



LOS ANGELES COUNTY FIRE DEPARTMENT
HEALTH HAZARDOUS MATERIALS DIVISION



**BUSINESS PLAN REQUIREMENTS
FOR REPORTING YEAR 2012**

The following forms are included in this packet:

1. Business Plan Annual Renewal Certification Form;
2. General information “Business Plan and Hazardous Materials Management”;
3. Haz Mat Owner and Operator Identification printout with emergency contact information, the mailing address, and the year of your previously certified consolidated contingency plan (CCP);
4. Records of hazardous materials from your 2011 submittal that were handled at your business during calendar year 2011.
5. Hazardous Materials Inventory—Chemical Description Form (blank), for new chemicals not already disclosed.

If additional unified program forms or a sample are needed please visit our website at: <http://www.fire.lacounty.gov/HealthHazMat/HHMDForms.asp>, or call (323) 890-4000 to have them mailed to you.

If you have ...	Then complete, sign, and submit the following forms:
no changes to your inventory or consolidated contingency plan,	<ol style="list-style-type: none"> 1. Business Plan Annual Renewal Certification Form; and 2. Haz Mat Owner and Operator Identification page. 3. Check no change on Business Plan Annual Renewal Certification.
no changes to your inventory or consolidated contingency plan, but you are subject to EPCRA,	<ol style="list-style-type: none"> 1. Business Plan Annual Renewal Certification Form; 2. Haz Mat Owner and Operator Identification page; and 3. Hazardous Materials Inventory Statement—sign each hazardous material being reported as an extremely hazardous substance.¹ 4. Check no change on Business Plan Annual Renewal Certification.
changes to your inventory,	<ol style="list-style-type: none"> 1. Business Plan Annual Renewal Certification Form; 2. Haz Mat Owner and Operator Identification page; and 3. Hazardous Materials Inventory—Chemical Description Form to add new reportable hazardous materials. Make as many copies as you need to disclose each reportable hazardous material that you will handle in 2012; that were not previously disclosed. 4. The attached Hazardous Materials Inventory Statement (HMIS) of previously reported hazardous materials if you report changes in the amounts, locations, or container type. Make changes directly to the inventory printout.
changes to your consolidated contingency plan,	<ol style="list-style-type: none"> 1. Business Plan Annual Renewal Certification Form; 2. Haz Mat Owner and Operator Identification page; 3. A revised Consolidated Contingency Plan form.
a chemical that is at or above the threshold quantity for a regulated substance ² .	<ol style="list-style-type: none"> 1. Business Plan Annual Renewal Certification Form; 2. Haz Mat Owner and Operator Identification page; and 3. A Cal-ARP Program Regulated Substances Registration form.

¹ Refer to 40 CFR Part 355 Appendix A: http://yosemite.epa.gov/oswer/ceppoehs.nsf/Alphabetical_Results?openview

² Refer to Tables 1, 2, and 3 in 19 CCR 2770.5: <http://www.oal.ca.gov/ccr.htm>



**LOS ANGELES COUNTY FIRE DEPARTMENT
HEALTH HAZARDOUS MATERIALS DIVISION
5825 Rickenbacker Road, Commerce, CA 90040**



2012 BUSINESS PLAN ANNUAL RENEWAL CERTIFICATION

Hazardous Materials Inventory Statement (HMIS)

I certify that the attached HMIS reflects the handling of hazardous materials for the reporting year in accordance with the following conditions: (Please check all that apply).

- Delete:** Write "delete" on the HMIS next to any previously disclosed hazardous materials that are no longer used.
- Revise:** Write the correct amounts, locations, or container type on the HMIS to reflect the accuracy of any previously reported hazardous materials.
- EPCRA Compliance:** Fill in the EPCRA field with your signature on the HMIS for any hazardous material type and quantity identified on 40 CFR Part 355, Appendix A—The List of Extremely Hazardous Substances and Their Threshold Planning Quantities.
- Add:** Complete one **Hazardous Materials Inventory—Chemical Description Form** to add each hazardous materials that you have not previously disclosed. Submit one form per chemical.
- No Change:** **Hazardous Materials Inventory Statement (HMIS)** is accurate and complete.

