professionally. Used knowledge as power against others or bluffed rather than acknowledging ignorance. Effectiveness reduced due to limited knowledge of own organizational role and customer needs. | <input type="checkbox"/>        | Competent and credible authority on specialty or operational issues. Acquired and applied excellent operational or specialty expertise for assigned duties. Showed professional growth through education, training, and professional reading. Shared knowledge and information with others clearly and simply. Understood own organizational role and customer needs. | Superior expertise; advice and actions showed great breadth and depth of knowledge. Remarkable grasp of complex issues, concepts, and situations. Rapidly developed professional growth beyond expectations. Vigorously conveyed knowledge, directly resulting in increased workplace productivity. Insightful knowledge of own role, customer needs, and value of work.                             |
| <b>12. Ability To Obtain Performance/Results:</b><br>Quality, quantity, timeliness, and impact of work.   | <input type="checkbox"/> | Routine tasks accomplished with difficulty. Results often late or of poor quality. Work had a negative impact on department or unit. Maintained the status quo despite opportunities to improve.  | <input type="checkbox"/>        | Got the job done in all routine situations and in many unusual ones. Work was timely and of high quality; required same of subordinates. Results had a positive impact on IMT. Continuously improved services and organizational effectiveness.   | Maintained optimal balance among quality, quantity, and timeliness of work. Quality of own and subordinates' work surpassed expectations. Results had a significant positive impact on the IMT. Established clearly effective systems of continuous improvement.   |
| <b>13. Planning/ Preparedness:</b><br>Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines, and create a shared vision of the Incident Management Team (IMT).  | <input type="checkbox"/> | Got caught by the unexpected; appeared to be controlled by events. Set vague or unrealistic goals. Used unreasonable criteria to set priorities and deadlines. Rarely had plan of action. Failed to focus on relevant information.  | <input type="checkbox"/>        | Consistently prepared. Set high but realistic goals. Used sound criteria to set priorities and deadlines. Used quality tools and processes to develop action plans. Identified key information. Kept supervisors and stakeholders informed.   | Exceptional preparation. Always looked beyond immediate events or problems. Skillfully balanced competing demands. Developed strategies with contingency plans. Assessed all aspects of problems, including underlying issues and impact.  |
| <b>14. Using Resources:</b><br>Ability to manage time, materials, information, money, and people (i.e., all IMT components as well as external publics).  | <input type="checkbox"/> | Concentrated on unproductive activities or often overlooked critical demands. Failed to use people productively. Did not follow up. Mismanaged information, money, or time. Used ineffective tools or left subordinates without means to accomplish tasks. Employed wasteful methods.   | <input type="checkbox"/>        | Effectively managed a variety of activities with available resources. Delegated, empowered, and followed up. Skilled time manager, budgeted own and subordinates' time productively. Ensured subordinates had adequate tools, materials, time, and direction. Cost conscious, sought ways to cut waste.   | Unusually skilled at bringing scarce resources to bear on the most critical of competing demands. Optimized productivity through effective delegation, empowerment, and follow-up control. Found ways to systematically reduce cost, eliminate waste, and improve efficiency.  |
| <b>15. Adaptability/Attitude:</b><br>Ability to maintain a positive attitude and modify work methods and priorities in response to new information, changing conditions, political realities, or unexpected obstacles.  | <input type="checkbox"/> | Unable to gauge effectiveness of work, recognize political realities, or make adjustments when needed. Maintained a poor outlook. Overlooked or screened out new information. Ineffective in ambiguous, complex, or pressured situations.   | <input type="checkbox"/>        | Receptive to change, new information, and technology. Effectively used benchmarks to improve performance and service. Monitored progress and changed course as required. Maintained a positive approach. Effectively dealt with pressure and ambiguity. Facilitated smooth transitions. Adjusted direction to accommodate political realities.                        | Rapidly assessed and confidently adjusted to changing conditions, political realities, new information, and technology. Very skilled at using and responding to measurement indicators. Championed organizational improvements. Effectively dealt with extremely complex situations. Turned pressure and ambiguity into constructive forces for change.  |
| <b>16. Communication Skills:</b><br>Ability to speak effectively and listen to understand. Ability to express facts and ideas clearly and convincingly.   | <input type="checkbox"/> | Unable to effectively articulate ideas and facts; lacked preparation, confidence, or logic. Used inappropriate language or rambled. Nervous or distracting mannerisms detracted from message. Failed to listen carefully or was too argumentative. Written material frequently unclear, verbose, or poorly organized. Seldom proofread.         | <input type="checkbox"/>        | Effectively expressed ideas and facts in individual and group situations; nonverbal actions consistent with spoken message. Communicated to people at all levels to ensure understanding. Listened carefully for intended message as well as spoken words. Written material clear, concise, and logically organized. Proofread conscientiously.                       | Clearly articulated and promoted ideas before a wide range of audiences; accomplished speaker in both formal and extemporaneous situations. Adept at presenting complex or sensitive issues. Active listener; remarkable ability to listen with open mind and identify key issues. Clearly and persuasively expressed complex or controversial material, directly contributing to stated objectives. |

## INCIDENT PERSONNEL PERFORMANCE RATING (ICS 225)

|   |                          |   |                                       |  |                            |  |
|---|--------------------------|---|---------------------------------------|--|----------------------------|--|
| <b>1. Name:</b>   |                          | <b>2. Incident Name:</b>  |                                       |  | <b>3. Incident Number:</b> |  |
| <b>10. Evaluation</b>   |                          |   |                                       |  |                            |  |
| <b>Rating Factors</b>   | <b>N/A</b>               | <b>1 – Unacceptable</b>   | <b>2</b>                              | <b>3 – Met Standards</b>   | <b>4</b>                   | <b>5 – Exceeded Expectations</b>   |
| <b>17. Ability To Work on a Team:</b><br>Ability to manage, lead and participate in teams, encourage cooperation, and develop esprit de corps.  | <input type="checkbox"/> | Used teams ineffectively or at wrong times. Conflicts mismanaged or often left unresolved, resulting in decreased team effectiveness. Excluded team members from vital information. Stifled group discussions or did not contribute productively. Inhibited cross functional cooperation to the detriment of unit or service goals. | <input type="checkbox"/>              | Skillfully used teams to increase unit effectiveness, quality, and service. Resolved or managed group conflict, enhanced cooperation, and involved team members in decision process. Valued team participation. Effectively negotiated work across functional boundaries to enhance support of broader mutual goals. | <input type="checkbox"/>   | Insightful use of teams raised unit productivity beyond expectations. Inspired high level of esprit de corps, even in difficult situations. Major contributor to team effort. Established relationships and networks across a broad range of people and groups, raising accomplishments of mutual goals to a remarkable level.                           |
| <b>18. Consideration for Personnel/Team Welfare:</b><br>Ability to consider and respond to others' personal needs, capabilities, and achievements; support for and application of worklife concepts and skills.       | <input type="checkbox"/> | Seldom recognized or responded to needs of people; left outside resources untapped despite apparent need. Ignorance of individuals' capabilities increased chance of failure. Seldom recognized or rewarded deserving subordinates or other IMT members.  | <input type="checkbox"/>              | Cared for people. Recognized and responded to their needs; referred to outside resources as appropriate. Considered individuals' capabilities to maximize opportunities for success. Consistently recognized and rewarded deserving subordinates or other IMT members.   | <input type="checkbox"/>   | Always accessible. Enhanced overall quality of life. Actively contributed to achieving balance among IMT requirements and professional and personal responsibilities. Strong advocate for subordinates; ensured appropriate and timely recognition, both formal and informal.  |
| <b>19. Directing Others:</b><br>Ability to influence or direct others in accomplishing tasks or missions.   | <input type="checkbox"/> | Showed difficulty in directing or influencing others. Low or unclear work standards reduced productivity. Failed to hold subordinates accountable for shoddy work or irresponsible actions. Unwilling to delegate authority to increase efficiency of task accomplishment.  | <input type="checkbox"/>              | A leader who earned others' support and commitment. Set high work standards; clearly articulated job requirements, expectations, and measurement criteria; held subordinates accountable. When appropriate, delegated authority to those directly responsible for the task.  | <input type="checkbox"/>   | An inspirational leader who motivated others to achieve results not normally attainable. Won people over rather than imposing will. Clearly articulated vision; empowered subordinates to set goals and objectives to accomplish tasks. Modified leadership style to best meet challenging situations.   |
| <b>20. Judgment/Decisions Under Stress:</b><br>Ability to make sound decisions and provide valid recommendations by using facts, experience, political acumen, common sense, risk assessment, and analytical thought. | <input type="checkbox"/> | Decisions often displayed poor analysis. Failed to make necessary decisions, or jumped to conclusions without considering facts, alternatives, and impact. Did not effectively weigh risk, cost, and time considerations. Unconcerned with political drivers on organization.   | <input type="checkbox"/>              | Demonstrated analytical thought and common sense in making decisions. Used facts, data, and experience, and considered the impact of alternatives and political realities. Weighed risk, cost, and time considerations. Made sound decisions promptly with the best available information.                           | <input type="checkbox"/>   | Combined keen analytical thought, an understanding of political processes, and insight to make appropriate decisions. Focused on the key issues and the most relevant information. Did the right thing at the right time. Actions indicated awareness of impact of decisions on others. Not afraid to take reasonable risks to achieve positive results. |
| <b>21. Initiative</b><br>Ability to originate and act on new ideas, pursue opportunities to learn and develop, and seek responsibility without guidance and supervision.  | <input type="checkbox"/> | Postponed needed action. Implemented or supported improvements only when directed to do so. Showed little interest in career development. Feasible improvements in methods, services, or products went unexplored.  | <input type="checkbox"/>              | Championed improvement through new ideas, methods, and practices. Anticipated problems and took prompt action to avoid or resolve them. Pursued productivity gains and enhanced mission performance by applying new ideas and methods.   | <input type="checkbox"/>   | Aggressively sought out additional responsibility. A self-learner. Made worthwhile ideas and practices work when others might have given up. Extremely innovative. Optimized use of new ideas and methods to improve work processes and decisionmaking.  |
| <b>22. Physical Ability for the Job:</b><br>Ability to invest in the IMT's future by caring for the physical health and emotional well-being of self and others.  | <input type="checkbox"/> | Failed to meet minimum standards of sobriety. Tolerated or condoned others' alcohol abuse. Seldom considered subordinates' health and well-being. Unwilling or unable to recognize and manage stress despite apparent need.   | <input type="checkbox"/>              | Committed to health and well-being of self and subordinates. Enhanced personal performance through activities supporting physical and emotional well-being. Recognized and managed stress effectively.   | <input type="checkbox"/>   | Remarkable vitality, enthusiasm, alertness, and energy. Consistently contributed at high levels of activity. Optimized personal performance through involvement in activities that supported physical and emotional well-being. Monitored and helped others deal with stress and enhance health and well-being.  |
| <b>23. Adherence to Safety:</b><br>Ability to invest in the IMT's future by caring for the safety of self and others.   | <input type="checkbox"/> | Failed to adequately identify and protect personnel from safety hazards.  | <input type="checkbox"/>              | Ensured that safe operating procedures were followed.  | <input type="checkbox"/>   | Demonstrated a significant commitment toward safety of personnel.  |
| <b>24. Remarks:</b>   |                          |   |                                       |  |                            |  |
| <b>25. Rated Individual (This rating has been discussed with me):</b>   |                          |   |                                       |  |                            |  |
| Signature: _____  |                          |   | Date/Time: _____                      |  |                            |  |
| <b>26. Rated by: Name:</b> _____  |                          |   | Signature: _____                      |  |                            |  |
| Home Unit: _____  |                          |   | Position Held on This Incident: _____ |  |                            |  |
| ICS 225   |                          |   | Date/Time: _____                      |  |                            |  |

## ICS 225 Incident Personnel Performance Rating

**Purpose.** The Incident Personnel Performance Rating (ICS 225) gives supervisors the opportunity to evaluate subordinates on incident assignments. THIS RATING IS TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE ON AN INCIDENT/EVENT.

**Preparation.** The ICS 225 is normally prepared by the supervisor for each subordinate, using the evaluation standard given in the form. The ICS 225 will be reviewed with the subordinate, who will sign at the bottom. It will be delivered to the Planning Section before the rater leaves the incident

**Distribution.** The ICS 225 is provided to the Planning Section Chief before the rater leaves the incident.

### Notes:

- Use a blank ICS 225 for each individual.
- Additional pages can be added based on individual need.

| Block Number | Block Title   | Instructions   |
|--------------|---|--|
| 1            | <b>Name</b>   | Enter the name of the individual being rated.  |
| 2            | <b>Incident Name</b>  | Enter the name assigned to the incident.   |
| 3            | <b>Incident Number</b>  | Enter the number assigned to the incident.   |
| 4            | <b>Home Unit Address</b>  | Enter the physical address of the home unit for the individual being rated.  |
| 5            | <b>Incident Agency and Address</b>  | Enter the name and address of the authority having jurisdiction for the incident.  |
| 6            | <b>Position Held on Incident</b>  | Enter the position held (e.g., Resources Unit Leader, Safety Officer, etc.) by the individual being rated.   |
| 7            | <b>Date(s) of Assignment</b> <ul style="list-style-type: none"> <li>• From</li> <li>• To</li> </ul>   | Enter the date(s) (month/day/year) the individual was assigned to the incident.  |
| 8            | <b>Incident Complexity Level</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1</li> <li><input type="checkbox"/> 2</li> <li><input type="checkbox"/> 3</li> <li><input type="checkbox"/> 4</li> <li><input type="checkbox"/> 5</li> </ul> | Indicate the level of complexity for the incident.   |
| 9            | <b>Incident Definition</b>  | Enter a general definition of the incident in this block. This may be a general incident category or kind description, such as "tornado," "wildfire," "bridge collapse," "civil unrest," "parade," "vehicle fire," "mass casualty," etc. |
| 10           | <b>Evaluation</b>   | Enter "X" under the appropriate column indicating the individual's level of performance for each duty listed.  |
|              | N/A   | The duty did not apply to this incident.   |
|              | 1 – Unacceptable  | Does not meet minimum requirements of the individual element. Deficiencies/Improvements needed must be identified in Remarks.  |
|              | 2 – Needs Improvement   | Meets some or most of the requirements of the individual element. IDENTIFY IMPROVEMENT NEEDED IN REMARKS.  |
|              | 3 – Met Standards   | Satisfactory. Employee meets all requirements of the individual element.   |

| Block Number | Block Title  | Instructions   |
|--------------|--|--|
|              | 4 – Fully Successful   | Employee meets all requirements and exceeds one or several of the requirements of the individual element.  |
| 10           | 5 – Exceeded Expectations  | Superior. Employee consistently exceeds the performance requirements.  |
| 11           | <b>Knowledge of the Job/<br/>Professional Competence:</b>  | Ability to acquire, apply, and share technical and administrative knowledge and skills associated with description of duties. (Includes operational aspects such as marine safety, seamanship, airmanship, SAR, etc., as appropriate.) |
| 12           | <b>Ability To Obtain<br/>Performance/Results:</b>  | Quality, quantity, timeliness, and impact of work.   |
| 13           | <b>Planning/Preparedness:</b>  | Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines, and create a shared vision of the Incident Management Team (IMT).   |
| 14           | <b>Using Resources:</b>  | Ability to manage time, materials, information, money, and people (i.e., all IMT components as well as external publics).  |
| 15           | <b>Adaptability/Attitude:</b>  | Ability to maintain a positive attitude and modify work methods and priorities in response to new information, changing conditions, political realities, or unexpected obstacles.  |
| 16           | <b>Communication Skills:</b>   | Ability to speak effectively and listen to understand. Ability to express facts and ideas clearly and convincingly.  |
| 17           | <b>Ability To Work on a Team:</b>  | Ability to manage, lead and participate in teams, encourage cooperation, and develop esprit de corps.  |
| 18           | <b>Consideration for<br/>Personnel/Team Welfare:</b>   | Ability to consider and respond to others' personal needs, capabilities, and achievements; support for and application of worklife concepts and skills.  |
| 19           | <b>Directing Others:</b>   | Ability to influence or direct others in accomplishing tasks or missions.  |
| 20           | <b>Judgment/Decisions Under<br/>Stress:</b>  | Ability to make sound decisions and provide valid recommendations by using facts, experience, political acumen, common sense, risk assessment, and analytical thought.   |
| 21           | <b>Initiative</b>  | Ability to originate and act on new ideas, pursue opportunities to learn and develop, and seek responsibility without guidance and supervision.  |
| 22           | <b>Physical Ability for the Job:</b>   | Ability to invest in the IMT's future by caring for the physical health and emotional well-being of self and others.   |
| 23           | <b>Adherence to Safety:</b>  | Ability to invest in the IMT's future by caring for the safety of self and others.   |
| 24           | <b>Remarks</b>   | Enter specific information on why the individual received performance levels.  |
| 25           | <b>Rated Individual</b> (This rating has been discussed with me)<br><ul style="list-style-type: none"> <li>• Signature</li> <li>• Date/Time</li> </ul>                               | Enter the signature of the individual being rated. Enter the date (month/day/year) and the time (24-hour clock) signed.  |
| 26           | <b>Rated by</b><br><ul style="list-style-type: none"> <li>• Name</li> <li>• Signature</li> <li>• Home Unit</li> <li>• Position Held on This Incident</li> <li>• Date/Time</li> </ul> | Enter the name, signature, home unit, and position held on the incident of the person preparing the form and rating the individual. Enter the date (month/day/year) and the time (24-hour clock) prepared.                             |

**FACILITY RESPONSE PLAN**

**FACILITY SPECIFIC PLAN**

**PART A: CEDAR CITY TERMINAL**

**NON-TRANSPORTATION (EPA) FACILITIES**

*Prepared for*  
UNEV Pipeline, LLC  
1602 West Main Street  
Artesia, New Mexico 88210

*Prepared by*



Austin, Texas

January 2014

## Response Plan Cover Sheet

### General Information

|                     |  |
|---------------------|--|
| Owner:              | UNEV Pipeline, LLC<br>1602 W Main Street<br>Artesia, NM 88210    |
| Operator:           | Holly Energy Partners<br>1602 W Main Street<br>Artesia, NM 88210 |
| Facility Name:      | Cedar City Terminal  |
| Facility Address:   | 4410 North Wecco Road<br>Cedar City, UT 84720                    |
| Facility Phone No.: | (435) 817-6678   |

(b) (7)(F)

|   |           |
|---|-----------|
| Dun & Bradstreet No:  | 048918817 |
| North American Industrial Classification System (NAICS) Code: | 424710    |

(b) (7)(F)

|  |    |
|--|----|
| Number of Aboveground Oil Storage Tanks: | 19 |
|--|----|

(b) (7)(F)

|                                       |   |
|---------------------------------------|---|
| Facility Distance to Navigable Water: | 0 - ¼ mile___ ¼ - ½ mile___ ½ - 1 mile___ >1 <b>X</b> |
|---------------------------------------|---|

## Response Plan Cover Sheet (Cont.)

### Applicability of Substantial Harm Criteria

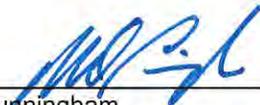
|  | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Does the facility transfer oil over water to or from vessels and does the facility have a total oil storage capacity greater than or equal to 42,000 gallons?   |            | X         |
| 2. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and does the facility lack secondary containment that is sufficiently large to contain the capacity of the largest aboveground oil storage tank plus sufficient freeboard to allow for precipitation within any aboveground oil storage tank area? |            | X         |
| 3. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and is the facility located at a distance such that a discharge from the facility could cause injury to fish and wildlife and sensitive environments?  |            | X         |
| 4. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and is the facility located at a distance such that a discharge from the facility would shut down a public drinking water intake?  |            | X         |
| 5. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons and has the facility experienced a reportable oil discharge in an amount greater than or equal to 10,000 gallons within the last 5 years?  |            | X         |

Note: Per EPA guidance, no man-made features that may impede, contain, or prevent an oil spill (e.g., secondary containment structures, levees, berms, structures, etc.) were considered when determining the applicability of substantial harm criteria.

**An FRP for EPA-regulated components of the Cedar City Terminal is not required. Part A of this FSP has been generated as a best management practice to prevent water pollution and to ensure consistent oil spill response activities across all UNEV facilities.**

### Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document, and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete.

Signature:   
 Name: Mark Cunningham  
 Title: Senior Vice President, Pipeline Operations

Date: 21 Jan 2014

**Regulatory Cross Reference Table – 40 CFR §112 (Non-Transportation-Related)**

| <b>Regulatory Citation</b> | <b>Description of Rule</b>                                  | <b>Report Section</b>     |
|----------------------------|---|---------------------------|
| §112 App. F 1.1            | Emergency Response Action Plan                              | ERAP<br>FSP Section A.1.0 |
| §112 App. F 1.2            | Facility Information  | FSP Section A.2.0         |
| §112 App. F 1.3            | Emergency Response Information                              | FSP Section A.3.0         |
| §112 App. F 1.3.1          | Notification  | FSP Section A.3.1         |
| §112 App. F 1.3.2          | Response Equipment List                                     | FSP Section A.3.2         |
| §112 App. F 1.3.3          | Response Equipment Testing/Deployment                       | FSP Section A.3.3         |
| §112 App. F 1.3.4          | Personnel   | FSP Section A.3.4         |
| §112 App. F 1.3.5          | Evacuation Plans  | FSP Section A.3.5         |
| §112 App. F 1.3.6          | Qualified individual's Duties                               | FSP Section A.3.6         |
| §112 App. F 1.4            | Hazard Evaluation   | FSP Section A.4.0         |
| §112 App. F 1.4.1          | Hazard Identification                                       | FSP Section A.4.1         |
| §112 App. F 1.4.2          | Vulnerability Analysis                                      | FSP Section A.4.2         |
| §112 App. F 1.4.3          | Analysis of the Potential for an Oil Spill                  | FSP Section A.4.3         |
| §112 App. F 1.4.4          | Facility Reportable Oil Spill History                       | FSP Section A.4.4         |
| §112 App. F 1.5            | Discharge Scenarios   | FSP Section A.5.0         |
| §112 App. F 1.5.1          | Small and Medium Discharges                                 | FSP Section A.5.1         |
| §112 App. F 1.5.2          | Worst Case Discharge  | FSP Section A.5.2         |
| §112 App. F 1.6            | Discharge Detection Systems                                 | FSP Section A.6.0         |
| §112 App. F 1.6.1          | Discharge Detection by Personnel                            | FSP Section A.6.1         |
| §112 App. F 1.6.2          | Automated Discharge Detection                               | FSP Section A.6.2         |
| §112 App. F 1.7            | Plan Implementation   | FSP Section A.7.0         |
| §112 App. F 1.7.1          | Response Resources for Small, Medium, and Worst Case Spills | FSP Section A.7.1         |
| §112 App. F 1.7.2          | Disposal Plans  | FSP Section A.7.2         |
| §112 App. F 1.7.3          | Containment and Drainage Planning                           | FSP Section A.7.3         |
| §112 App. F 1.8            | Self-Inspection, Drills/Exercises, and Response Training    | FSP Section A.8.0         |
| §112 App. F 1.8.1          | Facility Self-Inspection                                    | FSP Section A.8.1         |
| §112 App. F 1.8.2          | Facility Drills/Exercises                                   | FSP Section A.8.2         |
| §112 App. F 1.8.3          | Response Training   | FSP Section A.8.3         |
| §112 App. F 1.9            | Diagrams  | FSP Section A.9.0         |
| §112 App. F 1.10           | Security  | FSP Section A.10.0        |

## Table of Contents

|  |            |
|--|------------|
| <b>Response Plan Cover Sheet</b> .....   | <b>i</b>   |
| General Information .....  | i          |
| Applicability of Substantial Harm Criteria .....   | ii         |
| Certification .....  | ii         |
| <b>Regulatory Cross Reference Table – 40 CFR §112 (Non-Transportation-Related)</b> ..... | <b>iii</b> |
| <b>Table of Contents</b> .....   | <b>iv</b>  |
| <b>Figures</b> .....   | <b>v</b>   |
| <b>Appendices</b> .....  | <b>v</b>   |
| <b>Acronyms</b> .....  | <b>vi</b>  |
| <b>Introduction</b> .....  | <b>vii</b> |
| <b>A.1.0 Emergency Response Action Plan</b> .....  | <b>1</b>   |
| <b>A.2.0 Facility Information Form</b> .....   | <b>2</b>   |
| <b>A.3.0 Emergency Response Information</b> .....  | <b>3</b>   |
| A.3.1 Emergency Notifications .....  | 3          |
| A.3.2 Facility Response Equipment List .....   | 4          |
| A.3.3 Response Equipment Testing and Deployment .....                                    | 7          |
| A.3.4 Response Personnel .....   | 8          |
| A.3.5 Evacuation Plan .....  | 9          |
| A.3.6 Description of Qualified Individual's Duties .....                                 | 12         |
| <b>A.4.0 Hazard Evaluation</b> .....   | <b>13</b>  |
| A.4.1 Hazard Identification .....  | 13         |
| A.4.2 Vulnerability Analysis .....   | 15         |
| A.4.3 Analysis of the Potential for an Oil Discharge .....                               | 20         |
| A.4.4 Facility Reportable Oil Spill History .....  | 21         |
| <b>A.5.0 Discharge Scenarios</b> .....   | <b>22</b>  |
| A.5.1 Small and Medium Discharges .....  | 22         |
| A.5.2 Worst Case Discharge .....   | 25         |
| <b>A.6.0 Discharge Detection Systems</b> .....   | <b>29</b>  |
| A.6.1 Discharge Detection by Personnel .....   | 29         |
| A.6.2 Automated Discharge Detection .....  | 30         |
| <b>A.7.0 Plan Implementation</b> .....   | <b>31</b>  |
| A.7.1 Response Resources for Small, Medium, and Worst Case Discharges .....              | 31         |
| A.7.2 Disposal Plans .....   | 34         |
| A.7.3 Containment and Drainage Planning .....  | 35         |
| A.7.4 Spill Response and Cleanup Techniques .....  | 36         |
| <b>A.8.0 Self-Inspection, Drills/Exercises, and Response Training</b> .....              | <b>37</b>  |
| A.8.1 Self-Inspection .....  | 37         |
| A.8.2 Facility Drills/Exercises .....  | 37         |
| A.8.3 Response Training .....  | 38         |
| <b>A.9.0 Diagrams</b> .....  | <b>41</b>  |
| A.9.1 Site Plan Diagram .....  | 41         |
| A.9.2 Site Drainage Plan Diagram .....   | 41         |
| A.9.3 Site Evacuation Plan Diagram .....   | 41         |
| <b>A.10.0 Security</b> .....   | <b>42</b>  |
| A.10.1 Emergency Cut-Off Locations .....   | 42         |
| A.10.2 Enclosures .....  | 42         |
| A.10.3 Guards and Their Duties .....   | 42         |
| A.10.4 Lighting .....  | 42         |
| A.10.5 Valve and Pump Locks .....  | 42         |
| A.10.6 Pipeline Connection Caps .....  | 42         |

## Figures

- Figure 1 – Site Plan – Cedar City Terminal
- Figure 2 – Site Drainage Plan – Cedar City Terminal
- Figure 3 – Site Evacuation Plan – Cedar City Terminal
- Figure 4A – Pipeline Location Diagram – Cedar City Operational Segment
- Figure 4B – Pipeline Location Diagram – Cedar City Operational Segment

## Appendices

- Appendix A – Spill Response Form
- Appendix B – Response Equipment Testing and Deployment Drill Logs
- Appendix C – Inspection Forms
- Appendix D – Response Drill Logs
- Appendix E – Threatened and Endangered Species information
- Appendix F – Spill Response Techniques
- Appendix G – OSRO Information

## Acronyms

|          |   |
|----------|---|
| bbbl     | Barrel (42 gallons)                                 |
| BPD      | Barrels Per Day                                     |
| CCTV     | Closed Circuit Television                           |
| CFR      | Code of Federal Regulations                         |
| CP       | Core Plan   |
| DOT      | United States Department of Transportation          |
| EFR      | External Floating Roof                              |
| EPA      | United States Environmental Protection Agency       |
| ERAP     | Emergency Response Action Plan                      |
| FRP      | Facility Response Plan                              |
| FSP      | Facility Specific Plan                              |
| GPM      | Gallons per minute                                  |
| HAZWOPER | Hazardous Waste Operations and Emergency Response   |
| HEP      | Holly Energy Partners – Operating, LP               |
| IC       | Incident Commander                                  |
| IFR      | Internal Floating Roof                              |
| LEPC     | Local Emergency Planning Committee                  |
| MP       | Mile Post   |
| NRC      | National Response Center                            |
| NRDA     | Natural Resource Damage Assessment                  |
| OSC      | On-Scene Coordinator                                |
| OSRO     | Oil Spill Removal Organization                      |
| PPE      | Personal Protective Equipment                       |
| PREP     | National Preparedness for Response Exercise Program |
| QI       | Qualified Individual                                |
| SERC     | State Emergency Response Commission                 |
| SPCC     | Spill Prevention, Control, and Countermeasure       |
| TLV      | Threshold Limit Value                               |
| USFWS    | United States Fish and Wildlife Service             |

## Introduction

This portion of the Facility Specific Plan has been produced for UNEV Pipeline, LLC (UNEV) to fulfill United States Environmental Protection Agency (EPA) requirements outlined in 40 CFR §112.20 for non-transportation-related facilities associated with the Cedar City Terminal. 40 CFR §112.20(a) requires the owner or operator of non-transportation-related onshore facilities that could reasonably be expected to cause substantial harm to the environment by discharging oil into or on the navigable waters or adjoining shorelines to prepare and submit a Facility Response Plan (FRP) to the Regional Administrator. A release from the Cedar City Terminal is not expected to cause substantial harm to the environment since no sensitive environmental receptors or navigable waters are located downstream of the facility. Because of this, an FRP is not required for EPA-regulated aspects of the Cedar City Terminal. While an FRP is not required for EPA-regulated features at the Cedar City Terminal, this Facility Specific Plan (FSP) was created as a best management practice to prevent water pollution and to ensure consistent oil spill response activities across all UNEV facilities.

The Cedar City Terminal is located approximately 11 miles east-northeast of Cedar City in Iron County, Utah. The Cedar City Terminal is a refined product terminal facility that receives products via pipeline, stores products in on-site tanks, blends products to desired specifications, and distributes products to local end users and retail outlets via trucks. The facility operates and is staffed during normal business hours, five days per week. During an average day, personnel receive, transfer, and store products.

The Cedar City Terminal is also responsible for response activities associated with approximately 130 miles of pipeline, including a 120-mile segment of the UNEV pipeline and a 9.7-mile lateral extending from the main line to the Cedar City Terminal. These pipelines are regulated by the United States Department of Transportation (DOT). For response information that fulfills the DOT requirements outlined in 49 CFR §194, please refer to Part B of this FSP.

To clearly address the requirements of 40 CFR §112.20 and 49 CFR §194, the FRP has been formatted to include the following components:

- A **Core Plan (CP)** organized to directly address the requirements for a core plan as described by 49 CFR §194.107(c)(1). The CP includes response information pertinent to the pipeline system as a whole. While 49 CFR §194 applies specifically to transportation-related facilities, general information pertaining to non-transportation-related facilities operated by HEP has been incorporated into this framework for completeness.
- **Facility Specific Plans (FSPs)** for each terminal facility organized to clearly address FRP requirements associated with transportation-related (i.e., pipelines, breakout tanks, etc.) and non-transportation-related (i.e., the terminal facility) components of the facility. The FSPs are organized to follow the format preferred by both EPA and DOT. The FSPs include detailed facility-specific information regarding response activities.
- **Emergency Response Action Plan (ERAP)** for each terminal facility that include a summary of emergency response activities to address either a release from a transportation-related or non-transportation-related features.

The term “Facility Response Plan,” or “FRP,” is used in this document to refer to the CP, FSPs, and ERAP as a whole.

UNEV will retain this FRP at its headquarters located in Artesia, NM. The Cedar City Terminal and each Qualified Individual will receive a copy of the CP, FSP, and ERAP specific to the facility. The documents are accessible electronically through the Channel HFC Flashpoint interface.

**Other divisions of UNEV involved in emergency response activities, such as Logistics, Finance, or Administration, should proceed directly to Section 5.0 of the CP for a summary of the command structure utilized during emergency response activities and a list of duties specific to each position within the command structure.**

## A.1.0 Emergency Response Action Plan

The Emergency Response Action Plan (ERAP) is maintained as a separate document. Please refer to the document titled *Emergency Response Action Plan, Cedar City Terminal*.

## A.2.0 Facility Information Form

Facility Name: Cedar City Terminal  
 Facility Location: 4410 North Wecco Road Cedar City UT 84721 Iron  
*Street Address City State Zip County*  
 Facility Phone: (435) 586-1463

(b) (7)(F)

Wellhead Protection Area: >11 Miles  
 Owner: UNEV Pipeline, LLC  
 Owner Location: 1602 W Main Street Artesia NM 88210 Eddy  
*Street Address City State Zip County*  
 Owner Phone: (575) 748-8948  
 Operator: Holly Energy Partners  
 Operator Location: 1602 W Main Street Artesia NM 88210 Eddy  
*Street Address City State Zip County*  
 Operator Phone: (575) 748-8948  
 Qualified Individual: Craig Flanigan  
 Position: Terminal Supervisor  
 Work Phone: (435) 586-1463

(b) (6)

Cellular Phone: (435) 817-6678  
 Work Address: 4410 North Wecco Road  
 Cedar City, UT 84721

(b) (6)

Alt. Qualified Individual: Chris Fornelius  
 Position: Sr. Operations Manager  
 Work Phone: (801) 364-5252

(b) (6)

Cellular Phone: (801) 510-1907  
 Work Address: 2100 N Redwood Rd, Ste 10  
 Salt Lake City, UT 84116

(b) (6)

Oil Storage Start-Up Date: 2006

Current Operations: The Cedar City Terminal receives various products via pipeline, blends products to achieve specified grades of gasoline, stores products, and distributes products to end users and retail outlets.

Date(s) and Type(s) of

Substantial Expansion(s): 2010: The Cedar City Terminal was expanded to include additional storage, facilities associated with the UNEV Cedar City Lateral, and new truck loading facilities. The Cedar City Terminal returned to operation in 2012.

## A.3.0 Emergency Response Information

### A.3.1 Emergency Notifications

A Spill Response Form is provided as Appendix A of this FSP to assist with immediate spill response activities. The Spill Response Form includes immediate spill response activities and general information required for notification purposes.

In the case of a spill of petroleum product, the individual discovering the incident will function as the Incident Commander (IC) until relieved of this duty by a Qualified Individual (QI) or alternate. The IC must instruct personnel in the area to immediately begin emergency response activities, as necessary, and notify:

1. Emergency services (Fire and Police Departments) by calling 911 (if emergency situation)
2. QI – and advise of the nature of the incident

The QI functions as the Communications Coordinator and he or she will assess the situation and determine which agencies, organizations, or individuals will be notified depending upon the nature of the spill, and who will make the notification calls. The determination will depend on the type and size of the spill, the time of day, day of the week, and other circumstances regarding the spill. The sequence of government notifications for reportable spill is as follows:

1. National Response Center (NRC)
2. EPA Region 8 Emergency Response Branch

Concurrent with these external notifications, other facility personnel or spill response contractors may be called to report to the incident as determined by the QI. In addition, state and local agencies will be notified, as needed.

A reportable oil spill for EPA-regulated on-shore facilities is one that fits any of the following criteria:

- Causes a violation of applicable water quality standards
- Causes a film or sheen upon, or discoloration of the surface of water or adjoining shorelines
- Causes a sludge or emulsion to be deposited beneath the surface of the water or adjoining shorelines

#### A.3.1.1 Emergency Notification Phone List

In case of an emergency, contact the following organizations, as applicable.

| Organization  | Phone Number                                 |
|---|--|
| 1. Emergency Services (Fire Department, Police, Hospital) | 911  |
| 2. UNEV Pipeline Control Center (Artesia)                 | (575) 748-8950<br>(877) 748-4464 (alternate) |
| 3. Qualified Individuals      Craig Flanigan              | (435) 817-6678 (cell)<br>(b) (6)             |
| Chris Fornelius (Alternate)                               | (801) 510-1907 (cell)                        |
| 4. National Response Center (NRC)                         | (800) 424-8802 (24 hours)                    |
| 5. EPA Region 8 Emergency Response Branch                 | (800) 227-8917<br>(303) 312-6312 (alternate) |
| 6. Oil Spill Cleanup Contractor – H2O OSRO                | (866) 426-6770<br>(866) 426-7745 (alternate) |
| 7. Utah Department of Environmental Quality               | (800) 458-0145<br>(801) 536-4123 (alternate) |
| 8. State Emergency Response Commission (SERC)             | (801) 538-3400                               |
| 9. Utah Department of Transportation                      | (801) 965-4000                               |

| <b>Organization</b>   | <b>Phone Number</b>                          |
|---|--|
| 10. Iron County Emergency Management (LEPC) – Marie Brooks, Coordinator | (435) 590-0078<br>(435) 463-3192 (alternate) |
| 11. Iron County Sheriff's Office – Cedar City                           | (435) 867-7500<br>(435) 867-7550 (alternate) |
| 12. Iron County Engineer – Steve Platt                                  | (435) 865-5370                               |
| 13. Cedar City Fire Department  | (435) 586-2964                               |
| 14. Valley View Medical Center  | (435) 868-5000                               |
| 15. Rocky Mountain Power  | (866) 870-3419                               |
| 16. Questar Gas   | (800) 767-1689                               |
| 17. AT&T (Internet T1 Line)   | (800) 246-8464                               |
| 18. Union Pacific Railroad  | (435) 387-2231                               |
| 19. CML Metals  | (435) 586-5360                               |
| 20. National Weather Service – Salt Lake City                           | (801) 524-5113                               |
| 21. Cherry Creek Radio Group  | (534) 590-3056                               |
| 22. Marsh & McLennan Agency – Insurance Representative                  | (914) 397-1600                               |

### A.3.1.2 Spill Response Notification Form

The Spill Response Form included as Appendix A of this FSP shall be used to collect reporting information in the case of a reportable spill. **Initial notifications should not be delayed pending the collection of all information included on the Spill Response Form.**

## A.3.2 Facility Response Equipment List

Facility response equipment is maintained in a response trailer on-site and is supplemented by H2O Oil Spill Response Organization (OSRO), Inc. Equipment maintained on-site is described in the following sections, and equipment maintained by H2O OSRO, Inc. is included as Appendix G of this FSP.

### A.3.2.1 Skimmers and Pumps

No skimmers and pumps are maintained at the Cedar City Terminal. Skimmers and pumps will be provided by H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of skimmers and pumps available for spill response efforts.

### A.3.2.2 Boom

**Storage Location: Cedar City Terminal, Response Trailer (Response Time: 10 Minutes)**

| <b>Quantity</b> | <b>Description</b>        |
|-----------------|---------------------------|
| 4               | 10' 3M Sorbent Boom       |
| 4               | 10' x 3" Sorbent Boom     |
| 2               | 100' American Marine Boom |
| 2               | 50' American Marine Boom  |

Additional boom is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional boom available for spill response efforts.

