Office of Spill Prevention and Response



PLAN HOLDER Online Application Job Aid

for

Spill Management Team Certification



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Introduction

In 2017, the *Lempert-Keene-Seastrand Oil Spill Prevention and Response Act* was amended to require owners or operators of facilities and vessels regulated by the Office of Spill Prevention and Response (OSPR) to identify a certified spill management team (SMT) in their contingency plans. OSPR promulgated regulations (Title 14 CCR § 830.1-11) implementing the legislation, which require plan holders to submit applications to identity and request certification of their SMT. At the request of the regulated community, OSPR created an online system that can be used to submit applications. Users can also directly update their contact information, make corrections, and request revisions through the system.

This job aid will guide you through the online application for contingency plan holders or their authorized representatives. Plan holders are encouraged to apply through the online system in lieu of completing a <u>DFW Form 1005 Application for Certification of Plan Holder Spill Management Team</u>, which can be found on OSPR's <u>SMT website</u>. In addition to the instructions in this job aid, the online application contains extensive instructions and reference information to assist applicants.

For assistance with the application, please email <u>OSPRSMT@wildlife.ca.gov</u>. You will typically receive a response to your request within one full business day.

Note: The online application system is compatible with many different browsers; and has been tested in Chrome, Firefox, and Edge. It is highly recommended to have a high-speed internet connection.



Registration

All new applicants must create an account with the California Department of Fish and Wildlife. Go to OSPR's <u>SMT website</u> to find the link to <u>register</u>. To create a new account, click on "Register" in the "Actions" box.

Apps My Account Login	1	Actions
Login		Login
Login to the California Depa	rtment of Fish and Wildlife.	Forgot Password
Username/Email	jdoe@domain.org	
Password	A password is required.	
	Login	

You will be directed to the Registration Page where you will fill out the information required to create the account you will use to access the SMT Application. After you have filled in your information, you will receive an email to activate your account.

My Account ->> Create Account		
Create Account		
INSTRUCTIONS		
	he Department of Fish and Wildlife, you must complete a two step process.	
	intering all of the required information. When you click the create button, an email will be sent to you with information needed to	
	ivate your account using the information provided in the email from step one. Once your account is activated, you will be able to	•
Note: Fish and Wildlife employees supervisor contact the Help Desk.	already have access using their network account. Attempting to create an account with a CDFW email address will fail. Use yo	ur network username and password to login. If you do not have a network login, have your
	Personal Information	
Age of Consent:	I certify that I am at least 18 years old	
	State law restricts the collection of personal information from minors. If you are a minor, please have your parents create an account instead. For more information, refer to our <u>conditions of use</u> .	
First Name:		
Middle Initial:		(optional)
Last Name:		
Address Line 1:		
Address Line 2:		(optional)
City:		
Country:	United States of America	
State (if US):	California	
ZIP (Postal) Code:		
	Login Information	
Email:	shane.keefauver@wildlife.ca.gov	
	Passwords must have from 15 to 50 characters.	
	· Passwords must have at least one upper case letter, one lower case letter, one number and one non-alphanumeric characteristic characteristi	ter.
	Passwords may only contain ASCII letters, numbers, symbols and punctuation. Space or tab characters are not allowed.	
	 New passwords must be different than the current password and the previous 10 passwords. 	
New Password:		
Confirm Password:		
	Create	



Getting Started with the Online Application

Once you have activated your account, go to the <u>application</u> link on the <u>SMT website</u> and login using the credentials you created. If you forget your password, click on the "Forgot Password" link located in the "Actions" box and follow the instructions.

Apps i My Account i Login		*	Actions
Login Login to the California Depar	tment of Fish and Wildlife.	 Login Register 	
Username/Email	jdoe@domain.org	Forgot Pass	word
Password	A password is required.		
	Login		

Navigation

The application system has six different screens:

- **Index:** Dashboard where you can start an application, as well as edit, print, and view the status of existing applications.
- **Application Information:** Enter your contact information, types of SMT service providers, and your mobilization and certification exercise information. This screen corresponds to sections A, B, C.1, D.3, and E of DFW Form 1005.
- **Contingency Plans:** Enter the contingency plan numbers, impacted waterways, Tiers, and geographic regions. This screen corresponds to section C.2 of DFW Form 1005.
- Initial Personnel: Enter the number of Initial Response Personnel and the provider of personnel, if other than the plan holder. This screen corresponds to section D.1 of DFW Form 1005.
- **Cascading Personnel:** Enter the number of Cascading Response Personnel and the provider of personnel, if other than the plan holder. This screen corresponds to section D.2 of DFW Form 1005.
- Attestation: Attest to the veracity of the information provided and your intent to meet program requirements. This screen corresponds to section F of DFW Form 1005.



