

# TIER II REPORTING



Mathew Marshall, VP



# Industry Updates for Reporting 2011

# Welcome to *E-Plan's Online Tier II Reporting System*

This easy E-Plan online reporting system will allow you to create a report you can submit to your state to meet their requirement for filing of (SARA Title III) Tier II Emergency and Hazardous Chemical Inventory Reports.

This system is free to company managers required to file their Tier II reports to the State each year.

If you have comments or questions, please use the [Contact Us](#) button on any E-Plan website page.



**2011 NOW AVAILABLE**

New Users must first register their facility [Register Now](#) to obtain a 7-digit AccessID

If you have already registered for an account, enter your Access ID and password in the boxes below and Sign In to access or update your account and data.

Access ID

[Forgot Access ID](#)

Password

[Forgot Password](#)

[Sign In](#)

# E-Plan Online Filing Submission Management

Access ID: 1014804

Enter new Data/ Retrieve old Data:

Use this function to enter data for a new year or make changes to data of an year already submitted

- Select a year to file/retrieve Tier II data:
- Currently filed Years :

Copy data from previous year:

Use this function to copy data from a submitted year to any other non-submitted year

**Note:** Copying data will preserve additional data file previously uploaded

From:

To:

### Copy data from previous year:

Use this function to copy data from a submitted year to any other non-submitted year

**Note:** Copying data will preserve additional data file previously uploaded

From:

To:

[Continue](#)

### Enter new Data/ Retrieve old Data:

Use this function to enter data for a new year or make changes to data of an year already submitted

- Select a year to file/retrieve Tier II data:
- Currently filed Years :

[Continue](#)

### Import Tier2 '.zip', Tier2 '.t2s', or CAMEO '.zip' file:

Use this function to import an existing Tier2 '.zip', Tier2 '.t2s', or CAMEO '.zip' file.

- Note that the Tier2 '.zip' or Tier2 '.t2s' file should contain up to nine (9) data files and CAMEO '.zip' file should contain 16 data files.
- These data files should have comma-separated values and '.mer' file extensions.

[Continue](#)



## 2011 Online Filing Home

**\* Federal requirements include: Owner / Operator name, mail address, phone and 1 Emergency Contact with name and 24-hr phone**

Following is the submitted facility information

[Add New Facility](#)

<a href="#">NO.</a>	<a href="#">ID</a>	<a href="#">FACILITY NAME</a>	<a href="#">STATE</a>	<a href="#">FILING STATUS</a>	OPTIONS
1.	2880760	<a href="#">Cutting Edge Planning and Training</a> Contact Information 1. <a href="#">Mathew Marshall - Owner / Operator</a> <a href="#">Edit</a> <a href="#">Delete</a> Chemical Information 1. <a href="#">Mercury (62373)</a> <a href="#">Edit</a> <a href="#">Delete</a> <a href="#">Copy</a>	NJ	Not - Filed	<a href="#">Edit Facility</a> <a href="#">Delete Facility</a> <a href="#">Add Chemical</a> <a href="#">Add Contact</a>

**Important:** On Completion of data entry please click on "Validate Record" to finalize filing

[Validate Record](#)

[First Responder View](#)



## Facility Identification

### Cutting Edge Planning and Training (FacID:2880760)

10 Pearl Street  
Newfield, NJ, 08344, USA

\* Report a NAICS code (Federal requirement)

ID Type	ID Value	Description		
NAICS	611519	Fire Fighter Training School	<a href="#">Edit</a>	<a href="#">Delete</a>

ID Type

ID Value

Description

[Add](#)

[Reset](#)

[Next](#)



[Submission Home](#) [Filing Management](#)

[Facility Information](#)

[Facility Identification](#)

**State Fields**

[Documents](#)

## State Applicable Fields

**Cutting Edge Planning and Training (FacID:2880760)**

10 Pearl Street  
Newfield, NJ, 08344, USA

No Applicable State Fields

[Next](#)

[Contact Us](#)

[FAQ](#)

Instructional Video Tours


Select a Tour





## Cutting Edge Planning and Training (FacID: 2880760)

10 Pearl Street  
Newfield, NJ, 08344, USA

<a href="#">Document ID</a>	<a href="#">Object ID</a>	<a href="#">File Name</a>	<a href="#">File Type</a>	<a href="#">File Category</a>	<a href="#">File Description</a>	<a href="#">Download</a>	<a href="#">_</a>
184068	2880760	4thEPlanUsersGroupBrochure2011.pdf	File	Other	Users Group Conference		<a href="#">Delete</a>

**Note:** Please upload site plans

File types: PDF, DOC, JPG are only allowed.  
If entering a link, choose File type as Link  
and put the link as http://somewebsite in the description field.