Consolidated Contingency Plan (CCP)

I certify that I have a current and accurate CCP on file. To ensure your agency has an accurate and current CCP, the following action has been taken:

- For a new handler:** if the Owner/Operator page indicates "CCP Certification required", complete and submit a new CCP.
- Modification:** Significant changes in facility personnel or operations required a revision of the CCP. Complete and submit changes of your CCP with this form. Indicate changes by crossing out old information, and writing in the correct information.
- Lost:** Complete and submit any parts of your CCP that were lost or damaged.
- No Change:** There have not been any significant changes in the facility's personnel and operations that require a revision to the current CCP. (CCP needs to be reviewed and certified at least once every 3 years after the initial submittal)

Cal-ARP Program

I reviewed the threshold quantities in Section 2770.5 of Title 19 of the California Code of Regulations and certify that any regulated substance on the attached HMIS accords with the following registration requirement:

- Add:** Complete the **Cal-ARP Program Regulated Substance Registration** form only if the regulated substance is at or above the threshold quantity (TQ). Submit one form per chemical.
- No Change:** The previously submitted registration for regulated substance(s) is accurate.

ANNUAL CERTIFICATION

I certify that the information submitted herein is complete and accurate. Also, no hazardous materials subject to the inventory requirements of Chapter 6.95 of the Health and Safety Code are being handled that are not listed on the most recently submitted annual inventory form.

Print Name of Document Preparer

Print Name of Owner/Operator

Signature of Owner/Operator

Business Name

Site Address

Date

Submit this packet to the above address before January 2, 2012 to avoid a late submittal penalty of \$331 or other enforcement options. Certified Mail advised. Do not submit any fees with this packet.
Obtain unified program forms from our website at
<http://www.fire.lacounty.gov/HealthHazMat/HHMDForms.asp> or
from our Data Operations Unit at (323) 890-4000.

UNIFIED PROGRAM (UP) FORM BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID #		1	EPA ID # (Hazardous Waste Only)	2
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)				3
BUSINESS SITE ADDRESS				3a

II. ACTIVITIES DECLARATION

**NOTE: If you check YES to any part of this list,
please submit the Business Owner/Operator Identification page.**

Does your facility...	If Yes, please complete these pages of the UP FORM....
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<p>A. HAZARDOUS MATERIALS</p> <p>Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 4	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION CONSOLIDATED CONTINGENCY PLAN (Section I and Site Map(s)) TRAINING PLAN
<p>B. UNDERGROUND STORAGE TANKS (USTs)</p> <p>1. Own or operate underground storage tanks?</p> <p>2. Intend to upgrade existing or install new USTs?</p> <p>3. Need to report closing a UST?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 5 <input type="checkbox"/> YES <input type="checkbox"/> NO 6 <input type="checkbox"/> YES <input type="checkbox"/> NO 7	UST FACILITY UST TANK (one page per tank) UST FACILITY UST TANK (one per tank) UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) UST TANK (closure portion –one page per tank)
<p>C. ABOVE GROUND PETROLEUM STORAGE TANKS (APSTs)</p> <p>Petroleum oil is stored in any container or tank that has a storage capacity of 55 gallons or more. The aggregate capacity of petroleum oil in all tanks and containers is greater than 1,320 gallons.</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 8	CONSOLIDATED CONTINGENCY PLAN (Section I and Site Map(s))
<p>D. HAZARDOUS WASTE</p> <p>1. Generate hazardous waste?</p> <p>2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?</p> <p>3. Treat hazardous waste on site?</p> <p>4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?</p> <p>5. Consolidate hazardous waste generated at a remote site?</p> <p>6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?</p> <p>7. Generate in any single calendar month 1,000 kilograms (kg) (2,000 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.</p> <p>8. Household Hazardous Waste (HHW) Collection site</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 9 <input type="checkbox"/> YES <input type="checkbox"/> NO 10 <input type="checkbox"/> YES <input type="checkbox"/> NO 11 <input type="checkbox"/> YES <input type="checkbox"/> NO 12 <input type="checkbox"/> YES <input type="checkbox"/> NO 13 <input type="checkbox"/> YES <input type="checkbox"/> NO 14 <input type="checkbox"/> YES <input type="checkbox"/> NO 14a <input type="checkbox"/> YES <input type="checkbox"/> NO 14b	EPA ID NUMBER – provide at the top of this page. As a generator, answer YES to Item E2 and complete Waste Generator Form. RECYCLABLE MATERIALS REPORT ONSITE HAZARDOUS WASTE TREATMENT – FACILITY ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit) CERTIFICATION OF FINANCIAL ASSURANCE REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION HAZARDOUS WASTE TANK CLOSURE CERTIFICATION

