

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

## **EMERGENCY RESPONSE PLAN**

for the \_\_\_\_\_ water supply system

In case of emergency, contact the Michigan Department of Environmental Quality as soon as possible.

Considerations: Loss of pressure, inadequate quantities of water available, contamination

### **GENERAL**

1. Personnel  
List personnel available during emergency conditions. Include position, job duties, telephone number and whether available during strikes.
  
2. Miscellaneous  
List other telephone numbers that may be needed during emergencies:
  - a. Michigan Department of Environmental Quality:  
District Engineer/Sanitarian:  
Environmental Quality Analyst:  
Emergency Number:  
Fax:
  - b. Appropriate Municipal Officials:
  - c. Local Health Department:
  - d. Department of Agriculture:
  - e. Police:
  - f. Fire Department:
  - g. Newspapers:
  - h. Radio/TV Stations:
  - i. Nearby Water Utilities:
  - j. Nearby Laboratories:
  - k. Other:

3. Contractors  
List telephone numbers of reputable contractors which may be needed during emergencies.
  - a. Excavators:
  - b. Well Drillers:
  - c. Welders:
  - d. Electricians:
  - e. Plumbers:
  - f. Other:
  
4. Suppliers  
List telephone numbers of suppliers which may be needed during emergencies.
  - a. Chemical Suppliers:
  - b. Pump Suppliers:
  - c. Water Main Repair Materials Supplier:
  - d. Other:

### **CRITICAL CUSTOMERS**

1. List critical customers or users for whom the provision of a continuous supply of safe water is most urgent. Include name, telephone number and address.
  
2. Describe method to provide critical customers with a continuous supply of water.

### **COMMUNICATIONS**

1. Describe methods of communication available during power outages.
  
2. Describe methods to provide customers or users with current information and recommended precautions to protect public health.

## **PLANS & AGREEMENTS**

1. General Layout. Attach the general layout (piping schematic) of the waterworks system or indicate the location of the General Plan as well as valve and hydrant records and any other information that would be helpful in fully describing the water system.
  
2. Personnel Safety Plans. List relevant plans and indicate their locations. Examples may include evacuation plans, lock down procedures, location of personal protective equipment (PPE) and procedures for use, and location of Material Safety Data Sheets (MSDS).
  
3. Water Sampling and Monitoring Plans. Describe monitoring to be conducted to identify potential public health threats. List plans and their locations. Examples include the Bacteriological Sample Siting Plan, sampling procedures for different types of contaminants, locations of sampling containers and procedures to obtain more, laboratories to analyze other contaminants, identify laboratories to contact (with phone numbers) to arrange for rapid sampling for volatile organic chemicals or other unknown compounds.
  
4. Mutual aid agreements. Describe type and terms of agreements with other water supplies that may be implemented during an emergency. Attach or include location of agreements. Examples include sharing personnel and equipment, and loaning supplies.
  
5. Emergency Supplies and Equipment Plans
  - a. Emergency equipment available. Identify and indicate location of equipment and vehicles that may be needed in an emergency. If the equipment is leased, rented, shared or otherwise not immediately available, describe the procedure for securing the equipment including contact information.
  
  - b. Replacement equipment. Identify and indicate location of replacement equipment or parts that may be needed in an emergency. Describe how to secure replacements, if not on site, including contact information (or refer to Contacts section of this ERP).
  
  - c. First aid supplies and equipment. Include locations and contact information for securing additional supplies and equipment.

**SOURCE**

**Master Meter**

Location(s) and Size(s)

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**Groundwater Sources**

| Well Number | Diameter (inches) | Depth (feet) | Capacity (gpm) | Location | Treatment Type |
|-------------|-------------------|--------------|----------------|----------|----------------|
|             |                   |              |                |          |                |
|             |                   |              |                |          |                |
|             |                   |              |                |          |                |
|             |                   |              |                |          |                |
|             |                   |              |                |          |                |

**Surface Water Sources**

| Pump Number | High or Low Service | Capacity (gpm) | Location |
|-------------|---------------------|----------------|----------|
|             |                     |                |          |
|             |                     |                |          |
|             |                     |                |          |
|             |                     |                |          |
|             |                     |                |          |

1. Describe method to operate wells for groundwater sources, or pumps for surface water sources (manual or automatic).

2. Auxiliary power available:

Type:

Location:

Capacity:

Describe how to activate and operate auxiliary power:

If auxiliary power is leased, rented, shared or otherwise not immediately available on the property, describe the procedure for securing the equipment:

Owner:

Contact name and telephone number:

Type and terms of agreement:

## **TREATMENT**

1. If treatment employed at wells, describe method to provide auxiliary power to chemical feed pumps.
  
2. If centralized treatment employed (iron removal, zeolite softening, etc.):
  - a. Describe method to provide auxiliary power to high service pumps:
  
  - b. Describe method to provide auxiliary power to chemical feed pumps:
  
  - c. Describe procedure to bypass treatment facility:
  
3. If no treatment, describe method to provide emergency chlorination:
  
4. If surface water treatment employed, describe method to provide auxiliary power.

**DISTRIBUTION**

1. Storage

| Tank Type | Capacity | Location |
|-----------|----------|----------|
|           |          |          |
|           |          |          |
|           |          |          |
|           |          |          |

Describe procedure to bypass storage facility:

2. Pumping stations:

a. Identify location and capacity of pumps:

b. Describe method to provide auxiliary power to pumps:

3. Describe any emergency interconnections with other water supplies. List contact persons, telephone numbers and procedures to secure water from and provide water to those other water supplies.

4. List available licensed water haulers and sources of bottled water with phone numbers.

**ADDITIONAL INSTRUCTIONS**

The Emergency Response Plan shall be located and distributed as necessary to assure effective use by all necessary waterworks personnel.

This plan shall be updated every \_\_\_\_\_ years or as necessary (as changes occur in personnel, contact information, or other factors).

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

Title: \_\_\_\_\_