### All Fields are Mandatory

File Type

File Category

File   Max file size 9 Mb

File Description

# Add/Edit Contact



[Submission Home](#) [Filing Management](#)

[Manage Submission](#) [Logout](#)

## 2011 Online Filing Home

**\* Federal requirements include: Owner / Operator name, mail address, phone and 1 Emergency Contact with name and 24-hr phone**

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[Add New Facility](#)

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**Important:** On Completion of data entry please click on "Validate Record" to finalize filing

[Validate Record](#)

[First Responder View](#)

**Mathew Marshall(Owner / Operator)**  
**Cutting Edge Planning and Training (FacID:2880760)**

10 Pearl Street  
Newfield, NJ, 08344, USA

**\* Federal requirements include: Owner / Operator name, mail address, phone and 1 Emergency Contact with name and 24-hr phone**

\* Fields are mandatory

Title	<input type="text"/>
Last Name or Business Name *	<input type="text" value="Marshall"/>
First Name	<input type="text" value="Mathew"/>
Street Address *	<input type="text" value="90 3rd Street"/>
City *	<input type="text" value="Bonita Springs"/>
County	<input type="text" value="Collier"/>
State *	<input type="text" value="GA"/>
ZIP *	<input type="text" value="34134"/>
Country *	<input type="text" value="USA"/>
Email *	<input type="text" value="mathew.marshall0511@gmail.com"/>

## Contact Phone Information

**Mathew Marshall(Owner / Operator)**  
**Cutting Edge Planning and Training (FacID:2880760)**  
10 Pearl Street  
Newfield, NJ, 08344, USA

\* Federal requirements include: Owner / Operator name, mail address, phone and 1 Emergency Contact with name and 24-hr phone

<u>Phone Type</u>	<u>Phone Number</u>	<u>  </u>
Mobile - Cell	239-287-7069	<a href="#">Edit</a> <a href="#">Delete</a>

Phone Type

Select Phone Type ▼

Phone Number

[Add](#)

[Reset](#)

[Next](#)

## Associate Contact With Facility

**Mathew Marshall(Owner / Operator)**  
**Cutting Edge Planning and Training (FacID:2880760)**  
10 Pearl Street  
Newfield, NJ, 08344, USA

**Note:** You can associate "**Mathew Marshall**" with other facilities such that the contact information can be copied to the other associated facilities.

<u>Facility Name</u>	<u>Contact Type</u>	<u>  </u>	<u>  </u>
Cutting Edge Planning and Training	Owner / Operator	<a href="#">Edit</a>	<a href="#">Delete</a>

Select Facility ▼

Select Contact Type ▼

[Add](#)

[Reset](#)

[Next](#)

## Document Upload for Object ID: 5501782

**Mathew Marshall(Owner / Operator)**  
**Cutting Edge Planning and Training (FacID: 2880760)**

10 Pearl Street  
Newfield, NJ, 08344, USA

Document ID	Object ID	File Name	File Type	File Category	File Description	Download	
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File types: PDF, DOC, JPG are only allowed.  
If entering a link, choose File type as Link  
and put the link as http://somewebsite in the description field.

### All Fields are Mandatory

File Type

File Category

File   Max file size 9 Mb

File Description



## 2011 Online Filing Home

**\* Federal requirements include: Owner / Operator name, mail address, phone and 1 Emergency Contact with name and 24-hr phone**

Following is the submitted facility information

[Add New Facility](#)

<a href="#">NO.</a>	<a href="#">ID</a>	<a href="#">FACILITY NAME</a>	<a href="#">STATE</a>	<a href="#">FILING STATUS</a>	<a href="#">OPTIONS</a>
1.	2880760	<a href="#">Cutting Edge Planning and Training</a> Contact Information 1. <a href="#">Mathew Marshall - Owner / Operator</a> <a href="#">Edit</a> <a href="#">Delete</a> Chemical Information 1. <a href="#">Mercury (62373)</a> <a href="#">Edit</a> <a href="#">Delete</a> <a href="#">Copy</a>	NJ	Not - Filed	<a href="#">Edit Facility</a> <a href="#">Delete Facility</a> <a href="#">Add Chemical</a> <a href="#">Add Contact</a>

**Important:** On Completion of data entry please click on "Validate Record" to finalize filing

[Validate Record](#)

[First Responder View](#)



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[Manage Submission](#) [Logout](#)

## Submission Report for Access ID 1014804

**Note:**

- 1) Errors indicated on this page identify required fields not completed. While Federal and State requirements are mandatory, E-Plan requirements provide extremely needed information to first responders in emergency scenarios.
- 2) Once ALL facilities pass ALL submission tests, the "Upload Data to E-Plan" option will appear.

Validation Time : Fri Jan 06 12:31:31 UTC 2012

FacID 2880760 : Cutting Edge Planning and Training

**Error:** An Emergency contact is required for a Facility Submission. [Add New Contact of type Emergency Contact to fix this error.](#)

# Contact Information



**Mathew Marshall**

239-287-7069

[mathew.marshall0511@gmail.com](mailto:mathew.marshall0511@gmail.com)