

**CALIFORNIA CODE OF REGULATIONS  
TITLE 14. NATURAL RESOURCES  
DIVISION 1. FISH AND GAME COMMISSION – DEPARTMENT OF FISH AND GAME  
SUBDIVISION 4. OFFICE OF OIL SPILL PREVENTION AND RESPONSE**

**15-DAY COMMENT PERIOD  
ILLUSTRATION OF CHANGES**

The Department of Fish and Wildlife, Office of Spill Prevention and Response is proposing changes to the originally proposed Application for Certification of Plan Holder Spill Management Team (DFW form 1005). Those changes are illustrated as follows:

The original proposed text is illustrated entirely with single underline for new text.

For the 15-day public comment period, added text is illustrated in bold and double underline, and deleted text in ~~double strikethrough~~.

There were no revisions to Form 1005 during the second 15-day public comment period.

For the third 15-day public comment period, added text is illustrated in **bold, double underline, italics, and framed**, and deleted text in ~~double strikethrough, italics and framed~~. The 45-day and subsequent 15-day illustrations remain.



**APPLICATION FOR CERTIFICATION OF PLAN HOLDER SPILL MANAGEMENT TEAM**

Please type or print clearly in English when completing this application. Refer to page 8 for instructions on how to complete and submit this form.

Purpose: This form should be completed by all contingency plan holders to identify and request certification of a spill management team, pursuant to Title 14, California Code of Regulations, sections 830.1 through 830.11, **regardless of whether the identified spill management team is employed by the plan holder**. If the spill management team includes personnel not employed by the plan holder, the applicant will indicate this in sections C and D. If an owner or operator of a facility or vessel with more than one contingency plan will use the same spill management team for multiple plans, they may list the plan numbers in section C.

**A. APPLICATION TYPE**

- New Application
- Revision (refer to Title 14, California Code of Regulations, subsection 830.8(a)). **Complete only those sections being revised.**
- Renewal (refer to Title 14, California Code of Regulations, subsection 830.8(b))
- Update (refer to Title 14, California Code of Regulations, subsection 830.8(c)). **Complete only those sections being updated.**

**If indicating Revision, Renewal, or Update, enter your previously assigned SMT number:**

**B. PLAN HOLDER APPLICANT INFORMATION**

**1. Legal company name and/or name of applicant:**

Mailing Address:

Phone Number:

Email:

**2. Address ~~of~~ principal place of business of applicant if different from above:**

**3. Contact Name:**

Title:

Mailing Address:

Phone Number:

Email:

**C. DESCRIPTION OF SPILL MANAGEMENT TEAM SERVICES**

**1. Indicate the personnel the plan holder will use to meet the minimum spill management team requirements described in Title 14, California Code of Regulations, section 830.4 (check all that apply).**

- Personnel employed by plan holder
- Personnel employed by plan holder's parent company or other affiliated entity
- Contracted personnel



**2. Indicate the contingency plan(s) for which the applicant is requesting certification.**

Provide below the approved contingency plan number(s), **the waters impacted (marine, perennial, intermittent, ephemeral)**, the corresponding tier classification(s), and ~~area contingency planning (ACP)~~ **and/or response planning area(s) (RPA), geographic region(s)** in which spill management team services will be provided, or indicate whether the spill management team is seeking statewide certification. **If more than one type of waterway is impacted by a plan holder's operations, list all impacted water types.** Multiple plan numbers may be listed if the applicant is using the same spill management team for all plans listed.

<u>Contingency Plan Number</u>	<u>Waters Impacted</u>	<u>Tier</u>	<u>ACPs</u>	<u>RPAs</u>

Tier I SMT – Provides services to facilities with a reasonable worst-case spill volume of 1,000 barrels or more that may impact inland waters; or facilities or vessels with a reasonable worst-case spill volume of 600 barrels or more that may impact marine waters.

Tier II SMT – Provides services to facilities with a reasonable worst-case spill volume of 500 barrels to 999 barrels that may impact inland waters; or facilities or vessels with a reasonable worst-case spill volume of 250 barrels to 599 barrels that may impact marine waters.