### A.3.2.3 Chemicals Stored

This section is not applicable to the Cedar City Terminal. Dispersants listed on the EPA's NCP Product Schedule are not stored at the Cedar City Terminal and dispersants are not used by H2O OSRO, Inc. Use of dispersants or other chemicals during response actions will require approval from the regulatory authority overseeing response actions.

**A.3.2.4 Dispersant Dispensing Equipment**

This section is not applicable to the Cedar City Terminal. Dispersant dispensing equipment is not stored at the Cedar City Terminal and dispersant dispensing equipment is not used by H2O OSRO, Inc. Use of dispersants or other chemicals during response actions will require approval from the regulatory authority overseeing response actions.

**A.3.2.5 Sorbents**

**Storage Location: Cedar City Terminal, Response Trailer (Response Time: 10 Minutes)**

| Quantity | Description                    |
|----------|--------------------------------|
| 1        | 32" x 150' Sorbent Pads (Roll) |
| 1        | 100' Sorbent Pads              |
| 2        | 40 Pound Bags of DRI-ZORB      |
| 10       | 16"x16" Sorbent Pillows        |
| 25       | Heavy Weight King Sorbent Pads |

Additional sorbents are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional sorbents available for spill response efforts.

**A.3.2.6 Hand Tools**

**Storage Location: Cedar City Terminal, Response Trailer (Response Time: 10 Minutes)**

| Quantity | Description           |
|----------|-----------------------|
| 7        | Axe                   |
| 8        | Shovel                |
| 2        | Metal Rake            |
| 1        | Sledge Hammer         |
| 1        | Pick Axe              |
| 3        | Bundling Tape Rolls   |
| 11       | Streamlight Headlamps |

Additional hand tools are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of hand tools available for spill response efforts.

**A.3.2.7 Communication Equipment**

Communication equipment available for emergency response consists of cellular telephones issued to Cedar City Terminal personnel and high frequency radio systems located in company vehicles. Additional communications equipment is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional communications equipment available for spill response efforts.

**A.3.2.8 Firefighting and Personal Protective Equipment**

**Storage Location: Cedar City Terminal, Response Trailer (Response Time: 10 Minutes)**

| Quantity | Description                    |
|----------|--------------------------------|
| 20       | Pairs Neoprene Gloves          |
| 7        | Rubber Boots Size 9-10         |
| 5        | Rubber Boots Size 11-13        |
| 25       | Tyvek Coveralls XL             |
| 3        | Willson Respirators Large      |
| 8        | Willson Respirators Medium     |
| 20       | 3M Particulate Respirator N95  |
| 2        | Red Personal Gear Packs        |
| 2        | Winning Edge Life Jackets      |
| 1        | Decontamination Retention Pool |

| Quantity | Description                            |
|----------|--|
| 4        | 55 Gallon Hazardous Waste Drums        |
| 2        | Decontamination Trays                  |
| 3        | Decontamination Scrub Brush            |
| 1        | Green Plastic Decontamination Shovel   |
| 4        | 10'x12' Poly Tarp                      |
| 2        | Back Mount Water Spray Decontamination |

Additional firefighting and personal protective equipment are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional firefighting and personal protective equipment available for spill response efforts.

### A.3.2.9 Other Equipment (e.g. Heavy Equipment, Boats, and Motors)

**Storage Location: Cedar City Terminal, Response Trailer (Response Time: 10 Minutes)**

| Quantity | Description      |
|----------|------------------|
| 8        | Green Cones      |
| 8        | Yellow Cones     |
| 8        | Red Cones        |
| 1        | Generator        |
| 1        | LOWE L1436L Boat |
| 1        | Boat Paddle      |

Additional equipment is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional equipment available for spill response efforts.

### A.3.2.10 Launching/Deployment Locations

Descriptions of the launching and deployment locations for response equipment are provided below.

#### **Deployment Location A: Hole In The Wall Road West at Unnamed Drainage Channel (0.3 miles downstream of facility)**

Deployment location A is located approximately 0.3 miles downstream of the Cedar City Terminal, located where Hole In The Wall Road West crosses the unnamed drainage ditch leading to the northwest from the facility.

Hole In The Wall Road West provides direct access for response personnel to deploy response equipment in the discharge pathway immediately downstream of the facility. A culvert under Hole In The Wall West Road at this location may be temporarily blocked in order to contain a release of oil that leaves the facility.

#### **Deployment Location B: Railroad at Big Hollow Wash (1.4 miles downstream of facility)**

Deployment location B is located approximately 1.4 miles downstream of the Cedar City Terminal, located where the Union Pacific railroad crosses Big Hollow Wash. This area can be accessed via the UNEV Cedar City Lateral right of way or via Avon Road, located to the southwest of the railroad. Note that Avon Road is located approximately 0.4 miles from this deployment location. If Avon Road is to be used for access, vehicles with off-road capabilities may be required to reach the deployment location.

The railroad embankment and bridge span constrain flow at this location. Response equipment could be deployed at this location, utilizing the railroad infrastructure to prevent a release from reaching Iron Springs Creek.

#### **Deployment Location C: Railroad Tracks Road East at Iron Springs Creek (3.5 miles downstream of facility)**

Deployment location C is located approximately 3.5 miles downstream of the Cedar City Terminal, located where Railroad Tracks Road East crosses Iron Springs Creek.

Railroad Tracks Road East provides direct access for response personnel to deploy response equipment in the discharge pathway downstream of the facility. A small dam in the area may temporarily capture released material and could possibly be utilized to contain a release.

**Deployment Location D: Cedar City Road at Iron Springs Creek (5.6 miles downstream of facility)**

Deployment location D is located approximately 5.6 miles downstream of the Cedar City Terminal, located where Cedar City Road crosses Iron Springs Creek.

Cedar City Road provides direct access for response personnel to deploy response equipment in the discharge pathway downstream of the facility.

**Deployment Location E: 9600 N Road at Iron Springs Creek (7.1 miles downstream of facility)**

Deployment location E is located approximately 7.1 miles downstream of the Cedar City Terminal, located where 9600 N Road crosses Iron Springs Creek.

9600 N Road provides direct access for response personnel to deploy response equipment in the discharge pathway downstream of the facility. A small dam in the area may temporarily capture released material and could possibly be utilized to contain a release.

**Deployment Location F: Leigh Allotment Road near Iron Springs Creek (10.8 miles downstream of facility)**

Deployment location F is located approximately 10.8 miles downstream of the Cedar City Terminal, located on Iron Springs Creek near Leigh Allotment Road. This area can be accessed via Leigh Allotment Road, located to the west of Iron Springs Creek. Note that Leigh Allotment Road is located approximately 0.2 miles from this deployment location, and vehicles with off-road capabilities may be required to reach the deployment location.

Leigh Allotment Road provides access for response personnel to deploy response equipment in the discharge pathway downstream of the facility.

**Deployment Location G: Lund Highway at Iron Springs Creek (12.5 miles downstream of facility)**

Deployment location G is located approximately 12.5 miles downstream of the Cedar City Terminal, located on Iron Springs Creek.

Lund Highway provides direct access for response personnel to deploy response equipment in the discharge pathway downstream of the facility. A culvert under Lund Highway at this location may be temporarily blocked in order to contain a release of oil that leaves the facility.

**Deployment Location H: Depressed Area near Nelson Loop (13.3 miles downstream of facility)**

Deployment location H is located approximately 13.3 miles downstream of the Cedar City Terminal, located at a depressed area where Iron Springs Creek dissipates near Nelson Loop. This area can be accessed via Nelson Loop, located to the southeast of the depressed area. Note that Nelson Loop is located approximately 0.3 miles from this deployment location, and vehicles with off-road capabilities may be required to reach the deployment location.

The depressed area is the location where Iron Springs Creek dissipates, and is the furthest extent of a release from the Cedar City Terminal. Nelson Loop provides access for response personnel to deploy response equipment in the discharge pathway downstream of the facility.

### A.3.3 Response Equipment Testing and Deployment

#### A.3.3.1 Response Equipment Testing and Deployment Drill Log

Response equipment testing and deployment drills are conducted semiannually according to the Response Equipment Testing and Deployment Drill Log included in Appendix B of this FSP. Copies of completed Response Equipment Testing and Deployment Drill Logs will be maintained in Appendix B of

this FSP to document the response equipment testing and deployment drills conducted at the Cedar City Terminal. Refer to Appendix B of this FSP for the latest logs.

### A.3.3.2 Oil Spill Removal Organization (OSRO) Certification

Certification that response equipment owned by H2O OSRO, Inc. has been inspected and deployment drills have been performed as outlined in the National Preparedness for Response Exercise Program (PREP) guidelines is provided as Appendix G of this FSP.

## A.3.4 Response Personnel

### A.3.4.1 Emergency Response Personnel – Company Personnel

| Name                      | (b) (6) | Cell Phone*    | Response Time (Minutes) | Responsibility During Response Action        |
|---------------------------|---------|----------------|-------------------------|--|
| Craig Flanigan (QI)       |         | (435) 817-6678 | 30                      | Incident Commander (IC), Planning Chief      |
| Chris Fornelius (Alt. QI) |         | (801) 510-1907 | 480                     | Operations Chief, Planning Team              |
| Lowell Barker             |         | (435) 233-0135 | 20                      | Planning Team, First Responder               |
| Rashid Solo               |         | (435) 817-6675 | 25                      | Planning Team, First Responder               |
| Lori Coupland             |         | (214) 208-1260 | 1,380                   | Compliance Officer/Liaison, Planning Team    |
| Larry Olsen               |         | (801) 631-7957 | 480                     | Safety Officer                               |
| Bill Green                |         | (214) 864-1475 | 1,380                   | Environmental Officer/Liaison, Planning Team |
| Brad Thompson             |         | (214) 236-3428 | 1,380                   | SCADA Operations                             |
| Allison Stockweather      |         | (575) 513-9338 | 1,380                   | EHS Officer                                  |
| Aaron Mullins             |         | (575) 513-2758 | 1,380                   | Logistics Chief, Finance Chief               |

\* Phone number to be used when person is not on-site.

### A.3.4.2 Emergency Response Contractors

| Contractor    | Phone (Primary / Alternate)     | Response Time (Minutes) | Contract Responsibility |
|---------------|---------------------------------|-------------------------|-------------------------|
| H2O OSRO Inc. | (866) 426-6770 / (866) 426-7745 | 300                     | OSRO                    |

### A.3.4.3 Facility Response Team

| Team Member          | Duties During Response Action                | Response Time (Minutes) | Phone (Work / Cell)             |
|----------------------|--|-------------------------|---------------------------------|
| Craig Flanigan       | QI, Incident Commander (IC), Planning Chief  | 30                      | (435) 586-1463 / (435) 817-6678 |
| Chris Fornelius      | Alt. QI, Operations Chief, Planning Team     | 480                     | (801) 364-5252 / (801) 510-1907 |
| Lowell Barker        | Planning Team, First Responder               | 20                      | (435) 586-1463 / (435) 233-0135 |
| Rashid Solo          | Planning Team, First Responder               | 25                      | (435) 817-6675 / (435) 817-6675 |
| Lori Coupland        | Compliance Officer/Liaison, Planning Team    | 1,380                   | (575) 748-4076 / (214) 208-1260 |
| Larry Olsen          | Safety Officer                               | 480                     | (801) 364-5252 / (801) 631-7957 |
| Bill Green           | Environmental Officer/Liaison, Planning Team | 1,380                   | (575) 748-8968 / (214) 864-1475 |
| Brad Thompson        | SCADA Operations                             | 1,380                   | (575) 748-8961 / (214) 236-3428 |
| Allison Stockweather | EHS Officer, Planning Team                   | 1380                    | (575) 746-5475 / (575) 513-9338 |

### A.3.5 Evacuation Plan

If an evacuation of the Cedar City Terminal becomes necessary, the following evacuation plan shall be followed to ensure employee and visitor safety. Due to the small size of the Cedar City Terminal, all personnel will evacuate to the primary meeting points located at the southwest fence line along Avon Road, unless otherwise directed by the Incident Commander (IC). Personnel will be notified via cellular telephone, radio, or verbal communication. A Site Evacuation Plan Diagram is provided as Figure 3.

#### A.3.5.1 Location of Stored Materials

Bulk storage tanks containing stored products, piping, and transfer equipment are located throughout the Cedar City Terminal. Bulk storage tanks and transfer areas are located within secondary containment. In order to remove the threat posed by these site features, personnel should proceed to assembly points while avoiding any secondary containment structures and spilled product.

#### A.3.5.2 Hazard Imposed by Discharged Material

Discharged oil will typically be composed of gasoline, diesel, ethanol, or transmix (a mixture of refined products, typically of gasoline and diesel at the Cedar City Terminal). The primary hazards posed by these materials are flammability and toxicity. If it is safe to do so, sources of ignition should be extinguished prior to evacuation. Exposure to discharged materials should be avoided while evacuating. Human health effects of exposure to discharge materials are included below.

| Material | Toxic Effects  | Toxicity Levels           |
|----------|--|---------------------------|
| Diesel   | Irritates skin, eyes, and lungs after prolonged exposure. Material aspirated into the lungs may cause pneumonia. Shown to produce tumors in the liver and kidneys of rats (but not other species). Skin tumors have been associated with repeated skin absorption.                         | 100 mg/m <sup>3</sup> TLV |
| Gasoline | Moderately toxic for acute exposures through inhalation. Harmful if swallowed and/or aspirated into the lungs.   | 300 ppm TLV               |
| Ethanol  | May irritate respiratory tract for acute exposure through inhalation. Contact with eyes may cause mild to severe irritation. Ingestion may cause inebriation, gastrointestinal pain, central nervous system depression. Note: ethanol stored on-site contains 2% to 5% gasoline by volume. | 1,000 ppm TLV             |

#### A.3.5.3 Discharge Flow Direction

Discharged materials that remain on-site are expected to accumulate within secondary containment structures, within storm water retention ponds on-site, or within truck loading rack containment sumps. If discharged materials leave the site, they will travel to the northwest along an unnamed drainage feature. A Site Drainage Plan depicting the direction of discharge flow is included as Figure 2. The evacuation routes are away from these locations and are generally perpendicular to flow pathways.

#### A.3.5.4 Prevailing Wind Direction and Speed

Prevailing wind direction is depicted in the wind rose diagram provided in Figure 3. Generally, wind blows from the southwest or south-southwest with an average wind speed of 7.7 miles per hour. The primary evacuation assembly points are located upwind of the facility. Winds are calm approximately 24% of the time. If an evacuation is ordered, current wind conditions must be evaluated to ensure that the evacuation meeting point is not downwind of the facility. Secondary evacuation assembly points may be designated to the northwest or to the southeast along Avon Road, if necessary.

#### **A.3.5.5 Water Currents, Tides, or Wave Conditions**

Water currents are not likely to affect evacuation at the Cedar City Terminal. No perennial streams are in the vicinity, and storm water runoff is not expected to pose a threat to evacuating personnel. Tides and wave conditions are not applicable to the Cedar City Terminal.

#### **A.3.5.6 Arrival Route of Emergency Response Personnel and Response Equipment**

Emergency response personnel and equipment will approach on Avon Road from the southeast. Personnel must assemble in locations that do not hinder the approach of emergency response personnel and equipment.

#### **A.3.5.7 Evacuation Routes**

Evacuating personnel should proceed away from hazards present on-site while remaining upwind from the hazard toward the main gate of the facility. See Figure 3 for a depiction of evacuation routes and assembly points at the Cedar City Terminal.

#### **A.3.5.8 Alternative Routes of Evacuation**

Additional routes of evacuation are available via secondary access gates located in the perimeter fence. Alternate routes of evacuation should be used if it is not safe to evacuate via the primary evacuation route.

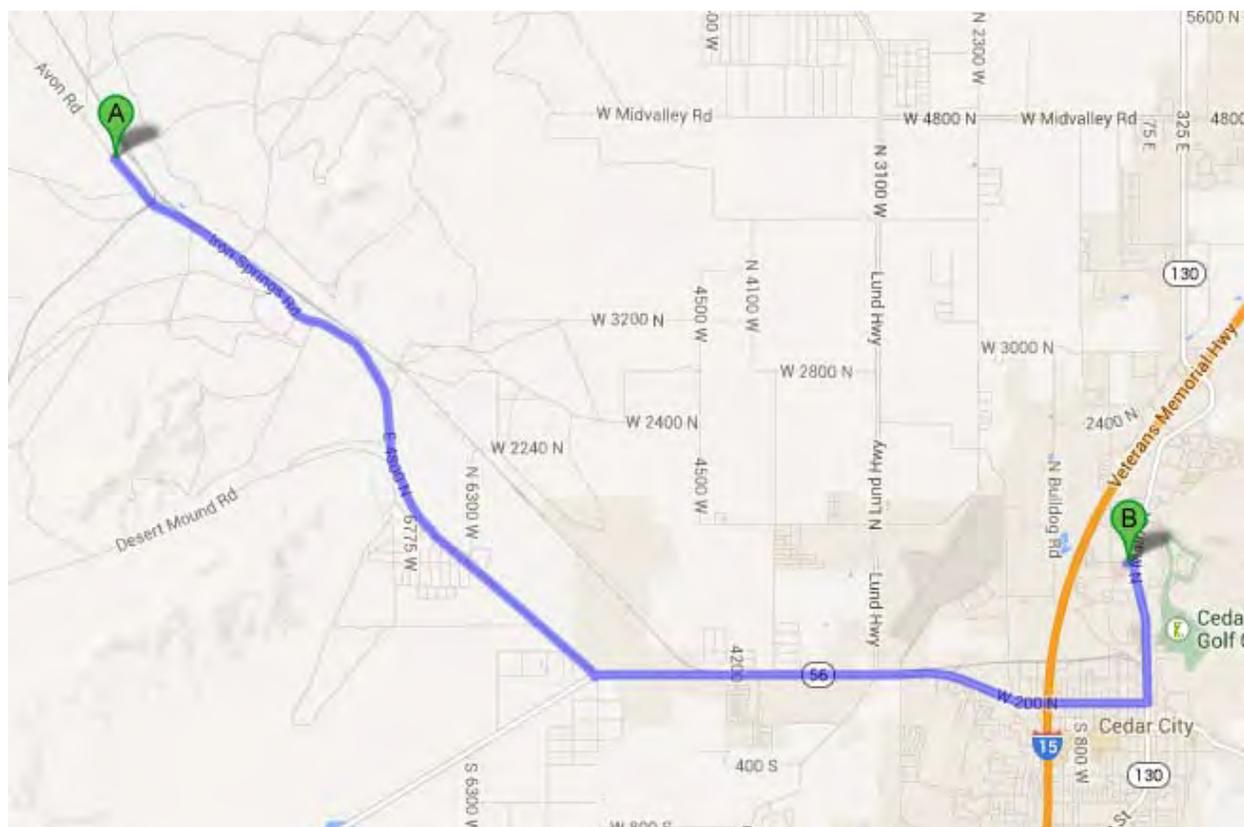
#### **A.3.5.9 Transportation of Injured Personnel to Nearest Emergency Medical Facility**

A person who discovers a medical emergency must:

- Notify the QI by radio or by cellular telephone and give pertinent information
- Do not move the injured person except in cases of imminent danger
- Apply first aid, as trained
- Call 911 and request an ambulance

In the case that immediate medical assistance is required and emergency responders are not available, injured personnel may be taken to Valley View Medical Center, located at 1303 North Main Street, Cedar City, UT 84721. Driving directions to Valley View Medical Center are provided below:

1. Proceed southeast on Avon Road for 0.6 miles.
2. Slight left (southeast) onto Iron Springs Road. Continue on Iron Springs Road for 6.7 miles.
3. Turn left (east) onto UT-56 E. Continue on UT-56 E for 5.5 miles.
4. Turn left (north) onto North Main Street. Continue on North Main Street for 1.4 miles.
5. Turn left (west) onto West 1325 North. Continue on West 1325 North for 450 feet.
6. Entrance for emergency services will be on the left.



#### A.3.5.10 Location of Alarm/Notification Systems

Notification of an evacuation will be communicated via cellular phones issued to each employee or high frequency radio systems located in company vehicles.

#### A.3.5.11 Need for Centralized Check-In Area for Evacuation Validation (Roll Call)

Verification of evacuation of personnel will occur at the evacuation meeting point. Accountability of personnel during an emergency means that all personnel have been contacted, their status verified, and their status reported to the proper personnel. Personnel to be accounted for include employees, visitors, suppliers, and contractors. Accountability is not completed until all personnel that could be within the emergency area have been located.

### A.3.5.12 Selection of a Mitigation Command Center

A Command Post will be established at a safe location on or near the site, depending on the nature of the emergency. Existing structures located on-site will be evaluated for safety with respect to the emergency. If no suitable structures are located on-site, a temporary Command Post may be transported to the site to manage the situation. The temporary Command Post must be placed in a location that is protected from any hazards encountered on-site.

### A.3.5.13 Location of Shelter at the Facility as an Alternative to Evacuation

Structures on-site may be considered a suitable shelter if conditions outside are too hazardous to allow evacuation. Shelter in place means personnel shall move inside the building until the danger passes. Shelter in place is used when evacuating the public would cause greater risk than staying where they are, or when evacuation cannot be performed. Personnel shall be directed inside, to close all doors and windows and to shut off all ventilation, heating and cooling systems. Shelter in place may not be the best option for the following situations:

- If the vapors are flammable
- If it will take a long time for the gas to clear the area
- If buildings cannot be closed tightly

It is vital that personnel sheltering in place maintain communications with emergency responders so that they can be advised about changing conditions. Personnel sheltering in-place should be warned to stay far from windows because of the danger from glass and projected metal fragments resulting from a fire and/or explosion.

## A.3.6 Description of Qualified Individual's Duties

In the event of a release, the QI will perform the following duties:

- Activate internal alarms and hazard communication systems to notify all system personnel.
- Notify appropriate response personnel, as needed.
- Identify the character, exact source, amount, and extent of the release, as well as other items needed for notification (refer to Spill Response Form included as Appendix A of this FSP).
- As appropriate, notify and provide necessary information to the Federal, State, and local authorities with designated response roles, including the NRC, the Federal On-Scene Coordinator (OSC), State Emergency Response Commission (SERC), and Local Emergency Planning Committee (LEPC).
- Assess the interaction of the discharged substance with water and/or other substances stored at the facility and notify response personnel at the scene of that assessment.
- Assess the possible hazards to human health and the environment due to the release. This assessment must consider both the direct and indirect effects of the release (i.e., the effects of any toxic, irritating, or asphyxiating gases that may be generated or the effects of any hazardous surface water runoffs from water or chemical agents used to control fire and heat-induced explosion).
- Assess and implement prompt removal actions to contain and remove the substance released.
- Coordinate rescue and response actions as previously arranged with all response personnel.
- Use authority to immediately access UNEV funding to initiate cleanup activities.
- Direct cleanup activities until properly relieved of this responsibility.

For a detailed description of response team organization and role descriptions, refer to Section 5.1 of the CP.

## A.4.0 Hazard Evaluation

### A.4.1 Hazard Identification

#### A.4.1.1 Tanks

| UNEV Tank No.                   | FRP Tank No. | Typical Substance Stored | Average Quantity Stored (gallons) | Tank Type    | Year* | Maximum Capacity (gallons) | Failure / Cause |
|---------------------------------|--------------|--------------------------|-----------------------------------|--------------|-------|----------------------------|-----------------|
| T-008                           | A001         | Diesel                   | (b) (7)(F)                        | Cone         | 2006  | (b) (7)(F)                 | None            |
| T-009                           | A002         | Diesel                   | (b) (7)(F)                        | Cone         | 2006  | (b) (7)(F)                 | None            |
| T-010                           | A003         | Unleaded Gasoline        | (b) (7)(F)                        | Cone, IFR    | 2006  | (b) (7)(F)                 | None            |
| T-100                           | A004         | Gas Additive             | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-101                           | A005         | Empty                    | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-102                           | A006         | Gas Additive             | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-103                           | A007         | Empty                    | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-104                           | A008         | Diesel Additive          | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-105                           | A009         | Diesel Additive          | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-106                           | A010         | Diesel Additive          | (b) (7)(F)                        | Horizontal   | 2010  | (b) (7)(F)                 | None            |
| T-114                           | A011         | Out of Service           | (b) (7)(F)                        | Horizontal   | 2006  | (b) (7)(F)                 | None            |
| T-115 (Oil/Water Separator)     | B001         | Out of Service           | (b) (7)(F)                        | Below Ground | 2006  | (b) (7)(F)                 | None            |
| T-380                           | A012         | Unleaded Gasoline        | (b) (7)(F)                        | Cone, IFR    | 2011  | (b) (7)(F)                 | None            |
| T-381                           | A013         | Premium Gasoline         | (b) (7)(F)                        | Cone, IFR    | 2011  | (b) (7)(F)                 | None            |
| T-382                           | A014         | Denatured Ethanol        | (b) (7)(F)                        | Cone, IFR    | 2011  | (b) (7)(F)                 | None            |
| T-389**                         | A015         | Transmix                 | (b) (7)(F)                        | Cone, IFR    | 2011  | (b) (7)(F)                 | None            |
| N/A (Fire Water Pump Fuel Tank) | A016         | Diesel                   | (b) (7)(F)                        | Horizontal   | 2006  | (b) (7)(F)                 | None            |
| F-1000**                        | A017         | Transmix                 | (b) (7)(F)                        | N/A (Filter) | 2011  | (b) (7)(F)                 | None            |
| F-1001**                        | A018         | Transmix                 | (b) (7)(F)                        | N/A (Filter) | 2011  | (b) (7)(F)                 | None            |
| F-2000                          | A019         | Transmix                 | (b) (7)(F)                        | N/A (Filter) | 2011  | (b) (7)(F)                 | None            |

\* Parentheses denote year of refabrication

\*\* Tank T-389 and filters F-1000 and F-1001 are subject to both EPA and DOT requirements

IFR – Internal Floating Roof

Up to 60 rail cars may be staged on the rail spur located to the northeast of the Cedar City Terminal with an average capacity of 29,000 gallons (691 bbls) each. Currently, only nine rail car offloading stations are in use.

Transformers that contain mineral oil are also located on-site. Transformers are not owned by UNEV, and are not included in this FSP. Refer to Figure 1 for locations of these transformers.

#### A.4.1.2 Surface Impoundments

This section is not applicable to the Cedar City Terminal. Surface impoundments are not located at the facility.

#### A.4.1.3 Schematic Drawing

A labeled schematic drawing of the Cedar City Terminal is provided as Figure 1.

#### A.4.1.4 Description of Transfers (Loading and Unloading) and Volume of Material

The Cedar City Terminal receives refined products via a lateral pipeline from the main UNEV pipeline that enters in the north corner of the facility. Product is transferred from this point into appropriate tankage via

aboveground piping within the facility. The facility periodically receives up to approximately 15,000 bbls per day (BPD) (630,000 gallons per day) of product.

Approximately 3,500 to 4,000 BPD (147,000 to 168,000 gallons per day) of product is loaded onto tanker trucks via the covered main truck loading rack. The main truck loading rack is contained within a dished concrete slab, which drains into a (b) (7)(F).

Approximately 691 to 1,381 bbls per week (29,000 to 58,000 gallons, or one to two rail cars per week) of denatured ethanol is offloaded from railroad tanker cars via the railcar offloading station. The railcar offloading station does not have secondary containment.

The ethanol truck unloading rack is not typically used, and serves as a backup to receiving ethanol via railcars. It is not used on an average day. The ethanol truck unloading rack is covered and is contained within a dished concrete slab, which drains into a 6,000-gallon sump.

#### A.4.1.5 Description of Daily Operations

The Cedar City Terminal is a refined product terminal facility that receives refined products via pipeline, receives denatured ethanol via truck and railcar, stores products in on-site tanks, blends products to desired specifications, and distributes products to local end users and retail outlets via trucks. The facility operates and is manned during normal business hours, five days per week.

During an average day, personnel receive, transfer, and store products. Maintenance activities are also performed periodically. Maintenance activities are performed in a manner that minimizes the occurrence of releases.

#### A.4.1.6 Secondary Containment Volumes

| UNEV Tank No.                   | FRP Tank No. | Typical Substance Stored | Tank Type    | Maximum Capacity (gallons) | Total Secondary Containment Provided (gallons) |
|---------------------------------|--------------|--------------------------|--------------|----------------------------|--|
| T-008                           | A001         | Diesel                   | Cone         | (b) (7)(F)                 | [REDACTED]                                     |
| T-009                           | A002         | Diesel                   | Cone         | (b) (7)(F)                 |  |
| T-010                           | A003         | Unleaded Gasoline        | Cone, IFR    | (b) (7)(F)                 |  |
| T-100                           | A004         | Gas Additive             | Horizontal   | (b) (7)(F)                 |  |
| T-101                           | A005         | Out of Service           | Horizontal   | (b) (7)(F)                 |  |
| T-102                           | A006         | Gas Additive             | Horizontal   | (b) (7)(F)                 |  |
| T-103                           | A007         | Out of Service           | Horizontal   | (b) (7)(F)                 |  |
| T-104                           | A008         | Diesel Additive          | Horizontal   | (b) (7)(F)                 |  |
| T-105                           | A009         | Diesel Additive          | Horizontal   | (b) (7)(F)                 |  |
| T-106                           | A010         | Diesel Additive          | Horizontal   | (b) (7)(F)                 |  |
| T-114                           | A011         | Out of Service           | Horizontal   | (b) (7)(F)                 |  |
| T-115 (Oil/Water Separator)     | B001         | Out of Service           | Below Ground | (b) (7)(F)                 |  |
| T-380                           | A012         | Unleaded Gasoline        | Cone, IFR    | (b) (7)(F)                 |  |
| T-381                           | A013         | Premium Gasoline         | Cone, IFR    | (b) (7)(F)                 |  |
| T-382                           | A014         | Denatured Ethanol        | Cone, IFR    | (b) (7)(F)                 |  |
| T-389                           | A015         | Transmix                 | Cone, IFR    | (b) (7)(F)                 |  |
| N/A (Fire Water Pump Fuel Tank) | A016         | Diesel                   | Horizontal   | (b) (7)(F)                 |  |
| F-1000                          | A017         | Transmix                 | N/A (Filter) | (b) (7)(F)                 |  |
| F-1001                          | A018         | Transmix                 | N/A (Filter) | (b) (7)(F)                 |  |
| F-2000                          | A019         | Transmix                 | N/A (Filter) | (b) (7)(F)                 |  |

In addition to the secondary containment structures associated with tanks listed above, secondary containment is provided for transfer areas on site, including the pipeline transfer area, the main truck loading rack, and the ethanol truck unloading rack.

| Transfer Area                            | Typical Substance Transferred | Tank Type    | Total Secondary Containment Provided (gallons) |
|--|-------------------------------|--------------|--|
| Pipeline Transfer Area, Filters (S-1000) | Transmix                      | Below Ground | (b) (7)(F)                                     |
| Main Truck Loading Rack (T-1000)         | Gasoline, Diesel              | Below Ground |  |
| Ethanol Truck Unloading Rack (T-1001)    | Denatured Ethanol             | Below Ground |  |

The truck loading racks are surrounded by a dished concrete slab that direct all spillage to the containment sumps. The main truck loading rack sump is sized to contain the contents of the largest compartment of a truck loaded at the facility, which is approximately 8,800 gallons.

#### A.4.1.7 Normal Daily Throughput

As noted in Section A.4.1.4, normal daily throughput for the Cedar City Terminal is up to approximately 15,000 BPD (630,000 gallons per day) of product received via pipeline (though not on a daily basis), approximately 3,500 to 4,000 BPD (147,000 to 168,000 gallons per day) loaded via tanker truck, and approximately 691 to 1,381 bbls per week (29,000 to 58,000 gallons, or one to two rail cars per week) of denatured ethanol offloaded from railcars. The ethanol truck unloading rack is not typically used.

### A.4.2 Vulnerability Analysis

#### A.4.2.1 Planning Distance Calculation

Per EPA guidance, the planning distance was calculated assuming the complete failure of secondary containment systems and ignoring all man-made features that may hinder the flow of an oil discharge. The planning distance represents the farthest extent that oil may travel within a specified response time in the unlikely event that a discharge leaves the boundaries of the site.

The planning distance was calculated for the Cedar City Terminal using the methods and formulas provided in Attachment C-III of Appendix C to 40 CFR §112. Assuming the failure of secondary containment systems and that a catastrophic spill leaves the facility, a discharge could potentially enter an unnamed drainage ditch, then enter Iron Springs Creek approximately 1.4 miles downstream to the north-northwest of the facility.

The following calculations are based upon the processes, requirements, and formulae found in 40 CFR §112, Appendix C, Attachment C-III, Section 2.

#### Oil Transport on Moving Navigable Waters

1. The formula to calculate the planning distance for oil transport on moving navigable waters is:

$$D = V \times T \times C, \text{ where:}$$

D = Distance downstream from a facility within which fish and wildlife and sensitive environments could be injured.

V = Velocity of the river (in ft/sec) as determined by Chezy-Manning's equation.

T = Time interval specified in Table 3 of Attachment C-III to Appendix C to 40 CFR §112

C = Conversion factor: 0.68 sec-mile/hr-ft

2. The Chezy-Manning equation is used to determine velocity. Its formula is:

$$V = 1.49/n \times R^{2/3} \times S^{1/2}, \text{ where:}$$

n = Manning's Roughness Coefficient from Table 1

R = Hydraulic radius, which can be approximated for parabolic channels by multiplying the average mid-channel depth of the river (in feet) by 0.667.

S = Average slope of the river (unitless)

3. Separate velocity calculations are made for each watercourse that is assumed would be affected by a worst case discharge from the Cedar City Terminal.

For Iron Springs Creek, the following calculations are made:

$$n = 0.04$$

$$R = 0.667 \times 1 \text{ ft} = 0.667 \text{ ft}$$

$$S = (5,350 \text{ ft} - 5,160 \text{ ft}) / 67,100 \text{ ft} = 0.00283 \text{ ft/ft}$$

Therefore, the velocity for Iron Springs Creek is calculated to be:

$$V = 1.5/n \times (R)^{2/3} \times (S)^{1/2}$$

$$V = 1.5/0.04 \times (0.667)^{2/3} \times (0.00283)^{1/2}$$

$$V = 1.52 \text{ ft/sec}$$

4. Per Table 3 in Attachment C-III to Appendix C of 40 CFR §112, the owner shall reference a response time of 24 hours plus a deployment time of 3 hours for a total of 27 hours. The calculated planning distance is:

$$D = V (1.52 \text{ ft/sec}) \times T (27 \text{ hours}) \times C (0.68 \text{ sec-mi/hr-ft})$$

$$D = 27.9 \text{ miles}$$

Therefore, the calculated planning distance to be used in emergency response preparations and evaluations at the Cedar City Terminal is 27.9 miles.

Though a planning distance of 27.9 miles was calculated, the channel of Iron Springs Creek dissipates approximately 13.3 miles downstream of the Cedar City Terminal. For the purposes of this FSP, 13.3 miles will be considered the planning distance since impacts are not expected beyond that point.

#### A.4.2.2 Vulnerability of Potentially Sensitive Receptors

##### **Water Intakes (Drinking, Cooling, or Other)**

Water intakes are used to collect water for public drinking water supplies, use by public utilities, or use by private industry. If a spill enters a body of water on which water intakes are present, the direct effects include potential petroleum contamination of intake water, intake structures, and facility equipment. Indirectly, oiled vegetation or wildlife may be impinged onto the structure or entrained in the intake water resulting in damages to the intake structure or downstream components. In addition to the emergency notifications detailed in this FSP, response efforts may include strategic booming immediately around the spill area (source control), shutting down the water intake, or exclusion (protective) booming around potentially affected intake structures. The shutdown of water intakes as a preventative measure can potentially result in social and economic impacts. Potential effects and specific response actions will depend on the nature of the released material.

There are no water intakes located within the projected pathway of a potential spill.

##### **Schools**

Two potential effects from a release from the facility could affect schools: direct contact with spilled material and exposure to flammable or irritating vapors. Direct contact with the spilled material could occur if the school was located in the pathway of the spill. In the event that a spill directly impacts the property of an educational institution, the effects may include: oiling of the school facility, equipment, and property; interruption of traffic flow to and from the facility; and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. If confined in a waterway or low area, vapor impingement may occur on downwind areas. In this event, air monitoring for potential fire hazards and irritating vapors is required, depending on the nature of the released material. In addition to the emergency notifications detailed in this FSP,

responses to these effects may include source control, strategic booming immediately around the spill area, evacuation of students and personnel, rerouting of traffic near the affected school, excavation of contaminated soil, monitoring and possible suppression of flammable/irritating vapors, and decontamination of oiled equipment, buildings, and pavement. Potential effects and specific response actions will depend on the nature of the released material.

There are no schools located within the projected pathway of a potential spill.

### **Medical Facilities**

Two potential effects from a release from the facility could affect medical facilities: direct contact with spilled material and exposure to flammable or irritating vapors. In the event that a spill impacts the property of a medical facility, the effects may include: oiling of the facility, equipment, and property; interruption of traffic flow to/from the medical facility; and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. Air monitoring for flammable and/or irritating vapors should be considered, depending on the nature of the released material. In addition to the emergency notifications detailed in this FSP, responses to these potential problems might include the following: source control, strategic booming immediately around the spill area, rerouting of traffic near the facility, excavation of contaminated soil, monitoring and possible suppression of flammable/irritating vapors, and decontamination of oiled equipment, buildings, and pavement. Potential effects and specific response actions will depend on the nature of the released material.

There are no medical facilities within the projected pathway of a potential spill.

### **Residential Areas**

A release of oil near a residential area may affect property, structures, and inhabitants. Specific effects may include oiled animals and vegetation, oiled homes and associated structures, and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. If the spill has reached a waterway, or has been confined to a low area, vapor impingement is a potential hazard downwind of the spill path. Vapors can be flammable, irritating, or may only pose an odor problem. Air monitoring should be conducted downwind of the spill path to monitor for vapors, depending on the nature of the released material. Responses to these effects may include strategic booming immediately around the spill area, evacuation of residents, rerouting of traffic, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled buildings, structures, pavement, etc. Potential effects and specific response actions will depend on the nature of the released material.

There are no residential areas within the projected pathway of a potential spill.

### **Businesses**

In the event that a spill impacts the property of a business, the effects may include: oiling of the facility, equipment, inventory, and property; interruption of traffic flow to/from the business; and potential fire hazards. A spill event that results in the closure of roads surrounding a business may also indirectly affect the business by the loss of revenue. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. If the spill has reached a waterway, or has been confined to a low area, vapor impingement is a potential problem downwind of the spill path. Vapors can be flammable, irritating, or may only pose an odor problem. In addition to the emergency notifications detailed in this FSP, responses to these effects may include strategic booming immediately around the spill area, protective booming of docks and marinas, evacuation of business owners, employees, and patrons, rerouting of traffic near the business, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled buildings, structures, pavement, etc. Air monitoring should be conducted downwind of the spill path to monitor for vapors. Potential effects and specific response actions will depend on the nature of the released material.