After completing the Application Information screen, you will navigate sequentially to the other screens by selecting the "Back" or "Next" buttons located at the bottom of each page. You are not required to complete the application in one sitting. Once you have completed the Applicant Information screen, the system automatically saves your progress as you complete each entry, so you can return to your application to complete it later.

As you progress through the application, you can navigate to previous screens by selecting the header page link located at the top of each page of the application.



There are instructions at the top of each screen. It is extremely important to read all instructions in the application system before entering information. You may be prompted to fill in required information if you attempt to leave a page without filling in all of the required fields. Blue text indicates a clickable link within the system.

To complete any fields with lengthy text in the application, we recommend that you compose the text using word processing software and then copy and paste the text into the application form. Please carefully review all pasted text, particularly when using special characters, bullets, etc.

Do not copy and paste charts or tables into the text boxes within the application. Ancillary documentation may be submitted by emailing OSPRSMT@wildlife.ca.gov with your SMT Number in the subject line.

Note: There is a house symbol located near the top of the Application that, if selected, will take you back to the CDFW home page. We do not recommend selecting this icon unless you want to exit the application. To navigate back to your dashboard, select the "Index" tab on the heading at the top of the page.





Index Screen

You will start at the Index screen, where you can also access your applications to view their status, edit, and print them.

Index				
c.	Application for Spill Ma	nagement Team (Certification	n
External Spill Managem	ent Team			
Create New External Application				
Plan Holder Spill Manag	gement Team			
Create New Plan Holder Application				
Name	SMT Number	Status		
OilCo Operators LLC	PH00035	In Progress	Edit	Print Preview

To begin an application, click on "Create New Plan Holder Application" from the Index screen.

Index
Application for Spill Management Team Certification
External Spill Management Team
Create New External Application
Plan Holder Spill Management Team
Create New Plan Holder Application

After selecting "Create New Plan Holder Application," you will be taken to the Create Plan Holder Application screen.

Applicant Information Screen

This is where you will enter your contact information, types of SMT service providers, and your mobilization and certification exercise information. The Applicant Information screen corresponds to sections A, B, C.1, D.3, and E of DFW Form 1005. Once you have completed the sections on this screen and click "Save and Continue," your application will be saved and you will be able to access it from the Index screen.



When you first create an application, the top of the screen will say, "Create Plan Holder Application."

Create Plan Holder Application 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.

When you return to an application, the top of the screen will say "Applicant Information" and you will be prompted to select an option that represents your application status. See the <u>Returning to an Existing Application</u> section of this job aid for guidance on returning to an application in progress, making corrections and updates, and requestions revisions and renewals.

Applicant Information
Purpose: This form should be completed by persons offering spill management services to contingency plan holders as part of a plan holder's certified spill management team pursuant to Title 14, California Code of Regulations, sections 830.1 through 830.11 and who are not directly employed by a plan holder. These persons may include parent companies or affiliates of plan holders or persons offering services to plan holders by contract or other approved means.
INSTRUCTIONS: DO NOT CHANGE THE RADIO BUTTON below unless you are making a Correction or an Update to a submitted application. Application opens "In Progress".
● In Progress ○ Correction ○ Update ○ Revision

Applicant Information

The Application Information section corresponds to B.1 of DFW Form 1005.

Enter the following applicant information: Legal company name, mailing address, and phone number. The email address will automatically populate with the email associated with the account.

Applicant Information			 			
Legal company name and/o	or name of applicant					
Mailing Address		City	State	~	Zip	
Phone	Shane.Keefauver@Wildlife	e.ca.gov				



Address of principal place of business (if different from above):

Fill out this section if the address of the applicant's principal place of business is different from the address listed in the Applicant Information section above. You may also use this space to add an alternate point of contact. If you enter an email address, this email will be included on correspondence from OSPR SMT. This section corresponds to B.2 of DFW Form 1005.

If applicable, enter the mailing address, as well as the phone number and email.

ddress	City	State	~	Zip	

Contact Information

-

Enter the contact information to be used for all correspondence. Please ensure that the contact information is correctly entered. This section corresponds to B.3 of DFW Form 1005. Enter the contact name, mailing address, phone number, and email address.