Tier III SMT – Provides services to facilities with a reasonable worst-case spill volume of 499 barrels or less that may impact inland waters; ~~or~~ facilities or vessels with a reasonable worst-case spill volume of 249 barrels or less that may impact marine waters; **mobile transfer units with any reasonable worst-case spill volume.**

- ACP 1 – North Coast
- ACP 2 – San Francisco Bay and Delta
- ACP 3 – Central Coast
- ACP 4 – L/LB North
- ACP 5 – LA/LB South
- ACP 6 – San Diego
- All – All ACPs

**Waters Impacted:**

- M – marine**
- P – perennial**
- I – intermittent**
- E – ephemeral**

RPA I – Counties of Los Angeles, Orange, San Luis Obispo, Santa Barbara, and Ventura

RPA II – Counties of Humboldt, Del Norte, Mendocino, Lake, Sonoma, Marin, Napa, Solano, Contra Costa, Alameda, San Francisco, San Mateo, Santa Clara, San Benito, Santa Cruz, and Monterey

RPA III – Counties of Butte, Colusa, Glenn, Lassen, Modoc, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, and Yuma

RPA IV – Counties of Alpine, Amador, Calaveras, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Stanislaus, Tuolumne, and Yolo

RPA V – Counties of Fresno, Kern, Kings, Madera, Mariposa, Merced, and Tulare

RPA VI – Counties of Imperial, Inyo, Mono, Riverside, San Bernardino, and San Diego

All – All counties



**APPLICATION FOR CERTIFICATION OF PLAN HOLDER SPILL MANAGEMENT TEAM**

**D. BASIS FOR CERTIFICATION**

**1. Initial Response Personnel:**

Indicate the number of initial response personnel who can perform the following incident command system (ICS) positions, who can arrive on-scene within eight hours of being notified of a spill, as described in Title 14, California Code of Regulations, subsections 830.4(a)(1)(A), (a)(2)(A), and (a)(3)(A), and have the qualifications described in subsections 830.5(d), ~~(e)(d)~~ through (h), as applicable to the tier classification for which the applicant is requesting certification. For personnel not employed by the plan holder, indicate the provider of the personnel. Personnel must be located in the continental United States, available on a 24-hour basis, and ~~should~~ **shall** be fluent in English

- Tier I & II spill management teams: The total number of personnel shall not be fewer than 4 individuals.
- Tier III spill management teams: The total number of personnel shall not be fewer than 3 individuals.

<u>ICS Position</u>	<u>Number of Trained Personnel</u>	<u>Provider of Personnel (if other than plan holder)</u>
<b>Incident Commander</b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b>Safety Officer</b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b>Operations Section Chief</b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b>Other Position (specify): _____</b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b>Other Position (specify): _____</b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		



**APPLICATION FOR CERTIFICATION OF PLAN HOLDER SPILL MANAGEMENT TEAM**

**2. Cascading Response Personnel:**

Indicate the number of cascading response personnel, including alternates, who can perform the following incident command system (ICS) positions, who can arrive on-scene within 24 hours of being notified of a spill, as described in Title 14, California Code of Regulations, subsections 830.4(a)(1)(B), (a)(2)(B), and (a)(3)(B), and who have the qualifications described in subsections 830.5(d) and ~~(d)~~ **and** (i) through (l), as applicable to the tier classification for which the applicant is requesting certification. **Refer to subsections 830.4(a)(1)(C), (a)(2)(C), and (a)(3)(C) for the required alternates for cascading positions.** For personnel not employed by the plan holder, indicate the provider of the personnel. A list of the names of personnel employed by the plan holder shall be maintained at the plan holder’s place of business and made available to the Administrator upon request. Personnel must be located in the continental United States, available on a 24-hour basis, and ~~should~~ **shall** be fluent in English. **Plan holders whose reasonable worst-case spill volume is in the Tier III range and who only pose a risk to intermittent or ephemeral waterways are not required to retain cascading response personnel and may leave this section blank.**

- Tier I spill management teams: The total number of personnel shall not be fewer than 12 individuals.
- Tier II spill management teams: The total number of personnel shall not be fewer than 10 individuals
- Tier III spill management teams: The total number of personnel shall not be fewer than 8 individuals.

<u>ICS Position</u>	<u>Number of Trained Personnel</u>	<u>Provider of Personnel (if other than plan holder)</u>
<b><u>Incident Commander</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Safety Officer</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Assistant Liaison Officer</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Assistant Public Information Officer</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		



**APPLICATION FOR CERTIFICATION OF PLAN HOLDER SPILL MANAGEMENT TEAM**

<u>ICS Position</u>	<u>Number of Trained Personnel</u>	<u>Provider of Personnel (if other than plan holder)</u>
<b><u>Operations Section Chief</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Planning Section Chief</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Logistics Section Chief</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		
<b><u>Finance Section Chief</u></b>		
<u>Personnel Employed by Plan Holder</u>		
<u>Personnel Employed by Affiliated Persons</u>		
<u>Contracted Personnel</u>		



**APPLICATION FOR CERTIFICATION OF PLAN HOLDER SPILL MANAGEMENT TEAM**

**3. Certification or renewal exercise:**

A spill management team shall achieve ~~the~~ objectives required for certification ~~within three years by the end of the third~~ full calendar year following the issuance of an interim certification (see Title 14, California Code of Regulations, sections 830.6 and 830.7). ~~The objectives must be achieved either at an announced exercise scheduled in accordance with the Office of Spill Prevention and Response’s Drills and Exercises program (see sections 820.01 and 820.01), or at a separate exercise (see section 830.6(a)(2)).~~ **Refer to subsection 830.6(a) for procedures for scheduling a certification exercise and the criteria for spill response credit.** Indicate the method and the anticipated date or year and location the exercise will be scheduled.