There are no businesses within the projected pathway of a potential spill.

### **Wetlands or Other Sensitive Environments**

The effects of a release of oil into a wetland area might include oiling of animals, vegetation, and sediment and the creation of an oil slick on areas of open water. Because water movement within a wetland habitat is minimal, oil spilled in these areas can pool and may tend to persist. Swamps and marshes often serve as nurseries for fish and shellfish and exhibit high biodiversity. Due to the typically soft sediments that underlie wetland areas, the use of mechanized equipment for cleanup efforts may cause more harm than the initial oiling. Responses to these effects include strategic booming immediately around the spill area and protective booming around identified sensitive wetland areas, and will depend heavily on the nature of the wetlands and potential routes of access for collection equipment. Potential effects and specific response actions will depend on the nature of the released material.

There are no wetlands or other sensitive environments within the projected pathway of a potential spill.

### **Fish and Wildlife**

Fish and wildlife species may be impacted directly or indirectly by an oil spill. A direct impact on wildlife would include physical contact with the released oil (e.g., oiling of a bird's feathers or an otter's fur) and toxic contamination (inhalation of petroleum vapors or ingestion of oil). Indirect impacts on wildlife would include the destruction of a species' habitat or food source or the displacement of the species or food source.

Direct effects of oil on fish populations include fish kills, specifically the egg and larval stages, which are more vulnerable to oil pollution than those in the adult stage. Spills to rivers used for spawning or used for migration to spawning grounds can affect future populations. Fish that have been tainted by an oil spill may not be fit to eat, thus affecting animals higher in the food chain.

Depending on the life cycle, behavior, and physiology of a particular wildlife species, the effects of an oil spill can vary. For example, birds that utilize the water-surface interface are at risk of contamination. Heavily oiled birds typically die as a result of their contamination. The specific effects on wildlife will depend on the nature of the released material and the wildlife present at the location.

Responses to these effects include strategic booming immediately around the spill area, protective booming around identified fish and wildlife habitat, and cleaning of affected animals by properly trained professionals. The response efforts in the direct vicinity of the impacted habitat depend heavily on the nature of the habitat and potential routes of access for collection equipment. Potential effects and specific response actions will depend on the nature of the released material.

In an oil spill incident, it is possible that birds, aquatic life, and/or other wildlife may come in contact with the spilled material. If wildlife becomes involved in the spilled material, it will be necessary to perform wildlife rescue and rehabilitation operations. The capture and treatment of wildlife, especially endangered species, is highly regulated by the U.S. Department of the Interior. To conduct these operations, it will be necessary to obtain assistance from properly trained, licensed, and permitted organizations and personnel. It is important to ensure that any personnel involved in wildlife rescue and rehabilitation operations, including volunteers, have received the appropriate level of Hazardous Waste Operations and Emergency Response (HAZWOPER) training.

In the event that wildlife is impacted, advice and assistance from trained and experienced persons in the area of wildlife rescue and rehabilitation need to be requested.

There are no fish and wildlife areas within the projected pathway of a potential spill.

### **Lakes and Streams**

Lakes are characterized by generally very low wave and current energy, although the surface may often become choppy. Water levels may fluctuate widely throughout the seasons and over time. Often other sensitive environments are in close proximity to lakes, such as wetlands, habitat for migratory birds, nesting birds and mammals, and fish nursery grounds. Lakes also often support various recreational activities. Depending on the severity of the spill, the effects may range from shoreline damages to fish and wildlife kills. Wind and tidal exchange will control the distribution of a slick, and can either hold the slick against a lee shore or spread it along shores or even into previously clean areas.

Small rivers and streams are characterized by shallow water (one to two meters in depth) and narrow channels. These systems are highly variable. The flow rates can range from fast-flowing to slow-moving. The channels may be free of debris or choked with log jams, mid-channel sand bars, and islands. The shoreline may have a high slope or a low bank fringed with vegetation or wetlands. Slicks typically contaminate both banks. The oil may mix throughout the entire water column in shallower streams, thus potentially affecting both aquatic and benthic organisms.

Responses to these effects include strategic booming immediately around the spill area and protective booming around vulnerable areas such as the mouths of creeks and inlets, and will depend heavily on the nature of the habitat and potential routes of access for collection equipment. Deflection boom can also be used to direct floating spills from vulnerable areas. Potential effects and specific response actions will depend on the nature of the released material.

The following lakes and streams are located within the projected pathway of a potential spill:

- Iron Springs Creek (located adjacent to site to approx. 13.3 miles downstream)
- Big Hollow Wash (located approximately 1.4 miles downstream)

### **Endangered Flora and Fauna**

Oil spills affect endangered flora and fauna by either directly impacting the individual or by destroying the habitat in which the species lives. In addition to the emergency notifications detailed in the ERAP and Section A.3.1, responses to these effects may include strategic booming immediately around the spill area, excavation of contaminated soil, suppression of flammable vapors, and cleaning of affected animals by properly trained professionals. Protective booming around vulnerable areas, as well as booming the mouths of creeks where sensitive species have been identified, should be conducted. Deflection boom can also be used to direct floating spills from vulnerable areas. Potential effects and specific response actions will depend on the nature of the released material.

No critical habitats for threatened or endangered flora or fauna located within the projected pathway of a potential spill. Refer to Appendix E of this FSP for Federally-listed and State-listed threatened and endangered species that may be present within the planning distance.

In the event of a release, UNEV will coordinate with the United States Fish and Wildlife Service (USFWS), and state and local wildlife management groups to ensure the protection of threatened and endangered species within a release area.

### **Recreational Areas**

In the event that a spill impacts a recreational area, the effects may include: oiling of the area, structures, and property; interruption of traffic flow to/from the area; and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. In addition to the emergency notifications detailed in this FSP, responses to these effects may include strategic booming immediately around the spill area, evacuation of visitors and employees of the areas, rerouting of traffic near the recreational area, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled structures, buildings, and pavement. Potential effects and specific response actions will depend on the nature of the released material.

There are no recreational areas within the projected pathway of a spill.

### **Transportation Routes (Air, Land, and Water)**

Transportation routes are typically indirectly affected by a spill event through the interruption of traffic flow. Other effects may include: oiling of pavement, vegetation, and soil; the creation of an oil slick on areas of open water; and potential fire hazards. Should human contact result from the spill, the potential route of exposure might include skin contamination, inhalation, or accidental ingestion. In addition to the emergency notifications detailed in the ERAP and Section A.3.1, responses to these effects may include strategic booming immediately around the spill area, evacuation of persons traveling the route, rerouting of traffic by authorized personnel, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled structures, buildings, pavement, etc. The halting of river traffic in the case of a spill to a major waterway or rerouting vehicular traffic from business areas would likely result in economic

impacts. Potential effects and specific response actions will depend on the nature of the released material.

The following transportation routes are located within the projected pathway of a potential spill:

- Union Pacific railroad (located adjacent to site to 1.5 miles downstream)
- Hole in the Wall Road West (located approx. 0.3 miles downstream)
- Railroad Tracks Road East (located approx. 3.5 miles downstream)
- Cedar City Road (located approx. 5.6 miles downstream)
- 9600 N Road (located approx. 7.1 miles downstream)
- Lund Highway (located approx. 12.5 miles downstream)
- Nelson Loop (located approx. 12.8 miles downstream)

### **Utilities**

In the event that a spill impacts a utility line or right-of-way, the effects may include: oiling of pavement, vegetation, and structures; interruption of utility services to homes and businesses; the creation of an electrical hazard; and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. In addition to the emergency notifications detailed in this FSP, responses to these effects may include strategic booming immediately around the spill area, evacuation of persons near the utility line or right-of-way, rerouting of traffic by authorized personnel away from the utility line or right-of-way, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled structures, buildings, pavement, etc. Potential effects and specific response actions will depend on the nature of the released material.

There are no utilities within the projected pathway of a potential spill.

### **Other Areas of Economic Importance**

In the event that a spill impacts an area of economic concern, the effects may include: oiling of vegetation, soil, and structures; interruption of traffic flow to/from the area; and potential fire hazards. Should human contact result from the spill, the potential exposure routes might include skin contamination, inhalation, or accidental ingestion. Responses to these effects depend heavily on the nature of the sensitive area and potential routes of access for collection equipment, but may include strategic booming immediately around the spill area, evacuation, rerouting of traffic, excavation of contaminated soil, suppression of flammable vapors, and decontamination of oiled equipment, buildings, pavement, etc. Potential effects and specific response actions will depend on the nature of the released material.

There are no other areas of economic concern within the projected pathway of a potential spill.

## **A.4.3 Analysis of the Potential for an Oil Discharge**

### **A.4.3.1 Oil Discharge History**

To UNEV's knowledge, there has never been a reportable spill in the history of the Cedar City Terminal.

### **A.4.3.2 Horizontal Range of a Potential Discharge**

The spill pathway for the Cedar City Terminal would extend approximately 13.3 miles north-northeast of the Cedar City Terminal along Iron Springs Creek. The horizontal range of a spill is calculated and described in Section A.4.2.1. It should be noted that spill trajectory may vary due to numerous variables, including currents, prevailing winds, or other factors.

### **A.4.3.3 Vulnerability to Natural Disaster**

The primary concerns for natural disasters at the Cedar City Terminal are severe weather and seismic activity. Severe weather conditions observed at the site include heavy rainfall, high winds, lightning,

snow, and/or ice conditions. The United States Geological Survey estimates that the Cedar City Terminal has an approximate peak ground acceleration of 0.30 G with a return period of 2% in 50 years.

No part of the Cedar City Terminal is located within the 100-year floodplain. As the facility is not located near a coastline, hurricanes and tsunamis are not a concern.

#### **A.4.3.4 Tank Age and Condition**

Oil storage tanks at the Cedar City Terminal range in age from two to seven years, with the oldest tanks at the Cedar City Terminal built in 2006 and the most recent one built in 2011. No tank failures have occurred at the Cedar City Terminal. Failure due to tank age is not anticipated at the Cedar City Terminal. Tanks are designed to the specifications of API 650 (Welded Steel Tanks for Oil Storage) and are subject to periodic integrity testing per API 653 (Tank Inspection, Repair, Alteration, and Reconstruction). The integrity testing and inspection program includes procedures for brittle fracture analysis. Any time a field-constructed aboveground tank undergoes a repair, alteration, reconstruction, or change in service that might affect the risk of a discharge due to brittle fracture or other failure, or has discharged oil due to a brittle fracture or other failure, a brittle fracture analysis will be undertaken.

#### **A.4.4 Facility Reportable Oil Spill History**

To UNEV's knowledge, there has never been a reportable spill in the history of the Cedar City Terminal. If a reportable spill occurs, the following table will be completed to document its occurrence.

| <b>Item</b>  | <b>Response</b> |
|--|-----------------|
| Date of Discharge(s):  |                 |
| List of Discharge Causes:  |                 |
| Amount of Discharge (gallons):   |                 |
| Amount that Reached Navigable Waters (if applicable):                                    |                 |
| Effectiveness and Capacity of Secondary Containment:                                     |                 |
| Clean-Up Actions Taken:  |                 |
| Steps Taken to Reduce Possibility of Reoccurrence:                                       |                 |
| Total Oil Storage Capacity of Tanks(s) or Impoundment(s) from which Material Discharged: |                 |
| Enforcement Actions:   |                 |
| Effectiveness of Monitoring Equipment:   |                 |
| Spill Detection:   |                 |

## A.5.0 Discharge Scenarios

This section describes possible discharge scenarios. The Cedar City Terminal is located in a relatively flat area approximately 11 miles west-northwest of Cedar City, Utah, adjacent to Iron Springs Creek. Drainage is to the northwest into an unnamed ditch running parallel to a railroad. Approximately 1.4 miles downstream of the facility, the ditch crosses the railroad and enters Iron Springs Creek. In the event of a major spill, the most probable scenario is that the spill would migrate in the ditch towards Iron Springs Creek. The spill would pool in a flat area approximately 13.3 miles downstream of the facility, where Iron Springs Creek dissipates. Iron Springs Creek does not continue beyond this point.

### A.5.1 Small and Medium Discharges

The Cedar City Terminal is considered a “Complex” facility, regulated by both DOT and EPA. DOT has no requirement to plan for a small spill. Therefore, the volume of a small discharge was calculated according to EPA requirements listed in 40 CFR §112 Appendix E. The EPA small discharge for the Cedar City Terminal is up to 2,100 gallons.

Similar to the requirements for a small spill scenario, DOT has no requirements for a medium spill. Therefore, the volume of a small discharge was calculated according to EPA requirements listed in 40 CFR §112 Appendix E. The EPA medium discharge for the Cedar City Terminal is up to 36,000 gallons.

The following sections discuss potential scenarios for both small and medium discharges at the Cedar City Terminal.

#### A.5.1.1 Loading and Unloading of Surface Transportation

| Response Factor  | Small Discharge<br>(2,100 gallons or less)   | Medium Discharge<br>(2,100 to 36,000 gallons)  |
|--|--|--|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.                  | Not a factor. No wells, waterways, or drinking water intakes in the area.  |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                       | Not a factor. No sensitive environments in the area.   |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.  | Unlikely, though larger spills may migrate to drainage off-site.   |
| Location of Material Discharged  | Into containment sump, or possibly onto ground outside containment where spill would pool. | Into containment sump, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.   | Gasoline, diesel, ethanol, additives, etc.   |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                                 | Rainfall may increase the potential for movement off-site.   |
| Available Response Equipment   | See Section A.3.2 and Appendix G.  | See Section A.3.2 and Appendix G.  |
| Probability of a Chain Reaction of Failures                            | Unlikely.  | Unlikely.  |
| Direction of Discharge Pathway   | Likely to pool on site.  | Likely to pool on site. To the northwest if spill leaves site.   |

## A.5.1.2 Facility Maintenance

| Response Factor  | Small Discharge<br>(2,100 gallons or less)  | Medium Discharge<br>(2,100 to 36,000 gallons)   |
|--|---|---|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.             | Not a factor. No wells, waterways, or drinking water intakes in the area.   |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                  | Not a factor. No sensitive environments in the area.  |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.   | Unlikely, though larger spills may migrate to drainage off-site.  |
| Location of Material Discharged  | Into containment, or possibly onto ground outside containment where spill would pool. | Into containment, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.  | Gasoline, diesel, ethanol, additives, etc.  |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                            | Rainfall may increase the potential for movement off-site.  |
| Available Response Equipment   | See Section A.3.2 and Appendix G.   | See Section A.3.2 and Appendix G.   |
| Probability of a Chain Reaction of Failures                            | Unlikely.   | Unlikely.   |
| Direction of Discharge Pathway   | Into sump   | Into sump. To the northwest if spill leaves site.   |

## A.5.1.3 Facility Piping

| Response Factor  | Small Discharge<br>(2,100 gallons or less)  | Medium Discharge<br>(2,100 to 36,000 gallons)   |
|--|---|---|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.             | Not a factor. No wells, waterways, or drinking water intakes in the area.   |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                  | Not a factor. No sensitive environments in the area.  |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.   | Unlikely, though larger spills may migrate to drainage off-site.  |
| Location of Material Discharged  | Into containment, or possibly onto ground outside containment where spill would pool. | Into containment, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.  | Gasoline, diesel, ethanol, additives, etc.  |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                            | Rainfall may increase the potential for movement off-site.  |
| Available Response Equipment   | See Section A.3.2 and Appendix G.   | See Section A.3.2 and Appendix G.   |
| Probability of a Chain Reaction of Failures                            | Unlikely.   | Unlikely.   |
| Direction of Discharge Pathway   | Likely to pool on site.   | Likely to pool on site. To the northwest if spill leaves site.  |

**A.5.1.4 Pumping Stations and Sumps**

| <b>Response Factor</b>   | <b>Small Discharge<br/>(2,100 gallons or less)</b>                                    | <b>Medium Discharge<br/>(2,100 to 36,000 gallons)</b>   |
|--|---|---|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.             | Not a factor. No wells, waterways, or drinking water intakes in the area.   |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                  | Not a factor. No sensitive environments in the area.  |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.   | Unlikely, though larger spills may migrate to drainage off-site.  |
| Location of Material Discharged  | Into containment, or possibly onto ground outside containment where spill would pool. | Into containment, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.  | Gasoline, diesel, ethanol, additives, etc.  |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                            | Rainfall may increase the potential for movement off-site.  |
| Available Response Equipment   | See Section A.3.2 and Appendix G.   | See Section A.3.2 and Appendix G.   |
| Probability of a Chain Reaction of Failures                            | Unlikely.   | Unlikely.   |
| Direction of Discharge Pathway   | Likely to pool on site.   | Likely to pool on site. To the northwest if spill leaves site.  |

**A.5.1.5 Oil Storage Tanks**

| <b>Response Factor</b>   | <b>Small Discharge<br/>(2,100 gallons or less)</b>                                    | <b>Medium Discharge<br/>(2,100 to 36,000 gallons)</b>   |
|--|---|---|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.             | Not a factor. No wells, waterways, or drinking water intakes in the area.   |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                  | Not a factor. No sensitive environments in the area.  |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.   | Unlikely, though larger spills may migrate to drainage off-site.  |
| Location of Material Discharged  | Into containment, or possibly onto ground outside containment where spill would pool. | Into containment, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.  | Gasoline, diesel, ethanol, additives, etc.  |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                            | Rainfall may increase the potential for movement off-site.  |
| Available Response Equipment   | See Section A.3.2 and Appendix G.   | See Section A.3.2 and Appendix G.   |
| Probability of a Chain Reaction of Failures                            | Unlikely.   | Unlikely.   |
| Direction of Discharge Pathway   | Likely to pool on site.   | Likely to pool on site. To the northwest if spill leaves site.  |

### A.5.1.6 Vehicle Refueling

Vehicle refueling is not performed at the Cedar City Terminal.

### A.5.1.7 Age and Condition of Facility and Components

| Response Factor  | Small Discharge<br>(2,100 gallons or less)  | Medium Discharge<br>(2,100 to 36,000 gallons)   |
|--|---|---|
| Proximity to Downgradient Wells, Waterways, and Drinking Water Intakes | Not a factor. No wells, waterways, or drinking water intakes in the area.             | Not a factor. No wells, waterways, or drinking water intakes in the area.   |
| Proximity to Fish and Wildlife and Sensitive Environments              | Not a factor. No sensitive environments in the area.                                  | Not a factor. No sensitive environments in the area.  |
| Likelihood that Discharge will Travel Off-Site                         | Unlikely. Spills would likely pool on-site.   | Unlikely, though larger spills may migrate to drainage off-site.  |
| Location of Material Discharged  | Into containment, or possibly onto ground outside containment where spill would pool. | Into containment, or possibly onto ground outside containment where spill would pool and/or potentially leave site. |
| Material Discharged  | Gasoline, diesel, ethanol, additives, etc.  | Gasoline, diesel, ethanol, additives, etc.  |
| Weather or Aquatic Conditions  | Rainfall may increase the potential for movement off-site.                            | Rainfall may increase the potential for movement off-site.  |
| Available Response Equipment   | See Section A.3.2 and Appendix G.   | See Section A.3.2 and Appendix G.   |
| Probability of a Chain Reaction of Failures                            | Unlikely.   | Unlikely.   |
| Direction of Discharge Pathway   | Likely to pool on site.   | Likely to pool on site. To the northwest if spill leaves site.  |

## A.5.2 Worst Case Discharge

### A.5.2.1 Planning Volume Calculations

Response resources required to respond to a worst case discharge must be calculated based on the physical characteristics of the discharged oil. EPA has defined the following five groups of petroleum-based oil based on persistence and specific gravity. Common examples of each oil group are provided in parentheses.

- Group 1 Oil: Non-persistent oils (e.g., naphtha, gasoline)
- Group 2 Oil: Persistent oils with a specific gravity less than 0.85 (e.g., diesel, gas oil)
- Group 3 Oil: Persistent oils with a specific gravity equal to or greater than 0.85 but less than 0.95 (e.g., most crude oils)
- Group 4 Oil: Persistent oils with a specific gravity equal to or greater than 0.95 but less than 1.0 (e.g., No. 6 fuel oil, heavy crude)
- Group 5 Oil: Persistent oils with a specific gravity equal to or greater than 1.0 (e.g., some extra-heavy crude oils, halogenated oils)

Two hypothetical examples of worst case discharges have been selected for consideration in emergency response planning; one scenario for each of the Group 1 and Group 2 oils stored at the facility. Group 3, Group 4, and Group 5 oils are not stored at the Cedar City Terminal. The following facility operations and components were taken into consideration in selection of the example worst case discharge scenarios:

- Loading and unloading of surface transportation

- Facility Maintenance
- Facility piping
- Pumping stations and sumps
- Oil storage tanks
- Vehicle refueling
- Age and condition of the facility and its components

In order to determine the worst case discharge planning volume for the Cedar City Terminal, calculations were performed according to Part A of 40 CFR §112, Appendix D. Considering the operations listed above applicable to the Cedar City Terminal, the worst possible discharge scenario for each oil group present is a catastrophic failure of the largest oil storage tank for each oil group. A summary of the calculations for Group 1 and Group 2 oils are provided below.

### **EPA Worst Case Discharge Planning Volume for Group 1 Oil**

#### A.2 SECONDARY CONTAINMENT—MULTIPLE-TANK FACILITIES

Are all aboveground oil storage tanks or groups of aboveground oil storage tanks at the facility without adequate secondary containment?

No

A.2.1 If the answer is yes, the final worst case discharge planning volume equals the total aboveground oil storage capacity at the facility.

1. FINAL WORST CASE VOLUME: N/A
2. Do not proceed further.

A.2.2 If the answer is no, calculate the total aboveground oil storage capacity of tanks without adequate secondary containment. If all aboveground oil storage tanks or groups of aboveground oil storage tanks at the facility have adequate secondary containment, ENTER “0” (zero).

0 gallons (all tanks have adequate secondary containment)

A.2.3 Calculate the capacity of the largest single aboveground oil storage tank within an adequate secondary containment area or the combined capacity of a group of aboveground oil storage tanks permanently manifolded together, whichever is greater, PLUS THE VOLUME FROM QUESTION A.2.2.

(b) (7)(F)

### **EPA Worst Case Discharge Planning Volume for Group 2 Oil**

#### A.2 SECONDARY CONTAINMENT—MULTIPLE-TANK FACILITIES

Are all aboveground oil storage tanks or groups of aboveground oil storage tanks at the facility without adequate secondary containment?

No

A.2.1 If the answer is yes, the final worst case discharge planning volume equals the total aboveground oil storage capacity at the facility.

1. FINAL WORST CASE VOLUME: N/A
2. Do not proceed further.

A.2.2 If the answer is no, calculate the total aboveground oil storage capacity of tanks without adequate secondary containment. If all aboveground oil storage tanks or groups of aboveground oil storage tanks at the facility have adequate secondary containment, ENTER “0” (zero).

0 gallons (all tanks have adequate secondary containment)

A.2.3 Calculate the capacity of the largest single aboveground oil storage tank within an adequate secondary containment area or the combined capacity of a group of aboveground oil storage tanks permanently manifolded together, whichever is greater, PLUS THE VOLUME FROM QUESTION A.2.2.

(b) (7)(F)

#### **DOT Worst Case Discharge Planning Volume**

The Cedar City Terminal is considered a complex facility. The DOT worst case discharge is (b) (7)(F). The EPA worst case discharge volumes are greater than the DOT volume, so the EPA volumes will be used for discharge planning purposes.

#### **A.5.2.2 Permanently Manifolded Oil Storage Tanks**

This section is not applicable to the Cedar City Terminal. No permanently manifolded oil storage tanks are located at the Cedar City Terminal.

#### **A.5.2.3 Planning Factors to be Addressed for a Worst Case Discharge Response**

##### **Size of Discharge**

Secondary containment dikes are capable of holding the volume of a worst case discharge release plus the storm water volume from a rain event. Even if a worst case discharge event occurs, most of the release would be captured within secondary containment. Thus, a majority of the response would be to remove the product from the diked area. If the dike failed, then the entire tank contents could be released, (b) (7)(F).

##### **Proximity to Down Gradient Wells, Waterways, and Drinking Water Intakes**

There are no known wells or drinking water intakes facility in the drainage path.

##### **Proximity to Fish and Wildlife and Sensitive Areas.**

There are no designated fish and wildlife sensitive areas in the drainage path.

##### **Location of the Material Discharged**

Any spill from the storage tank would be onto soil within the diked area. Any release from the dikes area would also be onto soil.

##### **Material Discharged**

The worst case discharge material is gasoline (a Group 1 Oil), or diesel (a Group 2 Oil).

##### **Weather or Aquatic Conditions**

If the release occurred during a rain event, storm water would transport the spill to the drainage ditch more quickly. If the drainage path was flowing with water, this would spread the spill downstream at a more rapid rate.

##### **Available Remediation Equipment**

The facility has response equipment and also depends on contracted OSROs for providing personnel and equipment for response. Equipment available for responding to a worst case discharge are listed in Section A.3.2 (on-site) and in Appendix G of this FSP (through H2O OSRO, Inc.).

##### **Probability of a Chain Reaction of Failures**

It is possible that a tank failure could be part of a larger event that would destroy the secondary containment or damage adjacent tanks.

**Direction of Discharge Pathway**

The drainage path is to the northwest, initially into an unnamed drainage ditch, then into Iron Springs Creek.

**A.5.2.4 Worst Case Discharge Scenarios****Vehicle Loading and Unloading Operations**

It is unlikely that a loading or unloading operation could result in a worst case discharge. The maximum quantity carried by a tanker truck is approximately 8,800 gallons. In addition, the driver is standing by and can take response measures in the event of a release. The facility has a sump containment system at the loading rack capable of containing the contents of tankers loaded at the facility.

**Facility Maintenance Operations**

There is a slight possibility of a relatively large release from facility maintenance, especially from the pipeline coming into the station; however it would not likely result in a worst case discharge. Equipment at the facility is drained prior to any maintenance activities.

**Facility Piping**

There is a possibility of a relatively large release, particularly during a pipeline transfer. This could amount to several thousand gallons; however it would not likely result in a worst case discharge.

**Pumping Stations and Sumps**

Pumps at the Cedar City Terminal are only operated when the facility is manned. There is a possibility of a release but it would likely be identified and stopped quickly by on-site personnel. Sumps are adequately sized to prevent overfilling. Releases from pumps and sumps are not likely to result in a worst case discharge.

**Oil Storage Tanks**

Oil storage tanks T-380 (Group 1 oil), T-008 (Group 2 oil), and T-009 (Group 2 oil) at the facility are capable of causing a worst case discharge. In the event of a spill of this size, the QI would be notified and this FRP would be activated. Terminal personnel would begin control and containment efforts. H2O OSRO, Inc. would be contacted to contain, recover, and clean up the release.

**Vehicle Refueling Operations**

Vehicle refueling is not performed at the Cedar City Terminal.

**Age and Condition of Facility Components**

The facility was placed in service in 2006 and has been maintained in accordance with industry standards. Tanks are operated and maintained in accordance with industry standards in order to mitigate the risk of a worst case discharge due to tank age or condition. The age and condition of facility components are not considered a factor in determining the worst case discharge.

## A.6.0 Discharge Detection Systems

### A.6.1 Discharge Detection by Personnel

The immediate responsibility for taking action resides with the person discovering the spill. Persons discovering a discharge should take all steps possible to immediately alert others in the area, shut down operations (as necessary), notify the QI, and safely initiate steps to control the emergency and reduce its hazard.

#### A.6.1.1 Description of Procedures and Personnel for Spill Detection

Aerial pilots, Operators, and other UNEV personnel visually monitor the facility to identify events or conditions that could pose a threat to the surrounding environment. If personnel observe an event or condition, the QI is notified via radio or phone. Examples of such events and conditions are:

- Localized dead vegetation
- Puddles of spilled or leaked material
- Corrosion
- Droplets of material on pipeline
- Discoloration
- Bowing of pipe between supports
- Evidence of material seepage from valves or seals
- Vapor clouds
- Frozen ground

Visible oil leaks from tank seams, gaskets, piping, pumps, valves, rivets, and bolts are investigated and promptly repaired. Oil is removed from diked areas and recovered or disposed of, as appropriate.

#### A.6.1.2 Description of Facility Inspections

Operators are responsible for conducting routine inspections of a section of the tank farm and pipeline area twice monthly observing the condition of the tanks, dikes, piping, valves and flanges, and other tank equipment. A comment section on the bottom of these forms will be utilized to denote any of the equipment that is either leaking or in poor condition from the perspective of oil spill potential. This inspection allows the entire tank farm and product line areas to be inspected monthly. The operator records observations from the inspections on a check sheet.

During a tank inspection, personnel specifically look for drip marks, discoloration of tanks, puddles containing spilled or leaked material, corrosion, cracks, and localized dead vegetation. The foundation is inspected for cracks, discoloration, puddles containing spilled or leaked material, settling, gaps between the tank and the foundation, and damage caused by vegetation roots. Piping is checked for droplets of stored material, discoloration, corrosion, bowing of pipe between supports, evidence of stored material seepage from valves or seals, and localized dead vegetation.

Secondary containment inspections include checks for available capacity, level of precipitation, operational status of drainage valves, debris, erosion, status of pipes and other accessories, cracks, discoloration, standing liquid, corrosion, and stressed vegetation.

Integrity testing of tanks is conducted in compliance with API-653 guidelines at a minimum of once every 20 years. The integrity testing includes welding, cathodic protection, lining, steel, and general design inspection.

#### A.6.1.3 Description of Initial Response Actions

Persons discovering a discharge should take all steps possible to immediately alert others in the area, shut down operations (as necessary), notify the QI, and safely initiate steps to control the emergency and

reduce its hazard. Actions should only be performed if it is safe to do so. Refer to Section A.7.1.3 for a detailed description of initial response actions to be taken in the event of an emergency.

#### A.6.1.4 Emergency Response Information

Refer to Section A.3.0 of this FSP for emergency response information.

### A.6.2 Automated Discharge Detection

#### A.6.2.1 Description of Automatic Spill Detection Equipment

(b) (7)(F)



## A.7.0 Plan Implementation

### A.7.1 Response Resources for Small, Medium, and Worst Case Discharges

#### A.7.1.1 Initial Response Actions

Securing the source is an extremely important step in oil spill response actions. However, a source should only be secured if it can be performed safely and pose no threat to human health. The actions to take in responding to a spill are (in order of implementation):

##### 1. Stop the Flow of Product

- a. Shut off pumps feeding leaking equipment.
- b. Isolate leaking equipment by closing appropriate valves.
- c. If possible, pump contents of leaking equipment to another tank.
- d. If possible, repair leak.

Transfer Equipment – If manifold fails, shut down upstream pumps, close upstream valves. If a hose failure is encountered, shut down upstream pumps, close upstream valves, and drain hose in catch basin, if feasible.

Tank Overflow – If the source of the oil spill is identified as a tank leaking or overflowing, divert oil to alternative tank or shut down upstream pump, close fill line valve, and overflow valve (if necessary).

Tank Failure – If the source of the spill is identified as a catastrophic tank failure (i.e., collapse) and safety conditions permit, divert oil to alternative tank and shut all valves associated with the tank. If this is not possible, shut the closest upstream valve where possible and all tandem lines associated with the failed tank to eliminate the possibility of additional product being discharged.

Pipe Rupture – If the source originates from a low pressure pipeline, shut down pumps, close pipeline block valves on both sides of the spill, and drain blocked section of the line to a tank or container. If the source originates from a high pressure pipeline, shut down pumps, close the pipeline block valves on both sides of leak, construct or obtain temporary containment, and bleed pressure off of the pipeline into containment. After pressure is totally released, drain blocked section of the line to a tank or container.

Explosion or Fire (Liquids) – Control or disperse vapors. Cool heated structures. Divert or control runoff (berms, absorbents, booms, etc.). Recover products (pumps, vacuum trucks, etc.).

Explosion or Fire (Gases) – Disperse vapors. Isolate source (e.g., turn off valves). Protect exposures. If practical, allow fire to burn itself out.

##### 2. Warn Personnel.

- a. Put personnel in affected spill area on alert.
- b. For a large spill that cannot be contained and/or may endanger people, determine if evacuation is necessary.
- c. Notify QI.

##### 3. Shut Off Ignition Sources.

- a. Remove ignition sources such as motors or electrical circuits.
- b. Remove chemically incompatible material from spill's pathway.
- c. Apply foam if necessary to reduce possibility of ignition.
- d. Perform other actions that will eliminate ignition sources (case-by-case).

#### 4. Initiate Containment.

- a. On-Site – Restrict and contain the flow in as small an area as possible using absorbents, sandbags, shovels, or earth-moving equipment. Pump standing oil to tank, if possible.
- b. Spill Threatening to Enter Nearby Drains – Block flow to ditches using earthen berms. Use sandy or finer grain material to contain spills. Do not use large pore size material such as pea gravel to contain oil spills.
- c. Off-Site – Call the QI and notify local authorities. Construct earthen berms around leading edge of spill. Reroute traffic.

#### 5. Notify NRC.

Contact the NRC at 1-800-424-8802 (24 hours).

#### 6. Notify OSC.

Request OSC assistance while contacting the NRC (see item 5 above).

#### 7. Notify, as Appropriate.

Notify emergency response personnel regarding the emergency, as appropriate.

#### A.7.1.2 Spill Response Resources for Small Spills

The Cedar City Terminal is considered a “Complex” facility. DOT has no requirement to plan for a small spill; therefore, the volume of a small discharge was calculated according to EPA requirements listed in 40 CFR §112 Appendix E. The EPA small discharge for this complex is up to 2,100 gallons. 40 CFR §112 Appendix E requires that response resources available for a small spill consist of the following:

- 1,000 feet of containment boom deployable within one hour of the detection of an oil discharge
- Oil recovery devices with an effective daily recovery capacity equal to 2,100 gallons available within two hours of the detection of an oil discharge
- Daily oil storage capacity of 4,200 gallons (twice the effective daily recovery capacity) available for recovered oily material

**Due to its distance from environmentally sensitive environments, the Cedar City Terminal is not required to maintain the above equipment for deployment within the times specified (i.e., an FRP is not required for this site).**

The facility has response equipment available both on-site and through contractual agreements with H2O OSRO, Inc. Oil recovery devices, containment boom, and oil storage capacity available are listed in Section A.3.2 (on-site) and in Appendix G of this FSP (through H2O OSRO, Inc.).

Generally, response resources for a small spill would consist of on-site equipment and personnel, and equipment and personnel from local contractors. Additional resources could be requested from other sources, as needed.

#### A.7.1.3 Spill Response Resources for Medium Spills

Similar to the requirements for a small spill scenario, DOT has no requirements for a medium spill. Therefore, the volume of a small discharge was calculated according to EPA requirements listed in 40 CFR §112 Appendix E. The EPA medium discharge for this complex is up to 36,000 gallons. 40 CFR §112 Appendix E requires that response resources available for a medium spill consist of the following:

- Response equipment to address the medium spill planning volume (36,000 gallons) available to arrive within 12 hours
- Oil recovery devices with an effective daily recovery capacity equal to 18,000 gallons (50% of the medium spill planning volume)

- Daily oil storage capacity of 36,000 (twice the effective daily recovery capacity) gallons available for recovered oily material
- A sufficient quantity of containment boom for protection of fish and wildlife and sensitive environments

Due to its distance from environmentally sensitive environments, the Cedar City Terminal is not required to maintain the above equipment for deployment within the times specified (i.e., an FRP is not required for this site).

The facility has response equipment available both on-site and through contractual agreements with H2O OSRO, Inc. Oil recovery devices, containment boom, and oil storage capacity available are listed in Section A.3.2 (on-site) and in Appendix G of this FSP (through H2O OSRO, Inc.).

Generally, response resources for a medium spill would consist of on-site equipment and personnel, equipment and personnel from local contractors, off-site UNEV equipment and personnel, and H2O OSRO, Inc. Additional resources could be requested from other sources, as needed.

#### A.7.1.4 Spill Response Resources for Worst Case Discharge

The worst case discharge planning volume for the Cedar City Terminal is calculated in Section A.5.2.1. Response resources required to address a worst case discharge were calculated according to Attachment E-1 of 40 CFR §112, Appendix E. A summary of the calculations are provided below.

**Worst Case Discharge Scenario Calculations**

| Worst Case Discharge Scenario Description                           | T-380<br>(Gasoline) | T-008 or T-009<br>(Diesel) |
|---|---------------------|----------------------------|
| Step A: Calculate Worst Case Discharge in Barrels                   | (b) (7)(F)          | (b) (7)(F)                 |
| Step B: Oil Group   | 1                   | 2                          |
| Step C: Operating Area  | Rivers and Canals   | Rivers and Canals          |
| Step D: Percentages of Oil  |                     |                            |
| Percent Lost to Natural Dissipation                                 | 80                  | 40                         |
| Percent Recovered Floating Oil                                      | 10                  | 15                         |
| Percent Oil Onshore   | 10                  | 45                         |
| Step E: Oil Recovery Volumes in Barrels                             | (b) (7)(F)          | (b) (7)(F)                 |
| On-Water Oil Recovery in Barrels                                    | (b) (7)(F)          | (b) (7)(F)                 |
| Shoreline Oil Recovery  | (b) (7)(F)          | (b) (7)(F)                 |
| Step F: Emulsification Factor                                       | 1.0                 | 1.8                        |
| Step G: On-Water Oil Recovery Resource Mobilization Factor          |                     |                            |
| Tier 1  | 0.3                 | 0.3                        |
| Tier 2  | 0.4                 | 0.4                        |
| Tier 3  | 0.6                 | 0.6                        |
| On-Water Oil Recovery Capacity in Barrels per Day                   |                     |                            |
| Tier 1  | 1,590               | 2,957                      |
| Tier 2  | 2,120               | 3,942                      |
| Tier 3  | 3,179               | 5,913                      |
| Shoreline Cleanup Volume in Barrels                                 | 5,299               | 29,565                     |
| On-Water Response Capacity (Amount to be Contracted For)            |                     |                            |
| Tier 1  | 1,590               | 1,875                      |
| Tier 2  | 2,120               | 3,750                      |
| Tier 3  | 3,179               | 5,913                      |
| On-Water Amount to be Identified, but Not Contracted For In Advance | (b) (7)(F)          | (b) (7)(F)                 |
| Tier 1  | (b) (7)(F)          | (b) (7)(F)                 |
| Tier 2  | (b) (7)(F)          | (b) (7)(F)                 |
| Tier 3  | (b) (7)(F)          | (b) (7)(F)                 |

Due to its distance from environmentally sensitive environments, the Cedar City Terminal is not required to maintain the above equipment for deployment within the times specified (i.e., an FRP is not required for this site).

The facility has response equipment available both on-site and through contractual agreements with H2O OSRO, Inc. Oil recovery devices, containment boom, and oil storage capacity available are listed in Section A.3.2 (on-site) and in Appendix G of this FSP (through H2O OSRO, Inc.).