Contact Information (This information will b phone number are entered.)	e used for all correspondence, p	please ensure the correct name, email address, and
First	Last	Title
Address	City	State V Zip
Phone Email		



Spill Management Team Services Section

Plan holders may draw from their own employees, personnel from a corporate parent or affiliated company, contracted personnel, or a combination thereof. In this section, you will indicate which types of personnel the plan holder is using for their certified SMT. This section corresponds to C.1 of DFW Form 1005.

Select "Yes" for each type of personnel that the plan holder's SMT includes and "No" for types that do not apply. For example, if the plan holder is using only their own employees, select "Yes" for "Personnel employed by a plan holder" and "No" for the other options. You must select "Yes" or "No" for all three radio buttons to be allowed to proceed to the next screen.

Spill Management Team Services		
 Indicate the personnel the plan holder will use to meet the minimum spill management requirements described in Title 14, California Code of Regulations, section 830.4. 	nt team	
Personnel employed by plan holder	Yes	O No
Personnel employed by plan holder's parent company or other affiliated entity	O Yes	No
Contracted personnel	O Yes	No

Certification or Renewal Exercise

Plan holders are encouraged to combine their certification exercise with their annual or triennial exercise held through OSPR's Drills and Exercises program. Indicate whether the Applicant will use an OSPR D&E exercise or if the applicant will contact OSPR about alternate arrangements. The Certification or Renewal Exercise section corresponds to D.3 of DFW Form 1005.

Enter the date or year and location you plan to conduct your certification exercise. If you do not yet know the exercise location, you may enter TBD.

Certification or Renewal Exerc	ise
(see Title 14, California Code of Regul	e the objectives required for certification by the end of the third full calendar year following the issuance of an interim certification lations, sections 830.6 and 830.7). Refer to subsection 830.6(a) for procedures for scheduling a certification exercise and the te 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



Mobilization Plan

Plan holders must submit a mobilization plan as part of their application. The mobilization plan should account for the locations of the Initial and primary Cascading Response Personnel positions and describe how they will arrive on-scene in the applicable geographic regions. The Mobilization Plan section corresponds to section E of DFW Form 1005.

You may enter the details of your mobilization plan in this section, or you may email it to <u>OSPRSMT@wildlife.ca.gov</u>. OSPR has created a <u>Mobilization Plan template</u> that plan holders can use to document their mobilization details. The template can be found on the <u>SMT website</u>. If you are submitting documents by email, please note that in the Mobilization Plan text box.

For the mobilization of personnel not employed by the plan holder, you may refer to the respective external application(s) for details. Provide the name of the SMT providing the personnel and include their SMT Number if available.

If you enter your mobilization plan in the text box provided, we recommend that you write it in a word processing program and copy and paste it into the text box.

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 geographic regions 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.
For mobilization of personnel not employed by the plan holder, you may refer to the relevant external application(s) for details rather than providing that information here.
If you cannot enter your full mobilization plan in the space provided, you may submit it by email to OSPRSMT@wildlife.ca.gov with your SMT number in the subject line. If you will be submitting additional documents by email, note that in the space below.
Mobilization Plan

User Notes

Only complete this section if you are correcting your application, making nonsignificant updates, or requesting a revision. See the <u>Returning to an Existing Application</u> section for details on making corrections and revisions. If you need to send the SMT Team a note with a new application, email <u>OSPRSMT@wildlife.ca.gov</u>.



Please indicate the change(s) to your application in the User Notes text box. Your note will be saved when you select the "Next" button, but the changes will not be submitted until you have completed the Attestation screen and selected the "Submit Form" button.

ick "Next.")			
ser Notes			

Contingency Plans (C-Plans) Screen

This is where you will enter the applicant's contingency plan information. The Plan Holder Information screen is referred to as "C-Plans" in the navigation bar in the header, and it corresponds to C.2 of DFW Form 1005.



The Plan Holder Information screen has legends defining the Tiers, Waters Impacted, Area Contingency Plans (ACP), and Regional Planning Areas (RPA). To add a new contingency plan, select "Add Contingency Plan."