E. LOCAL REQUIREMENTS 15

1. REGULATED SUBSTANCES		
<p>Have Regulated Substances (RS) including Extremely Hazardous Substances (EHS) stored on site at greater than the threshold planning quantities established by the California Accidental Release Program (Cal ARP) ?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 15a	In addition to Hazardous Materials requirements, complete: Regulated Substance Registration Risk Management Plan (when required)
<p>2. Have hazardous materials on site at or above threshold amount established by CUPA or PA local ordinance?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO 15b	Consult local CUPA or PA for added reporting requirements

INSTRUCTIONS FOR THE UNIFIED PROGRAM (UP) FORM Business Activities

Please submit the Business Activities page, the Business Owner/Operator Identification page (Form 2730), and Hazardous Materials Inventory - Chemical Description pages (Form 2731) for all submissions. Please number all pages of your submittal. This helps your CUPA or PA identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER Leave this blank. This number is assigned by the Certified Unified Program Agency (CUPA) and identifies your facility.
2. EPA ID NUMBER If you generate, recycle, or treat hazardous waste, enter your facility's 12-character U.S. Environmental Protection Agency (U.S. EPA) or California Identification number. For facilities in California, the number usually starts with the letters "CA". If you need a CA EPA number, complete and submit DTSC Form 1358 located at http://www.dtsc.ca.gov/IDManifest/ID_Numbers.cfm to the Department of Toxic Substances Control (DTSC), or if you need a federal EPA number, call (415) 495-8895 <http://www.epa.gov/region09/waste/epanums.html#rcranum>
3. BUSINESS NAME Enter the full legal name of the business. This is the same as the terms "Facility Name" or "DBA - Doing Business As".
- 3a. BUSINESS SITE ADDRESS- Enter the street address where the facility is located. No post office box numbers are allowed. This information must provide a means to geographically locate the facility.
4. HAZARDOUS MATERIALS ONSITE Check the box to indicate whether you have hazardous materials onsite. You have a hazardous material if:
 - It is handled in quantities equal to or greater than 500 pounds, 55 gallons, or 200 cubic feet of gas (calculated at standard temperature and pressure),
 - It is handled in quantities equal to or greater than the applicable federal threshold planning quantity for an extremely hazardous substance listed in 40 CFR Part 355, Appendix A,
 - Radioactive materials are handled in quantities for which an emergency plan is required to be adopted pursuant to Part 30, Part 40, or Part 70 of Chapter 10 of 10 CFR, or pursuant to any regulations adopted by the state in accordance with these regulations.

If you have hazardous materials onsite, then you must complete the Business Owner/Operator Identification page (OES Form 2730) and the Hazardous Materials Inventory - Chemical Description page (OES Form 2731), as well as an Emergency Response Plan (i.e. Consolidated Contingency Plan) and Training Plan. Do not answer "YES" to this question if you exceed only a local threshold, but do not exceed the state threshold.