OSPR D&E Exercise  Other: Applicant will contact OSPR

Date or Year: \_\_\_\_\_ Location: \_\_\_\_\_

**E. MOBILIZATION PLAN**

Provide a general description of the means by which personnel and essential supporting equipment will arrive on-scene within the required timeframes in the ~~area contingency planning/response planning~~ area(s) geographic region(s) for which the spill management team intends to provide services (described in Title 14, California Code of Regulations, section 830.4). The description shall reference locations where personnel are typically based and the method by which (e.g. commercial jet, automobile) they will arrive.



**F. ATTESTATION**

The information provided regarding spill management team personnel and capabilities is factual and correct to the best of my knowledge and belief. I agree to allow Office of Spill Prevention and Response personnel access to my facility and documentation associated with the spill management team certification process, prior and subsequent to receiving a certification, for the purpose of verifying information contained in this application. I understand that all training records identified for certification purposes are subject to verification. I agree to participate in announced and unannounced exercises as set forth in Title 14, California Code of Regulations, sections 830.6 and 830.7, to verify any or all information contained in this application, prior and subsequent to receiving a certification.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





## **INSTRUCTIONS**

This form should be completed by all contingency plan holders to identify and request certification of a spill management team, pursuant to Title 14, California Code of Regulations, sections 830.1 through 830.11. This form is required to be submitted to the Office of Spill Prevention and Response (OSPR) in accordance with section 830.7 for a plan holder's spill management team to become certified by the Office of Spill Prevention and Response. This form can be found on OSPR's website at <https://www.wildlife.ca.gov/OSPR/Spill-Management-Teams>.

### **1. Submit completed application via one of the following methods:**

By U.S. Mail to:

California Department of Fish and Wildlife  
Office of Spill Prevention and Response (OSPR)  
Attn: Preparedness Branch  
P.O. Box 944209  
Sacramento, CA 94244-2090

By e-mail to: [osprsmt@wildlife.ca.gov](mailto:osprsmt@wildlife.ca.gov)

Note: For security purposes, ZIP files transmitted via e-mail will not be accepted.

### **2. Miscellaneous instructions:**

- If a question does not apply, answer "not applicable".
- If additional space is required, supplemental pages may be attached.
- Incomplete applications will not be processed until OSPR receives all required information.
- Confidentiality. The process for asserting a claim of confidentiality for any information required by this application is described at Title 14, California Code of Regulations, subsection 830.7(a)(f).

## **Section C**

The plan holder should indicate whether they will use personnel employed by the plan holder, a parent company or affiliated entity, contracted personnel, or any combination of these options in C.1. The plan holder should indicate the contingency plan number, waters impacted, tier, and geographic regions for which the spill management team is requesting certification in C.2. Waterway designations are depicted in the National Hydrography Dataset and the statewide quarter mile buffer data layers on the Southwest Environmental Response Management Application, available on the National Oceanic and Atmospheric Administration's website. If more than one type of waterway is impacted by a plan holder's operations, list all impacted water types. If an owner or operator or a facility or vessel with more than one contingency plan will use the same team for multiple plans, they may list the plan numbers in C.2.

## **Section D**

The applicant shall indicate the number of personnel employed by the plan holder or by persons affiliated with the plan holder, and the number of contracted personnel in the tables in section D. For personnel not employed by the plan holder, indicate the provider of personnel. Personnel listed in section D.1 shall have the training described in subsections 830.5(d) ~~(e)(a)~~ through (h) for Initial Response Personnel, as applicable to the tier classification for which the applicant is requesting certification.

Personnel listed in section D.2 shall have the training or other qualifications described in subsections 830.5(e) ~~(f)(d)~~ through (j), as applicable to the tier classification for which the applicant is requesting certification. Plan holders whose reasonable worst-case spill volume is in the Tier III range and who only pose a risk of impacting waterways designated as intermittent or ephemeral are not required to retain cascading response personnel. If an applicant is submitting an application for a plan in the Tier III range with intermittent or ephemeral impacts only, section D.2 may be left blank.

If personnel still need training at the time of submission of a New Application form is submitted, as indicated in section A, the applicant shall indicate the current number of personnel trained in compliance with subsections 830.5(e) ~~(e)(d)~~ through (j). When the Administrator requests documentation of training, exercise participation, and experience, as described in subsection 830.7(b)(2), the applicant shall submit a training plan indicating which courses will be completed by December 31 of the third full calendar year following the date of issuance of an interim certification.