Generally, response resources for a worst case discharge would consist of on-site equipment and personnel, equipment and personnel from local contractors, off-site UNEV equipment and personnel, H2O OSRO, Inc., and the SERC. Additional resources could be requested from other sources, as needed.

H2O OSRO, Inc. has offices and personnel in four locations. The locations with approximate response times are provided below. Response times were calculated assuming a 35 mile per hour road speed, per EPA requirements:

- Las Vegas, Nevada (~5 hours)
- Reno, Nevada (~15 hours)
- Taos, New Mexico (~17 hours)
- Boise, Idaho (~17 hours)

In the event of a worst case discharge, H2O OSRO, Inc. can meet Tier I response requirements using equipment from the Las Vegas, Nevada, location. Equipment from all four locations can be used to meet Tier II and Tier III response requirements.

Assistance from H2O OSRO, Inc. may be requested using the contact telephone numbers provided in Section A.3.1.1.

## **A.7.2 Disposal Plans**

### **A.7.2.1 Description of Procedure for Recovering, Reusing, Decontaminating, or Disposing of Material**

Waste and contaminated material that results from a release will be handled and disposed in accordance with all applicable local, state, and federal regulations.

Current practices for recovery of large amounts of spilled liquid materials may include initial recovery with a vacuum truck and dewatering in frac tanks, storage tanks, or on-site oil-water separators. Solid materials may be placed into bags, drums, or roll-off containers until final disposal.

All emergency equipment will be cleaned and fit for its intended use before operations are resumed. The equipment will either be cleaned at the spill site in a manner appropriate for the specific type of equipment and contaminating material (i.e., with water, steam, or an appropriate solvent). If necessary, scrub brushes also may be used to remove any waste. The rinse water will be collected and disposed of in an appropriate manner.

Every effort will be made to reduce the amount of waste-contaminated debris generated during a response. Waste minimization through the use of recycling, recovery, or treatment will be given a high priority.

Small or medium spills or leaks that occur at the truck loading racks are routed to and collected in a drainage sump. Liquid material collected in a drainage sump may be recovered or disposed of, as appropriate.

Very small leaks, spills, or residual material from larger releases are removed with absorbent material. Also, residual waste from sumps, floors, tools, etc. may be cleaned up with absorbent material (e.g., absorbent pads). Once used, the absorbent material is placed into a separate drum or other appropriate container for disposal.

**A.7.2.2 Materials Addressed in Disposal Plan**

| Material   | Disposal Facility  | Location   | RCRA Permit/Manifest                         |
|--|--|--|--|
| Recovered product  | Vacuum truck, dewatering in frac tanks, storage in product tank on-site, potential for disposal off-site | Cedar City Terminal, off-site locations to be determined | RCRA Permit and/or manifests, as appropriate |
| Contaminated Soil  | Within plastic-lined bermed areas, roll-off bins, in-place for in-situ soil remediation                  | Cedar City Terminal, off-site locations to be determined | RCRA Permit and/or manifests, as appropriate |
| Contaminated equipment and materials, including drums, tank parts, valves, and shovels | Containers, drums, lined roll-off bins, etc.   | Off-site locations to be determined                      | RCRA Permit and/or manifests, as appropriate |
| Personnel protective equipment   | Containers, drums, lined roll-off bins, etc.   | Off-site locations to be determined                      | RCRA Permit and/or manifests, as appropriate |
| Decontamination solutions  | Containers, drums, vacuum trucks   | Off-site locations to be determined                      | RCRA Permit and/or manifests, as appropriate |
| Adsorbents   | Containers, drums, lined roll-off bins, etc.   | Off-site locations to be determined                      | RCRA Permit and/or manifests, as appropriate |
| Spent Chemicals  | Containers, drums, vacuum trucks   | Off-site locations to be determined                      | RCRA Permit and/or manifests, as appropriate |

**A.7.2.3 Federal, State, and Local Regulations**

All material that has been contaminated as a result of loss of containment or release will be handled and disposed of in accordance with all local, state, and federal regulations. Cedar City Terminal personnel are responsible for:

- Coordinating the handling of contaminated materials
- Ensuring that appropriate manifests are obtained and utilized
- Coordinating the transportation and disposal of contaminated materials

**A.7.2.4 Permits Required to Transport or Dispose of Recovered Materials**

All applicable manifests and permits must be obtained prior to transporting any wastes or recovered materials off-site.

**A.7.3 Containment and Drainage Planning****A.7.3.1 Containment Volume**

The Cedar City Terminal has a dike system that provides secondary containment for all petroleum storage tanks. Secondary containment volumes are provided in Section A.4.1.6 of this document. Each dike was constructed to have sufficient capacity to contain 100% of the contents of the largest tank within the dike with sufficient freeboard to contain storm water from a rainfall event. Spills which may occur at transfer areas will be contained in underground sumps.

### **A.7.3.2 Drainage Route from Oil Storage and Transfer Areas**

Drainage is to the northwest into an unnamed ditch running parallel to a railroad. Approximately 1.4 miles downstream of the facility, the ditch crosses the railroad and enters Iron Springs Creek. In the event of a spill, the most probable scenario is that the spill would migrate in the ditch towards Iron Springs Creek. Approximately 13.3 miles downstream of the Cedar City Terminal, Iron Springs Creek dissipates. Iron Springs Creek does not continue beyond this point.

### **A.7.3.3 Construction Materials in Drainage Troughs**

Most drainage troughs at the Cedar City Terminal are earthen. Drainage structures surrounding the loading rack are built of concrete.

### **A.7.3.4 Type and Number of Valves and Separators in the Drainage System**

Drainage at the Cedar City Terminal is conveyed via uncontrolled surface drainage features. There are no valves or separators present in the drainage system.

### **A.7.3.5 Sump Pump Capacities**

Secondary containment sumps are equipped with pumps with the following capacities:

- S-1000 – 150 gallons per minute (GPM) (214 bbls per hour)
- T-1000 – 300 GPM (429 bbls per hour)
- T-1001 – 300 GPM (429 bbls per hour)

Emergency sump pumps are routed to T-389 for temporary storage.

### **A.7.3.6 Containment Capacities of Weirs and Booms and Their Locations**

No weirs are located on-site. The locations, types, and quantities of boom are included in Section A.3.2 and Appendix G of this FSP.

### **A.7.3.7 Other Cleanup Materials**

The locations, types, and quantities of other cleanup materials are included in Sections A.3.2 and Appendix G of this FSP.

## **A.7.4 Spill Response and Cleanup Techniques**

Refer to Appendix F of this FSP for summaries of common spill response and cleanup techniques that may be used to mitigate the effects of a release to the environment.

## A.8.0 Self-Inspection, Drills/Exercises, and Response Training

### A.8.1 Self-Inspection

Inspections of facility equipment are performed on a continual basis as a part of routine operations at the terminal. Corrective actions are taken as appropriate. Inspection forms located in Appendix C of this FSP will be completed twice per month for the tank/berm inspections and annually for the facility inspection. Inspection records will be signed by the terminal operator who performs the inspection and will be retained at the terminal for five years.

#### A.8.1.1 Tank Inspection

Inspections of facility tanks are done on a continual basis as a part of routine operations at the Cedar City Terminal. Corrective actions are taken as appropriate. Inspection reports will be prepared on a twice monthly basis using the Tank and Secondary Containment Inspection Form included in Appendix C of this FSP.

#### A.8.1.2 Response Equipment Inspection

Inspections of response equipment are performed on a semiannual basis at the Cedar City Terminal. Any discrepancies discovered with the Facility Response Equipment List included in Section A.3.2 must be noted and corrected. Inspection reports will be prepared using the Response Equipment Testing and Deployment Drill Log included in Appendix B of this FSP.

#### A.8.1.3 Secondary Containment Inspection

Inspections of secondary containment structures are performed in conjunction with tank inspections as a part of routine operations at the Cedar City Terminal. Corrective actions are taken as appropriate. Inspection reports will be prepared on a twice monthly basis using the Tank and Secondary Containment Inspection Form included in Appendix C of this FSP.

### A.8.2 Facility Drills/Exercises

Numerous spill response drills are performed in order to ensure that UNEV personnel are familiar with spill response procedures. The following table describes the types and frequency of drills performed. Drill logs are included in Appendix D of this FSP. Copies of completed Drill Logs will be maintained in Appendix D of this FSP to document drills conducted at the Cedar City Terminal. Refer to Appendix D of this FSP for the latest logs.

| Drill/Exercise                                | Description   |
|---|---|
| Qualified Individual (QI) Notification Drills | Four drills will be conducted annually to exercise communication between facility personnel and QI.   |
| Internal Tabletop Drills                      | Two drills will be conducted annually with at least one every three years involving a worst case discharge scenario that will demonstrate the Response Team's ability to organize, communicate and make strategic decisions regarding population and environmental protection during a drill. The designated Spill Emergency Response Team members and QI for each area will meet to pose this drill. |
| Operator Equipment Deployment Drills          | Two drills will be conducted annually to demonstrate the deployment and operation of equipment (company-owned and/or OSRO) listed in the plan into its intended operating environment.  |

| Drill/Exercise                               | Description   |
|--|---|
| Triennial Cycle of Exercising the Entire FRP | Every three years all components of the entire FRP will be exercised to ensure that all components of the plan function adequately for response to an oil or hazardous spill.   |
| Government Unannounced Drills (External)     | An Area Exercise will be conducted when scheduled by the government. This exercise will include a full test of the FRP with government involvement. The Unified Command System for the area will be tested. A scenario will be developed by the lead plan holder (HEP), in consultation with the exercise design team (comprised of representatives from Federal, State and local Government, environmentalists and industry).The scenario will involve equipment deployment. The extent of equipment deployment shall be determined by the lead plan holder in consultation with the exercise design team. |

### A.8.3 Response Training

#### A.8.3.1 General Employee Training

All personnel are required to complete internet-based training courses which cover hazard response procedures, hazardous material recognition and evaluation including instruction on the United States DOT Emergency Response Guidebook, emergency preparedness, hazardous material characteristics, use of respirators, and use of firefighting equipment. These courses are customized to UNEV transportation facilities. To complete a course successfully, personnel must pass an exam at the end of each course with a minimum score of 80%. Personnel are required to take part in ongoing training. Personnel are required annually to take part in field exercises using proper air respirator techniques. In addition, personnel take part in firefighting training and other specialized training courses.

Each new employee is required to undergo on the job training under a trained supervisor. This training includes job-specific training; instruction in hazards and safety issues related to the job; normal and abnormal situations; emergency procedures; facility malfunctions and appropriate corrective actions; and instruction in controlling any discharge to minimize the potential for fire, explosion, toxicity or environmental damage. Annual evaluations are made of the training program to ensure that personnel and supervisors maintain a thorough knowledge of any updates or revisions in operations. A copy of the plan and training records are maintained in the Artesia, New Mexico headquarters office.

Initial and periodic review discussions on FRP procedures for personnel will take place during tabletop drills and cover the following:

- Their responsibilities under the FRP
- The name and the procedure for contacting the QI on a 24-hour basis
- Operator's 24-hour telephone number

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with reporting personnel and will cover the following:

- The content of the information summary of the FRP
- The toll-free telephone number of the NRC
- The notification process

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with personnel engaged in response activities attending and will cover the following:

- The characteristics and hazards of the oil discharged
- The conditions that are likely to worsen emergencies, including the consequences of facility malfunctions and their appropriate corrective actions
- The steps necessary to control any accidental discharge of oil and to minimize the potential for fire, explosion, toxicity, or environmental damage
- The proper fire-fighting procedures and the use of equipment, fire suits, and breathing apparatus

#### A.8.3.2 HAZWOPER Training (29 CFR §1910.120)

Personnel receive HAZWOPER training and certification by going through the training procedure. Personnel shall receive annual refresher training of sufficient content and duration to maintain their competencies, or shall demonstrate competency in those areas at least yearly.

Non-United States Coast Guard (USCG) classified OSRO responders are required to complete training per 29 CFR §1910.120 and provide documentation of the training to UNEV. The Regulatory Coordinator maintains these records.

#### A.8.3.3 Certification Levels

##### **First Responder Awareness Level**

Personnel are certified at the First Responder Awareness level when they complete sufficient training to ensure:

- An understanding of what hazardous substances are, and the risks associated with them in an incident
- An understanding of the potential outcomes associated with an emergency created when hazardous substances are present
- The ability to recognize the presence of hazardous substances in an emergency
- The ability to identify the hazardous substances, if possible
- An understanding of the role of the First Responder Awareness level individual in the ERAP including site security and control and the DOT Emergency Response Guidebook
- The ability to recognize the need for additional resources, and to make appropriate notifications to the communication center

##### **First Responder Operations Level**

Personnel are certified at the First Responder Operations level upon completion of at least eight hours of training or have had the sufficient experience to demonstrate objective competency in the following areas in addition to those listed for the First Responder Awareness level:

- Knowledge of the basic hazard and risk assessment techniques
- Know how to select and use proper personal protective equipment provided to the First Responder Operations level
- An understanding of basic hazardous materials terms
- Know how to perform basic control, containment and/or confinement operations within the capabilities of the resources and personal protective equipment available with their unit
- Know how to implement basic decontamination procedures
- An understanding of the relevant standard operating procedures and termination procedures

##### **Hazardous Materials Technician**

Personnel are certified at the Hazardous Materials Technician level when they have received at least 24 hours of training equal to the first responder operations level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Know the classification, identification and verification of known and unknown materials by using field survey instruments and equipment
- Be able to function within an assigned role in the ICS
- Know how to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Technician
- Understand hazard and risk assessment techniques
- Be able to perform advance control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available with the unit
- Understand and implement decontamination procedures
- Understand termination procedures
- Understand basic chemical and toxicological terminology and behavior

### **Hazardous Materials Specialist**

Personnel will be certified at the Hazardous Materials Specialist level when they have received at least 24 hours of training equal to the technician level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Understand classification, identification and verification of known and unknown materials by using advanced survey instruments and equipment
- Knowledge of the state emergency response plan
- Be able to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Specialist
- Understand in-depth hazard and risk techniques
- Be able to perform specialized control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available
- Be able to determine and implement decontamination procedures
- Have the ability to develop a site-specific Health and Safety Plan
- Understand chemical, radiological and toxicological terminology and behavior

### **Incident Commander**

Personnel are certified at the Incident Commander level when they have received at least 24 hours of training equal to the first responder operations level and have competency in the following areas:

- Know and be able to implement the ICS
- Know how to implement the ERAP
- Know and understand the hazards and risks associated with employees working in chemical protective clothing
- Know how to implement the local emergency response plan
- Knowledge of the state emergency response plan and of the Federal Regional Response Team
- Know and understand the importance of decontamination procedures

#### **A.8.3.4 Training Records Retention**

All training records for UNEV personnel and contractor personnel, as well as records on instructors and/or training organizations that provide training, are kept at the headquarters office in Artesia, New Mexico, and will be maintained as long as individuals are assigned duties under this FSP.

## A.9.0 Diagrams

### A.9.1 Site Plan Diagram

A Site Plan Diagram is provided as Figure 1, including the following features:

- Entire facility to scale
- Access control (fences, gates)
- Above and below ground bulk oil storage tanks
- Contents and capacities of above and below ground bulk oil storage tanks
- Contents and capacities of drum oil storage areas (N/A)
- Contents and capacities of surface impoundments (N/A)
- Process buildings (N/A)
- Transfer areas
- Secondary containment systems
- Structures where hazardous materials are stored or handled, including materials stored and capacity of storage
- Location of communication and emergency response equipment
- Location of electrical equipment that contains oil (transformers, etc.)
- The interface between EPA and DOT jurisdiction.

### A.9.2 Site Drainage Plan Diagram

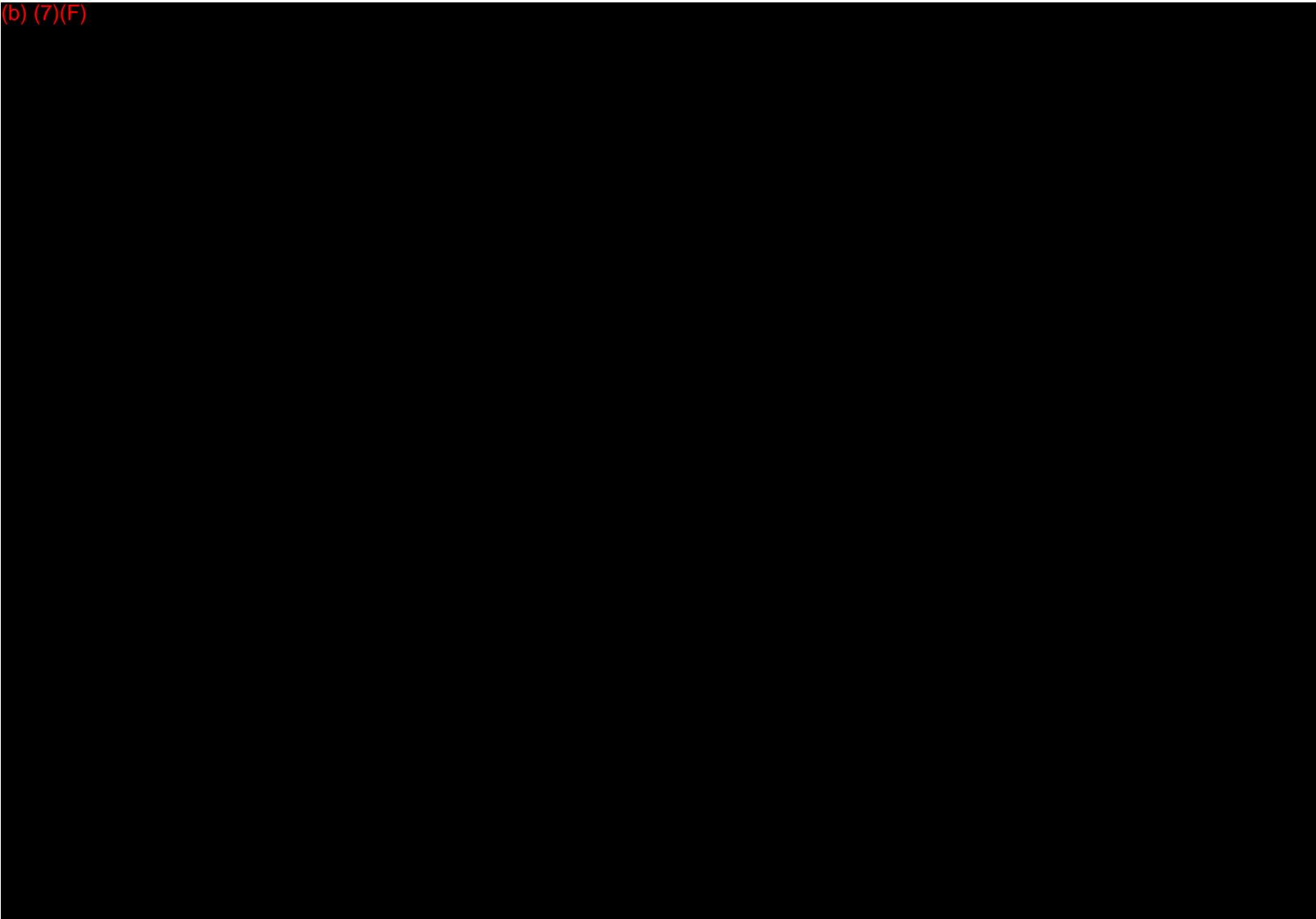
A Site Drainage Plan Diagram is provided as Figure 2, including the following features:

- Major sanitary and storm sewers, manholes, and drains (N/A)
- Weirs and shut-off valves (N/A)
- Surface water receiving streams
- Firefighting water sources
- Other utilities
- Response personnel ingress and egress
- Response equipment transportation routes
- Direction of discharge flow from discharge points

### A.9.3 Site Evacuation Plan Diagram

A Site Evacuation Plan Diagram is provided as Figure 3, including the following features:

- Site plan diagram with evacuation routes
- Location of evacuation regrouping areas



(b) (7)(F)

**FACILITY RESPONSE PLAN**

**FACILITY SPECIFIC PLAN**

**PART B: CEDAR CITY OPERATIONAL SEGMENT**

**TRANSPORTATION (DOT) FACILITIES**

**Sequence Number 2300**

*Prepared for*  
UNEV Pipeline, LLC  
1602 West Main Street  
Artesia, New Mexico 88210

*Prepared by*



Austin, Texas

January 2014

## Certification

I certify that the National Oil and Hazardous Substances Pollution Contingency Plan (National Contingency Plan, or NCP) and the applicable Area Contingency Plan (ACP) have been reviewed and that this Facility Response Plan (FRP) is consistent with these contingency plans. The following ACP is applicable for this Facility Specific Plan (FSP):

- EPA Region 8 Regional Contingency Plan

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document, and that based on my inquiry of those individuals responsible for obtaining information, I believe that the submitted information is true, accurate, and complete.

Signature: 

Name: Mark Cunningham

Title: Senior Vice President, Pipeline Operations

Date: 21 Jan 2014

## Regulatory Cross Reference Table – 49 CFR §194 (Transportation-Related)

| Regulatory Citation  | Description of Rule  | Report Section  |
|----------------------|--|---|
| §194.1               | Purpose  | N/A   |
| §194.3               | Applicability  | CP Introduction                                       |
| §194.5               | Definitions  | N/A   |
| §194.7               | Response plan required to operate                                | CP Introduction                                       |
| §194.101(a)          | Operators required to submit response plans                      | FSP Section B.1.0<br>CP Introduction                  |
| §194.101(b)          | Exceptions   | FSP Section B.1.0                                     |
| §194.103             | Identification of significant and substantial harm line sections | FSP Section B.1.0                                     |
| §194.105             | Worst case discharge   | FSP Section B.5.6.3                                   |
| §194.107             | General response plan requirements                               | ERAP, FSP, and CP                                     |
| §194.107(a)          | Procedures for responding to worst case discharge                | FSP Section B.5.9<br>CP Section 5.0                   |
| §194.107(b)          | Certify consistency with NCP and ACPs                            | CP Introduction                                       |
| §194.107(c)          | Response plan requirements                                       | ERAP, FSP, and CP                                     |
| §194.107(c)(1)       | Core plan requirements   | CP  |
| §194.107(c)(1)(i)    | Information summary  | CP Section 1.0  |
| §194.107(c)(1)(ii)   | Immediate notification procedures                                | CP Section 2.0  |
| §194.107(c)(1)(iii)  | Spill detection and mitigation procedures                        | CP Section 3.0  |
| §194.107(c)(1)(iv)   | OSRO information   | CP Section 4.0  |
| §194.107(c)(1)(v)    | Response activities and response resources                       | CP Section 5.0  |
| §194.107(c)(1)(vi)   | Federal, State, and Local agency information                     | CP Section 6.0  |
| §194.107(c)(1)(vii)  | Training procedures  | CP Section 7.0  |
| §194.107(c)(1)(viii) | Equipment testing  | CP Section 8.0  |
| §194.107(c)(1)(ix)   | Drill program  | CP Section 9.0  |
| §194.107(c)(1)(x)    | Plan review and update procedures                                | CP Section 10.0                                       |
| §194.107(c)(2)       | Response zone appendices   | FSP Part B  |
| §194.107(c)(3)       | Response management system description                           | CP Section 5.1  |
| §194.109             | Submission of state response plans                               | N/A   |
| §194.111             | Response plan retention  | CP Introduction                                       |
| §194.113(a)          | Core plan information summary requirements                       | CP Section 1.0  |
| §194.113(b)          | Response zone appendix information summary requirements          | FSP Section B.1.0                                     |
| §194.115             | Response resources   | FSP Section B.5.0<br>CP Section 5.0                   |
| §194.117             | Training   | FSP Sections B.7.0 and 9.0<br>CP Sections 7.0 and 9.0 |
| §194.119             | Submission and approval procedures                               | CP Section 10.0                                       |
| §194.121             | Response plan review and update procedures                       | CP Section 10.0                                       |

## Table of Contents

|   |           |
|---|-----------|
| Certification .....   | i         |
| Regulatory Cross Reference Table – 49 CFR §194 (Transportation-Related) ..... | ii        |
| Table of Contents .....   | iii       |
| Figures .....   | iv        |
| Appendices .....  | iv        |
| Acronyms .....  | v         |
| Introduction .....  | vi        |
| <b>B.1.0 Information Summary .....</b>  | <b>1</b>  |
| B.1.1 Owner Information .....   | 1         |
| B.1.2 Qualified Individuals .....   | 1         |
| B.1.3 Description of Response Zone .....                                      | 1         |
| B.1.4 Classification of Line Sections Within Response Zone .....              | 2         |
| B.1.5 Worst Case Discharge Summary .....                                      | 3         |
| <b>B.2.0 Immediate Notification Procedures.....</b>                           | <b>4</b>  |
| B.2.1 Emergency Notification Phone List .....                                 | 4         |
| B.2.2 Spill Response Notification Form .....                                  | 5         |
| <b>B.3.0 Spill Detection and Mitigation Procedures.....</b>                   | <b>6</b>  |
| B.3.1 Spill Detection.....  | 6         |
| B.3.2 Facility Self-Inspection.....   | 7         |
| B.3.3 Security.....   | 7         |
| B.3.4 Spill Prevention.....   | 8         |
| <b>B.4.0 Oil Spill Removal Organization (OSRO) Information.....</b>           | <b>9</b>  |
| <b>B.5.0 Response Activities and Resources .....</b>                          | <b>10</b> |
| B.5.1 Description of Initial Response Actions .....                           | 10        |
| B.5.2 Description of Qualified Individual's Duties .....                      | 11        |
| B.5.3 Response Equipment .....  | 11        |
| B.5.4 HEP Response Personnel.....   | 14        |
| B.5.5 Evacuation Plans .....  | 14        |
| B.5.6 Resource Planning .....   | 15        |
| B.5.7 Response Resources .....  | 17        |
| B.5.8 Discharge Scenarios .....   | 17        |
| B.5.9 Response Strategies .....   | 19        |
| <b>B.6.0 Federal, State, and Local Agency Information.....</b>                | <b>21</b> |
| <b>B.7.0 Training Procedures .....</b>  | <b>22</b> |
| B.7.1 General Employee Training.....  | 22        |
| B.7.2 HAZWOPER Training (29 CFR §1910.120).....                               | 22        |
| B.7.3 Certification Levels .....  | 23        |
| B.7.4 Training Records Retention.....   | 24        |
| <b>B.8.0 Equipment Testing.....</b>   | <b>25</b> |
| B.8.1 Response Equipment Testing and Deployment Drill Log.....                | 25        |
| B.8.2 Oil Spill Removal Organization (OSRO) Certification.....                | 25        |
| <b>B.9.0 Drill Program .....</b>  | <b>26</b> |
| B.9.1 Spill Response Drills.....  | 26        |
| B.9.2 Manned/Unmanned Pipeline Emergency Procedures .....                     | 26        |
| B.9.3 Drill Program Responsibility, Implementation, and Recordkeeping .....   | 27        |
| <b>B.10.0 Diagrams.....</b>   | <b>28</b> |
| B.10.1 Cedar City Terminal Diagrams .....                                     | 28        |
| B.10.2 Pipeline Location Diagram.....   | 28        |

## Figures

- Figure 1 – Site Plan – Cedar City Terminal
- Figure 2 – Site Drainage Plan – Cedar City Terminal
- Figure 3 – Site Evacuation Plan – Cedar City Terminal
- Figure 4A – Pipeline Location Diagram – Cedar City Operational Segment
- Figure 4B – Pipeline Location Diagram – Cedar City Operational Segment

## Appendices

- Appendix A – Spill Response Form
- Appendix B – Response Equipment Testing and Deployment Drill Logs
- Appendix C – Inspection Forms
- Appendix D – Response Drill Logs
- Appendix E – Threatened and Endangered Species information
- Appendix F – Spill Response Techniques
- Appendix G – OSRO Information

## Acronyms

|          |  |
|----------|--|
| ACP      | Area Contingency Plan  |
| bbf      | Barrel (42 gallons)  |
| BPD      | Barrels Per Day  |
| CCTV     | Closed Circuit Television  |
| CFR      | Code of Federal Regulations                                      |
| CP       | Core Plan  |
| DOT      | United States Department of Transportation                       |
| EFR      | External Floating Roof   |
| EPA      | United States Environmental Protection Agency                    |
| ERAP     | Emergency Response Action Plan                                   |
| FRP      | Facility Response Plan   |
| FSP      | Facility Specific Plan   |
| HAZWOPER | Hazardous Waste Operations and Emergency Response                |
| HEP      | Holly Energy Partners – Operating, LP                            |
| IC       | Incident Commander   |
| IFR      | Internal Floating Roof   |
| LEPC     | Local Emergency Planning Committee                               |
| MP       | Mile Post  |
| NCP      | National Oil and Hazardous Substances Pollution Contingency Plan |
| NRC      | National Response Center   |
| NRDA     | Natural Resource Damage Assessment                               |
| OSC      | On-Scene Coordinator   |
| OSRO     | Oil Spill Removal Organization                                   |
| PPE      | Personal Protective Equipment                                    |
| PREP     | National Preparedness for Response Exercise Program              |
| psig     | Pounds per Square inch Gauge                                     |
| QI       | Qualified Individual   |
| SERC     | State Emergency Response Commission                              |
| SPCC     | Spill Prevention, Control, and Countermeasure                    |
| TLV      | Threshold Limit Value  |
| USFWS    | United States Fish and Wildlife Service                          |

## Introduction

This portion of the Facility Specific Plan has been produced for UNEV Pipeline, LLC (UNEV) to fulfill United States Department of Transportation (DOT) requirements outlined in 49 CFR §194 for transportation-related facilities associated with the Cedar City Terminal. 49 CFR §194 requires the operator of an onshore pipeline facility that could reasonably be expected to cause substantial harm to the environment by discharging oil into or on the navigable waters or adjoining shorelines to prepare and submit a Facility Response Plan (FRP) to the Pipeline and Hazardous Materials Safety Administration (PHMSA). In the event of an oil spill, pipelines associated with the Cedar City Operational Segment may cause substantial harm to the environment.

The Cedar City Terminal is located approximately 11 miles east-northeast of Cedar City, Utah. The Cedar City Terminal is responsible for response activities associated with the Cedar City Operational Segment, which consists of a 120-mile segment of the UNEV pipeline (b) (7)(F) and a 9.7-mile lateral extending from the main line to the Cedar City Terminal. The Cedar City Operational Segment routinely carries refined products, including gasoline and diesel.

The Cedar City Terminal is a refined product terminal facility that receives products via pipeline, stores products in on-site tanks, blends products to desired specifications, and distributes products to local end users and retail outlets via trucks. The Cedar City Terminal is regulated by the United States Environmental Protection Agency (EPA). For response information that fulfills the EPA requirements outlined in 40 CFR §112.20, please refer to Part A of this FSP.

Breakout tanks and equipment associated with the pipeline system located within the Cedar City Terminal have dual DOT and EPA jurisdiction, and are addressed in both Part A and Part B of this FSP. It is recommended that releases from these features are addressed using the more stringent EPA requirements found in Part A of this FSP.

To clearly address the requirements of 40 CFR §112.20 and 49 CFR §194, the FRP has been formatted to include the following components:

- A **Core Plan (CP)** organized to directly address the requirements for a core plan as described by 49 CFR §194.107(c)(1). This plan includes response information pertinent to the pipeline system as a whole. While 49 CFR §194 applies specifically to transportation-related facilities, general information pertaining to non-transportation-related facilities operated by HEP has been incorporated into this framework for completeness.
- **Facility Specific Plans (FSPs)** for each terminal facility organized to clearly address FRP requirements associated with transportation-related (i.e., pipelines, breakout tanks, etc.) and non-transportation-related (i.e., the terminal facility) components of the facility. The FSPs are formatted to follow the format preferred by both EPA and DOT. The FSPs include detailed facility-specific information regarding response activities.
- **Emergency Response Action Plan (ERAP)** for each terminal facility that include a summary of emergency response activities to address either a release from a transportation-related or non-transportation-related features.

The term “Facility Response Plan,” or, “FRP,” is used in this document to refer to the CP, FSPs, and ERAP as a whole.

UNEV will retain this FSP at its headquarters located in Artesia, NM. The Cedar City Terminal and each Qualified Individual will receive a copy of the CP, FSP, and ERAP specific to the facility. The documents are accessible electronically through the Channel HFC Flashpoint interface.

**Other divisions of UNEV involved in emergency response activities, such as Logistics, Finance, or Administration, should proceed directly to Section 5.0 of the CP for a summary of the command structure utilized during emergency response activities and a list of duties specific to each position within the command structure.**

## B.1.0 Information Summary

### B.1.1 Owner Information

**Owner:**

UNEV Pipeline, LLC  
1602 W Main Street  
Artesia, New Mexico 88210

**Operator:**

Holly Energy Partners  
1602 W Main Street  
Artesia, New Mexico 88210

### B.1.2 Qualified Individuals

|                            |  |
|----------------------------|--|
| Qualified Individual:      | Craig Flanigan                                       |
| Position:                  | Terminal Supervisor                                  |
| Work Phone:                | (435) 586-1463                                       |
|                            | (b) (6)  |
| Cellular Phone:            | (435) 817-6678                                       |
| Work Address:              | 4410 North Wecco Road<br>Cedar City, UT 84721        |
| Alt. Qualified Individual: | Chris Fornelius                                      |
| Position:                  | Sr. Operations Manager                               |
| Work Phone:                | (801) 364-5252                                       |
| Home Phone:                | N/A  |
| Cellular Phone:            | (801) 510-1907                                       |
| Work Address:              | 2100 N Redwood Rd, Ste 1<br>Salt Lake City, UT 84116 |

(b) (6)

### B.1.3 Description of Response Zone

The UNEV pipeline is 415.5 miles in length. The Cedar City Operational Segment consists of a 120-mile long segment of the UNEV pipeline ((b) (7)(F)) and the 9.7-mile long UNEV Cedar City Lateral extending from the main line to the Cedar City Terminal. The UNEV pipeline is a 12-inch diameter pipeline with a maximum operating pressure of (b) (7)(F) (g). The UNEV Cedar City Lateral is an 8-inch diameter pipeline with a maximum operating pressure of (b) (7)(F). The Cedar City Operational Segment carries refined products, including gasoline and diesel (F).

The Cedar City Terminal is a refined product terminal facility that receives products via pipeline, stores products in on-site tanks, blends products to desired specifications, and distributes products to local end users and retail outlets via trucks. The Cedar City Terminal is regulated by the EPA. For response information that fulfills the EPA requirements outlined in 40 CFR §112.20, please refer to Part A of this FSP.

Breakout tanks and equipment associated with the UNEV pipeline system located within the Cedar City Terminal have dual DOT and EPA jurisdiction, and are addressed in both Part A and Part B of this FSP. It is recommended that releases from these features within the Cedar City Terminal are addressed using the more stringent EPA requirements found in Part A of this FSP.

The Cedar City Operational Segment is located within Millard, Beaver, and Iron Counties, Utah. (b) (7) (the north boundary of the response zone) is located approximately 19 miles south-southwest of Desert, Utah. (b) (7) (the south boundary of the response zone) is located approximately 7 miles southwest of Newcastle, Utah, at the county line between Iron County and Washington County, Utah.

For response activities associated with the operational segment from (b) (7)(F) of the UNEV pipeline, refer to the FRP for the Woods Cross facility. For response activities associated with the operational segment from (b) (7)(F) of the UNEV pipeline, refer to the FRP for the Las Vegas Terminal.

### B.1.4 Classification of Line Sections Within Response Zone

Line sections within the Cedar City Operational Segment response zone have been evaluated to determine exemptions as defined in 49 CFR §194.101(b). Line sections were then evaluated to determine the potential to cause significant and substantial harm as defined in 49 CFR §194.103(c).

| Line Section | County, State              | Worst Case Discharge (bbbls) | Classification   | Comments  |
|--------------|----------------------------|------------------------------|------------------|---|
| (b) (7)(F)   | Millard, UT                | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Millard, UT                | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Millard, UT                | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Millard, UT;<br>Beaver, UT | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Beaver, UT                 | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Beaver, UT                 | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Beaver, UT                 | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
| (b) (7)(F)   | Beaver, UT;<br>Iron, UT    | (b) (7)(F)                   | Substantial Harm | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |

| Line Section | County, State               | Worst Case Discharge (bbls) | Classification                   | Comments  |
|--------------|-----------------------------|-----------------------------|----------------------------------|---|
| (b) (7)(F)   | Iron, UT                    | (b) (7)(F)                  | Substantial Harm                 | Pipeline is not located within 1 mile of sensitive environments or within 5 miles of public drinking water intakes. |
|              | Iron, UT;<br>Washington, UT |                             | Significant and Substantial Harm | Pipeline is located within 1 mile of Newcastle, UT.   |
|              | Iron, UT                    |                             | Substantial Harm                 | (b) (7)(F)  |

\* Portions of this line section are outside the response zone. This FSP applies from MF (b) (7)(F).  
CC Lat. – Cedar City Lateral  
UNEV – UNEV Pipeline

### B.1.5 Worst Case Discharge Summary

The worst case discharge for the Cedar City Operational Segment could potentially occur between (b) (7)(F) 5. Pipeline appurtenances in the vicinity of the worst case discharge that may be used to stop product flow include the following (nearest block valves in **bold**):

(b) (7)(F)

(b) (7)(F) f oil is released in the worst case discharge scenario. The material discharged from the UNEV Pipeline is either gasoline or diesel.

Factors considered in the worst case discharge volume calculation included consideration of the pipeline's maximum release time, the maximum shut-down time, the maximum flow rate, and the pipeline drainage volume. H2O Oil Spill Removal Organization (OSRO), Inc. will be utilized by UNEV in the event of a discharge. UNEV has retained personnel and equipment to respond to a worst case discharge scenario through contractual agreements with H2O OSRO, Inc.

## B.2.0 Immediate Notification Procedures

A Spill Response Form is provided as Appendix A of this FSP to assist with immediate spill response activities. The Spill Response Form includes immediate spill response activities and general information required for notification purposes.

In the case of a spill of petroleum product, the individual discovering the incident will function as the Incident Commander (IC) until relieved of this duty by a Qualified Individual (QI) or alternate. The IC must instruct personnel in the area to immediately begin emergency response activities, as necessary, and notify:

1. Emergency services (Fire and Police Departments) by calling 911 (if emergency situation)
2. QI – and advise of the nature of the incident

The QI functions as the Communications Coordinator and he or she will assess the situation and determine which agencies, organizations, or individuals will be notified depending upon the nature of the spill, and who will make the notification calls. The determination will depend on the type and size of the spill, the time of day, day of the week, and other circumstances regarding the spill. The sequence of government notifications for a reportable spill is as follows:

1. National Response Center (NRC)
2. EPA Region 8 Emergency Response Branch

Concurrent with these external notifications, other facility personnel or spill response contractors may be called to report to the incident as determined by the QI. In addition, state and local agencies will be notified, as needed.