5. OWN OR OPERATE UNDERGROUND STORAGE TANK (UST) Check the appropriate box to indicate whether you own or operate USTs containing hazardous substances as defined in Health and Safety Code (HSC) §25316. If "YES", then you must complete one UST Facility page and UST Tank pages for each tank. **You must also submit a plot plan and a monitoring program plan.**
6. UPGRADE/INSTALL UST Check the appropriate box to indicate whether you intend to install or upgrade USTs containing hazardous substances as defined in HSC §25316. If "YES", then you must complete the UST Installation - Certificate of Compliance page in addition to UST Facility and Tank pages, plot plan and monitoring program plan.
7. UST CLOSURE Check the appropriate box if you are closing an UST and complete the closure portion of the UST Tank pages for each tank.
8. OWN OR OPERATE ABOVEGROUND PETROLEUM STORAGE TANK (APST) To calculate the storage capacity of petroleum oil, add the volume capacities of all containers and tanks that store 55 gallons or more of petroleum oil in your calculation. Do not include underground storage tanks. In the H&SC, Section 25270.2 (g) defines petroleum oil and Section 25270.2 (a)(4) lists the types of petroleum oil that are exempt. Until the CUPA provides a tank facility statement, document your consolidated contingency plan with the following tank information: (1) facility name, address, and owner or operator; (2) total storage capacity, and (3) the location, size, age, and contents of each storage tank that exceeds 10,000 gallons of petroleum oil. If you have 1,320 gallons or more of petroleum oil, prepare a spill prevention control and countermeasure plan.
9. HAZARDOUS WASTE GENERATOR Check the appropriate box to indicate whether your facility generates hazardous waste. A generator is the person or business whose acts or processes produce a hazardous waste or who causes a hazardous substance or waste to become subject to State hazardous waste law. If your facility generates hazardous waste, you must obtain and use an EPA Identification number (ID) in order to properly transport and dispose of it. Report your EPA ID number in #2. Hazardous waste means a waste that meets any of the criteria for the identification of a hazardous waste adopted by DTSC pursuant to HSC §25141. "Hazardous waste" includes, but is not limited to, federally regulated hazardous waste. Federal hazardous waste law is known as the Resource Conservation and Recovery Act (RCRA). Unless explicitly stated otherwise, "hazardous waste" also includes extremely hazardous waste and acutely hazardous waste.
10. RECYCLE Check the appropriate box to indicate whether your facility recycles more than 100 kilograms per month of recyclable material under a claim that the material is excluded or exempt per HSC §25143.2. Check "YES" and complete the Recyclable Materials Report pages, if you either recycled onsite or recycled excluded recyclable materials which were generated offsite. Check "NO" if you only send recyclable materials to an offsite recycler; you do not need to report.
11. ONSITE HAZARDOUS WASTE TREATMENT Check the appropriate box to indicate whether your facility treats hazardous waste onsite. "Treatment" means any method, technique, or process which is designed to change the physical, chemical, or biological character or composition of any hazardous waste or any material contained therein, or removes or reduces its harmful properties or characteristics for any purpose. "Treatment" does not include the removal of residues from manufacturing process equipment for the purposes of cleaning that equipment. Amendments (effective 1/1/99) add exemptions from the definition of "treatment" for certain processes under specific, limited conditions. Refer to HSC §25123.5 (b) for these specific exemptions. Treatment of certain laboratory hazardous wastes do not require authorization. Refer to HSC §25200.3.1 for specific information. Please contact your CUPA to determine if any exemptions apply to your facility. If your facility treats hazardous waste onsite, complete the Onsite Hazardous Waste Treatment Notification - Facility page and one set of Onsite Hazardous Waste Treatment Notification - Unit pages for each unit.
12. FINANCIAL ASSURANCE Check the appropriate box to indicate whether your facility is subject to financial assurance requirements for closure of an onsite treatment unit. Unless they are exempt, Permit by Rule (PBR) and Conditionally Authorized (CA) operations are required to provide financial assurance for closure costs (per 22 CCR §67450.13 (b) and HSC §25245.4). If your facility is subject to financial assurance requirements or claiming an exemption, then complete the Certification of Financial Assurance page.
13. REMOTE WASTE CONSOLIDATION SITE Check the appropriate box to indicate whether your facility consolidates hazardous waste generated at a remote site. Answer "YES" if you are a hazardous waste generator that collects hazardous waste at remote sites and transports the hazardous waste to a consolidation site you also operate. You must be eligible pursuant to the conditions in HSC §25110.10. If your facility consolidates hazardous waste generated at a remote site, then complete the Remote Waste Consolidation Site Annual Notification page.
14. HAZARDOUS WASTE TANK CLOSURE Check the appropriate box to indicate whether the tank being closed would be classified as hazardous waste after its contents are removed. Classification could be based on your knowledge of the tank and its contents, the mixture rule, testing of the tank, the listed wastes in 40 CFR 261.31 or 40 CFR 261.32, or inability to remove hazardous materials stored in the tank. If the closed tank would be classified as hazardous waste, then complete the Hazardous Waste Tank Closure Certification page.
- 14a. RCRA LQG- Check the appropriate box to indicate whether your facility is a Large Quantity Generator. If YES, you must obtain a US EPA ID Number.
- 14b. HOUSEHOLD HAZARDOUS WASTE COLLECTION- Check the appropriate box to indicate whether your facility is a HHW Collection Site.
15. LOCAL REQUIREMENTS- Some CUPAs or AAs may require additional information. Check with your CUPA before submitting the UPCF.
- 15a. LOCAL REQUIRED INFORMATION: REGULATED SUBSTANCES (RS) Check the box to indicate whether Regulated Substances (RS) are stored onsite. An RS is any substance, listed in CCR, Title 19, Section 2770.5. See attached Regulated Substance list. If you handle an RS at greater than the threshold planning quantities then complete the Regulated Substance Registration in addition to forms required under item number 4.
- 15b. LOCAL HAZARDOUS MATERIALS THRESHOLD Check the appropriate box to indicate if you are subject to reporting hazardous materials at a level established by your local CUPA or PA. Check with your local CUPA or PA for details.