			Plan Hold	er Informati	on	
peographic regio than one type of	o(s) in which spill ma	nagement team se 5 by a plan holder's	rvices will be provided.	x indicate whether b	ermittent, ephemeral), the correspo re spill management team is seekin Apre plan numbers may be listed if	g statewide certification. If more
case spi waters, o volume o . Tier II Si case spi inland w	ET - Provides service solume of 1,000 bas or facilities or vessels of 600 barrels or more of 600 barrels or more affects of 500 barrels afters, or facilities or v me of 250 barrels fo	retis or more that in with a reasonable o that may impact i es to facilities with els to 999 barrets th resels with a reaso	ray impact inland worst-case spill name waters. a reasonable worst- rat may impact pnable worst-case		ACP 1 - Noth Coat ACP 2 - San Trancisco Bay an ACP 3 - cohail Coat ACP 4 - LAUB Noth ACP 4 - LAUB Noth ACP 6 - LAUB Soth ACP 6 - San Diego ACP 6 - San Diego AR - AA 2CPs Waters Impacted: M - narine P - permail I - Intermitted E - sphemetal	d Detta
	with a reasonable wo				barrels or less that may impact into ine waters, mobile transfer units wit	
 RPA II – Ciara, S RPA III – RPA IV – RPA V – 	Counties of Humbon an Benito. Santa Cru Counties of Butle. C Counties of Alpine. Counties of Fresno. Counties of Imperia	R. Dei Norte, Mend z. and Monterey Jolusa, Glenn, Lass Amador, Cataveras Kern, Kings, Made	ee, Modoc, Plumas, Sh	tarin Napa, Solano, esta, Sierra, Siskiyov acer, Sacramento, S nd Tutare	Contra Costa, Alameda, San Pranc J. Sutter, Tehama, Trinity, and Yuma an Joaquin, Stanislaus, Tushumne,	
CEIanNo	Waters	Int	AGE	RPA		
			AMO			



After selecting "Add Contingency Plan," you will be prompted to enter the contingency plan number (CPlanNo), Tier, Waters, ACPs, and RPAs. Consult the legends on the entry page, as well as the instructions beneath each entry field, to help you correctly enter your contingency plan information. Marine plan holders should indicate ACPs, while inland plan holders should indicate RPAs. Some plan holders (e.g., pipelines with impacts to both marine and inland waters) may need to indicate both ACPs and RPAs. You are required to enter information in both the ACP and RPA fields, so enter "N/A" if one of the geographic region fields does not apply. Inland contingency plan holders may refer to the <u>Waters of the Sate Guidance Document</u> for help identifying the impacted waters.

Once you have entered all of the required information, select the "Create" button at the bottom of the page. This button will return you to the Plan Holder Information screen. Here, you may add another contingency plan. You may also edit an entry by selecting "Edit" or "Delete."

CPlan Number	e.g. XX-XX-XXXXX
	Only enter one C-Plan number per entry. You may add up to 20 C-Plan entries if you are using the same SMT for all of the plans entered. If you need to enter additional C-Plans, please email OSPRSMT@wildlife.ca.gov with your SMT number in the subject line.
	If you have a new C-Plan that not yet been assigned a plan number, please enter "Pending."
Tier	Select 🗸
Waters	e.g. E, P
	Indicate all water types impacted by the contingency plan, as defined in the National Hydrography Dataset (M = marine, P = perennial, I = intermittent, E = ephemeral). To identify impacted water types, see the statewide quarter mile buffer data layer on the Southwest Environmental Response Management Application, found on the National Oceanic and Atmospheric Administration's website.
ACP	e.g. 1, 2
	If applicable, enter ACPs using numerical values. If multiple ACPs, please put them in increasing sequence and separate them with commas. If covering all ACPs, type "All" instead. If not applicable, please type "N/A".
RPA	e.g. I, II
	If applicable, enter RPAs using Roman numerals. If multiple RPAs, please put them in increasing sequence and separate them with commas. If covering all RPAs, type "All" instead. If not applicable, please type "N/A".
	Back Create
	PlanNo Waters Tier ACP RPA

<u>CPlanNo</u>	<u>Waters</u>	<u>Tier</u>	ACP	<u>RPA</u>	
F2-20-3482	Μ	1	2	N/A	Edit Delete

You may add multiple contingency plans if the plan holders are relying on a common pool of SMT personnel. The system currently supports up to 20 contingency plan entries. If you need to add additional contingency plan numbers, send an email to <u>OSPRSMT@wildlife.ca.gov</u> with the additional contingency plan information.

Once you have finished entering your contingency plans, select the "Next" button to proceed.



Initial Personnel Screen

This is where you will enter information about the Initial Response Personnel who can arrive on scene within eight hours of being activated. The Initial Personnel screen corresponds to D.1 of DFW Form 1005.

