**Items due to the SERC by January 31st**

**To be reviewed by SERC staff:**

Affidavit of Publication date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership List date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bylaws date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be reviewed by Planning and Training Subcommittee members:**

**Letter of Response Questionnaire** date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completely and accurately filled out

Level of Response declared --- Awareness, Operations, Technician / circle declared Level of Response

Number of individuals trained in accordance to OSHA 1910.120 \_\_\_\_\_\_\_\_\_\_

Any specialized training provided \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HazMat Emergency Response Plan** date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RAD component: \_\_\_\_\_

Y / N

Entire plan updated **OR** specific sections of the plan updated with dates

NRT-1A Checklist completely and accurately filled out

correct page #s match with the nine areas on the NRT-1A Checklist within the Hazmat Plan

Current Letter of Promulgation

Tier II Facility List, dated later than October

Level of Response is identified in the Plan

Contact Information

Equipment List

Training and Exercise schedules identified by type and when to be held

Meeting minutes approving the Plan updates

**Exercise / Incident Report** date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completely and accurately filled out / signed

Narrative explaining the Hazardous Materials event, to include:

Hazardous Materials used during the event

Who and what agencies were involved in the event

How and what parts of the Hazmat Plan were used

After Action Report (AAR)/Corrective Actions, if any, identified for Hazmat Plan

Date in previous calendar year the exercise/event happened \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SERC Staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Committee Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**