BUSINESS PLAN AND HAZARDOUS MATERIALS MANAGEMENT

PURPOSE OF THE BUSINESS PLAN The Health and Safety Code requires that your Business Plan gives the first responders, such as firefighters, information on the location, quantity, and health risks for the hazardous materials at your facility. Every year each Hazardous Materials Handler is required to disclose the names, amounts, locations, and mixtures containing hazardous materials to this Department if the container amount equals or exceeds the following quantities at any one time during the reporting year: a total weight of 500 pounds, or a total volume of 55 gallons, or 200 cubic feet at standard temperature and pressure for a compressed gas, or the threshold quantity for Regulated Substances. A mixture that contains one tenth of one percent (1%) or more of a hazardous ingredient or one tenth of one percent (.1%) or more of a carcinogen is a hazardous material.

HAZARDOUS MATERIALS are harmful based on their physical and health characteristics. They include hazardous wastes or any hazardous substance that are listed in Title 49 of the Code of Federal Regulations. You can review the Material Safety Data Sheet for the following types of hazards:

PHYSICAL HAZARDS: Blasting agent, Combustible liquid, Compressed gas, Cryogenic, Explosive, Flammable gas, Flammable liquid, Flammable solid, Oxidizer, Pyrophoric, Unstable (reactive), Water-reactive. **HEALTH HAZARDS:** Carcinogens, Corrosives, Etiologic agents, Highly toxics (including poison), Irritants, Target organ toxins, Radioactives.

CONSOLIDATED CONTINGENCY PLAN (CCP) – Every three years the hazardous materials handler shall certify to this Department that the previously submitted CCP reveals the current personnel, owner, and business name, and that it includes the current and effective procedures that trained personnel would implement in the event of a hazardous materials release from an operation or storage condition at the site. Download a blank or sample CCP from our website at <http://fire.lacounty.gov/HealthHazMat/HHMDForms.asp>. You must send a copy of any revised sections of the CCP with the annual certification. Furthermore, you must train the personnel about the revised procedures, because the Health and Safety Code requires a training program on hazardous materials for employees on safety procedures in the event of a release or threatened release of hazardous materials.

SITE MAPS- A site map is included in the CCP form. The map is given to the firefighters. Therefore indicate the hazardous materials storage areas and operations on the map. Please use the site map that is included with the CCP form; blue prints will not be accepted. The site map may be multiple pages depending on the size of the facility.

BUSINESS PLAN AMENDMENTS- Submit a Hazardous Materials Inventory—Chemical Description form to this Department within 30 days of the following changes: 100% of an increase of a previously disclosed hazardous material, or handling of a hazardous material that was not previously disclosed. Submit a CCP to this department within 30 days if there is a change of owner or operator at a facility that has reportable quantities of hazardous materials (required by the new owner/operator), if the operations change in a way that compromise the procedures towards any release of a hazardous materials that are specified in the previously submitted CCP.

CERTIFICATION OF YOUR BUSINESS PLAN- The Health Hazardous Materials Division intends to simplify your annual certification by providing you with your Hazardous Materials Inventory as it currently appears in our database and an Owner Operator Identification Form. Download additional unified program forms or a sample from our website at <http://fire.lacounty.gov/HealthHazMat/HHMDForms.asp>

Cal-ARP PROGRAM- If you handle Regulated Substances (RS) at or above a threshold quantity, you need to submit the Cal-ARP Regulated Substance Registration form. Refer to Tables 1, 2, and 3 in 19 CCR 2770.5 <http://www.oal.ca.gov/ccr.htm> to determine if your hazardous material is listed in amounts that equal or exceed the threshold quantity. The reporting threshold for a regulated substance shall be determined by the quantity of the substance in a process, Process means “any activity involving a” RS including any use, storage, manufacturing, handling, on-site movement or any combination thereof.”