Tier III applicants must enter an Incident Commander, Safety Officer, and an Operations Section Chief. Tier I and II applicants must enter these three positions, plus one additional position. This fourth team member can be an alternate for one of the three required positions, or it can be another ICS position.

All required positions must be entered prior to continuing to the next section of the application. If you try to advance without entering the required positions, you will receive an error message and will not be allowed to proceed.

S Position	Type of Personnel	Number Trained Personnel Provider	
ncident Commander	Personnel employed by plan holder	1	Edit Delete - add to ICS Position
afety Officer	Personnel employed by plan holder	1	Edit Delete
			- add to ICS Position
dd Operations Section Chief	Error: You must choose an Op	erations Section Chief before subm	
dd Operations Section Chief	Error: You must choose an Op	erations Section Chief before subm	
dd Operations Section Chief		erations Section Chief before subm	

Adding the Incident Commander, Safety Officer, and Operations Section Chief

To add each position, select the blue text link corresponding to the position below the table.

Initial Personnel							
Initial Response Personnet: 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 split, as described in Title 14, California Code of Regulations, subsections 830, 4(a)(1)(A), (a)(2)(A), and have the qualifications described in subsections 830.6(d) through (n), as applicable to the ter classification for which the applicant is requesting certification. If the applicant will rely on subcontractors to supplement its initial response personnel, indicate the name(s) of subcontractor(s) providing services. Personnel must be located in the continuential United States, available on a 24-hour basis, and shall be fluert in English.							
Tier III spill management to ICS Position	eams: The total number of personnel si	nall not be fewer than Number <u>Trained</u>	3 individuals. Personnel Provider				
Add Incident Commander Add Safety Officer Add Operations Section Chief]						

After selecting the blue text link, you will be taken to a screen to enter the type of personnel, the number trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."



If personnel on your team still need training at the time you submit your application, indicate the number of personnel who plan to complete the required training by the end of the interim certification period (December 31, 2025 for applications submitted by June 30, 2022).

After you have finished entering the information on this screen, select "Create" to save the position. You will be returned to the Initial Personnel screen where you can continue to add the Safety Officer and Operations Section Chief positions.

	Create Incident Commander
Type of Personnel	O Personnel employed by plan holder
	 Personnel employed by plan holder's parent company or other affiliated entity
	O Contracted personnel
NumberTrained	
Provider of Personnel (if other than plan holder)	
	Back Create

If you have added all of the required Initial Response positions, select "Next" to proceed to the Cascading Personnel screen.

Adding Positions Using Create New ICS Position

Tier I and II applicants must enter four Initial Personnel. To add an additional ICS position, select the "Create New ICS Position" button.

n-scene within eight hours of bein ave the qualifications described in oplicant will rely on subcontractor	cate the number of initial response personnel ng notified of a spill, as described in Title 14, n subsections 830.5(d) through (h), as applicate rs to supplement its initial response personne valable on a 24-hour basis, and shall be fluer	California Co able to the tie	de of Regulations, subsections 8 er classification for which the app	30.4(a)(1)(A), (a)(2)(A), and (a)(3)(A), an licant is requesting certification. If the
	teams: The total number of personnel shall n ms: The total number of personnel shall not to Type of Personnel			
Incident Commander	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Safety Officer	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Operations Section Chief	Personnel employed by plan holder	1		Edit Delete - add to ICS Position



You will be taken to a screen where you will select the ICS Position from the dropdown menu and enter the type of personnel, the number trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."

After you have finished entering the information on this screen, select the "Create" button at the bottom of the page to save the position and return to the Initial Personnel screen.

	Create ICS P	osition
ICS Position	Select	~
Type of Personnel	Personnel employed by plan Personnel employed by plan Contracted personnel	holder holder's parent company or other affiliated entity
Number Trained		
Provider of Personnel (if other than plan holder)		
	Back	sata

The example below shows the Initial Personnel table after the applicant used the "Create New ICS Position" button to add a Planning Section Chief from a contracted SMT, fulfilling their Tier I or II Initial Personnel requirements.

ICS Position	Type of Personnel	Number <u>Trained</u>	Personnel Provider	
Incident Commander	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Safety Officer	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Operations Section Chief	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Planning Section Chief	Contracted personnel	1	ABC SMT	Edit Delete - add to ICS Position

If you have added all of the required Initial Response positions, select "Next" to proceed to the Cascading Personnel screen.