A reportable spill for DOT-regulated liquid pipeline facilities is one that fits any of the following criteria:

- Causes an explosion or fire
- Causes an escape to the atmosphere of more than five barrels a day of highly volatile liquid
- Causes a death or injury
- Causes property damage exceeding \$50,000
- Causes pollution of any body of water
- Is an incident deemed significant by the operator

## B.2.1 Emergency Notification Phone List

In case of an emergency, contact the following organizations, as applicable.

| Organization  | Phone Number                                 |
|---|--|
| 1. Emergency Services (Fire Department, Police, Hospital) | 911  |
| 2. UNEV Pipeline Control Center (Artesia)                 | (575) 748-8950<br>(877) 748-4464 (alternate) |
| 3. Qualified Individuals      Craig Flanigan              | (435) 817-6678 (cell)<br>(b) (6)             |
| Chris Fornelius (Alternate)                               | (801) 510-1907 (cell)                        |
| 4. National Response Center (NRC)                         | (800) 424-8802 (24 hours)                    |
| 5. EPA Region 8 Emergency Response Branch                 | (800) 227-8917<br>(303) 312-6312 (alternate) |
| 6. Oil Spill Cleanup Contractor – H2O OSRO                | (866) 426-6770<br>(866) 426-7745 (alternate) |
| 7. Utah Department of Environmental Quality               | (800) 458-0145<br>(801) 536-4123 (alternate) |
| 8. State Emergency Response Commission (SERC)             | (801) 538-3400                               |
| 9. Utah Department of Transportation                      | (801) 965-4000                               |

| <b>Organization</b>   | <b>Phone Number</b>                          |
|---|--|
| 10. Iron County Emergency Management (LEPC) – Marie Brooks, Coordinator | (435) 590-0078<br>(435) 463-3192 (alternate) |
| 11. Iron County Sheriff's Office – Cedar City                           | (435) 867-7500<br>(435) 867-7550 (alternate) |
| 12. Iron County Engineer – Steve Platt                                  | (435) 865-5370                               |
| 13. Cedar City Fire Department  | (435) 586-2964                               |
| 14. Valley View Medical Center  | (435) 868-5000                               |
| 15. Rocky Mountain Power  | (866) 870-3419                               |
| 16. Questar Gas   | (800) 767-1689                               |
| 17. AT&T (Internet T1 Line)   | (800) 246-8464                               |
| 18. Union Pacific Railroad  | (435) 387-2231                               |
| 19. CML Metals  | (435) 586-5360                               |
| 20. National Weather Service – Salt Lake City                           | (801) 524-5113                               |
| 21. Cherry Creek Radio Group  | (534) 590-3056                               |
| 22. Marsh & McLennan Agency – Insurance Representative                  | (914) 397-1600                               |

## **B.2.2 Spill Response Notification Form**

The Spill Response Form included as Appendix A to this FSP shall be used to collect reporting information in the case of an emergency. **Initial notifications should not be delayed pending the collection of all information included on the Spill Response Form.**

## B.3.0 Spill Detection and Mitigation Procedures

### B.3.1 Spill Detection

Examples of events and conditions that could pose a threat of a worst case discharge are:

- High or low line pressures
- High or low tank levels
- Abnormal readings on the cathodic protection systems
- Erosion that could affect pipeline foundations and supports

Automated discharge detection equipment aids in identifying potential events that could indicate a discharge. Aerial pilots, Operators, and other UNEV personnel are trained to identify situations that indicate potential spills or leaks.

Aerial pilots, Operators, and other UNEV personnel visually monitor the pipeline and facilities to identify events or conditions that could pose a threat to the surrounding environment. If personnel observe an event or condition, the QI is notified via radio or phone. Examples of such events and conditions are:

- Localized dead vegetation
- Puddles of spilled or leaked material
- Corrosion
- Droplets of material on pipeline
- Discoloration
- Bowing of pipe between supports
- Evidence of material seepage from valves or seals
- Vapor clouds
- Frozen ground

It is the responsibility of Operators to identify and correct any abnormal condition before it becomes an emergency. An abnormal condition exists when:

- There are unexplainable deviations from normal operating conditions
- Operating design limits are exceeded
- Protective devices initiate, such as pressure or temperature shutdown devices
- Supervisory, control, or protective devices for the safe operation of the system are not able to perform their functions. This might be due to:
  - Communication failure to the control center
  - Power failure resulting in loss of communication
  - Malfunction of a piece of critical equipment
- Personnel errors occur such as:
  - Unintended closure of valves or shutdowns
  - Other personnel errors which could cause a hazard to persons or property
- Circumstances develop that are likely to cause emergency conditions

Should an abnormal operating condition occur, it is the responsibility of the Operator to respond to, investigate, and correct (with the assistance of technicians as appropriate) the cause of the abnormal condition as follows:

1. Decide the course of action (i.e., whether to continue pumping, slow pumping, or stop part or all operations in the system).

2. Strictly monitor all system facilities to detect any signs of other failures or an indication that an emergency is eminent.
3. Notify the supervisor and the responsible maintenance personnel of the abnormal operations.
4. Provide for correction of malfunctions as necessary.

When the abnormal condition has been addressed, the Operator will:

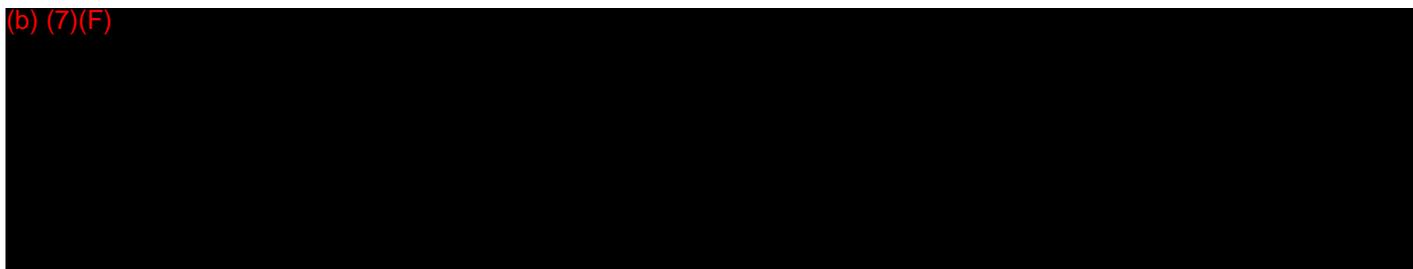
- Confirm the system is operating safely under normal operating conditions
- Investigate the cause and take corrective action if variations from normal operating conditions again become evident

Operations management is required to review periodically the response of Operator personnel to determine the effectiveness of the Abnormal Operations Procedures and take corrective action where deficiencies are discovered.

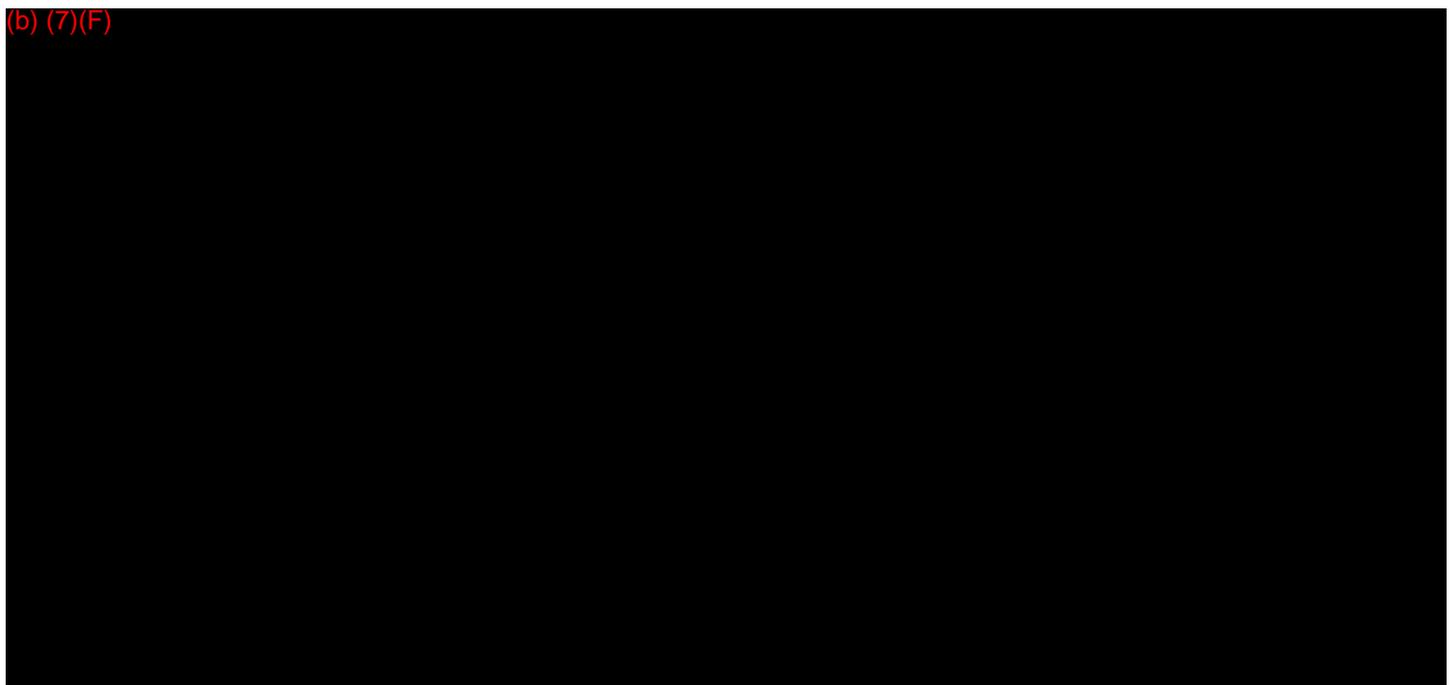
### B.3.2 Facility Self-Inspection

Inspections of the system equipment are done on a continual basis as part of routine operations. Corrective actions are taken as appropriate. The Tank Inspection form located in Appendix C of this FSP will be completed for the tank/berm inspections twice per month. The Facility Inspection form located in Appendix C will be completed annually. Completed inspection forms are kept at the Cedar City Terminal. Inspection records are maintained for five years.

(b) (7)(F)

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(b) (7)(F)

## **B.3.4 Spill Prevention**

### **B.3.4.1 Spill Prevention Procedures**

The Operations Managers (OM) are the designated persons accountable for refined product spill prevention. Spill prevention briefings for Operator personnel are conducted to ensure adequate understanding of the spill contingency plan. Spill events, malfunctioning components, and newly developed precautionary measures are discussed during these briefings.

Buried pipe within the system is coated to inhibit corrosion. In addition, most major sections of the system are also provided with cathodic protection. Pipe supports are properly engineered to reduce corrosion.

### **B.3.4.2 Containment and Drainage Planning**

The Cedar City Terminal has a dike system that provides secondary containment for all petroleum storage tanks. Each dike was constructed to have sufficient capacity to contain 100% of the contents of the largest tank within the dike with sufficient freeboard to contain storm water from a rainfall event. Spills which may occur at transfer areas will be contained in an underground sump.

At the Cedar City Terminal, drainage is to the northwest into an unnamed ditch running parallel to a railroad. Approximately 1.4 miles downstream of the facility, the ditch crosses the railroad and enters Iron Springs Creek. In the event of a spill at the Cedar City Terminal, the most probable scenario is that the spill would migrate in the ditch towards Iron Springs Creek. Approximately 13.3 miles downstream of the Cedar City Terminal, Iron Springs Creek dissipates. Iron Springs Creek does not continue beyond this point.

Most drainage troughs at the Cedar City Terminal are earthen. Drainage structures surrounding the loading rack are built of concrete. Drainage at the Cedar City Terminal is conveyed via uncontrolled surface drainage features. There are no valves or separators present in the drainage system.

### **B.3.4.3 Other Spill Prevention Measures**

When piping is abandoned in-place or placed out-of-service, it is drained and then sealed at both ends with either caps or blind flanges.

Warning signs are posted, where appropriate, to warn vehicular traffic about the presence of above ground piping and/or tanks.

## B.4.0 Oil Spill Removal Organization (OSRO) Information

Though a response trailer is maintained on-site at the Cedar City Terminal, the Cedar City Terminal and Cedar City Operational Segment rely on spill response equipment and personnel from H2O OSRO, Inc. in order to respond to releases of oil. UNEV maintains a current service contract with H2O OSRO, Inc. This contract is located in the Artesia, New Mexico office, and is provided in Appendix G of this FSP.

H2O OSRO, Inc. has offices and personnel in four locations. The locations with approximate response times are provided below. Response times were calculated assuming a 35 mile per hour road speed, per EPA requirements:

- Las Vegas, Nevada (~5 hours)
- Reno, Nevada (~15 hours)
- Taos, New Mexico (~17 hours)
- Boise, Idaho (~17 hours)

In the event of a worst case discharge, H2O OSRO, Inc. can meet Tier I response requirements using equipment from the Las Vegas, Nevada, location. Equipment from all four locations can be used to meet Tier II and Tier III response requirements.

Assistance from H2O OSRO, Inc. may be requested using the contact telephone numbers provided in Section B.2.1.

## B.5.0 Response Activities and Resources

### B.5.1 Description of Initial Response Actions

Securing the source is an extremely important step in oil spill response actions. However, a source should only be secured if it can be performed safely and pose no threat to human health. The actions to take in responding to a spill are (in order of implementation):

#### 1. Stop the Flow of Product

- a. Shut off pumps feeding leaking equipment.
- b. Isolate leaking equipment by closing appropriate valves.
- c. If possible, pump contents of leaking equipment to another tank.
- d. If possible, repair leak.

Transfer Equipment – If manifold fails, shut down upstream pumps, close upstream valves. If a hose failure is encountered, shut down upstream pumps, close upstream valves, and drain hose in catch basin, if feasible.

Tank Overflow – If the source of the oil spill is identified as a tank leaking or overflowing, divert oil to alternative tank or shut down upstream pump, close fill line valve, and overflow valve (if necessary).

Tank Failure – If the source of the spill is identified as a catastrophic tank failure (i.e., collapse) and safety conditions permit, divert oil to alternative tank and shut all valves associated with the tank. If this is not possible, shut the closest upstream valve where possible and all tandem lines associated with the failed tank to eliminate the possibility of additional product being discharged.

Pipe Rupture – If the source originates from a low pressure pipeline, shut down pumps, close the pipeline block valves on both sides of the spill, and drain blocked section of line to a tank or container. If the source originates from a high pressure pipeline, shut down pumps, close pipeline block valves on both sides of leak, construct or obtain temporary containment, and bleed pressure off of pipeline into containment. After pressure is totally released, drain blocked section of the line to a tank or container.

Explosion or Fire (Liquids) – Control or disperse vapors. Cool heated structures. Divert or control runoff (berms, absorbents, booms, etc.). Recover products (pumps, vacuum trucks, etc.).

Explosion or Fire (Gases) – Disperse vapors. Isolate source (e.g., turn off valves). Protect exposures. If practical, allow fire to burn itself out.

#### 2. Warn Personnel.

- a. Put personnel in affected spill area on alert.
- b. For a large spill that cannot be contained and/or may endanger people, determine if evacuation is necessary.
- c. Notify QI.

#### 3. Shut Off Ignition Sources.

- a. Remove ignition sources such as motors or electrical circuits.
- b. Remove chemically incompatible material from spill's pathway.
- c. Apply foam if necessary to reduce possibility of ignition.
- d. Perform other actions that will eliminate ignition sources (case-by-case).

#### 4. **Initiate Containment.**

- a. On-Site – Restrict and contain the flow in as small an area as possible using absorbents, sandbags, shovels, or earth-moving equipment. Pump standing oil to tank, if possible.
- b. Spill Threatening to Enter Nearby Drains – Block flow to ditches using earthen berms. Use sandy or finer grain material to contain spills. Do not use large pore size material such as pea gravel to contain oil spills.
- c. Off-Site – Call the QI and notify local authorities. Construct earthen berms around leading edge of spill. Reroute traffic.

#### 5. **Notify NRC.**

To contact the NRC, dial 1-800-424-8802 (24 hours).

#### 6. **Notify OSC.**

Request OSC assistance while contacting the NRC (see item 5 above).

#### 7. **Notify, as Appropriate.**

Notify emergency response personnel regarding the emergency, as appropriate.

### B.5.2 Description of Qualified Individual's Duties

In the event of a release, the QI will perform the following duties:

- Activate internal alarms and hazard communication systems to notify all system personnel.
- Notify appropriate response personnel, as needed.
- Identify the character, exact source, amount, and extent of the release, as well as other items needed for notification (refer to Spill Response Form included as Appendix A of this FSP).
- As appropriate, notify and provide necessary information to the Federal, State, and local authorities with designated response roles, including the NRC, the Federal On-Scene Coordinator (OSC), State Emergency Response Commission (SERC), and Local Emergency Planning Committee (LEPC).
- Assess the interaction of the discharged substance with water and/or other substances stored at the facility and notify response personnel at the scene of that assessment.
- Assess the possible hazards to human health and the environment due to the release. This assessment must consider both the direct and indirect effects of the release (i.e., the effects of any toxic, irritating, or asphyxiating gases that may be generated or the effects of any hazardous surface water runoffs from water or chemical agents used to control fire and heat-induced explosion).
- Assess and implement prompt removal actions to contain and remove the substance released.
- Coordinate rescue and response actions as previously arranged with all response personnel.
- Use authority to immediately access UNEV funding to initiate cleanup activities.
- Direct cleanup activities until properly relieved of this responsibility.

For a detailed description of response team organization, role descriptions, and a description of the command post and staging areas, refer to Section 5.0 of the CP.

### B.5.3 Response Equipment

Response equipment is maintained in a response trailer at the Cedar City Terminal and is supplemented by H2O OSRO, Inc. Additional information regarding H2O OSRO, Inc. is provided in Section B.4.0. Equipment maintained on-site is described in the following sections, and equipment maintained by H2O OSRO, Inc. is included as Appendix G of this FSP.

### B.5.3.1 Skimmers and Pumps

No skimmers and pumps are maintained at the Cedar City Terminal. Skimmers and pumps will be provided by H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of skimmers and pumps available for spill response efforts.

### B.5.3.2 Boom

**Storage Location: Cedar City Terminal, Response Trailer**

| Quantity | Description               |
|----------|---------------------------|
| 4        | 10' 3M Sorbent Boom       |
| 4        | 10' x 3" Sorbent Boom     |
| 2        | 100' American Marine Boom |
| 2        | 50' American Marine Boom  |

Additional boom is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional boom available for spill response efforts.

### B.5.3.3 Chemicals Stored

This section is not applicable to the Cedar City Terminal. Dispersants listed on the EPA's NCP Product Schedule are not stored at the Cedar City Terminal and dispersants are not used by H2O OSRO, Inc. Use of dispersants or other chemicals during response actions will require approval from the regulatory authority overseeing response actions.

### B.5.3.4 Dispersant Dispensing Equipment

This section is not applicable to the Cedar City Terminal. Dispersant dispensing equipment is not stored at the Cedar City Terminal and dispersant dispensing equipment is not used by H2O OSRO, Inc. Use of dispersants or other chemicals during response actions will require approval from the regulatory authority overseeing response actions.

### B.5.3.5 Sorbents

**Storage Location: Cedar City Terminal, Response Trailer**

| Quantity | Description                    |
|----------|--------------------------------|
| 1        | 32" x 150' Sorbent Pads (Roll) |
| 1        | 100' Sorbent Pads              |
| 2        | 40 Pound Bags of DRI-ZORB      |
| 10       | 16"x16" Sorbent Pillows        |
| 25       | Heavy Weight King Sorbent Pads |

Additional sorbents are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional sorbents available for spill response efforts.

### B.5.3.6 Hand Tools

**Storage Location: Cedar City Terminal, Response Trailer**

| Quantity | Description           |
|----------|-----------------------|
| 7        | Axe                   |
| 8        | Shovel                |
| 2        | Metal Rake            |
| 1        | Sledge Hammer         |
| 1        | Pick Axe              |
| 3        | Bundling Tape Rolls   |
| 11       | Streamlight Headlamps |

Additional hand tools are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of hand tools available for spill response efforts.

### **B.5.3.7 Communication Equipment**

Communication equipment available for emergency response consists of cellular telephones issued to Cedar City Terminal personnel and high frequency radio systems located in company vehicles. Additional communications equipment is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional communications equipment available for spill response efforts.

### **B.5.3.8 Firefighting and Personal Protective Equipment**

**Storage Location: Cedar City Terminal, Response Trailer**

| Quantity | Description                            |
|----------|--|
| 20       | Pairs Neoprene Gloves                  |
| 7        | Rubber Boots Size 9-10                 |
| 5        | Rubber Boots Size 11-13                |
| 25       | Tyvek Coveralls XL                     |
| 3        | Willson Respirators Large              |
| 8        | Willson Respirators Medium             |
| 20       | 3M Particulate Respirator N95          |
| 2        | Red Personal Gear Packs                |
| 2        | Winning Edge Life Jackets              |
| 1        | Decontamination Retention Pool         |
| 4        | 55 Gallon Hazardous Waste Drums        |
| 2        | Decontamination Trays                  |
| 3        | Decontamination Scrub Brush            |
| 1        | Green Plastic Decontamination Shovel   |
| 4        | 10'x12' Poly Tarp                      |
| 2        | Back Mount Water Spray Decontamination |

Additional firefighting and personal protective equipment are available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional firefighting and personal protective equipment available for spill response efforts.

### **B.5.3.9 Other Equipment (e.g. Heavy Equipment, Boats, and Motors)**

**Storage Location: Cedar City Terminal, Response Trailer**

| Quantity | Description      |
|----------|------------------|
| 8        | Green Cones      |
| 8        | Yellow Cones     |
| 8        | Red Cones        |
| 1        | Generator        |
| 1        | LOWE L1436L Boat |
| 1        | Boat Paddle      |

Additional equipment is available from H2O OSRO, Inc. Refer to Appendix G of this FSP for a list of additional equipment available for spill response efforts.

## B.5.4 HEP Response Personnel

### B.5.4.1 Emergency Response Personnel – Company Personnel

| Name                      | Home Phone* | Cell Phone*    | Response Time (Minutes) | Responsibility During Response Action        |
|---------------------------|-------------|----------------|-------------------------|--|
| Craig Flanigan (QI)       | (b) (6)     | (435) 817-6678 | 30                      | Incident Commander (IC), Planning Chief      |
| Chris Fornelius (Alt. QI) |             | (801) 510-1907 | 480                     | Operations Chief, Planning Team              |
| Lowell Barker             |             | (435) 233-0135 | 20                      | Planning Team, First Responder               |
| Rashid Solo               |             | (435) 817-6675 | 25                      | Planning Team, First Responder               |
| Lori Coupland             |             | (214) 208-1260 | 1,380                   | Compliance Officer/Liaison, Planning Team    |
| Larry Olsen               |             | (801) 631-7957 | 480                     | Safety Officer                               |
| Bill Green                |             | (214) 864-1475 | 1,380                   | Environmental Officer/Liaison, Planning Team |
| Brad Thompson             |             | (214) 236-3428 | 1,380                   | SCADA Operations                             |
| Allison Stockweather      |             | (575) 513-9338 | 1,380                   | EHS Officer                                  |
| Aaron Mullins             |             | (575) 513-2758 | 1,380                   | Logistics Chief, Finance Chief               |

### B.5.4.2 Emergency Response Contractors

| Contractor    | Phone (Primary / Alternate)     | Response Time (Minutes) | Contract Responsibility |
|---------------|---------------------------------|-------------------------|-------------------------|
| H2O OSRO Inc. | (866) 426-6770 / (866) 426-7745 | 300                     | OSRO                    |

### B.5.4.3 Facility Response Team

| Team Member          | Duties During Response Action                | Response Time (Minutes) | Phone (Work / Cell)             |
|----------------------|--|-------------------------|---------------------------------|
| Craig Flanigan       | QI, Incident Commander (IC), Planning Chief  | 30                      | (435) 586-1463 / (435) 817-6678 |
| Chris Fornelius      | Alt. QI, Operations Chief, Planning Team     | 480                     | (801) 364-5252 / (801) 510-1907 |
| Lowell Barker        | Planning Team, First Responder               | 20                      | (435) 586-1463 / (435) 233-0135 |
| Rashid Solo          | Planning Team, First Responder               | 25                      | (435) 817-6675 / (435) 817-6675 |
| Lori Coupland        | Compliance Officer/Liaison, Planning Team    | 1,380                   | (575) 748-4076 / (214) 208-1260 |
| Larry Olsen          | Safety Officer                               | 480                     | (801) 364-5252 / (801) 631-7957 |
| Bill Green           | Environmental Officer/Liaison, Planning Team | 1,380                   | (575) 748-8968 / (214) 864-1475 |
| Brad Thompson        | SCADA Operations                             | 1,380                   | (575) 748-8961 / (214) 236-3428 |
| Allison Stockweather | EHS Officer, Planning Team                   | 1380                    | (575) 746-5475 / (575) 513-9338 |

## B.5.5 Evacuation Plans

Pre-established evacuation routes specific to the Cedar City Terminal are provided as Figure 3. In the event an evacuation from the Cedar City Terminal is necessary, the IC may modify the evacuation plan and routes based on site conditions. Evacuation routes for releases from pipelines have not been established. In the event an evacuation from the area affected by a pipeline release is necessary, the IC

will evaluate site conditions and formulate an evacuation plan. Evacuees will remain upwind, uphill, and/or upstream of the incident, where possible.

## B.5.6 Resource Planning

### B.5.6.1 Hazard Identification

DOT-regulated facilities that pose oil spill hazards within the Cedar City Operational Segment include the following:

- UNEV pipeline
- UNEV Cedar City lateral
- Filters F-1000 and F-1001 (located within the Cedar City Terminal, dual EPA/DOT jurisdiction)
- Transmix storage and breakout tank T-389 (located within the Cedar City Terminal, dual EPA/DOT jurisdiction)
- Cedar City Terminal piping connecting the Cedar City lateral, filters, and tank T-389 (dual jurisdiction)

#### UNEV Pipeline and Cedar City Lateral

The UNEV Pipeline is a 12-inch diameter pipeline with a maximum operating pressure of 1,480 psig. The Cedar City Lateral is an 8-inch diameter pipeline with a maximum operating pressure of 1,480 psig. The Cedar City Operational Segment carries refined products, including gasoline and diesel.

The Cedar City Operational Segment of the UNEV Pipeline is located within Millard, Beaver, and Iron Counties, Utah. The Cedar City Lateral is located within Iron County, Utah. The extent of the Cedar City Operational Segment is depicted in Figures 4A and 4B.

The UNEV Pipeline has a design maximum throughput of 60,000 bbls per day (BPD) (2,520,000 gallons per day). The Cedar City Terminal may periodically receive up to approximately 15,000 BPD (630,000 gallons per day) of product via the Cedar City Lateral.

#### DOT-Regulated Facilities Within the Cedar City Terminal

Filters F-1000 and F-1001, transmix storage tank T-389, and piping connecting the Cedar City lateral, filters, and tank T-389 are regulated by both DOT and EPA, and are identified in Figure 1. For detailed response information pertaining to these features, refer to Part A of this FSP.

### B.5.6.2 Hazards Posed By Discharge materials

Discharged oil from a pipeline release will typically be composed of gasoline, diesel, or transmix (a mixture of refined products, typically of gasoline and diesel at the Cedar City Terminal). The primary hazards posed by these materials are flammability and toxicity. If it is safe to do so, sources of ignition should be extinguished prior to evacuation. Exposure to discharged materials should be avoided while evacuating. Human health effects of exposure to discharge materials are included below.

| Material | Toxic Effects  | Toxicity Levels           |
|----------|--|---------------------------|
| Diesel   | Irritates skin, eyes, and lungs after prolonged exposure. Material aspirated into the lungs may cause pneumonia. Shown to produce tumors in the liver and kidneys of rats (but not other species). Skin tumors have been associated with repeated skin absorption. | 100 mg/m <sup>3</sup> TLV |
| Gasoline | Moderately toxic for acute exposures through inhalation. Harmful if swallowed and/or aspirated into the lungs.   | 300 ppm TLV               |

### B.5.6.3 Worst Case Discharge Calculation

DOT-regulated pipelines and DOT-regulated facilities located within the Cedar City Terminal were evaluated to determine the volume of a worst case discharge for the Cedar City Operational Segment.

#### Pipelines

Pipeline spill modeling was performed for the Cedar City Operational Segment in order to calculate the worst-case discharge volume and location. Factors considered in the worst case discharge volume calculation included consideration of the pipeline's maximum release time, the maximum shut-down time, the maximum flow rate, and the pipeline drainage volume.

The analysis yielded a worst case discharge of (b) (7)(F) [REDACTED]. The response zone extends from (b) (7)(F) [REDACTED], so the worst case discharge for the Cedar City Operational Segment will occur between (b) (7)(F) [REDACTED].

#### Tank T-389

Transmix storage and breakout tank T-389 is the largest DOT-regulated feature located within the Cedar City Terminal. The (b) (7)(F) [REDACTED] ns). Per 49 CFR §194.105(4), the following prevention credits are applicable to T-389:

| Prevention Measure                      | Credit | Applicable? |
|---|--------|-------------|
| Secondary Containment >100%             | 50%    | Yes         |
| Built or Repaired to API Standards      | 10%    | Yes         |
| Overfill Protection Standards           | 5%     | Yes         |
| Testing/Cathodic Protection             | 5%     | Yes         |
| Tertiary Containment/Drainage/Treatment | 5%     | No          |

The total credit claimed for T-389 is 70% of the total capacity. The final discharge amount for T-389 per 49 CFR §194.105(4) is (b) (7)(F) [REDACTED].

#### Final Worst Case Discharge Volume

The volume of the worst case discharge from the UNEV pipeline between (b) (7)(F) [REDACTED] is greater than the volume from the largest transportation-related breakout tank. The worst case discharge for the Cedar City Operational Segment is (b) (7)(F) [REDACTED] of gasoline or diesel.

Pipeline appurtenances in the vicinity of the worst case discharge that may be used to stop product flow include the following (nearest block valves in **bold**):

(b) (7)(F) [REDACTED]

### B.5.6.4 Vulnerability Analysis

A vulnerability analysis of pipelines within the Cedar City Operational Segment has been performed, identifying environmentally sensitive areas within one mile of the pipeline and in or adjacent to navigable waters, and drinking water sources within five miles of the pipeline. Detailed construction drawings of the Cedar City Operational Segment are located at the Cedar City Terminal and from the UNEV Integrity Management Department.

No environmentally sensitive areas were identified within one mile of the pipelines within the Cedar City Operational Segment.

No critical habitats for threatened or endangered species are located within one mile of the Cedar City Operational Segment. Refer to Appendix E of this FSP for Federally-listed and State-listed threatened and endangered species that may be present within the Cedar City Operational Segment.

Public drinking water wells were identified within 5 miles of the Cedar City Operational Segment, but a release is not expected to affect these receptors due to the topography of the area. The line sections within the Cedar City Operational Segment are not expected to cause significant and substantial harm to the environment due to these features.

### B.5.7 Response Resources

In addition to on-site response equipment and personnel, UNEV can make use of local contractors and off-site UNEV equipment and personnel when responding to a release of product. UNEV maintains a current service contract with H2O OSRO, Inc. These contracts are located in the Artesia, New Mexico headquarters office. The specified response resources are available in case of the discharge scenarios listed below.

Equipment and personnel for response activities can be available on location within five hours of notification. UNEV, the OSRO, and additional contract personnel can be available to maintain seven days of operational support. Crews will be rotated every eight hours in order to maintain 24-hour cleanup operations. The QI or Alternate QI will determine the response activities involving crew rotation, and the level of spill response required. Response resources will be available per the response time requirements listed in 49 CFR §194.115(b). UNEV personnel, area contractors, and H2O OSRO, Inc. personnel from the Las Vegas, Nevada location will handle the initial response within 12 hours per the Tier I response resources requirement. Additional personnel, equipment and supplies can be available from other H2O OSRO, Inc. locations within 36 hours per the Tier II response resources requirement. All equipment and personnel listed to contain a worst case discharge are available within 60 hours of discovery per the Tier III response resources requirement.

Specific response resources for the worst-case discharge are listed in Section B.5.3.

### B.5.8 Discharge Scenarios

The following sections describe general actions to be taken to respond to a release from DOT-regulated facilities.

#### B.5.8.1 Minor Spill Scenario (2,100 gallons [50 bbls] or less)

Example scenario: A small leak is discovered during a routine inspection of the pipeline. The leak is discovered and stopped before a significant amount of product has spilled.

- Stop product flow
- Call QI who will activate on-site personnel
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- Repair equipment
- Remove free product with vacuum truck
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

#### B.5.8.2 Medium Spill Scenario (2,100 - 36,000 gallons [50 – 857 bbls])

Example scenario: A piping failure occurs in the pipeline area of the Cedar City Terminal during a transfer operation. The leak is discovered and measures are taken to stop product flow.

- Stop product flow
- Call QI who will activate on-site personnel, members of Spill Response Team, and external resources, as needed
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
  - Off-site UNEV equipment and personnel
  - H2O OSRO, Inc.
- Begin containment by diking area of spill
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- QI will call local contractor and request earthmoving equipment, as needed
- Remove free product with vacuum trucks
- Begin by using on-site equipment; call for additional resources as needed
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

#### B.5.8.3 Worst Case Discharge Scenario (b) (7)(F)

Example scenario: A pipeline ruptures in a remote area. Discharge detection equipment identifies the loss of product in the pipeline and actions are taken to stop flow of product.

- Stop product flow
- Call QI who will activate on-site personnel, Spill Response Team, OSRO, LEPC, and local contractors, as needed
- Use response resources from the following sources:
  - On-site equipment and personnel
  - Local contractors
  - Off-site UNEV equipment and personnel
  - H2O OSRO, Inc.
  - SERC – (can provide support through the Area Committee, Local Response Team, Fire Marshall, and LEPCs)
- Begin containment by diking area of spill
- QI will ensure all personnel follow safety procedures
- QI will follow notification procedures
- QI will call other resources as needed
- QI will activate the spill management Incident Command Structure (ICS)
- Remove free product with vacuum trucks
- QI will ensure sorbents, boom, vacuum trucks, pumps, skimmers, etc. are available at the site in the event spill reaches a surface water feature
- Spill Response Team and contractor personnel will keep spill diverted from environmentally sensitive areas
- Depending on hazardous substance evaluation determine best treatment method, begin remediation on site or remove to an approved site

## B.5.9 Response Strategies

Detailed descriptions of specific response techniques that may be used to respond to a release of oil to the environment are provided in Appendix F of this FSP.

### B.5.9.1 General Response Strategies (Covering all Types of Spills)

#### First Response to a Spill

Anyone observing a spill should immediately take action or contact the necessary qualified person to take emergency action to stop flow at the source safely. Examples of such action are:

- Stop necessary pumps.
- Close block valves to stop line leaks.
- Stop fuel pumps to minimize leakage from fuel lines.

Upon notification of a spill, the QI will assume command and take control of the response to the incident and will initiate mitigating action and ensure that appropriate government agencies are notified.

#### Preventing Fire and Explosion

Fire and explosion are potential dangers during petroleum product spills. Although flammability varies dramatically with the type of spilled product and the circumstances of the spill, it is essential that all reasonable steps be taken, as soon as possible, to minimize the chance of accidental ignition of the spilled product(s). Examples of such steps are:

- Extinguish open flames, such as welding torches, immediately.
- Cease all operations involving arc welders, grinders, and other sources of sparks.
- Cease all operations that vent oxygen or enriched oxygen mixtures.
- Shut off electric circuits that might create a fire hazard, if possible. This includes rectifiers. Under some circumstances, even a simple switch or electric motor can cause a dangerous spark. Remember that fans, blowers, electric lights, and electric pumps all have switches and/or electric motors.
- Extinguish smoking materials.

#### Removal of Spilled Product

Physical removal of the product is the preferred action in almost all cases. Containment and recovery should be attempted. Spills remaining within the confines of the facility and not reaching the water will be cleaned up using materials such as vacuum trucks, backhoes, and sorbents to contain and pick up any spilled product. Oil soaked absorbents, and other contaminated debris will be disposed of at an approved site.

### B.5.9.2 Specific Response Strategies

The specific strategies taken to control, contain, and clean up a spill will vary with the type of product spilled, the location, the amount, and various other factors. Spill containment strategies initiated vary depending on the location of the spill and the affected environment. Environmentally sensitive areas and endangered/threatened species have been identified in the FSPs. Additional precautions will be taken, as necessary, during the response containment and recovery of spills to protect sensitive species. Potential wetlands are listed in “Basis for Operator’s Determination of Significant and Substantial Harm” for each response zone.

All spills are subject to the Natural Resources Damage Assessment (NRDA). This assessment is implemented by federal and state agencies. The NRDA determines the total economic and environmental impacts of the spill. The NRDA process determines final restoration. In the event NRDA is implemented, the company will follow all criteria as dictated by the assessment.

**Spills Confined to Land**

- If the spill is contained on land and is threatening groundwater, drainage, or populated areas and can be contained or diverted by using heavy equipment, then dispatch heavy equipment and vacuum trucks to divert, contain, and clean up the spill. If it cannot be contained or diverted by using heavy equipment, then dispatch manpower to contain and clean up.
- If the spill is contained on land and not threatening groundwater, drainage, or populated areas, then contain and clean up.

**Spills Threatening or Entering Navigable Waters**

If the spill has not reached navigable waters, then divert, contain, and clean up. If the spill is threatening to enter or has entered navigable waters, then dispatch boom and heavy equipment to stop flow from spreading. Use skimmers, vacuum trucks, and sorbents to clean up.

**Cleanup Key for Shallow Waters and Shorelines**

- Deploy boom, skimmers, vacuum trucks, pumps, absorbents, transport trucks, and personnel to begin containment and cleanup. Place boom downstream of spill. Utilize vacuum trucks, pumps, skimmers, and sorbents to remove contaminated water. Continue procedure until analysis determines water to be at pre-spill state. Contaminated water will be pumped into transport trucks and transported to a treatment facility with agency approval.
- If 1) the substrata type is sand, gravel, cobble, mud flat, or mud bank; 2) there is medium to high levels of contamination; and 3) the shoreline sediment can be removed without causing erosion of beaches; then mechanized cleaning techniques may be used. If shoreline sediment removal would cause erosion of beaches but sediment could be replaced if removed, then mechanized cleaning techniques may be used. If the sediment cannot be replaced or removed, then manual recovery will be used.
- If the substrata type is boulder, rock cliff, rock bench, or man-made structures, then methods that will be used for cleanup are high or low temperature high pressure flushing (determined by presence or non-presence of living animals and algae), manual scraping, steam cleaning, or sandblasting. For large pools of oil on flat surfaces, vacuum trucks and sorbents will be used.

## **B.6.0 Federal, State, and Local Agency Information**

The Cedar City Operational Segment is located within Millard, Beaver, and Iron Counties, Utah and is subject to applicable Federal, State, and local regulations. Refer to Section B.2.1 for contact information applicable to the Cedar City Operational Segment.