MANDATORY REGULATED SUBSTANCE REGISTRATION- any business that has above threshold quantities of a regulated substance in a process, shall fill out the Regulated Substance (RS) Registration form available on our website at <http://fire.lacounty.gov/HealthHazMat/HHMDForms.asp>. This registration will provide information to this Department to evaluate the requirements imposed by the Cal-ARP Program on each covered process.

EPCRA REPORTING – Facilities reporting chemicals subject to the Federal Emergency Planning and Community Right-to-Know Act (EPCRA) reporting thresholds must sign each page or line for each Extremely Hazardous Substance at or above its Federal Threshold Planning Quantity (TPQ) or 500 pounds, whichever is less. For more information on EPCRA visit US EPA’s EPCRA website at http://yosemite.epa.gov/oswer/ceppoehs.nsf/Alphabetical_Results?openview

EXEMPTIONS- A retail store, including the interior receiving and stockroom areas, that handles hazardous materials contained solely in a consumer product for direct distribution to and use by the general public is exempt from the State reporting requirements, unless the individual container size equals or exceeds the reportable quantities in State Law.

Railcars or tankers containing hazardous materials if the mode of power (i.e. locomotive or tractor) is disconnected.

Railroad cars containing hazardous materials remaining within the same railroad facility or business facility for more than thirty (30) days are deemed stored at that location and are subject to all reporting requirements. This Department upon written application, may exempt a handler from any portion of the Business Plan and/or exempt a hazardous material, if it is determined this exemption does not pose a significant hazard to human health, safety, or the environment.

PENALTIES FOR VIOLATORS- Any business that fails to review and submit a current and accurate business plan by the date specified on the Business Plan Annual Renewal Certification form may be subjected to a \$285 late submittal fee, an administrative enforcement action, civil penalties, or criminal penalties.

Reporting a release or threatened release of hazardous materials that pose a significant, present, or potential hazard to human health, safety, property, or the environment:

- Call 911 for local emergency response personnel
- Notify this Department at (323) 890-4317
- Notify the Office of Emergency Services (800) 852-7550 or (916) 845-8911

FOR ASSISTANCE: Instructions and a sample of completed unified program forms are available for download from our website at <http://fire.lacounty.gov/HealthHazMat/HHMDForms.asp> OR you may contact the Data Operations Unit on weekday's 9:00 a.m. to 4:00 p.m. (323) 890-4000 to have the forms mailed to you.

TO SPEAK TO OR MAKE AN APPOINTMENT WITH AN INSPECTOR, PLEASE CALL WEEKDAYS 8:00 A.M. – 10:00 A.M. AT ANY OF THE FOLLOWING FIELD OFFICES:

East Office

5110 North Peck Rd.
El Monte, CA 91732
(626) 450-7450

Southeast Office

9155 Telegraph Rd.
Pico Rivera, CA 90717
(562) 654-2620

Central Office

5825 Rickenbacker Rd.
Commerce, CA 90040
(323) 890-4107

North County Office

14425 Olive view Dr.
Sylmar, CA 91342
(818) 364-7120

Southwest Office

24330 Narbonne Ave.
Lomita, CA 90717
(310) 534-6270

West Office

6167 Bristol Parkway #220
Culver City, CA 90230
(310) 348-1781

**California Accidental Release Prevention Program Unit
(Cal-ARP Unit)**

5825 Rickenbacker Rd.
Commerce, CA 90040
(323) 890-4035

PERMIT FEE: This Department collects an annual hazardous materials fee in an amount sufficient to pay those costs incurred in carrying out the provisions of Chapter 6.95 of the California Health and Safety Code. This fee is based on the volume of hazardous materials handled by the business.

DO NOT SEND annual fee monies to the Los Angeles County Fire Department at this time. Your bill will be handled separately and will include mailing instructions.

NOTE: Hazardous Materials Inventory Chemical Description Forms and the Regulated Substance Registration Forms may be reproduced. Please feel free to make as many copies as needed to comply with the annual reporting requirements. You may download forms from our website, pick up copies at the field offices, or request to have them mailed to you.