



Contra Costa Health Services
Contra Costa County Certified Unified Program Agency
Hazardous Materials Program
California Accidental Release Prevention Program
**REGULATED SUBSTANCE REGISTRATION/DEREGISTRATION
STATIONARY SOURCE INFORMATION FORM
INSTRUCTION INFORMATION**

Following are the instructions to fill out the stationary source information form. This form will need to be filled out once when registering a regulated substance and again if deregistering a regulated substance from the CalARP Program.

1. Stationary Source Name: The name of the facility
2. Facility ID #: The Contra Costa Health Services identification number that is given to each individual facility/stationary source. This ID number can be found on the mailing label.
3. U.S. EPA ID#: The identification number given to your facility by the U.S. EPA.
4. Phone: The business phone number for the stationary source
5. Stationary Source Address: The stationary source site street address
6. City: The city the stationary source is located
7. Zip Code: The zip code of the stationary source site
8. Latitude/Longitude: The latitude and longitude of the stationary source site
9. Dun and Bradstreet: The Dun and Bradstreet number of the stationary source
10. NAICS: The primary North American Industrial Classification System code for the stationary source
11. No. of Emp: The number of full-time employees at the stationary source
12. Owner/Operator: Means any person who owns, leases, operates, controls, or supervises a stationary source
13. Phone: The phone number of the owner/operator
14. Mailing Address: The stationary source street for the mailing address
15. City: The stationary source city for the mailing address
16. State: The stationary source state for the mailing address
17. Zip Code: The stationary source zip code for the mailing address
18. Name of Parent Company: The name of the parent company for the stationary source
19. Dun & Bradstreet: The Dun & Bradstreet number for the parent company
20. Phone: The phone number for the parent company
21. Person Responsible for the CalARP: The person or position who has the overall responsibility for the CalARP Program elements and implementation
22. Title: The title of the person who is responsible for the CalARP Program elements and implementation
23. Phone: The phone number of the person who is responsible for the CalARP Program elements and implementation
24. Emergency Contact: Name of the person to contact during an emergency
25. Title: Title of the emergency contact
26. Phone: Phone number of the emergency contact
27. 24 Hour Phone: The twenty-four emergency telephone number for the stationary source
28. Is the Stationary Source Subject to Title 8 CCR §5189 (Process Safety Management)? Yes or No
29. Is the Stationary Source Subject to Part 355 of Title 40 of CFR? Yes or No

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- 30.** Is the Stationary Source required to have a CAA Title V permit? The Clean Air Act Title V permit Yes or No
- 31.** Last Safety Inspection: The last safety inspection by a federal, state or local government agency, the name of that agency and the date of the inspection.
- 32.** Regulated Substances/Flammable Mixture at Stationary Source: The regulated substances handled at the stationary source above the threshold quantity (consider flammable mixtures as one regulated substance). Check the box under “Register” if registering a regulated substance. Check the box under “Deregister” if a previously registered regulated substance is no longer present at the stationary source at or above the CalARP threshold quantity. Identify whether or not multiple forms need to be included to register or deregister regulated substances by checking the appropriate “Yes” or “No” box.
- 33.** Quantity of Regulated Substance in Largest Single Container (lbs.): The largest single containment for each regulated substance and flammable mixtures (flammable mixtures are treated as a single regulated substance) at the stationary source in pounds.
- 34.** Distance From Largest Single Container to Public Receptor (feet): The distance from the largest single containment identified in item #33 to the closest public receptor in feet.
- 35.** If deregistering one or more regulated substances, identify the date CCHS was physically on site to verify that the regulated substance(s) is/are no longer on site at or above the CalARP regulatory threshold(s); otherwise identify N/A if not deregistering any regulated substances: Contact CCHS to schedule a site visit to verify the regulated substance has been removed to below the appropriate CalARP threshold. CCHS must perform a site visit before a regulated substance can be officially deregistered from the CalARP Program. The CCHS inspector must sign and date the form to document that a deregistration inspection was performed. The facility must contact USEPA if the covered process was subject to USEPA RMP requirements.
- 36.** Signature of Owner/Operator: The signature of the owner/operator
- 37.** Printed Name: The printed name of the owner/operator
- 38.** Date: The date the owner/operator signed the registration form