

PIPP COMPLETENESS REVIEW CHECKLIST

This checklist is provided to help identify that the minimum requirements included in Rule 323.2006 that must be addressed in the PIPP along with a few recommended items to include. Include components that are specific to the facility's pollution prevention methods and emergency response. It is not required to provide the information in the order presented. This checklist does not address all the requirements that may be needed to be included if preparing an Integrated Contingency Plan (ICP) as that will vary with the other planning regulation requirements.

IN THE PLAN? I: Facility identification information Rule 6(1)(a)

- | Yes | No | N/A | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | | Identify the following information about the facility: |
| <input type="checkbox"/> | <input type="checkbox"/> | | 1. Facility name |
| <input type="checkbox"/> | <input type="checkbox"/> | | 2. Facility owner |
| <input type="checkbox"/> | <input type="checkbox"/> | | 3. Mailing address |
| <input type="checkbox"/> | <input type="checkbox"/> | | 4. Street address (if different from mailing address) |
| <input type="checkbox"/> | <input type="checkbox"/> | | 5. Facility telephone number |
| <input type="checkbox"/> | <input type="checkbox"/> | | 6. 24-Hour emergency telephone number(s) It is recommended to list coordinator's office, home, cell phone, pager, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | | 7. Designated spill prevention and control coordinator. It is recommended to also have an alternate contact. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Name of person(s) responsible for on-site spill prevention and control (if different from coordinator). It is recommended to also identify an alternate contact. |
| <input type="checkbox"/> | <input type="checkbox"/> | | 9. Procedures that will be used to alert individuals within the facility of an emergency at the facility: |
| <input type="checkbox"/> | <input type="checkbox"/> | | a. Spill prevention and control coordinator |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Person(s) responsible for on-site spill prevention and control if different from coordinator, and |
| <input type="checkbox"/> | <input type="checkbox"/> | | c. Other people in the facility about the emergency including employees, visitors, contractors, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | | 10. Map showing facility relative to the surrounding area, include thoroughfares. |

II: Notification Procedures to Entities Outside of Facility Rule 6(1)(b) and Part 31 Section 3111b

- | Yes | No | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| | | | Identify the reporting procedures that will be used to notify entities off-site. At a minimum, include notification to the following: |
| <input type="checkbox"/> | <input type="checkbox"/> | | 1. Michigan Department of Environmental Quality |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. PEAS Hotline 800-292-4706 |
| <input type="checkbox"/> | <input type="checkbox"/> | | b. District office during business hours (recommended) |
| <input type="checkbox"/> | <input type="checkbox"/> | | 2. U.S. Coast Guard - National Response Center 800-424-8802 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 3. 911 or if that service not available, then contact your community's primary public safety answering point |
| <input type="checkbox"/> | <input type="checkbox"/> | | 4. Local emergency planning committee (check if covered by calling 911) |
| <input type="checkbox"/> | <input type="checkbox"/> | | 5. Local fire department (check if covered by calling 911) |
| <input type="checkbox"/> | <input type="checkbox"/> | | 6. Local law enforcement agency (e.g. police, sheriff's department, state police) (check if covered by calling 911) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Municipal wastewater treatment plant if facility served by that plant |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Spill clean-up contractor, or consulting firm, or both |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Other local, state, and/or federal agencies or entities that you may be required to report releases under other regulations (required if preparing an ICP that has additional reporting requirements) |

III: Spill Control and Cleanup Procedures Rule 6(1)(c)

- | Yes | No | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| | | | Identify information about how the facility will control spills and conduct cleanups of releases: |
| <input type="checkbox"/> | <input type="checkbox"/> | | 1. Inventory and location of spill control and clean-up equipment (type and quantity) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Equipment available on-site |
| <input type="checkbox"/> | <input type="checkbox"/> | | b. Equipment available off-site |
| <input type="checkbox"/> | <input type="checkbox"/> | | 2. Procedures for response and cleanup |
| <input type="checkbox"/> | <input type="checkbox"/> | | 3. Procedures for characterization and disposal of recovered materials |