## B.7.0 Training Procedures

### B.7.1 General Employee Training

All personnel are required to complete internet-based training courses that cover hazard response procedures, hazardous material recognition and evaluation including instruction on the United States DOT Emergency Response Guidebook, emergency preparedness, hazardous material characteristics, use of respirators, and use of firefighting equipment. These courses are customized to UNEV transportation facilities. To complete a course successfully, personnel must pass an exam at the end of each course with a minimum score of 80%. Personnel are required to take part in ongoing training. Personnel are required annually to take part in field exercises using proper air respirator techniques. In addition, personnel take part in firefighting training and other specialized training courses.

Each new employee is required to undergo on the job training under a trained supervisor. This training includes job-specific training; instruction in hazards and safety issues related to the job; normal and abnormal situations; emergency procedures; facility malfunctions and appropriate corrective actions; and instruction in controlling any discharge to minimize the potential for fire, explosion, toxicity or environmental damage. Annual evaluations are made of the training program to ensure that personnel and supervisors maintain a thorough knowledge of any updates or revisions in operations. A copy of the plan and training records are maintained in the Artesia, New Mexico headquarters office.

Initial and periodic review discussions on FRP procedures for personnel will take place during tabletop drills and cover the following:

- Their responsibilities under the FRP
- The name and the procedure for contacting the QI on a 24-hour basis
- Operator's 24-hour telephone number

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with reporting personnel and will cover the following:

- The content of the information summary of the FRP
- The toll-free telephone number of the NRC
- The notification process

Initial and periodic review discussions on FRP procedures will be conducted during the tabletop drill with personnel engaged in response activities attending and will cover the following:

- The characteristics and hazards of the oil discharged
- The conditions that are likely to worsen emergencies, including the consequences of facility malfunctions and their appropriate corrective actions
- The steps necessary to control any accidental discharge of oil and to minimize the potential for fire, explosion, toxicity, or environmental damage
- The proper fire-fighting procedures and the use of equipment, fire suits, and breathing apparatus

### B.7.2 HAZWOPER Training (29 CFR §1910.120)

Personnel receive HAZWOPER training and certification by going through the training procedure. Personnel shall receive annual refresher training of sufficient content and duration to maintain their competencies, or shall demonstrate competency in those areas at least yearly.

Non-United States Coast Guard (USCG) classified OSRO responders are required to complete training per 29 CFR §1910.120 and provide documentation of the training to UNEV. The Regulatory Coordinator maintains these records.

## B.7.3 Certification Levels

### B.7.3.1 First Responder Awareness Level

Personnel are certified at the First Responder Awareness level when they complete sufficient training to ensure:

- An understanding of what hazardous substances are, and the risks associated with them in an incident
- An understanding of the potential outcomes associated with an emergency created when hazardous substances are present
- The ability to recognize the presence of hazardous substances in an emergency
- The ability to identify the hazardous substances, if possible
- An understanding of the role of the First Responder Awareness level individual in the ERAP including site security and control and the DOT Emergency Response Guidebook
- The ability to recognize the need for additional resources, and to make appropriate notifications to the communication center

### B.7.3.2 First Responder Operations Level

Personnel are certified at the First Responder Operations level upon completion of at least eight hours of training or have had the sufficient experience to demonstrate objective competency in the following areas in addition to those listed for the First Responder Awareness level:

- Knowledge of the basic hazard and risk assessment techniques
- Know how to select and use proper personal protective equipment provided to the First Responder Operations level
- An understanding of basic hazardous materials terms
- Know how to perform basic control, containment and/or confinement operations within the capabilities of the resources and personal protective equipment available with their unit
- Know how to implement basic decontamination procedures
- An understanding of the relevant standard operating procedures and termination procedures

### B.7.3.3 Hazardous Materials Technician

Personnel are certified at the Hazardous Materials Technician level when they have received at least 24 hours of training equal to the first responder operations level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Know the classification, identification and verification of known and unknown materials by using field survey instruments and equipment
- Be able to function within an assigned role in the ICS
- Know how to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Technician
- Understand hazard and risk assessment techniques
- Be able to perform advance control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available with the unit
- Understand and implement decontamination procedures
- Understand termination procedures
- Understand basic chemical and toxicological terminology and behavior

#### **B.7.3.4 Hazardous Materials Specialist**

Personnel will be certified at the Hazardous Materials Specialist level when they have received at least 24 hours of training equal to the technician level and in addition have competency in the following areas:

- Know how to implement the ERAP
- Understand classification, identification and verification of known and unknown materials by using advanced survey instruments and equipment
- Knowledge of the state emergency response plan
- Be able to select and use proper specialized chemical personal protective equipment provided to the Hazardous Materials Specialist
- Understand in-depth hazard and risk techniques
- Be able to perform specialized control, containment, and/or confinement operations within the capabilities of the resources and personal protective equipment available
- Be able to determine and implement decontamination procedures
- Have the ability to develop a site-specific Health and Safety Plan
- Understand chemical, radiological and toxicological terminology and behavior

#### **B.7.3.5 Incident Commander**

Personnel are certified at the Incident Commander level when they have received at least 24 hours of training equal to the first responder operations level and have competency in the following areas:

- Know and be able to implement the ICS
- Know how to implement the ERAP
- Know and understand the hazards and risks associated with employees working in chemical protective clothing
- Know how to implement the local emergency response plan
- Knowledge of the state emergency response plan and of the Federal Regional Response Team
- Know and understand the importance of decontamination procedures

#### **B.7.4 Training Records Retention**

All training records for UNEV personnel and contractor personnel, as well as records on instructors and/or training organizations that provide training, are kept at the headquarters office in Artesia, New Mexico, and will be maintained as long as individuals are assigned duties under this FSP.

## **B.8.0 Equipment Testing**

### **B.8.1 Response Equipment Testing and Deployment Drill Log**

Response equipment testing and deployment drills are conducted semiannually according to the Response Equipment Testing and Deployment Drill Log included in Appendix B of this FSP. Copies of completed Response Equipment Testing and Deployment Drill Logs will be maintained in Appendix B of this FSP to document the response equipment testing and deployment drills conducted at the Cedar City Operational Segment. Refer to Appendix B of this FSP for the latest logs.

### **B.8.2 Oil Spill Removal Organization (OSRO) Certification**

Certification that response equipment owned by H2O OSRO, Inc. has been inspected and deployment drills have been performed as outlined in the National Preparedness for Response Exercise Program (PREP) guidelines is provided as Appendix G of this FSP.

## B.9.0 Drill Program

### B.9.1 Spill Response Drills

Numerous spill response drills are performed in order to ensure that UNEV personnel are familiar with spill response procedures. The following table describes the types and frequency of drills performed. Drill logs have been included in Appendix D of this FSP. Copies of completed Drill Logs will be maintained in Appendix D of this FSP to document drills conducted at the Cedar City Operational Segment. Refer to Appendix D of this FSP for the latest logs.

| Drill/Exercise                                | Description   |
|---|---|
| Qualified Individual (QI) Notification Drills | Four drills will be conducted annually to exercise communication between facility personnel and QI.   |
| Internal Tabletop Drills                      | Two drills will be conducted annually with at least one every three years involving a worst case discharge scenario that will demonstrate the Response Team's ability to organize, communicate and make strategic decisions regarding population and environmental protection during a drill. The designated Spill Emergency Response Team members and QI for each area will meet to pose this drill.   |
| Operator Equipment Deployment Drills          | Two drills will be conducted annually to demonstrate the deployment and operation of equipment (company-owned and/or OSRO) listed in the plan into its intended operating environment.  |
| Triennial Cycle of Exercising the Entire FRP  | Every three years all components of the entire FRP will be exercised to ensure that all components of the plan function adequately for response to an oil or hazardous spill.   |
| Government Unannounced Drills (External)      | An Area Exercise will be conducted when scheduled by the government. This exercise will include a full test of the FRP with government involvement. The Unified Command System for the area will be tested. A scenario will be developed by the lead plan holder (HEP), in consultation with the exercise design team (comprised of representatives from Federal, State and local Government, environmentalists and industry).The scenario will involve equipment deployment. The extent of equipment deployment shall be determined by the lead plan holder in consultation with the exercise design team. |

### B.9.2 Manned/Unmanned Pipeline Emergency Procedures

In addition to the drills listed above, UNEV personnel take part in initial and ongoing training on the procedures for manned and unmanned pipeline emergencies. Operator personnel have the ability to shut down the line from the Operations Control Center. Operator and field personnel go through practice procedures that prepare them to recognize normal and abnormal situations, what constitutes an emergency, emergency shutdown procedures, and proper notification procedures. All pipeline personnel know where block valves are located in the event manual shutdown is necessary. Manned/unmanned pipeline emergency procedures are conducted quarterly.

### **B.9.3 Drill Program Responsibility, Implementation, and Recordkeeping**

The Regulatory and Environmental, Health, and Safety Divisions have responsibility for the drill program implementation, execution, monitoring, and recordkeeping. Documentation and records of drills are kept at the office in Artesia, New Mexico for three years and are available to government agencies. Post-drill and post-incident evaluations are completed following the drill or incident. The Regulatory Division incorporates lessons learned and agency recommendations into subsequent FRP revisions.

## **B.10.0 Diagrams**

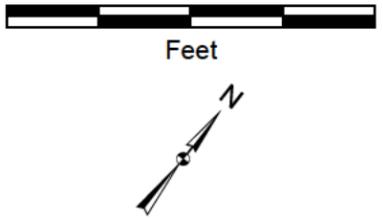
### **B.10.1 Cedar City Terminal Diagrams**

Diagrams for the Cedar City Terminal are provided as Figures 1 through 3, as described in Part A of the FSP.

### **B.10.2 Pipeline Location Diagram**

Pipeline Location Diagrams depicting the locations of pipelines and block valves within the Cedar City Operational Segment are provided as Figures 4A and 4B.

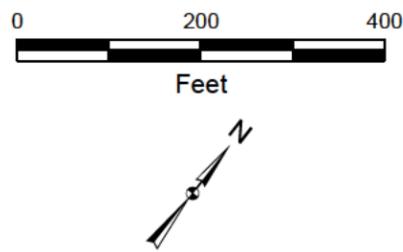
|  |  |  |  |   |  |  |  |
|--|--|--|--|---|--|--|--|
| <b>Legend</b><br> Above-Ground Piping<br> Tanks and Oil-Filled Equipment<br> Secondary Containment<br> Structures and Other Features |  |  Facility Roads<br> Fence<br> Gates |  | <br>Feet<br>1 inch = 250 feet<br> |  | <b>SITE PLAN</b><br>UNEV PIPELINE, LLC<br>CEDAR CITY TERMINAL<br>CEDAR CITY, IRON COUNTY, UT |  |
|  |  |  |  | PROJECT NUMBER: 195102    FILE NAME: 195102-1   |  |  |  |
|  |  |  |  | AUTHOR: SMAXWELL    DATE: 7/31/2013   |  |  |  |
|  |  |   |  | 505 E. HUNTLAND DR.<br>SUITE 250<br>AUSTIN, TX 78752<br>(512) 329-6080  |  |  |  |
|  |  |  |  | <b>FIGURE 1</b>   |  |  |  |

|  |  |  |  |  |                        |                     |                 |                 |
|--|--|--|--|--|------------------------|---------------------|-----------------|-----------------|
| <ul style="list-style-type: none"> <li> Above-Ground Piping</li> <li> Tanks and Oil-Filled Equipment</li> <li> Secondary Containment</li> <li> Structures and Other Features</li> <li> Facility Roads</li> </ul> | <ul style="list-style-type: none"> <li> Fence</li> <li> Gates</li> <li> Drainage Flow Direction</li> <li> Fire Hydrant</li> <li> Foam Tote</li> </ul> |  <p>Feet</p> | <p><b>SITE DRAINAGE PLAN</b></p> <p>UNEV PIPELINE, LLC<br/>CEDAR CITY TERMINAL<br/>CEDAR CITY, IRON COUNTY, UT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">PROJECT NUMBER: 195102</td> <td style="width: 50%;">FILE NAME: 195102-2</td> </tr> <tr> <td>AUTHOR: SMAWELL</td> <td>DATE: 7/31/2013</td> </tr> </table> <div style="display: flex; justify-content: space-between; align-items: center;"> <div data-bbox="1300 2968 1532 3045">  </div> <div data-bbox="1572 2968 1743 3045" style="font-size: small;"> <p>505 E. HUNTLAND DR.<br/>SUITE 250<br/>AUSTIN, TX 78752<br/>(512) 329-6080</p> </div> <div data-bbox="1824 2952 1955 3045" style="text-align: center;"> <p>FIGURE<br/>2</p> </div> </div> |  | PROJECT NUMBER: 195102 | FILE NAME: 195102-2 | AUTHOR: SMAWELL | DATE: 7/31/2013 |
| PROJECT NUMBER: 195102   | FILE NAME: 195102-2  |  |  |  |                        |                     |                 |                 |
| AUTHOR: SMAWELL  | DATE: 7/31/2013  |  |  |  |                        |                     |                 |                 |

(b) (7)(F)

**Legend**

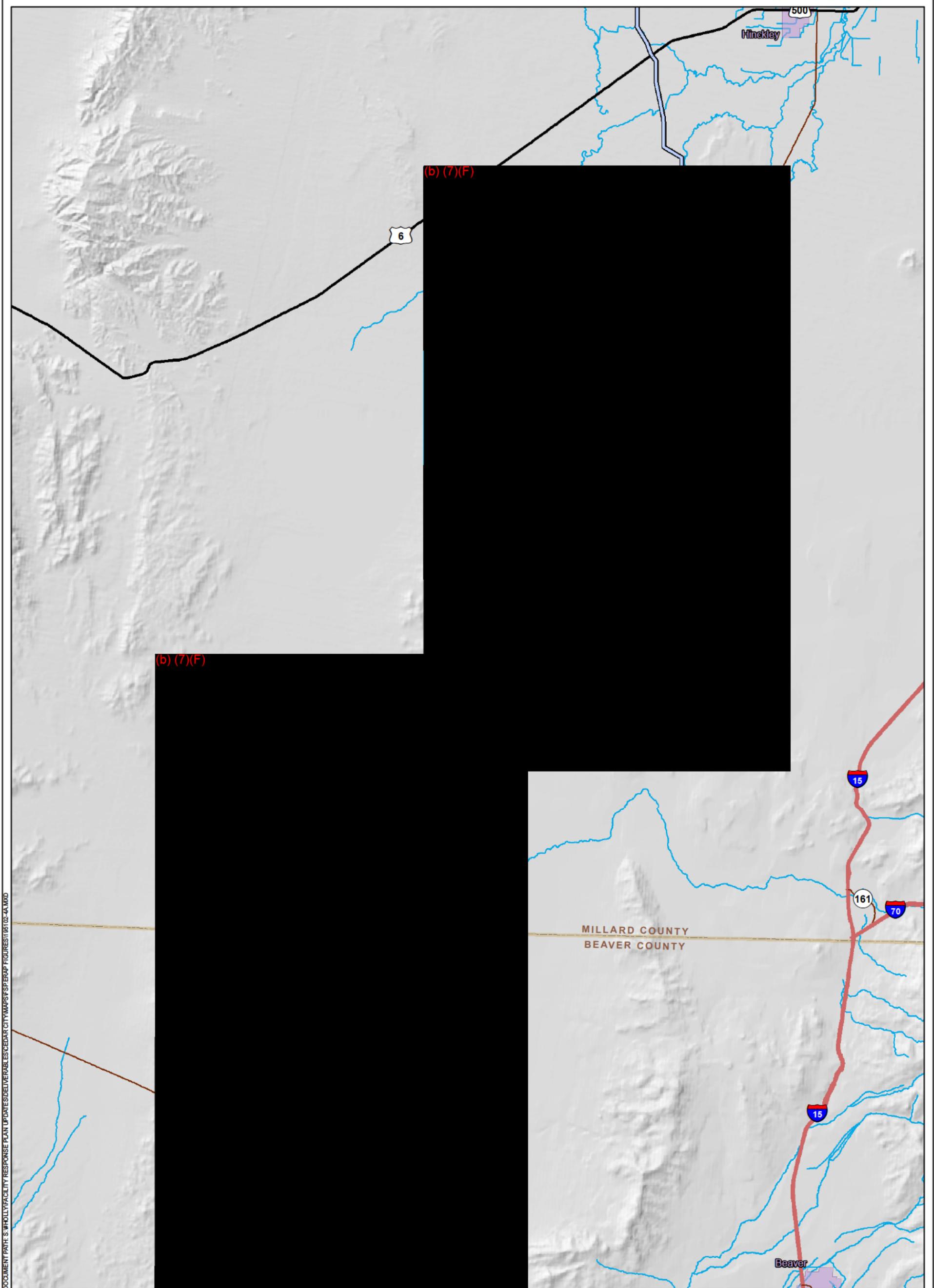
-  Above-Ground Piping
-  Tanks and Oil-Filled Equipment
-  Secondary Containment
-  Structures and Other Features
-  Facility Roads
-  Fence
-  Gates
-  Evacuation Route
-  Assembly Point



**SITE EVACUATION PLAN**

UNEV PIPELINE, LLC  
CEDAR CITY TERMINAL  
CEDAR CITY, IRON COUNTY, UT

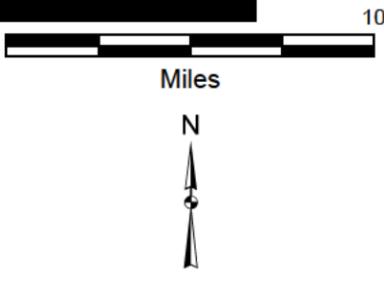
|   |  |
|---|--|
| PROJECT NUMBER: 195102  | FILE NAME: 195102-3  |
| AUTHOR: SMAWELL   | DATE: 8/9/2013   |
|  | 505 E. HUNTLAND DR.<br>SUITE 250<br>AUSTIN, TX 78752<br>(512) 329-6080 |
|   | <b>FIGURE<br/>3</b>  |



DOCUMENT PATH: S:\HOLLYFACILITY RESPONSE PLAN UPDATES\DELIVERABLES\CEDAR CITY\MAPS\FSP\ERAP FIGURES\195102-4A.MXD

**Legend**

-  Cedar City Terminal
-  Block Valve
-  Mile Marker (10-Mile Increments)
-  Cedar City Operational Segment
-  HEP Pipeline
-  Interstate Highway
-  US Highway
-  State Highway
-  Surface Water Feature



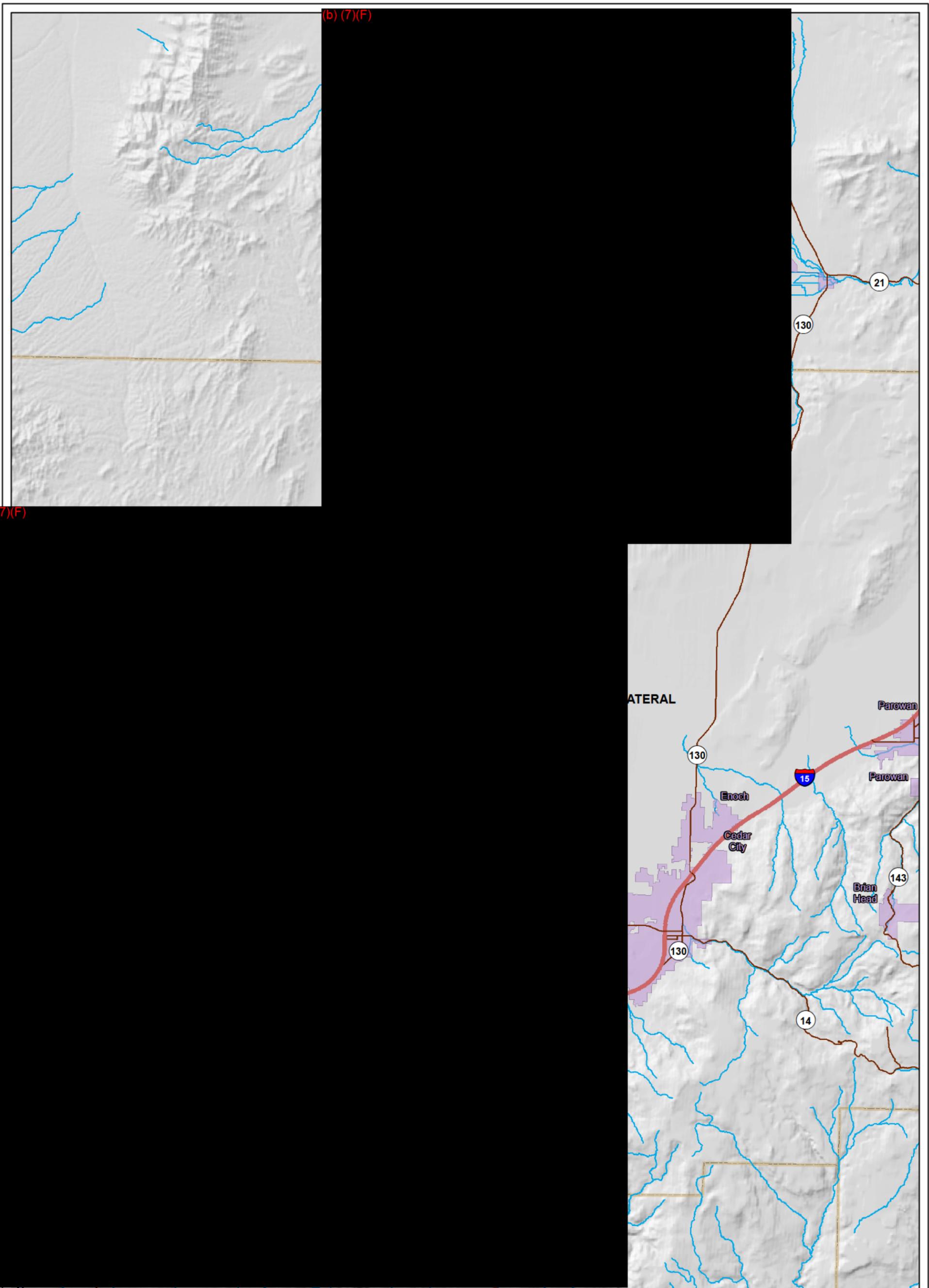
**PIPELINE LOCATION DIAGRAM**

UNEV PIPELINE, LLC  
 CEDAR CITY OPERATIONAL SEGMENT  
 MILLARD, BEAVER, AND IRON COUNTIES, UT

PROJECT NUMBER: 202492      FILE NAME: 195102-4a

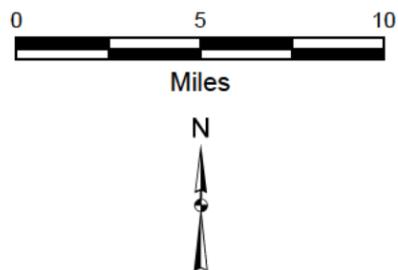
AUTHOR: SMAWELL      DATE: 7/31/2013

|   |  |              |
|---|--|--------------|
|  | 505 E. HUNTLAND DR.<br>SUITE 250<br>AUSTIN, TX 78752<br>(512) 329-6080 | FIGURE<br>4A |
|---|--|--------------|



**Legend**

-  Cedar City Terminal
-  Block Valve
-  Mile Marker (10-Mile Increments)
-  Cedar City Operational Segment
-  HEP Pipeline
-  Interstate Highway
-  US Highway
-  State Highway
-  Surface Water Feature



**PIPELINE LOCATION DIAGRAM**

UNEV PIPELINE, LLC  
 CEDAR CITY OPERATIONAL SEGMENT  
 MILLARD, BEAVER, AND IRON COUNTIES, UT

|   |  |
|---|--|
| PROJECT NUMBER: 202492  | FILE NAME: 195102-4b   |
| AUTHOR: SMAWELL   | DATE: 7/31/2013  |
|  | 505 E. HUNTLAND DR.<br>SUITE 250<br>AUSTIN, TX 78752<br>(512) 329-6080 |
|   | <b>FIGURE<br/>4B</b>   |

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
*UNEV Pipeline, LLC*

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**Appendix A:**  
**Spill Response Form**

**SPILL RESPONSE FORM****Immediate Response Actions**

- Evaluate if an evacuation is needed.
- Prevent flame or spark and do not operate a cell phone.
- If it is safe to do so, extinguish any flames.
- If it is safe to do so, move quickly to stop the discharge by closing any open valves or shutting off pumps, as necessary.
- If it is safe to do so, eliminate any potential ignitions sources (motors or electrical circuits).
- If there are significant injuries notify the local 911 and Company Safety Representative.
- Alert the Control Center (1-877-748-4464) and your Supervisor immediately of the release and system involved within 30 Minutes.

**Operational Response Actions**

- Seek assistance from other HEP personnel.
- Dike flow path to limit the downhill flow.
- Place Sorbents, Pads and Booms, as necessary.
- Call for a Vacuum Truck to remove fluids, as directed by your Supervisor.
- Call for Excavation Equipment, as directed by your Supervisor.
- Outline impact area with marking paint. Remove as much impacted soil as possible and place on plastic.
- Use safety tape, cones, fencing, or barriers to secure excavation.

**1. Reporter Information**

Reporter's Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Position: \_\_\_\_\_

Phone Numbers: Day (\_\_\_\_) \_\_\_\_\_ – \_\_\_\_\_ Evening (\_\_\_\_) \_\_\_\_\_ – \_\_\_\_\_

Company: \_\_\_\_\_

Organization Type: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**2. Incident Description**

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ AM/PM

Weather Conditions: \_\_\_\_\_

Incident Address/Location: \_\_\_\_\_

Nearest City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Distance from City: \_\_\_\_\_ Units of Measure: \_\_\_\_\_ Direction from City: \_\_\_\_\_

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Borough: \_\_\_\_\_

**If tank**, Container Type: \_\_\_\_\_

Tank Oil Storage Capacity: \_\_\_\_\_ Units of Measure: \_\_\_\_\_

Facility Oil Storage Capacity: \_\_\_\_\_ Units of Measure: \_\_\_\_\_

**If pipeline**, Name of Pipeline: \_\_\_\_\_

Location (Valve/Sump/Line/Tank/Mile Post): \_\_\_\_\_

Latitude: \_\_\_\_\_ Degrees \_\_\_\_\_ Minutes \_\_\_\_\_ Seconds

Longitude: \_\_\_\_\_ Degrees \_\_\_\_\_ Minutes \_\_\_\_\_ Seconds

Were Materials Discharged? \_\_\_\_\_ (Y/N) Confidential? \_\_\_\_\_ (Y/N)

Source and/or Cause of Incident:

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### 3. Material

| CHRIS Code | Discharged Quantity | Unit of Measure | Material Discharged to Water? | Quantity to Water | Unit of Measure |
|------------|---------------------|-----------------|-------------------------------|-------------------|-----------------|
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |
|            |                     |                 |                               |                   |                 |

### 4. Response Action

Actions Taken to Correct, Control or Mitigate Incident:

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### 5. Impact

Number of Injuries: \_\_\_\_\_ Number of Deaths: \_\_\_\_\_

Were there Evacuations? \_\_\_\_\_ (Y/N) Number Evacuated: \_\_\_\_\_

Was there any Damage? \_\_\_\_\_ (Y/N)

Damage in Dollars (approximate): \_\_\_\_\_

Medium Affected: \_\_\_\_\_

Description: \_\_\_\_\_

More Information about Medium: \_\_\_\_\_

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**6. Caller Notifications (Refer to ERAP or FSP for required notifications)**

| Entity | Contact Number | Date/Time Contacted |
|--------|----------------|---------------------|
| NRC    | 1-800-424-8802 |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
|        |                |                     |
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**7. Disposal Information**

| Material | Disposal Facility | Location | RCRA Permit/Manifest No. |
|----------|-------------------|----------|--------------------------|
|          |                   |          |                          |
|          |                   |          |                          |
|          |                   |          |                          |
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**8. Additional Information**

Any information about the incident not recorded elsewhere in the report:

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**Appendix B:**  
**Response Equipment Testing**  
**and Deployment Drill Logs**



**Appendix C:**  
**Inspection Forms**



# Tank Berm/Routine Inservice Tank Inspection Checklist

Location:

Date:

**The gauger shall immediately report any discrepancy on a gauge verification when the gauge is off by 3 inches or more.**

**Instructions: Mark an X for any noted deficiencies**

**Inspector's Signature:**

TANK ID

**1. CHECK TANK SHELL, ROOF & BOTTOM FOR LEAKS, SPECIFICALLY LOOKING FOR:**

- A. DRIP MARKS
- B. DISCOLORATION OF TANKS
- C. PUDDLES CONTAINING SPILLED OR LEAKED MATERIAL
- D. CORROSION
- E. CRACKS
- F. SHELL DISTORTION, BULGES
- G. HIGH LEVEL ALARM
- H. LOCALIZED DEAD VEGETATION
- I. UNDER BOTTOM LEAKS
- J. VISUAL INSPECTION OF UNDER BOTTOM LEAK DETECTION (IF IT EXISTS)

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**2. CHECK FOUNDATION FOR:**

- A. CRACKS
- B. DISCOLORATION
- C. PUDDLES CONTAINING SPILLED OR LEAKED MATERIAL
- D. SETTLING ON ONE SIDE OF THE TANK WITH RESPECT TO THE OTHER SIDE
- E. GAPS BETWEEN TANK AND FOUNDATION
- F. DAMAGE CAUSED BY VEGETATION ROOTS
- G. BUILDUP OR EROSION OF SOIL
- I. WATER ACCUMULATION AROUND THE TANK

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**3. CHECK PIPING & SHELL CONNECTIONS i.e. NOZZLES, MANWAYS, VALVES, & GROUNDING CONNECTIONS FOR:**

- A. DROPLETS OF STORED MATERIAL
- B. DISCOLORATION
- C. CORROSION
- D. BOWING OF PIPE BETWEEN SUPPORTS
- E. EVIDENCE OF STORED MATERIAL SEEPAGE FROM VALVES OR SEALS
- F. LOCALIZED DEAD VEGETATION
- G. CRACKS

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**4. CHECK LADDERS, STAIRWAYS, PLATFORMS & WALKWAYS FOR:**

- A. CORROSION
- B. BROKEN OR MISSING PARTS, SUPPORTS OR ANCHOR BOLTS
- C. CRACKED, SPALLED, OR DETERIORATED PEDESTALS & FOUNDATIONS

|  |  |  |  |  |  |  |  |  |  |
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**5. DIKE OR BERM SYSTEM**

- A. LEVEL OF PRECIPITATION IN DIKE/AVAILABLE CAPACITY
- B. OPERATION STATUS OF DRAINAGE VALVES -CARSEALED CLOSED
- C. DIKE OR BERM PERMEABILITY / CRACKS IN STATIONARY FIREWALLS
- D. DEBRIS
- E. EROSION
- F. PERMEABILITY OF DIKE FLOOR
- G. LOCATION/STATUS OF PIPE
- H. ACCESS
- I. HOUSEKEEPING

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**6. SECONDARY CONTAINMENT**

- A. CRACKS
- B. DISCOLORATION
- C. PRESENCE OF SPILLED OR LEAKED MATERIAL
- D. CORROSION
- E. VALVE CONDITIONS

|  |  |  |  |  |  |  |  |  |  |
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List detail of deficiencies found and action(s) taken:

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# FACILITY INSPECTION FORM

| DATE:  |                          |                          |                          |          |
|--|--------------------------|--------------------------|--------------------------|----------|
| FACILITY NAME:   |                          |                          |                          |          |
| INSPECTOR NAME/TITLE:  |                          |                          |                          |          |
| Observation Checklist  | Yes                      | No                       | N/A                      | Comments |
| 1. Has a facility inspection been conducted and documented on the Facility Inspection Form once per calendar year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 2. Is the Facility Response Plan updated and located in an accessible location?                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 3. Are Fire Extinguisher Inspection and Test Records complete and current?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 4. Have the annual tank/vessel inspections been conducted?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 5. Have the 5-yr. tank integrity tests been performed?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 6. Are initial O&M Procedure Training Records on location for each employee?                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 7. Are refresher O&M Procedure Training Records on location for each employee?                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 8. Are all required Department of Labor posters prominently displayed?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 9. Is the emergency contact information posted?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 10. Is the sign "Hearing Protection Required" adequately posted where required?                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 11. Are Confined Space signs located on all confined spaces?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 12. Are evacuation routes posted at appropriate locations throughout the facility?                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 13. Are all exits free of obstructions?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 14. Are all doors operable and unlocked?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 15. Are exit routes clearly marked and as indicated on evacuation route poster?                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 16. Are portable ladder rungs and steps corrugated and in good condition to minimize the possibility of slipping?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 17. Are stable footings in place on portable ladders?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 18. Are portable ladders stowed properly so as to not create additional hazards?                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 19. Are ladders in use properly secured with leashes?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 20. Are non-metallic ladders available for electrical work?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 21. Are scaffolds properly guarded with a standard top rail, mid rail, and toe board?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 22. Are working platforms four feet (4') or higher properly guarded?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 23. Are tools inspected and safe to use?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 24. Are locks and tags in place where required?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 25. Is fixed equipment properly grounded?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |



# FACILITY INSPECTION FORM

| DATE:   |                          |                          |                          |          |
|---|--------------------------|--------------------------|--------------------------|----------|
| FACILITY NAME:  |                          |                          |                          |          |
| INSPECTOR NAME/TITLE:   |                          |                          |                          |          |
| Observation Checklist   | Yes                      | No                       | N/A                      | Comments |
| 26. Are cover plates, switches, and outlets in good condition?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 27. Are switches and panels labeled with voltage/ caution warnings?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 28. Are grounded capabilities available at truck loading docks?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 29. Is equipment marked legibly with voltage and manufacturer's marking?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 30. Does facility contain lighting sufficient for the detail/type of work performed?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 31. Does each person required to drive a motor vehicle maintain a current driver's license?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 32. Are all company vehicles maintained in safe operating condition?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 33. Are a fire extinguisher and first aid kit available and maintained in company vehicle?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 34. Are storage cabinets painted yellow, fire resistant and labeled "Flammable – Keep Fire Away"?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 35. Do tanks and drums have proper grounding and labels?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 36. Are tanks and drums adequately supported?   |                          |                          |                          |          |
| 37. Are hazardous material containers properly labeled and stored?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 38. Are compressed gas cylinders stored upright, away from heat sources, stairs, elevators, and egress routes? Are they secured and capped?       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 39. Is spill containment adequate to contain contents of largest container?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 40. Are there separate waste containers for oily rags, smoking materials, dust, flammable scrap, chemical waste, etc.?                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 41. Is chemical waste properly labeled and coded for disposal off-site?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 42. Is proper footwear worn when working in areas where there is a danger of foot injury due to falling or rolling objects?                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 43. Is hand protection used to protect employees' hands from skin absorption of harmful substances, severe cuts and harmful temperature extremes? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 44. Is flame-retardant clothing provided and worn in required areas?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 45. Are compressed gas cylinders properly secured?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 46. Are welding cables in good condition, not frayed and not cracked?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 47. Is the truck loading area properly marked and yellow lined?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |



HOLLY ENERGY PARTNERS

# FACILITY INSPECTION FORM

| DATE:  |                          |                          |                          |          |
|--|--------------------------|--------------------------|--------------------------|----------|
| FACILITY NAME:   |                          |                          |                          |          |
| INSPECTOR NAME/TITLE:  |                          |                          |                          |          |
| Observation Checklist  | Yes                      | No                       | N/A                      | Comments |
| 48. Are the emergency alarm horns properly located and operational?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 49. Are the sidewalks and drives in good condition?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 50. Is the facility security fence in good condition?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 51. Does the facility have an air permit?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 52. Is the air permit posted?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 53. Do the tanks contain the products specified in the air permit?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 54. Are control equipment shutdowns communicated to the Environmental Specialist and applicable regulatory agency? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 55. Does the facility have an AST/UST permit?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 56. Is the AST/UST permit posted?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 57. Were all spills cleaned up and contained appropriately?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 58. Are welding cables in good condition, not frayed and not cracked?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 59. Are there product stains on the ground?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 60. Are the loading/unloading areas properly contained?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 61. Are empty drums located on site?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 62. Are chemical bottles stored properly?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 63. Are all drains closed to prevent release to water?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 64. Are all tank basin drains closed or the reason documented if open?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 65. Is there proper drainage across the facility?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 66. Are all employees aware of the SPCC Plan?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 67. Are visitors escorted while at the company facility?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 68. Does the facility require Visitor Badges?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 69. Are manned facilities equipped with automated access gates?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 70. Are the locks on buildings, gates, and valves adequate?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |
| 71. Does the facility require all visitors to sign in?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
*UNEV Pipeline, LLC*

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**Appendix D:**  
**Response Drill Logs**









**Appendix E:**  
**Threatened and Endangered Species Information**

**Facility Response Plan – Cedar City Facility Specific Plan**  
**UNEV Pipeline, LLC**

## Threatened and Endangered Species Potentially Present in Beaver County, Utah

The following federally-listed endangered flora or fauna species are listed in Iron County, Utah, and may be present within the worst case discharge planning distance.

| Common Name                            | Scientific Name           | Federal Status   |
|--|---------------------------|------------------|
| California Condor (bird)               | Gymnogyps californianus   | E (Experimental) |
| Yellow-Billed Cuckoo (bird)            | Coccyzus americanus       | C                |
| Greater Sage-Grouse (bird)             | Centrocercus urophasianus | C                |
| Frisco Buckwheat (flowering plant)     | Eriogonum soredium        | C                |
| Ostler's Peppergrass (flowering plant) | Lepidium ostleri          | C                |
| Frisco Clover (flowering plant)        | Trifolium friscanum       | C                |
| Utah Prairie Dog (mammal)              | Cynomys parvidens         | T                |

C: Candidate species, which is under consideration for official listing

T: Threatened species, which is likely to become an endangered species

E: Endangered species, which is in danger of extinction

The following state-listed endangered flora or fauna species are listed in Iron County, Utah.

| Common Name                | Scientific Name            | State Status |
|----------------------------|----------------------------|--------------|
| American White Pelican     | Pelecanus erythrorhynchos  | SPC          |
| Bald Eagle                 | Haliaeetus leucocephalus   | SPC          |
| Big Free-Tailed Bat        | Nyctinomops macrotis       | SPC          |
| Bonneville Cutthroat Trout | Oncorhynchus clarkii utah  | CS           |
| Burrowing Owl              | Athene cucularia           | SPC          |
| Dark Kangaroo Mouse        | Microdipodops megacephalus | SPC          |
| Ferruginous Hawk           | Buteo regalis              | SPC          |
| Fringed Myotis             | Myotis thysanodes          | SPC          |
| Greater Sage-Grouse        | Centrocercus urophasianus  | S-ESA        |
| Hamlin Valley Pyrg         | Pyrgulopsis hamlinensis    | SPC          |
| Kit Fox                    | Vulpes macrotis            | SPC          |
| Least Chub                 | Notichthys phlegethontis   | S-ESA, CS    |
| Long-Billed Curlew         | Numenius americanus        | SPC          |
| Northern Goshawk           | Accipiter gentilis         | CS           |
| Pygmy Rabbit               | Brachylagus idahoensis     | SPC          |
| Short-Eared Owl            | Asio flammeus              | SPC          |
| Southern Leatherside Chub  | Lepidomeda aliciae         | SPC          |
| Spotted Bat                | Euderma maculatum          | SPC          |
| Three-Toed Woodpecker      | Picoides tridactylus       | SPC          |
| Townsend's Big-Eared Bat   | Corynorhinus townsendii    | SPC          |
| Utah Prairie-Dog           | Cynomys parvidens          | S-ESA        |
| Western Toad               | Bufo boreas                | SPC          |