IV: Polluting Material Inventory Rule 6(1)(d)

- | Yes | No | N/A | |
|--------------------------|--------------------------|-----|---|
| | | | Include information about polluting materials typically on-site in quantities exceeding TMQs during the preceding 12 months: |
| <input type="checkbox"/> | <input type="checkbox"/> | | 1. Polluting Material(s) by: |
| <input type="checkbox"/> | <input type="checkbox"/> | | a. Chemical Name(s), and |
| <input type="checkbox"/> | <input type="checkbox"/> | | b. Product Name (e.g. Trade Name(s)), and |
| <input type="checkbox"/> | <input type="checkbox"/> | | c. Chemical Abstracts Service (CAS) number |
| <input type="checkbox"/> | <input type="checkbox"/> | | 2. Location where the Material Safety Data Sheets (MSDS) are kept for these polluting materials |

IN THE PLAN? V: Site Plan (Facility map) Rule 6(1)(e)

Yes No N/A

Include information about polluting materials typically on-site in quantities exceeding TMQs during the preceding 12 months:

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Aboveground and underground storage tanks |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Floor drains (know where these floor drains lead to) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Loading and unloading areas, docks |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Sumps (sump pumps) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. On-site water supply |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Containment structures for solid polluting materials |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Secondary containment structures for liquid polluting materials |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Other storage and use areas of polluting materials that do not exceed TMQs (recommended) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Other relevant site structures |

VI: Outdoor Secondary Containment for Liquid Polluting Materials Rule 6(1)(f)

Yes No N/A

Include information about outdoor secondary containment structures on-site used for liquid polluting materials exceeding TMQs:

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Location(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Design and construction data including: |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Dimensions |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Construction materials (and types of coatings) used |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Holding capacity |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Amount of polluting material stored in that structure |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. How spilled polluting materials will be captured and removed |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Provisions for physical security of secondary containment structure, such as: |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Signage |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Gates & Fences |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Barriers |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Other |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Precipitation management (rain or storm water and snow accumulation) procedures |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Characterization of collected precipitation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Disposal procedures |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Copies of permits or exemptions authorizing discharge (i.e. from DEQ, local wastewater treatment plant) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Inspections and maintenance procedures |

VII: Other Control Mechanisms and Facility Security Rule 6(1)(g) & (h)

Yes No N/A

Include the following information if it has not already been addressed in the plan:

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Other control mechanisms at facility to prohibit or control releases |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Provisions for general facility physical security |

VIII: Plan Preparation, Submittal, and Update Requirements Rule 6(2)–(5)

Yes No N/A

Complete PIPP or ICP, review and update as necessary, and submit notifications:

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | | 1. PIPP completed when facility meets threshold management quantities |
| <input type="checkbox"/> | <input type="checkbox"/> | | 2. Plan is kept at the facility and available for inspection |
| <input type="checkbox"/> | <input type="checkbox"/> | | 3. Notification that PIPP or ICP has been prepared and certification of compliance with Part 5 rules sent to Water Bureau district office within 30 days of completing the PIPP or ICP |
| <input type="checkbox"/> | <input type="checkbox"/> | | 4. Notification sent to LEPC that plan is completed and available upon request |
| <input type="checkbox"/> | <input type="checkbox"/> | | 5. Notification sent to local health department that the plan is completed and available upon request |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Copy of plan submitted to a requesting agency within 30 days after receiving the request |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Plan is evaluated every three years and after any release requiring implementation of the plan |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Plan is updated if any facility personnel, processes, or procedures that were included in the plan occur, or other changes are necessary to maintain compliance with rules |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Recertification and re-notification of updates are sent to Water Bureau district office , LEPC , and local health department |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Plan is modified within 30 days of receipt, or other DEQ provided response timeframe, of the DEQ's request to modify the plan if found to be incomplete or inadequate; submit re-notification and recertification |