S-ESA: Federally-listed or candidate species under the Endangered Species Act

SPC: Wildlife species of concern

CS: Species receiving special management under a Conservation Agreement in order to preclude the need for Federal listing

**Facility Response Plan – Cedar City Facility Specific Plan**  
**UNEV Pipeline, LLC**

## Threatened and Endangered Species Potentially Present in Iron County, Utah

The following federally-listed endangered flora or fauna species are listed in Iron County, Utah.

| Common Name                           | Scientific Name                   | Federal Status   |
|---------------------------------------|-----------------------------------|------------------|
| California Condor (bird)              | <i>Gymnogyps californianus</i>    | E (Experimental) |
| Yellow-Billed Cuckoo (bird)           | <i>Coccyzus americanus</i>        | C                |
| Greater Sage-Grouse (bird)            | <i>Centrocercus urophasianus</i>  | C                |
| Mexican Spotted Owl (bird)            | <i>Strix occidentalis lucida</i>  | T                |
| Southwestern Willow Flycatcher (bird) | <i>Empidonax traillii extimus</i> | E                |
| Utah Prairie Dog (mammal)             | <i>Cynomys parvidens</i>          | T                |

C: Candidate species, which is under consideration for official listing

T: Threatened species, which is likely to become an endangered species

E: Endangered species, which is in danger of extinction

The following state-listed endangered flora or fauna species are listed in Iron County, Utah.

| Common Name                | Scientific Name                   | State Status |
|----------------------------|-----------------------------------|--------------|
| Arizona Toad               | <i>Bufo microscaphus</i>          | SPC          |
| Bald Eagle                 | <i>Haliaeetus leucocephalus</i>   | SPC          |
| Black Swift                | <i>Cypseloides niger</i>          | SPC          |
| Bonneville Cutthroat Trout | <i>Oncorhynchus clarkii utah</i>  | CS           |
| Brian Head Mountainsnail   | <i>Oreohelix parawanensis</i>     | SPC          |
| Brown (Grizzly) Bear       | <i>Ursus arctos</i>               | S-ESA        |
| Burrowing Owl              | <i>Athene cucularia</i>           | SPC          |
| Dark Kangaroo Mouse        | <i>Microdipodops megacephalus</i> | SPC          |
| Ferruginous Hawk           | <i>Buteo regalis</i>              | SPC          |
| Fringed Myotis             | <i>Myotis thysanodes</i>          | SPC          |
| Greater Sage-Grouse        | <i>Centrocercus urophasianus</i>  | S-ESA        |
| Kit Fox                    | <i>Vulpes macrotis</i>            | SPC          |
| Least Chub                 | <i>Notichthys phlegethontis</i>   | S-ESA, CS    |
| Lewis's Woodpecker         | <i>Melanerpes lewis</i>           | SPC          |
| Long-Billed Curlew         | <i>Numenius americanus</i>        | SPC          |
| Northern Goshawk           | <i>Accipiter gentilis</i>         | CS           |
| Pygmy Rabbit               | <i>Brachylagus idahoensis</i>     | SPC          |
| Short-Eared Owl            | <i>Asio flammeus</i>              | SPC          |
| Southern Leatherside Chub  | <i>Lepidomeda aliciae</i>         | SPC          |
| Spotted Bat                | <i>Euderma maculatum</i>          | SPC          |
| Spotted Owl                | <i>Strix occidentalis</i>         | S-ESA        |
| Three-Toed Woodpecker      | <i>Picoides tridactylus</i>       | SPC          |
| Townsend's Big-Eared bat   | <i>Corynorhinus townsendii</i>    | SPC          |
| Utah Prairie Dog           | <i>Cynomys parvidens</i>          | S-ESA        |
| Yellow-Billed Cuckoo       | <i>Coccyzus americanus</i>        | S-ESA        |

S-ESA: Federally-listed or candidate species under the Endangered Species Act

SPC: Wildlife species of concern

CS: Species receiving special management under a Conservation Agreement in order to preclude the need for Federal listing

**Facility Response Plan – Cedar City Facility Specific Plan**  
**UNEV Pipeline, LLC**

## Threatened and Endangered Species Potentially Present in Millard County, Utah

The following federally-listed endangered flora or fauna species are listed in Iron County, Utah, and may be present within the worst case discharge planning distance.

| Common Name                     | Scientific Name           | Federal Status   |
|---------------------------------|---------------------------|------------------|
| California Condor (bird)        | Gymnogyps californianus   | E (Experimental) |
| Yellow-Billed Cuckoo (bird)     | Coccyzus americanus       | C                |
| Greater Sage-Grouse (bird)      | Centrocercus urophasianus | C                |
| Least Chub (fish)               | lotichthys phlegethontis  | C                |
| Frisco Clover (flowering plant) | Trifolium friscanum       | C                |

C: Candidate species, which is under consideration for official listing

T: Threatened species, which is likely to become an endangered species

E: Endangered species, which is in danger of extinction

The following state-listed endangered flora or fauna species are listed in Iron County, Utah.

| Common Name                | Scientific Name            | State Status |
|----------------------------|----------------------------|--------------|
| American White Pelican     | Pelecanus erythrorhynchos  | SPC          |
| Bald Eagle                 | Haliaeetus leucocephalus   | SPC          |
| Bifid Duct Pyrg            | Pyrgulopsis peculiaris     | SPC          |
| Big Free-Tailed Bat        | Nyctinomops macrotis       | SPC          |
| Bonneville Cutthroat Trout | Oncorhynchus clarkii utah  | CS           |
| Burrowing Owl              | Athene cucularia           | SPC          |
| California Floater         | Anodonta californiensis    | SPC          |
| Cloaked Physa              | Physa megalochlamys        | SPC          |
| Columbia Spotted Frog      | Rana luteiventris          | CS           |
| Dark Kangaroo Mouse        | Microdipodops megacephalus | SPC          |
| Ferruginous Hawk           | Buteo regalis              | SPC          |
| Fringed Myotis             | Myotis thysanodes          | SPC          |
| Greater Sage-Grouse        | Centrocercus urophasianus  | S-ESA        |
| Kit Fox                    | Vulpes macrotis            | SPC          |
| Least Chub                 | lotichthys phlegethontis   | S-ESA, CS    |
| Lewis's Woodpecker         | Melanerpes lewis           | SPC          |
| Long-Billed Curlew         | Numenius americanus        | SPC          |
| Longitudinal Gland Pyrg    | Pyrgulopsis anguina        | SPC          |
| Northern Goshawk           | Accipiter gentilis         | CS           |
| Pygmy Rabbit               | Brachylagus idahoensis     | SPC          |
| Short-Eared Owl            | Asio flammeus              | SPC          |
| Southern Leatherside Chub  | Lepidomeda aliciae         | SPC          |
| Sub-Globose Snake Pyrg     | Pyrgulopsis saxatilis      | SPC          |
| Townsend's Big-Eared Bat   | Corynorhinus townsendii    | SPC          |
| Utah Prairie-Dog           | Cynomys parvidens          | S-ESA        |
| Western Toad               | Bufo boreas                | SPC          |

S-ESA: Federally-listed or candidate species under the Endangered Species Act

SPC: Wildlife species of concern

CS: Species receiving special management under a Conservation Agreement in order to preclude the need for Federal listing

**Appendix F:**  
**Spill Response Techniques**

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
 UNEV Pipeline, LLC

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## Natural Recovery

**Objective:** No attempt is made to remove any stranded oil, when there is no effective method for cleanup or to minimize impact to the environment. Oil is left to degrade naturally.

**Description:** No action is taken, although monitoring of contaminated areas is required.

**Applicable Habitat Types:** All habitat types.

**When To Use:** When natural removal rates are fast, when oiling is light, access is severely restricted or dangerous to cleanup crews, or when cleanup actions will do more harm than natural removal.

**Biological Constraints:** This method may be inappropriate for areas used by high numbers of mobile animals (birds) or endangered species.

**Environmental Effects:** Same as from the oil alone.

**Waste Generation:** None.

## Barriers or Berms

**Objective:** To prevent entry of oil into a sensitive area or to divert oil to a collection area.

**Description:** A physical barrier other than a boom is placed across an area to prevent oil from passing. Barriers can consist of earthen berms or filter fences. When it is necessary for water to pass because of water volume, underflow or overflow dams are used.

**Applicable Habitat Types:** At the mouths of creeks or streams to prevent oil from entering, or to prevent oil from being released from creek into another body of water.

**When To Use:** When the oil threatens sensitive habitats and other barriers are not feasible. To protect sensitive areas when cleaning adjacent shorelines.

**Biological Constraints:** Responders must minimize disturbance to sensitive areas, such as shorebird nesting sites on beaches. Placement of dams and filter fences could cause excessive physical disruptions to the site, particularly in wetlands.

**Environmental Effects:** May disrupt or contaminate sediments and adjacent vegetation. The natural beach or shoreline should be restored (may take weeks to months on gravel beaches).

**Waste Generation:** Sediment barriers will become contaminated on the oil side and filter fence materials will have to be disposed of as oily wastes.

## Physical Herding

**Objective:** To free any oil trapped in debris or vegetation on-water; to direct the movement of floating oil towards containment and recovery devices; or to divert oil away from sensitive areas.

**Description:** Plunging water jets, water or air hoses, and propeller wash can be used to dislodge trapped oil and divert or herd it to containment and recovery areas. May emulsify the oil. Mostly conducted from small boats.

**Applicable Habitat Types:** In nearshore areas where there are little or no currents, in and around manmade structures, in streams where oil is trapped by debris.

**When To Use:** In low-current or stagnant water bodies, to herd oil towards recovery devices. In high current situations to divert floating oil away from sensitive areas, or dislodge oil from debris.

**Biological Constraints:** When used near shore and in shallow water, must be careful to not disrupt bottom sediments or submerged aquatic vegetation.

**Environmental Effects:** May generate high levels of suspended sediments and mix them with the oil, resulting in deposition of contaminated sediments in benthic habitats.

**Waste Generation:** None.

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
*UNEV Pipeline, LLC*

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## Manual Oil Removal or Cleanup

**Objective:** To remove oil with hand tools and manual labor.

**Description:** Removal of surface oil with hands, rakes, shovels, buckets, scrappers, sorbents, pitchforks, etc., and placing in containers. No mechanized equipment is used.

**Applicable Habitat Types:** Can be used on all habitat types.

**When To Use:** Light to moderate oiling conditions for stranded oil or heavy oils that have formed semi-solid to solid masses that can be picked up manually. Also can be used in areas where roosting or birthing animals cannot or should not be disturbed.

**Biological Constraints:** Foot traffic over sensitive areas (wetlands, etc.) should be restricted or prevented. There may be periods when shoreline access should be avoided, such as during bird nesting.

**Environmental Effects:** Minimal, if surface disturbance by crew movement and waste generation is controlled.

**Waste Generation:** May generate significant quantities of oil mixed with sediment which must be properly disposed of or treated. Decontamination of hand tools may produce oily wastewater that must be treated properly. Worker personnel protective gear is usually disposed of daily or decontaminated and the resulting oily wastewater treated.

## Mechanical Oil Removal

**Objective:** To remove oil from shorelines and bottom sediments with mechanical equipment.

**Description:** Oil and oiled sediments are collected and removed using mechanical equipment such as backhoes, graders, bulldozers, dredges, draglines, etc. Requires systems for temporary storage, transportation, and final treatment and disposal.

**Applicable Habitat Types:** On land, wherever surface sediments are both amenable to and accessible to heavy equipment. For submerged oil, used in sheltered areas where oil accumulates. On water, used on viscous to solid oil.

**When To Use:** When large amounts of oiled materials must be removed. Care should be taken to remove sediments only to the depth of oil penetration, which can be difficult when using heavy equipment. Should be used carefully where excessive sediment removal may cause erosion.

**Biological Constraints:** Heavy equipment may be restricted in sensitive habitats (e.g., wetlands, soft substrate) or areas containing endangered species. Will need special permission to use in areas with known cultural resources. Dredging may be prohibited in the areas and note generated by mechanical equipment may also be a constraint.

**Environmental Effects:** The equipment is heavy, with many support personnel required. May be detrimental if excessive sediments are removed without replacement. All organisms in the sediments will be affected, although the need to remove the oil may make this response method the best overall alternative. Resuspension of exposed oil and fine-grained oily sediments can affect adjacent bodies of water.

**Waste Generation:** Can generate significant quantities of contaminated sediment that must be cleaned or landfilled. The amount of waste generated by this cleanup option should be given careful consideration by response planners when reviewing potential environmental impacts of the oily wastes, debris, and residues.

## **Facility Response Plan – Cedar City Terminal Facility Specific Plan**

UNEV Pipeline, LLC

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### Sorbents

**Objective:** To remove surface oil by absorption onto oleophilic (oil-attracting) material placed in water or at the waterline.

**Description:** Sorbent material is placed on the floating oil or water surface to allow it to sorb oil, or alternatively, the material can be used to wipe or dab stranded oil. Forms include sausage boom, pads, rolls, sweeps, snares, and loose granules or particles. These products can be either synthetic or natural substances. Efficiency depends on the capacity of the particular sorbent, energy available for lifting oil off the substrate, and stickiness of the oil. Recovery of all sorbent materials is mandatory.

**Applicable Habitat Types:** Can be used on any habitat or environment type.

**When To Use:** When oil is free-floating close to shore or stranded on shore. The oil must be able to be released from the substrate and absorbed by the sorbent. Often used as a secondary treatment method after gross oil removal and in sensitive areas where access is restricted. Selection of sorbent varies by oil type; heavy oils only coat surfaces, requiring a high surface area to be effective, whereas lighter oils can use sorbent material.

**Biological Constraints:** Access for deploying and retrieving sorbents should not be through soft or sensitive habitats or affect wildlife. Sorbent use should be monitored to prevent overuse and generation of large volumes of waste. Sorbents should not be used in a fashion that would endanger or trap wildlife. Sorbents left in place too long can break apart and present an ingestion hazard to wildlife.

**Environmental Effects:** Physical disturbance of habitat during deployment and retrieval. Improperly deployed or tended sorbent material can crush or smother sensitive substrates.

**Waste Generation:** Sorbents must eventually be collected for proper disposal so care should be taken to select and use sorbents properly, and prevent generation of large amounts of lightly-oiled sorbents. Recycling should be emphasized rather than disposal.

### Vacuum

**Objective:** To remove oil pooled on a shoreline substrate or subtidal sediments.

**Description:** A vacuum unit is attached via a flexible hose to a suction head that recovers free oil. The equipment can range from small, portable units that fill individual 55-gallon drums to large supersuckers that are truck-mounted and can generate enough suction to lift large rocks. Removal rates from substrates can be extremely slow.

**Applicable Habitat Types:** Any accessible habitat type. May be mounted on boats for water-based operations, on trucks driven to the recovery area, or hand-carried to remote sites.

**When To Use:** When oil is stranded on the substrate, concentrated in trenches or trapped in vegetation. Usually requires shoreline access points.

**Biological Constraints:** Special restrictions should be established for areas where foot traffic and equipment may be damaging such as soft substrates. Operations in wetlands need to be very closely monitored, with a site-specific list of restrictions developed to prevent damage to vegetation.

**Environmental Effects:** Minimal, if foot and vehicular traffic is controlled and minimal substrate is damaged or removed.

**Waste Generation:** Collected oil and or oil/water mix will need to be stored temporarily prior to recycling or disposal. Oil may be recyclable; if not, it will require proper disposal. Large amounts of water are often recovered, requiring separation and treatment.

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
 UNEV Pipeline, LLC

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## Debris Removal

**Objective:** To remove contaminated debris from the shoreline or water surface.

**Description:** Manual or mechanical removal of debris from the shore or water surface. Can include cutting and removal of oiled logs.

**Applicable Habitat Types:** Can be used on any habitat or environment type where access is safe.

**When To Use:** When driftwood and debris are heavily contaminated and provide a potential source of chronic oil release. When it may create aesthetic problems, be a source of contamination for other resources in the area, cause clogging problems in the skimmer, or create safety problems for responders. Used in areas of debris accumulation on beaches prior to oiling to minimize the amount of oiled debris to be handled.

**Biological Constraints:** Foot traffic over sensitive areas (wetlands, spawning grounds) needs to be restricted. May be periods when access should be restricted (spawning periods, influx of large numbers of migratory waterbirds).

**Environmental Effects:** Physical disruption of substrate, especially when mechanized equipment must be deployed to recover a large quantity of debris.

**Waste Generation:** Will generate contaminated debris (volume depends on what, and how much, is collected, e.g., logs, brush). Unless there is an approved hazardous waste incinerator that will take oily debris, burning will seldom be allowed, especially on-site burning. However, this option should still be explored, especially for remote locations, with the appropriate state or federal agencies who must give approvals for burning.

## Sediment Reworking/Tilling

**Objective:** To enhance the rate of degradation, by breaking up oily sediments and surface oil deposits, increasing the surface area, and mixing deep subsurface oil layers to the surface.

**Description:** The oiled sediments are roto-tilled, disked, or otherwise mixed using mechanical equipment or manual tools. Along beaches, oiled sediments may also be pushed to the water's edge to enhance natural cleanup by wave activity. The process may be aided with high-volume flushing of gravel.

**Applicable Habitat Types:** On any sedimentary substrate that can support mechanical equipment or foot traffic.

**When To Use:** On sand to gravel beaches with subsurface oil, where sediment removal is not feasible (due to erosion or disposal problems). On sand beaches where the sediment is stained or lightly oiled. Appropriate where oil is stranded above normal high waterline.

**Biological Constraints:** Avoid use on shores near sensitive wildlife habitat, such as fish-spawning areas or bird-nesting or concentration areas because of the potential for release of oil and oiled sediments into adjacent bodies of water. Should not be used in shellfish beds.

**Environmental Effects:** Due to the mixing of oil into sediments, this method could further expose organisms that live below the original layer of oil. Repeated mixing over time could delay reestablishing organisms. Refloated oil from treated sites could contaminate adjacent areas.

**Waste Generation:** None.

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
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## Vegetation Cutting or Removal

**Objective:** To remove portions of oiled vegetation or oil trapped in vegetation to prevent oiling of wildlife or secondary oil releases.

**Description:** Oiled vegetation is cut with weed whackers, blades, etc., and picked or raked up and bagged for disposal.

**Applicable Habitat Types:** Habitats composed of vegetation such as wetlands.

**When To Use:** When the risk of oiled vegetation contaminating wildlife is greater than the value of the vegetation that is to be cut, and there is no less-destructive method that removes or reduces the risk to acceptable levels.

**Biological Constraints:** Operations must be strictly monitored to minimize the degree of root destruction and mixing of oil deeper into the sediments. Access in bird-nesting areas should be restricted during nesting seasons. Cutting only the oiled portions of the plants and leaving roots and as much of the stem as possible minimizes impact to plants.

**Environmental Effects:** Vegetation removal will destroy habitat for many animals. Cut areas will have reduced plant growth, and in some instances, plants may be killed. Cutting at the base of the plant stem may allow oil to penetrate into the substrate, causing subsurface contamination, along exposed sections of the shoreline, the vegetation may not recover, resulting in erosion and habitat loss. Trampled areas will recover much more slowly.

**Waste Generation:** Cut portions of oiled plants must be collected and disposed.

## Flooding

**Objective:** To wash oil stranded on the land surface to the water's edge for cleanup.

**Description:** A perforated header pipe or hose is placed above the oiled shore or bank. Ambient-temperature water is pumped through the header pipe at low pressures and flows downslope to the water. On porous sediments, water flows through the substrate, pushing loose oil ahead of it, or floating oil to the water's surface and transporting the oil down the slope for pickup. On saturated fine-grained sediments, the technique becomes more of a flushing of the surface.

**Applicable Habitat Types:** All shoreline types where the equipment can be effectively deployed.

**When To Use:** In heavily oiled areas when the oil is still fluid and adheres loosely to the substrate, and where oil has penetrated into gravel sediments. This method is frequently used with other washing techniques (low-or high-pressure, cold-to-hot-water flushing).

**Biological Constraints:** Special care should be taken to recover oil where nearshore habitats contain rich biological communities. Not appropriate for muddy substrates.

**Environmental Effects:** Habitat may be physically disturbed by foot traffic during operations and smothered by sediment washed down the slope. Oiled sediment may be transported to shallow nearshore areas, contaminating them and burying benthic organisms.

**Waste Generation:** Depends on the effectiveness of the collection method.

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
*UNEV Pipeline, LLC*

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## Low Pressure, Ambient Water Flushing

**Objective:** To remove fluid oil that has adhered to the substrate or man-made structures, pooled on the surface, or become trapped in vegetation.

**Description:** Ambient-temperature water is sprayed at low pressures (<10 psi), usually from hand-held hoses, to lift oil from the substrate and direct it to the water's edge for recovery by skimmers, vacuum, or sorbents. Can be used with a flooding system to prevent released oil from re-adhering to the substrate down-stream of the treatment area.

**Applicable Habitat Types:** On substrates, and solid man-made structures, where the oil is still fluid. In wetlands and along vegetated banks where oil is trapped in vegetation.

**When To Use:** Where fluid oil is stranded onshore or floating on shallow areas.

**Biological Constraints:** May need to restrict use so that the oil-water effluent does not drain across sensitive habitats and mobilized sediments do not affect rich subtidal communities. Use from boats will reduce the need for foot traffic in soft substrates and vegetation. Flushed oil must be recovered to prevent further oiling of adjacent areas.

**Environmental Effects:** If containment methods are not sufficient, oil and oiled sediments may be flushed into other areas. Some trampling of substrate and attached biota will occur.

**Waste Generation:** Depends on the effectiveness of the collection method.

## High Pressure, Ambient Water Flushing

**Objective:** To remove oil that has adhered to hard substrates of man-made structures.

**Description:** Similar to low-pressure flushing except that water pressure is 100-1,000 psi. High-pressure spray will more effectively remove sticky or viscous oils. If low-water volumes are used, sorbents are placed directly below the treatment area to recover oil.

**Applicable Habitat Types:** On bedrock, man-made structures, and gravel substrates.

**When To Use:** When low-pressure flushing is not effective at removing adhered oil that must be removed to prevent continued oil release or for aesthetic reasons. When a directed water jet can remove oil from hard-to-reach sites.

**Biological Constraints:** May have to restrict flushing so that the oil does not drain across sensitive habitats. Flushed oil must be recovered to prevent further oiling of adjacent areas.

**Environmental Effects:** Attached animals and plants in the direct spray zone will be removed. May drive oil deeper into the substrate or erode shorelines of fine sediments if water jet is improperly applied. If containment methods are not sufficient, oil and oiled sediments may be flushed into other areas, some trampling of substrate and attached biota will occur.

**Waste Generation:** Depends on the effectiveness of the collection method.

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*UNEV Pipeline, LLC*

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## Low-Pressure, Hot-Water Flushing

**Objective:** To remove non-fluid oil that has adhered to the substrate or man-made structures, or pooled on the surface.

**Description:** Hot water (90 degrees F up to 170 degrees F) is sprayed with hoses at low pressures (<10 psi) to liquefy and lift oil from the substrate and direct it to the water's edge for recovery by skimmers, vacuums, or sorbents. Used with flooding to prevent released oil from re-adhering to the substrate.

**Applicable Habitat Types:** On bedrock, sand to gravel substrates, and man-made structures.

**When To Use:** Where heavy, but relatively fresh oil is stranded onshore. The oil must be heated above its pour point, so it will flow. Less effective on sticky oils.

**Biological Constraints:** Avoid wetlands so that hot oil/water effluent does not contact sensitive habitats. Operations from boats will help reduce foot traffic in soft substrates and vegetation. Flushed oil must be recovered to prevent further oiling of adjacent areas.

**Environmental Effects:** Hot-water contact can kill all attached animals and plants. If containment methods are not sufficient, oil may be flushed into downstream areas. Some trampling of substrate and biota will occur.

**Waste Generation:** Depends on the effectiveness of the collection method.

## High-Pressure, Hot-Water Flushing

**Objective:** To mobilize weathered and viscous oil strongly adhered to surfaces.

**Description:** Hot water (90 degrees F up to 171 degrees F) is sprayed with hand-held wands at pressures greater than 100 psi. If used without water flooding, this procedure requires immediate use of vacuum or sorbents to recover the oil/water runoff. When used with a flooding system, the oil is flushed to the water surface for collection by skimmers, vacuum, or sorbents.

**Applicable Habitat Types:** Gravel substrates, bedrock, and man-made structures.

**When To Use:** When oil has weathered to the point that warm water at low pressure no longer effectively removes oil. To remove viscous oil from man-made structures for aesthetic reasons.

**Biological Constraints:** Use should be restricted so that the oil/water effluent does not drain across sensitive habitats (damage can result from exposure to oil, oiled sediments, and hot water). Should not be used directly on attached algae. Released oil must be recovered to prevent further oiling of adjacent areas.

**Environmental Effects:** All attached animals and plants in the direct spray zone will be removed or killed, even when used properly. Oiled sediment may be transported to shallow nearshore areas, contaminating them and burying benthic organisms.

**Waste Generation:** Depends on the effectiveness of the collection method.

**Facility Response Plan – Cedar City Terminal Facility Specific Plan**  
 UNEV Pipeline, LLC

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## Steam Cleaning

**Objective:** To remove heavy residual oil from solid substrates or man-made structures.

**Description:** Steam or very hot water (171 degrees F to 212 degrees F is sprayed with hand-held wands at high pressure (2000+ psi. Water volumes are very low compared to flushing methods.

**Applicable Habitat Types:** Man-made structures.

**When To Use:** When heavy oil residue must be removed for aesthetic reasons, and when hot-water flushing is not effective and no living resources are present.

**Biological Constraints:** Not to be used in areas of soft substrates, vegetation, or high biological abundance directly on, or below, the structure.

**Environmental Effects:** Complete destruction of all organisms in the spray zone. Difficult to recover all released oil.

**Waste Generation:** Depends on the effectiveness of the collection method. Usually sorbents are used, generating significant waste volumes.

## Sand Blasting

**Objective:** To remove heavy residual oil from solid substrates or man-made structures.

**Description:** Use of sandblasting equipment to remove oil from the substrate. May include recovery of used (oiled) sand in some cases.

**Applicable Habitat Types:** On heavily oiled bedrock and artificial structures.

**When To Use:** When heavy oil residue must be cleaned for aesthetic reasons and even steam-cleaning is not effective.

**Biological Constraints:** Not to be used in areas of soft substrate, vegetation, or high biological abundance directly below, or adjacent to, the structure.

**Environmental Effects:** Complete destruction of all organisms in the blast zone. Possible smothering of downstream organisms. Unrecovered, used sand will introduce oiled sediments into the adjacent habitat.

**Waste Generation:** Will need to recover and dispose of oiled sand used in blasting.

## Elasticity Modifiers

**Objective:** To impart visco-elastic properties to floating oil, thereby increasing skimming rates.

**Description:** The product is applied as a liquid, slurry, or solid onto the oil. Some mixing is required and is usually provided by the water spray during application. Treated oil is rendered visco-elastic (gelatinous, or semi-solid), but still fluid; there is no chemical change in the oil. The primary purpose is to increase skimmer efficiency removal rates while minimizing water recovery amounts. Increases the efficiency of some skimmers, but may clog other skimmers and pumps.

**Applicable Habitat Types:** On all water environments where oil can be contained for skimming. Not for use near wetlands nor debris because of increased adhesive properties of the treated oil.

**When To Use:** When skimmer efficiency is low. Must be used with booming or other physical containment. Not for use on heavy oils, which are already highly viscous.

**Biological Constraints:** Not suitable for vegetated shores or where there is extensive debris mixed in the oil. Should be avoided when birds or other wildlife cannot be kept away from the treated oil.

**Environmental Effects:** May increase the smothering effect of oil on organisms; therefore, the treatment should be considered only where recovery of the treated oil is likely.

**Waste Generation:** If skimming efficiency is increased, will reduce the volume of water in oil/water collections. Effects on recycling of oil treated with elasticity modifiers is unknown.

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*UNEV Pipeline, LLC*

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## Herding Agents

**Objective:** To collect or herd oil into a smaller area and thicker slick in order to increase recovery. Can be used to herd oil away from sensitive areas or to help keep oil contained when it is necessary to move a boom.

**Description:** These agents, which are insoluble surfactants and have a high spreading pressure, are applied in small quantities (1-2 gallons per lineal mile) to the clean water surrounding the edge of a fresh oil slick. They contain the oil, prevent spreading, but do not hold the spill in place. Hand-held or vessel-mounted systems can be used. Must be applied early in spill, when oil is still fluid.

**Applicable Habitat Types:** On all still water environments.

**When To Use:** Potential use for collection and protection. For collection, used to push slicks out from under man-made structures where it has become trapped, or along shorelines where the equipment is readily accessible for use early in the spill. For protection in low-current areas, use to push slicks away from sensitive resources such as wetlands. Not effective in fast currents or rainfall.

**Biological Constraints:** Not suitable for use in very shallow water or fish-spawning areas.

**Environmental Effects:** Direct acute toxicity to surface-layer organisms possible, though available products vary greatly in their aquatic toxicity.

**Waste Generation:** Same as for manual oil recovery.

## Solidifiers

**Objective:** To change the physical state of spilled oil from a liquid to a solid.

**Description:** Chemical agents (polymers) are applied to oil at rates of 10-45 percent or more, solidifying the oil in minutes to hours. Various broadcast systems, such as leaf blowers, water cannons, or fire suppression system, can be modified to apply the product over large areas. Can be applied to both floating and stranded oil can be placed in booms, pillows, sausages, etc. and used like sorbents, although this type of solidifier application has not been used operationally.

**Applicable Habitat Types:** All water environments, bedrock, sediments, and artificial structures.

**When To Use:** When immobilization of the oil is desired, to prevent refloating from a shoreline, penetration into the substrate, or further spreading. However, the oil may not fully solidify unless the product is mixed well with the oil, and may result in a mix of solid and untreated oil. Generally not used on heavy oil spills which are already viscous.

**Biological Constraints:** Must be able to recover all treated material.

**Environmental Effects:** Available products are insoluble and have very low aquatic toxicity. Unrecovered solidified oil may have longer impact because of slow weathering rates. Physical disturbance of habitat is likely during application and recovery.

**Waste Generation:** If skimming efficiency is increased, solidifiers may reduce the volume of water collected during oil recovery. Effects on recycling oil treated with solidifiers is unknown. Most solidifier producers state that treated oil can pass leachate tests, allowing disposal in landfills.

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*UNEV Pipeline, LLC*

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## Shoreline Cleaning Agents (Surface Washing Agents)

**Objective:** To increase the efficiency of oil removal from contaminated substrates.

**Description:** Special formulations are applied to the substrate, as a presoak and/or flushing solution, to soften or lift weathered or heavy oils from the substrate to enhance flushing methods. The intent is to lower the water temperature and pressure required to mobilize the oil from the substrate during flushing. Some agents will disperse the oil as it washes off the beach, others will not.

**Applicable Habitat Types:** On any habitat where water flooding and flushing procedures are applicable.

**When To Use:** When the oil has weathered to the point where it cannot be removed using ambient water temperatures and low pressures. This approach may be most applicable where flushing effectiveness decreases as the oil weathers. Use of dispersants will require approval from the regulatory authority overseeing response actions.

**Biological Constraints:** When the product does not disperse the oil into the water column, the released oil must be recovered from the water surface. Use may be restricted where suspended sediment concentrations are high, near wetlands, and near sensitive nearshore resources.

**Environmental Effects:** The toxicity and effects on dispersability of treated oil vary widely among products. Selection of a product should consider the toxicity of the product.

**Waste Generation:** Because treated oil must be recovered, waste generation is a function of recovery method, which often includes sorbents.

## Nutrient Enrichment (Biostimulation)

**Objective:** To accelerate the rate of oil hydrocarbon degradation due to natural microbial processes using a form of bioremediation that adds nutrients (generally nitrogen and phosphorus) that stimulate microbial growth.

**Description:** If nutrients are a limiting factor (as measured using the interstitial pore water) in an area where shoreline oiling has occurred, water-soluble nutrients can be applied by a spray irrigation system. Nutrients should be applied daily if the impacted area gets completely submerged by waves and if maximum biostimulation is desired. Using slow-release granular encapsulated nutrients or oleophilic fertilizer (which adheres to the oil residue on the surface) should require less frequent addition, but time-series monitoring of interstitial pore water nutrient levels is needed to ensure target levels are being maintained, especially throughout the depth of the impacted zone.

**Applicable Habitat Types:** Any shoreline habitat type where access is allowed and nutrients are deficient.

**When To Use:** On moderate-to heavily-oiled substrates, after other techniques have been used to remove free product on lightly-oiled shorelines, where other techniques are destructive or ineffective; and where nutrients limit natural attenuation.

**Biological Constraints:** Avoid using ammonia-based fertilizers at highly elevated concentrations because unionized ammonia is toxic to aquatic life. Nitrate is an equally good nitrogen source, minus the toxicity. Sodium tripolyphosphate is a better phosphorus source than orthophosphates because it is more soluble in water. If nutrients are applied properly with adequate monitoring, eutrophication should not be a problem. Only nutrient additives proven to be nontoxic and effective in either the laboratory or the field should be used.

**Environmental Effects:** Detrimental effects to shoreline from foot or vehicle traffic caused by workers applying nutrients (unless nutrients are sprayed from a vessel or aircraft).

**Waste Generation:** None.

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*UNEV Pipeline, LLC*

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## In-situ Burning

**Objective:** To remove oil from the water surface or habitat by burning it in place.

**Description:** Oil floating on the water surface is collected into slicks at least 2-3mm thick and ignited. The oil can be contained in fire-resistant booms, or by natural barriers. On land, oil can be burned when it is on a combustible substrate (vegetation, debris, etc.).

**Applicable Habitat Types:** On most habitats except dry muddy substrates where heat may impact the biological productivity of the habitat. May increase oil penetration into permeable substrates. Use in marshes should be undertaken using special precautions. Not suitable for woody areas.

**When To Use:** On land, where there is heavy oil in sites neither amenable nor accessible to physical removal and it is important to remove the stranded oil quickly. In wetlands and mud habitats, a water layer will minimize impacts to sediments and roots. In-situ burning will require approval from the regulatory authority overseeing response actions.

**Biological Constraints:** The possible effect of smoke on wildlife and populated areas should be evaluated.

**Environmental Effects:** Temperature and air quality effects are likely to be localized and short-lived. Toxicological impact from burn residues have not been evaluated. On-water, burn residues are likely to sink. On land, removal of residues is often necessary for crude.

**Waste Generation:** Any residues remaining after burning will need to be collected and landfilled, but with an efficient burn will be a small fraction of the original oil volume.

**Appendix G:**  
**OSRO Information**

**Facility Response Plan – Cedar City Facility Specific Plan**  
*UNEV Pipeline, LLC*

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H2O OSRO, Inc. Contract



The OSRO logo consists of the letters 'OSRO' in a bold, red, hand-drawn style font. A blue wavy line is positioned below the letters.

P.O. Box 2638  
 Ranchos de Taos, NM 87557  
 575.751.3688: Fax 575.751.1418  
 Las Vegas, NV Office  
 702.396.4148: Fax 702.643.8635  
 Reno/Sparks, NV Office  
 775.351.2237: Fax 775.351.2219  
 Boise, ID Office  
 208.343.7867: Fax 208.322.2670  
 Salt Lake City, UT Office  
 801.355.3499: Fax 801.355.8485  
 Phoenix, AZ Office  
 602.258.3388: Fax 602.258.3266  
 1.866.426.6710 - TOLL FREE  
 www.H2O-OSRO.com  
 Email - H2O@LAPLAZA.ORG

June 2, 2012

Ms. Lori Coupland  
 Sr. Manager-Regulatory, Security and Training  
**HOLLY ENERGY PARTNERS - OPERATING, L.P.**  
 1602 West Main Street  
 Artesia, NM 88210

RE: **H2O OSRO** - HEP Operating, L.P; Pipeline Operations

Dear Ms. Coupland,

As per your request, please find enclosed our signed OSRO Contract for HEP - Operating, LP; Pipeline Operations for you review and consideration.

Please sign and return a signed copy of page 6 of the Emergency Response Agreements for HEP Operating - LP; Pipeline Operations.

If you have any questions, please do not hesitate to call me.

Very truly yours,  
**H2O OSRO, Inc.**

A handwritten signature in blue ink, appearing to read 'C. Oskins'.

Carl J. Oskins  
 President

CJO/me  
 Enclosures:

**OIL, HAZMAT & ENVIRONMENTAL EMERGENCY RESPONSE SERVICES**

# H2O OSRO, Inc. EMERGENCY RESPONSE AGREEMENT

The Parties of this Agreement are:

Owner/Responsible Party:

Holly Energy Partners - Operating, L.P.  
- Pipeline Operations

1602 West Main Street  
Artesia, NM 88210

(575) 748-9743

Contractor:

H2O OSRO, Inc.

P. O. Box 2638  
Ranchos de Taos, NM 87557  
(866) 426-6770  
Fax (575) 751-1418

Owner and Contractor are referred to herein individually as a "Party" and collectively as the "Parties".

**EFFECTIVE DATE:** This Agreement is effective as of June 2, 2012. This agreement shall remain in effect for a period of three (3) years from the date written above.

**TERMINATION:** Either party may cancel this work Agreement by giving the other party thirty (30) days written notice of cancellation. Neither party hereto shall, by the termination of this work Agreement, be relieved of such party's respective liabilities arising from, growing out of, or incident to work performed hereunder prior to the time such work Agreement is terminated.

**PURPOSE:** It is specifically understood that the Contractor intends to commit response resources to the Owner in the event of an emergency spill response, provided that the Contractor has not committed all its resources to another on going spill response. It is further understood that if resources are committed to an on going spill that the response resources may not be immediately available. The types of work contemplated to be done by the Contractor are: Spill Response Control/Cleanup and such other work as is generally performed by the Contractor in its usual line of service.

**EMERGENCY RESPONSE TEAM:** During the term of this Agreement, the Contractor will make available to the Owner a 24-hour Standby Emergency Response Team for the Response, Containment, Cleanup and Transportation of any Oil/Petroleum Products/Hazardous Materials Waste Spills.

**THIS 24-HOUR STANDBY EMERGENCY RESPONSE TEAM SHALL INCLUDE:**

- \* A 24-hour Monitored Toll Free Telephone Contact Number (866-426-6770) for the Initiation of Emergency Spill Response,
- \* A Staff of 24-hour on-call Trained Personnel who can Mobilize to Respond to an Oil/Petroleum Products/Hazardous Materials Waste Spill Incident,
- \* Emergency Response Resources, and
- \* Containment, Recovery, Waste Minimization, Disposal Assistance, and Other Services and equipment within its rating as may be reasonably requested by the Owner or others (including appropriate government agencies) authorized by the Owner to request such services and equipment.

**SCOPE of WORK:** This work Agreement being a time and materials work Agreement, the Contractor will begin each part of the work covered by this work Agreement at such time as Owner initiates a request to respond to a spill of a substance by a direct telephone call to Contractor at (866-426-6770). The person initiating the response shall provide the Contractor with:

- \* His or Her Name and Title,
- \* Owner's Name, Address, and Telephone Number
- \* The Location of the Spill,
- \* The Nature of the Substances Involved in the Spill Incident,
- \* The Approximate Time of the Spill Incident,
- \* Any Other Pertinent Information Relating to Spill (*i.e. size, fire involvement, injuries, etc.*)

Upon receiving the call, the Contractor will use due diligence to mobilize resources within the allotted response time.

**RETAINER FEE:** A fee of \$5,000.00 per Facility and/or Facility Response Plan each year shall be charged to the Owner to cover initial expenses incurred by the Contractor should a response become necessary.

The Retainer Fee is Not Transferable from one year to the next and must be paid on each yearly anniversary of this contract as long as this contract is in effect.

**EMERGENCY RESPONSE SERVICE CHARGES:** In the event emergency response services are requested by or for the Owner from the Contractor, the Owner shall pay the fees and charges of the Contractor as described in H2O OSRD's Response Rate Schedule and any expenses (including subcontractor's charges) incurred by the Contractor in providing such services.

It is understood that the rates and prices set forth in H2O OSRO's Response Rate Schedule are subject to change by the Contractor upon Ten Days written notice to the Owner. Any change shall not apply to work then in progress or on order. The rates to be paid to the Contractor by the Owner shall be for the actual performance of the work and shall be in addition to any charges for materials or supplies furnished by the Contractor for use in the work and any charges for transportation of tools, equipment and labor or time required to transport tools, equipment and labor to and from the job.

INVOICES: The Contractor will submit invoices for services and expenses rendered periodically. These invoices shall be due and payable immediately upon submission to the Owner. Invoices shall clearly describe the project name, services rendered, and any Owner-required data. Invoices must be paid within 15 days of the invoice date and if not paid within such time, shall be subject to a late charge of 1.5% per month on the unpaid balance or the highest rate permitted by law.

Owner agrees to make payment to the Contractor for services rendered in the amounts and the terms specified above, regardless of whether the Owner or another person or entity is legally responsible for remediation or abatement of the environmental conditions involved and, regardless of whether the Owner is entitled to reimbursement for such costs from his or from some other person's entity's insurance carrier.

INDEPENDENT CONTRACTOR RELATIONSHIPS: In the performance of the work herein contemplated the Contractor is an independent contractor, with the authority to control and direct the performance of the details of the work, the Owner being interested only in the results obtained; but the work contemplated herein shall meet the approval of the Owner and be subject to the general right of the Owner to inspect the work to secure the satisfactory completion thereof.

INDEMNIFICATION by the CONTRACTOR: The Contractor agrees to indemnify, defend and hold harmless the Owner from and against any Costs or Claims which the Owner reasonably incurs to the extent such Costs and Claims are caused solely by the gross negligence or willful misconduct of the Contractor in the performance of services under this Agreement.

INDEMNIFICATION by the OWNER: Except as otherwise provided above, the Owner shall indemnify, defend and hold harmless the Contractor, its affiliates, directors, officers, shareholders, employees, agents and subcontractors from and against any costs, liabilities, claims, demands, and causes of action arising from the performance of services under this Agreement.

Owner shall indemnify, defend, and hold Contractor harmless from any claim arising out of Owner's willful misconduct or negligence in connection with the performance of this Agreement, any actual or potential environmental pollution or contamination, including failure to detect or properly evaluate the presence of such substances.

**LIMITATION of LIABILITY:** The Contractor shall not be liable in connection with this Agreement or the services provided under this Agreement for lost profits or any other consequential, incidental or natural resource damages. Owner agrees that the liability of the Contractor and all officers, employees, agents and subcontractors of Contractor for all claims or other proceedings arising from the performance of services under this Agreement, including, but not limited to, Contractor's professional negligence, errors or omissions or other professional acts, shall be limited to actual damages or the fee, whichever is more. Not in any event shall Contractor's liability exceed the insurance coverage carried by the Contractor.

**FORCE MAJEUR:** It is agreed that in the event of either party being rendered unable wholly or in part by force majeure to carry out its obligations under this work Agreement, other than its obligations to make payments of money due hereunder, then on such party's giving notice and full particulars of such force majeure in writing to the other party immediately after the occurrence of the cause relied on, then the obligation of that party giving such notice, so far as it is affected by such force majeure, shall be suspended during the continuance of any inability so caused, but for no longer period and such cause shall, as far as possible, be remedied with all reasonable dispatch. The term "force majeure" as employed herein, shall mean acts of God, strikes, lockouts or other industrial disturbances, acts of the public enemies, wars, blockades, insurrections, riots, epidemics, landslides, lightning, earthquakes, fires, storms, floods, washouts, arrests and restraints of rulers and people, civil disturbances, explosions, inability with reasonable diligence to obtain materials and any other causes not within the reasonable control of the party claiming a suspension which by the exercise of due diligence such party shall not have been able to avoid or overcome. In no event, however, shall the forgoing limit the rights of the Contractor or Owner to terminate this work Agreement of the work as otherwise provided herein.

### **MISCELLANEOUS:**

- 1. COMPLIANCE with LAWS:** The Contractor agrees to comply with all laws, rules, and regulations, Federal, State, and Municipal, which are now, or in the future may become, applicable to the Contractor, the Contractor's business, equipment, sub-contractors and personnel engaged in operations covered by this instrument, or accruing out of the performance of such operations.
- 2. PROPERTY DAMAGE:** With respect to property damage sustained by the Contractor or Owner or their employees, subcontractors, or invitees or employees of such kind and character, the rights and obligations between the parties to this Agreement shall be determined by law, except as otherwise expressly provided within this Agreement.
- 3. BODILY INJURY:** In the event that bodily injury, death or property damage is sustained by a person or entity, the rights and obligations between the parties to this work Agreement shall be determined by law, except as otherwise provided in this work Agreement.

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4. SAFETY of OTHERS: Contractor shall not be responsible for the health and safety of any person other than its employees and representatives, nor shall it have any responsibility for the operations, procedures, or practices of persons or entities other than the Contractor's.

5. RELATION of PARTIES: The Contractor is not the Owner's employee and shall perform all services under this Agreement as an independent contractor.

6. ASSIGNMENT: The Contractor may, without the Owner's consent, enter into any subcontract(s) for the performance of its obligations under this Agreement, as the Contractor deems necessary or desirable.

7. SEVERABILITY: If any provision of this Agreement is invalid or unenforceable, such provision shall be deemed modified to the extent necessary to render such provision valid and enforceable. In any event, the validity or enforceability of any such provision shall not affect any other provision of this Agreement, and this Agreement shall be construed and enforced as if such provision had not been included.

8. AMENDMENT and WAIVER: No amendment or waiver of any provision of this Agreement shall be effective unless in writing and signed by the party against whom it is asserted. No waiver shall constitute a waiver of any subsequent breach or default.

9. ENTIRE AGREEMENT: This is the entire Agreement of the parties and supersedes any other past or present writing, oral conversation, or understanding.

10. EXECUTION: This Agreement may be executed in counterparts, and when each party hereto has signed and delivered at least one such counterpart, each counterpart shall be deemed an original. When taken together with the other signed counterparts, shall constitute one Agreement, which shall be binding upon and effective as to both parties hereto. This Agreement is not binding on either party until both parties have executed and delivered one or more counterparts to the other party.

11. ATTORNEY'S FEES: If either party finds it necessary to enforce this Agreement by litigation, arbitration, or mediation, the successful party shall, in addition to any other right conferred in this Agreement, be entitled to reasonable attorneys' fees and costs as may be awarded by any court, arbitrator, or mediator.

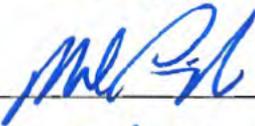
In Witness whereof, the parties have signed this Agreement as of the date first written above.

OWNER:

Company: Holly Energy Partners - Operating, L.P.  
- Pipeline Operations

Name: Mark Cunningham

Title: VP, operations

Signature: 

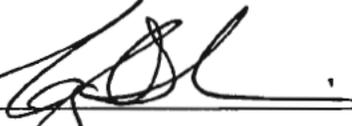
Date: 11 July 2012

CONTRACTOR:

Company: H2O OIL SPILL RESPONSE ORGANIZATION, Inc. (OSRO)

Name: Carl J. Oskins

Title: President

Signature: 

Date: June 2, 2012

In Witness whereof, the parties have signed this Agreement as of the date first written above.

OWNER:

Company: Holly Energy Partners - Operating, L.P.  
- Pipeline Operations

Name: Mark Cunningham

Title: V.P., Operations

Signature: Mark Cunningham

Date: 11 July 2012

CONTRACTOR:

Company: H2O OIL SPILL RESPONSE ORGANIZATION, Inc. (OSRO)

Name: Carl J. Oskins

Title: President

Signature: Carl J. Oskins

Date: June 2, 2012

**Facility Response Plan – Cedar City Facility Specific Plan**  
*UNEV Pipeline, LLC*

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H2O OSRO, Inc. Deployment Certification



**OSRO**

P.O. Box 2638  
Ranchos de Taos, NM 87557  
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Las Vegas, NV Office  
702.396.4148: Fax 702.643.8635  
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602.258.3388: Fax 602.258.3266  
**1.866.426.6770 - TOLL FREE**  
www.H2O-OSRO.com  
Email - H2O@LAPLAZA.ORG

April 3, 2013

Ms. Lori Coupland  
Manager - Regulatory/EHS  
Holly Energy Partners  
P.O. Box 1260  
Artesia, NM 88210

**Re: H2O OSRO, Inc. - 2012 PREP OSRO Equipment & Spill Management Team Deployment Requirements:**

Dear Ms. Coupland,

As per National Preparedness for Response Exercise Program (PREP) Guidelines, August, 2002 - Section 2: Guiding Principles, Exercise Deployment Exercises Section - OSRO Involvement in Equipment Deployment Exercises, page 2-6 and 2-7, H2O Oil Spill Response Organization, Inc., USCG OSRO Classification No. 147 has participated in the following Spill Management Team and Equipment Deployment Exercises and Oil Spill Response Incidents for 2012.

| <u>Date:</u>         | <u>Location:</u> | <u>Type of Exercise:</u>       |
|----------------------|------------------|--------------------------------|
| February 16, 2012    | Shiprock, NM     | Equipment Deployment           |
| February 20-22, 2012 | Cut Bank, MT     | Equipment Deployments          |
| February 29, 2012    | Aneth, UT        | Spill Management Team Tabletop |
| March 8, 2012        | Farmington, NM   | Equipment Deployment           |
| April 17-19, 2012    | Spokane, WA      | Equipment Deployments          |
| April, 27, 2012      | Sparks, NV       | Oil Spill Equipment Deployment |
| May 10, 2012         | Great Falls, MT  | Spill Management Team Tabletop |
| June 19              | Boise, ID        | Equipment Deployment           |
| June 21              | Boise, ID        | Spill Management Team Tabletop |
| July 16-20           | Reno, NV         | Equipment Deployments          |
| July 23-25           | Farmington, NM   | Equipment Deployments          |
| August 15, 2012      | Great Falls, MT  | Equipment Deployment           |
| August 22, 2012      | Boise, ID        | Oil Spill Equipment Deployment |
| August 22-23, 2012   | Lander, WY       | Equipment Deployment           |
| August 23, 2012      | Lander, WY       | Spill Management Team Tabletop |
| August 27-31, 2012   | Casper, WY       | Equipment Deployments          |
| December 5, 2012     | Donner, CA       | Oil Spill Equipment Deployment |
| December 9, 2012     | Turlock, CA      | Oil Spill Equipment Deployment |

**OIL, HAZMAT & ENVIRONMENTAL EMERGENCY RESPONSE SERVICES**

Re: H2O OSRO, Inc. - 2012 PREP OSRO Equipment & Spill Management Team Deployment Requirements:

April 3, 2013

Page 2.

Based upon the above Listed PREP Equipment Deployment Exercises that H2O OSRO, Inc. participated in during 2012, we certify that we have met our PREP Equipment Deployment Exercise Requirement for 2012.



Carl J. Oskins  
President



CJO/me

**OIL, HAZMAT & ENVIRONMENTAL EMERGENCY RESPONSE SERVICES**

**Facility Response Plan – Cedar City Facility Specific Plan**  
*UNEV Pipeline, LLC*

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H2O OSRO, Inc. Equipment Lists

## H2O OSRO EQUIPMENT LISTED BY RESPONSE AREA - LAS VEGAS, NV LAS VEGAS AREA REGION

### OIL SPILL CONTAINMENT BOOM:

River Boom (*American Marine, Inc.*)  
4" flotation x 6" skirt,  
¼" Stainless Steel Top Tension Cable,  
Universeal End Connectors,

**Total of 2,100 foot:**

**"LEO" Bag**

**Boom Deployment  
Rope Pulling System**

**Ancillary Equipment**  
(*Rope, Buoys, Anchors End-Connectors, etc.*)

**Various Quantities**

### OIL RECOVERY SKIMMERS & ANCILLARY EQUIPMENT:

**Oleophilic 2 Drum Oil Skimmer** - 1 each  
*Elastic/American Marine - Model TDS-118*  
*Recovery Capacity - 1,200 Barrels per day.*

**Oleophilic 1 Drum Oil Skimmer** - 1 each  
*Crucial, Inc. - Model 1D19P-24"*  
*Recovery Capacity - 1,900+ Barrels per day*

**Oleophilic Triangular Disc Oil Skimmer**  
21 discs (*Morris Industries*) - 1 each  
*Recovery Capacity - 80+ Barrels per day.*

**Oleophilic Rope Mop Skimmer**  
(*Alden Industries*) - 1 each  
*Recovery Capacity - 300 Barrels per day*

**Oil Spill Response Weir Skimmers - 2 Total:**

Slurp (*Slickbar Products Corp.*) - 1 each  
Manta Ray (*Slickbar Products Corp.*) - 1 each

**Generators** (*Various Wattage*) - 2 each

### COMMUNICATIONS EQUIPMENT:

Handheld Multi-channel Radios - 12 each  
Mobile Repeater for Handheld Radios - 1 each  
Worldwide Satellite Phone - 2 each

**H2O OSRO EQUIPMENT LIST - LAS VEGAS AREA REGION**

Page 2.

**PERSONAL PROTECTIVE SAFETY EQUIPMENT:**

|  |                      |
|--|----------------------|
| SCBA's ( <i>MSA - 4400 lbs.</i> )                            | - 2 each             |
| SAR Units  | - 4 each             |
| LEL Meters   | - 3 each             |
| Multigas Detector ( <i>LEL, O2, CO, H2S</i> )                | - 2 each             |
| Tripods for Confined Space Entry                             | - 2 each             |
| Level A HazMat Suits   | - 4 each             |
| Level B/C HazMat Suites                                      | - 50 each            |
| Air Purifying Respirators ( <i>APR</i> ) - Half Face         | - 50 each            |
| Air Purifying Respirators ( <i>APR</i> ) - Full Face         | - 25 each            |
| Decontamination Kit System                                   | - 1 each             |
| ICS Safety Vests   | - Various Quantities |
| Hard Hats, Safety Glasses/Goggles, Steel Toe Calf-High Boots | - Various Quantities |

**EMERGENCY RESPONSE BOATS:**

|   |          |
|---|----------|
| 14' Aluminum Utility Work Boat<br>with Mercury 4 Cycle Engine | - 1 each |
|---|----------|

**OIL SORBENT MATERIALS:**

|   |                      |
|---|----------------------|
| <u>Sorbent Booms</u><br><i>8" Dia. x 10' Length - 40 ft. to Bag</i> | - Various Quantities |
| <u>Sorbent Pads</u><br><i>18" x 18" x 3/8" Pads - 100 to Bag</i>    | - Various Quantities |

**EMERGENCY RESPONSE UNITS/VEHICLES:**

|  |          |
|--|----------|
| 10 Ton, Emergency Response Vehicles ( <i>fully stocked</i> ) | - 4 each |
| Work Utility Trucks  | - 9 each |
| Mobil Emergency Response Incident Command Center Vehicle     | - 1 each |
| 4 Wheel ATV  | - 1 each |

**PUMPING & CLEANING UNITS:**

|   |                       |          |
|---|-----------------------|----------|
| Gapvax Vacuum Truck                         | 3,300 gallon capacity | - 2 each |
| Peterbilt Vacuum Tanker                     | 5,000 gallon capacity | - 1 each |
| Stainless Steel Vacuum Tanker               | 6,000 gallon capacity | - 1 each |
| Vactor Air Mover ( <i>w/Hydro-Jetters</i> ) | 2,500 gallon capacity | - 1 each |

**H2O OSRO EQUIPMENT LIST - LAS VEGAS AREA REGION**

Page 3.

**PUMPING & CLEANING UNITS: (cont.)**

|   |                       |          |
|---|-----------------------|----------|
| Vacuum Truck  | 6,000 gallon capacity | - 1 each |
| Tanker Trailer  | 3,000 gallon capacity | - 1 each |
| Vacuum Tanker ( <i>Dark Blue</i> )                                      | 3,000 gallon capacity | - 1 each |
| Vacuum Pup Tanker   | 3,000 gallon capacity | - 1 each |
| Pressure Washer w/Lt. Trailer   |                       | - 3 each |
| Pressure Washer/Portable  |                       | - 2 each |
| Steam Cleaner ( <i>trailer mounted with 300 gal. water tank</i> )       |                       | - 2 each |
| 1-4" Centrifugal High Volume Liquid Pipeline ( <i>trailer mounted</i> ) |                       | - 1 each |
| Video Pipeline Inspection Camera & Line Locator                         |                       | - 1 each |
| Portable TPH Vapor Extraction Unit ( <i>trailer mounted</i> )           |                       | - 1 each |

**EXCAVATION EQUIPMENT:**

|   |  |          |
|---|--|----------|
| Cat 330 Excavator ( <i>with thumb</i> )                     |  | - 1 each |
| Cat 312 Excavator ( <i>w/hydraulic breaker Attachment</i> ) |  | - 1 each |
| Case 580 Backhoe ( <i>4WD, enclosed cab</i> )               |  | - 1 each |
| Case Uni-Loader   |  | - 2 each |
| Cat Backhoe ( <i>4WD, enclosed cab</i> )                    |  | - 1 each |
| Case Mini Excavator   |  |          |

**ROLL-OFF, TRANSPORTATION:**

|   |  |           |
|---|--|-----------|
| Kenworth Tractor                                  |  | - 6 each  |
| Freightliner Truck                                |  | - 1 each  |
| Peterbilt Transport Tractor                       |  | - 1 each  |
| Pace Trailer - 24 ft.                             |  | - 1 each  |
| Autocar Dump Truck                                |  | - 1 each  |
| 10 Wheel Roll-Off Truck                           |  | - 1 each  |
| Roll-Off Bins ( <i>18 thru 30 yard capacity</i> ) |  | - 20 each |
| Roll-Off Trailers ( <i>53' Rocket Launcher</i> )  |  | - 4 each  |
| Pup Dump Trailer/Semi-trailer                     |  | - 1 each  |
| Trailer Roll Pup/Roll-off Trailer                 |  | - 1 each  |
| Side Dump Trailers                                |  | - 6 each  |
| Converter Dolly Gear                              |  | - 4 each  |
| Converter Dolly Transport Trailer                 |  | - 1 each  |
| Lt. Deck Trailer - 24 ft.                         |  | - 1 each  |
| Utility Trailer                                   |  | - 1 each  |
| Trailer Flatbed - Lt.                             |  | - 1 each  |
| Equipment Trailer - 24 ft.                        |  | - 1 each  |
| Van Trailer                                       |  | - 1 each  |
| Echo Trailer - Lt.                                |  | - 1 each  |
| Bulk Utility Trailer w/Tank - Lt.                 |  | - 1 each  |
| Water Truck                                       |  | - 1 each  |

**H2O OSRO EQUIPMENT LIST - LAS VEGAS AREA REGION**

Page 4.

**PORTABLE WATER/OIL/WASTE STORAGE CAPACITY**

|   |                 |
|---|-----------------|
| <b>1,000 gallon Portable Poly Tank</b>            | <b>- 5 each</b> |
| <b>3,000 gallons Pup Tank Trailer</b>             | <b>- 1 each</b> |
| <b>24,000 gallon Fixed Oil/Waste Storage Tank</b> | <b>- 4 each</b> |
| <i>(Total Storage Capacity - 98,000 gallons)</i>  |                 |

**PRODUCT TRANSFER PUMPS:**

|                                      |                 |
|--------------------------------------|-----------------|
| <b>2 inch Wilden - HDPE Pump</b>     | <b>- 1 each</b> |
| <b>2 inch Wilden - Poly Pump</b>     | <b>- 1 each</b> |
| <b>2 inch Wilden - Aluminum Pump</b> | <b>- 1 each</b> |

## H2O OSRO EQUIPMENT LISTED BY RESPONSE AREA - RENO, NV

### RENO AREA REGION

#### OIL SPILL CONTAINMENT BOOM:

River Boom (*American Marine, Inc.*)  
 4" flotation x 6" skirt,  
 1/4" Stainless Steel Top Tension Cable,  
 Universeal End Connectors,

Total of 2,000 foot:

"LEO" Bag

Boom Deployment  
 Rope Pulling System

Ancillary Equipment  
 (Rope, Buoys, Anchors End-Connectors, etc.)

Various Quantities

#### OIL RECOVERY SKIMMER:

Oleophilic 1 Drum Oil Skimmer -1 each  
*Crucial, Inc. - Model 1D19P-24"*  
*Recovery Capacity - 1,200 Barrels per day*

Oil Spill Response Weir Skimmers  
*Douglas Engineering - Skimpack* - 1 each

#### EMERGENCY RESPONSE BOATS:

14' Aluminum Utility Work Boat  
 with Honda 4 Cycle Engine - 1 each

#### OIL SORBENT MATERIALS:

Sorbent Booms  
*8" Dia. x 10' Length - 40 ft. to Bag* - Various Quantities

Sorbent Pads  
*18" x 18" x 3/8" Pads - 100 to Bag* - Various Quantities

#### EMERGENCY RESPONSE UNITS/VEHICLES:

Emergency Response Vehicle (*Fully Stocked*) - 1 each  
 Hazardous Materials Response Unit (*w/generators & compressors*) - 1 each  
 Emergency Response Trailer (*fully stocked with exterior lighting*) - 1 each  
 Work Trucks - 2 each  
 32' Mobil Emergency Response Van/Command Post - 1 each

**H2O OSRD EQUIPMENT LIST - RENO AREA REGION**

Page 6.

**PERSONAL PROTECTIVE SAFETY EQUIPMENT:**

|  |                      |
|--|----------------------|
| <i>SCBA's (MSA - 4400 lbs.)</i>                              | - 2 each             |
| SAR Units  | - 4 each             |
| Multigas Detectors ( <i>LEL, O2, CO, H2S</i> )               | - 2 each             |
| Tripods for Confined Space Entry                             | - 2 each             |
| Level "A" HazMat Suits                                       | - 2 each             |
| Level "B/C" HazMat Suites                                    | - 20 each            |
| Air Purifying Respirators ( <i>APR</i> ) - Full Face         | - 20 each            |
| Air Purifying Respirators ( <i>APR</i> ) - Half Face         | - 20 each            |
| Personal Protective Flotation Devices                        | - 60 each            |
| Tripods for Confined Space Entry                             | - 2 each             |
| Decontamination Kit System                                   | - 1 each             |
| ICS Safety Vests   | - Various Quantities |
| Hard Hats, Safety Glasses/Goggles, Steel Toe Calf-High Boots | - Various Quantities |

**PUMPING & CLEANING UNITS:**

|   |          |
|---|----------|
| Stainless Steel Vacuum Tanker ( <i>6,000 gal. capacity, DOT-407/412</i> )         | - 1 each |
| Vacuum Skid/Roll-off Tank ( <i>3,000 gal. capacity, DOT407/412</i> )              | - 2 each |
| Vacuum Tanker ( <i>5,000 gal. capacity, self-contained pump, DOT-407/412</i> )    | - 1 each |
| Tanker Trailer ( <i>3,000 gal. capacity</i> )                                     | - 1 each |
| Steam Cleaner<br>( <i>3,000 psi./3 gpm, trailer mounted 300 gal. water tank</i> ) | - 1 each |
| 24,000 psi Hydro Blaster  | - 1 each |
| Video Pipeline Inspection Camera & Line Locator                                   | - 1 each |

**EXCAVATION EQUIPMENT:**

|   |          |
|---|----------|
| Cat 315 Excavator   | - 1 each |
| Cat Backhoe ( <i>4 WD, enclosed cab</i> )                             | - 1 each |
| Cat Skid Steer Loader - Uni Loader ( <i>w/hydraulic drum turner</i> ) | - 1 each |
| Side Dump Trailers ( <i>20 tons</i> )                                 | - 2 each |

**ROLL-OFF, TRANSPORTATION:**

|  |          |
|--|----------|
| Semi Tractor ( <i>3-axle with hydraulic kits</i> ) | - 2 each |
| 48' Semi-Van Trailer ( <i>with lift gate</i> )     | - 1 each |
| 10 Wheel Roll-Off Truck                            | - 1 each |
| Roll-Off Trailer ( <i>53' Rocket Launcher</i> )    | - 1 each |
| Roll-Off Bins ( <i>18 thru 30 yard capacity</i> )  | - 6 each |

**H2O OSRO EQUIPMENT LIST - RENO AREA REGION**

Page 7.

**PORTABLE OIL/WASTE STORAGE CAPACITY:**

1,000 gallon Portable Poly Tanks - 5 each

**PRODUCT TRANSFER PUMPS:**

2 inch Wilden - HDPE Pump - 1 each  
2 inch Wilden - Poly Pump - 1 each  
2 inch Wilden - Aluminum Pump - 1 each

**COMMUNICATIONS EQUIPMENT:**

Satellite Phone - 1 each  
Line of Site Radios with a 2 Mile Range - 10 each

**FILTRATION EQUIPMENT:**

HEPA Negative Air Machines - 8 each  
HEPA Vacuums - 2 each  
Mercury Vacuums - 1 each

## H2O OSRO EQUIPMENT LISTED BY RESPONSE AREA - TAOS, NM TAOS AREA REGION

### OIL SPILL CONTAINMENT BOOM:

River Boom (*American Marine, Inc.*)  
4" flotation x 6" skirt,  
1/4" Stainless Steel Top Tension Cable,  
Universeal End Connectors,

"LEO" Bag

Ancillary Equipment  
(*Rope, Buoys, Anchors End-Connectors, etc.*)

Total of 1,100 foot:

Boom Deployment  
Rope Pulling System

Various Quantities

### OIL RECOVERY SKIMMER & ANCILLARY EQUIPMENT:

Oleophilic 1 Drum Oil Skimmer - 1 each  
*Crucial, Inc. - Model 1D19P-42"*  
*Recovery Capacity - 2,400 Barrels per day*

Portable Storage - 1 each  
*5'x5'x3' Storage Capacity - 50 Barrels (2,100 gallons)*

Generators & Compressors - 1 each

3 hp Power Winch w/Capstan & Stand - 1 each

### EMERGENCY RESPONSE TRAILERS:

18 foot Open Top Emergency Response Trailer - 1 each

### EMERGENCY RESPONSE VEHICLES:

5 Ton - 4 door Crew Cab Truck - 1 each

Work Utility Truck/SUV - 2 each

### EMERGENCY RESPONSE BOATS:

14' Utility Work Boat - 1 each

**H2O OSRD EQUIPMENT LIST - TAOS AREA REGION**

Page 9.

**COMMUNICATIONS EQUIPMENT:**

Line of Site Radios with a 2 to 26 Miles Range - 40 each

**PERSONAL PROTECTIVE SAFETY EQUIPMENT:**

SCBA' - 2,200 Lbs. - 6 each  
 Combustible Gas Detector - 1 each  
 H<sub>2</sub>S Meter - 1 each  
 Toxic Gas Detector - 1 each  
 Multigas Detector (*LEL, O<sub>2</sub>, CO, H<sub>2</sub>S*) - 1 each  
 Level "B/C" Suits - 30 each  
 Air Purifying Respirators - Half Face - 20 each  
 Air Purifying Respirators - Full Face - 20 each  
 Decontamination Kit System - 1 each  
 Personal Protective Flotation Devices - 25 each  
 Level "B" HazMat Suits - 25 each  
 Hard Hats - 25 each  
 ICS Safety Vests - 60 each  
 Steel Toe Rubber Boots - Calf High - 30 each  
 Tent, Shelter (*10' x 10' - EZ Up*) - 3 each

**EXTREME COLD WEATHER OIL SPILL RESPONSE EQUIPMENT:**

3 hp Ice Auger - 10" Blade - 3 each  
 Chain Saw - 28" Bar (*Stihl*) - 2 each  
 Chain Saw - 24" Bar (*Hava*) - 1 each  
 Chain Saw - 22" Bar (*Poulan*) - 2 each  
 Chain Saw - 20" Bar (*Poulan*) - 1 each  
 Chain Saw Chaps - 20 each  
 8' x 7' x 7' - I Beam "A" Frame w/Hoist (*3000 Lbs.*) - 1 each  
 Hoist "T" Bars - 4 each  
 Ice Hand Saw - 42" - 1 each  
 Ice Hand Saw - 48" - 1 each  
 JSG - Ice Slotting Miter Guide - 1 each  
 Ice Depth Gauge - 1 each  
 6' Spud Bars - 6 each  
 Snow Shovels - 10 each  
 6' x 3' Snow Sleds - 1 each  
 Harness - Full Body - 20 each

**EXTREME COLD WEATHER OIL SPILL RESPONSE EQUIPMENT: (cont.)**

|                        |                  |
|------------------------|------------------|
| <b>Safety Glasses</b>  | <b>- 50 each</b> |
| <b>Hard Hat Liners</b> | <b>- 25 each</b> |
| <b>Ear-muffs</b>       | <b>- 25 each</b> |
| <b>Hard Hats</b>       | <b>- 25 each</b> |

## H2O OSRO EQUIPMENT LISTED BY AREA REGION - BOISE, ID

### BOISE AREA REGION

#### OIL SPILL CONTAINMENT BOOM:

**River Boom** (*American Marine, Inc.*)  
 4" flotation x 6" skirt,  
 1/4" Stainless Steel Top Tension Cable,  
 Universeal End Connectors,

"LEO" Bag

Ancillary Equipment  
 (Rope, Buoys, Anchors End-Connectors, etc.)

Total of 2,000 foot:

2 ea. Boom Deployment  
 Rope Pulling System

Various Quantities

#### OIL RECOVERY SKIMMER & ANCILLARY EQUIPMENT:

Oleophilic 1 Drum Oil Skimmer  
*Crucial, Inc. - Model 1D19P-24"*  
 Recovery Capacity – 1,200 Barrels per day

- 2 each

#### EMERGENCY RESPONSE BOATS:

14' Aluminum Utility Work Boat  
 with Honda 4 Cycle Engine

- 2 each

#### EMERGENCY RESPONSE UNITS/VEHICLES:

Emergency Response Trailer (*fully stocked with exterior lighting*)  
 Emergency Response Vehicle (*fully stocked*)  
 Hazardous Materials Response Unit (*w/generators and compressors*)

- 2 each

- 2 each

- 2 each

#### COMMUNICATIONS EQUIPMENT:

Line of Site Radios with a 2 - 26 Miles Range  
 Satellite Phone

- 24 each

- 1 each

**H2O OSRD EQUIPMENT LIST - BOISE AREA REGION**

Page 12.

**OIL SORBENT MATERIALS:****Sorbent Booms***8" Dia. x 10' Length - 40 ft. to Bag*

- Various Quantities

**Sorbent Pads***18" x 18" x 3/8" Pads - 100 to Bag*

- Various Quantities

**PERSONAL PROTECTIVE SAFETY EQUIPMENT:**

|   |           |
|---|-----------|
| SCBA - 4,400 Lbs.                               | - 4 each  |
| Multigas Detector ( <i>LEL, O2, CO, H2S</i> )   | - 4 each  |
| Ohio Lumex RA915 Light - Mercury Vapor Analyzer | - 2 each  |
| Level "A" HazMat Suits                          | - 4 each  |
| Level "B/C" HazMat Suits                        | - 20 each |
| Air Purifying Respirators - Half Face           | - 20 each |
| Air Purifying Respirators - Full Face           | - 20 each |
| Decontamination Kit System                      | - 2 each  |
| Personal Protective Flotation Devices           | - 20 each |
| Hard Hats                                       | - 20 each |
| ICS Safety Vests                                | - 20 each |
| Steel Toe Calf-High Rubber Boots                | - 20 each |

**PUMPING and CLEANING UNITS:**

|   |          |
|---|----------|
| Vactor Air Movers ( <i>w/Hydro-Jetter - 2,500 gal. capacity</i> )                 | - 1 each |
| Vacuum Tanker ( <i>Stainless Steel - 5,000 gal. capacity</i> )                    | - 1 each |
| Steam Cleaner<br>( <i>3,000 psi./3 gpm, trailer mounted 300 gal. water tank</i> ) | - 1 each |

**EXCAVATION EQUIPMENT:**

|  |          |
|--|----------|
| Cat 322 Excavator  | - 1 each |
| Cat Backhoe ( <i>4 WD, enclosed cab</i> )                | - 1 each |
| Cat Skid Steer Loader ( <i>w/hydraulic drum turner</i> ) | - 1 each |
| Air Compressor, Concrete Saw, 5K Generator               | - 1 each |
| Side Dump Trailer ( <i>20 Tons</i> )                     | - 1 each |

**H2O OSRO EQUIPMENT LIST - BOISE AREA REGION**

Page 13.

**PORTABLE OIL/WASTE STORAGE CAPACITY**

Portable Poly Storage Tanks (*500 to 5,000 gal. capacity*) - 3 each

**PRODUCT TRANSFER PUMPS:**

2 inch Wilden - HDPE Pump - 1 each  
 2 inch Wilden - Poly Pump - 1 each  
 2 inch Wilden - Aluminum Pump - 1 each

**ROLL-OFF, TRANSPORTATION**

Semi Tractor (*3-axle with hydraulic kits*) - 1 each  
 10 Wheel Roll-Off Truck - 1 each  
 Roll-Off Trailer (*53' Rocket Launcher*) - 1 each  
 Side Dump Trailer - 1 each  
 Roll-Off Bins (18 thru 30 yard capacity) - 6 each

**FILTRATION EQUIPMENT:**

HEPA Negative Air Machines - 2 each  
 HEPA Vacuums - 2 each  
 Mercury Vacuum - 1 each

## H2O OSRO EQUIPMENT LISTED BY AREA REGION - PHOENIX, AZ

### PHOENIX AREA REGION

#### OIL SPILL CONTAINMENT BOOM:

River Boom (*American Marine, Inc.*)  
 4" flotation x 6" skirt,  
 1/4" Stainless Steel Top Tension Cable,  
 Universeal End Connectors,

Total of 1,000 foot:

Ancillary Equipment  
 (Rope, Buoys, Anchors End-Connectors, etc.)

Various Quantities

#### Oil Spill Response Weir Skimmers - 2 Total:

Slurp (*Slickbar Products Corp.*)

- 1 each

#### EMERGENCY RESPONSE BOATS:

14' Aluminum Utility Work Boat  
 with Honda 4 Cycle Engine

- 1 each

#### EMERGENCY RESPONSE UNITS/VEHICLES:

Emergency Response Vehicle (fully stocked)  
 Emergency Response Trailer (*fully stocked with exterior lighting*)  
 Hazardous Materials Response Unit (*w/Generators & Compressor*)

- 1 each

- 1 each

- 1 each

#### COMMUNICATIONS EQUIPMENT:

Line of Site Radios with a 2 - 26 Miles Range

- 12 each

#### OIL SORBENT MATERIALS:

##### Sorbent Booms

8" Dia. x 10' Length - 40 ft. to Bag

- Various Quantities

##### Sorbent Pads

18" x 18" x 3/8" Pads - 100 to Bag

- Various Quantities

**H2O OSRO EQUIPMENT LIST - PHOENIX AREA REGION**

Page 15.

**PERSONAL PROTECTIVE SAFETY EQUIPMENT:**

|   |           |
|---|-----------|
| SCBA - 4,400 Lbs.                             | - 2 each  |
| Multigas Detector ( <i>LEL, O2, CO, H2S</i> ) | - 2 each  |
| Level "A" HazMat Suits                        | - 2 each  |
| Level "B/C" HazMat Suits                      | - 10 each |
| Air Purifying Respirators - Half Face         | - 10 each |
| Air Purifying Respirators - Full Face         | - 10 each |
| Decontamination Kit System                    | - 1 each  |
| Personal Protective Flotation Devices         | - 10 each |
| Hard Hats                                     | - 10 each |
| ICS Safety Vests                              | - 10 each |
| Steel Toe Calf-High Rubber Boots              | - 10 each |

**PUMPING and CLEANING UNITS:**

|   |          |
|---|----------|
| Vacuum Tanker ( <i>Stainless Steel - 6,000 gal. capacity</i> )                    | - 1 each |
| Vactor Air Movers ( <i>w/Hydro-Jetters - 2,500 gallon capacity</i> )              | - 1 each |
| GapVax Wet/Dry Industrial Vacuum Truck ( <i>3,000 gal. capacity</i> )             |          |
| Steam Cleaner<br>( <i>3,000 psi./3 gpm, trailer mounted 300 gal. water tank</i> ) | - 1 each |
| Video Pipeline Inspection Camera & Line Locator                                   | - 1 each |

**EXCAVATION EQUIPMENT:**

|  |          |
|--|----------|
| Cat 322 Excavator  | - 1 each |
| 95XT Case Steer Loader ( <i>with Hydraulic Drum Turner</i> ) | - 1 each |
| Side Dump Trailer ( <i>20 tons</i> )                         | - 1 each |

**ROLL-OFF & TRANSPORTATION:**

|  |          |
|--|----------|
| Semi Tractor ( <i>3-Axle with Hydraulic Kits</i> ) | - 1 each |
| 48' Semi-Van Trailer ( <i>with Lift Gate</i> )     | - 1 each |
| Roll-Off Bins ( <i>18 thru 30 yard capacity</i> )  | - 6 each |

**FILTRATION EQUIPMENT:**

|                            |          |
|----------------------------|----------|
| HEPA Negative Air Machines | - 2 each |
| HEPA Vacuums               | - 3 each |
| Mercury Vacuums            | - 1 each |