Adding to ICS Positions

If you are using a second provider for an ICS position, select the "add to ICS Position" on the right side of the Initial Personnel table to add a second provider for a position. Note that you can also select "Edit" to make changes to existing entries and "Delete" to remove them.

ICS Position	Type of Personnel	Number <u>Trained</u> <u>Personnel Provider</u>	
Incident Commander	Personnel employed by plan holder	1	Edit Delete - add to ICS Position
Safety Officer	Personnel employed by plan holder	1	Edit Delete - add to ICS Position
Operations Section Chief	Personnel employed by plan holder	1	Edit Delete - add to ICS Position

After selecting the "add to ICS Position screen," you will be taken to a screen to enter the type of personnel, the number trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."

After you have finished entering the information on this screen, select the "Create" button at the bottom of the page to save the position and return to the Initial Personnel screen.

	Add to ICS Position				
Type of Personnel	 Personnel employed by plan holder Personnel employed by plan holder's parent company or other affiliated entity Contracted personnel 				
Number Trained					
Provider of Personnel (if other than plan holder)					
	Back Create				

The example below shows the Initial Personnel table after the applicant used the "add to ICS Position" link to add a second Incident Commander from a corporate team, fulfilling their Tier I or II Initial Personnel requirements.

ICS Position	<u>Type of Personnel</u>	Number <u>Trained</u>	Personnel Provider	
Incident Commander	Personnel employed by plan holder	1		Edit Delete
<	Personnel employed by plan holder's parent company or other affiliated entity	1	Parent Corp. XYZ	Edit Delete
Safety Officer	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Operations Section Chief	Personnel employed by plan holder	1		Edit Delete - add to ICS Position



If you have added all of the required Initial Response positions, select "Next" to proceed to the Cascading Personnel screen.

Cascading Personnel Screen

This where you will enter information about the Cascading Response Personnel who can arrive on scene within 24 hours of being activated. The Cascading Personnel screen corresponds to D.2 of DFW Form 1005.

Applicants of all Tiers must enter an Incident Commander, Safety Officer, Assistant Liaison Officer, Assistant Public Information Officer, Operations Section Chief, Planning Section Chief, Logistics Section Chief, and Finance Section Chief. Tier I and II applicants must enter sufficient personnel to account for the required alternates.

Inland plan holders who fall into Tier III and whose operations only pose impacts to waters designated as intermittent or ephemeral are exempted from including Cascading Response Personnel on their SMT. Inland contingency plan holders may refer to the <u>Waters of the Sate Guidance Document</u> for help identifying the impacted waters.

All required positions must be entered prior to continuing to the next section of the application. If you try to advance without entering the required positions, you will receive an error message and will not be allowed to proceed. The remaining positions will pop up as blue text links, and you will be able to proceed once you have made entries for each of the positions.

ICS Position Type of Personnel Number Trained Personnel Provider Incident Commander Personnel employed by plan holder 1 Edit Delete Incident Commander Personnel employed by plan holder 1 Edit Delete Safety Officer Personnel employed by plan holder 2 Edit Delete Assistant Liaison Officer Personnel employed by plan holder 1 Edit Delete	Type of Personnel Trained Personnel Provider r Personnel employed by plan holder 1 Edit Delete Personnel employed by plan holder's parent company or other affiliated entity 1 Parent Corp. XYZ Edit Delete Personnel employed by plan holder's parent company or other affiliated entity 1 Parent Corp. XYZ Edit Delete Personnel employed by plan holder 2 Edit Delete -add to ICS Position					
Personnel employed by plan holder's 1 Parent Corp. XYZ Edit Delete parent company or other affiliated entity Safety Officer Personnel employed by plan holder 2 Edit Delete - add to ICS Position	Personnel employed by plan holder's parent company or other affiliated entity 1 Parent Corp. XYZ Edit Delete Personnel employed by plan holder 2 Edit Delete - add to ICS Position ficer Personnel employed by plan holder 1 Edit Delete Personnel employed by plan holder 1 Edit Delete parent company or other affiliated entity 1 Parent Corp. XYZ	ICS Position	Type of Personnel		Personnel Provider	
parent company or other affiliated entity Edit Delete - add to ICS Position	parent company or other affiliated entity Personnel employed by plan holder 2 Edit Delete - add to ICS Position ficer Personnel employed by plan holder 1 Edit Delete Personnel employed by plan holder's parent company or other affiliated entity 1 Parent Corp. XYZ	Incident Commander	Personnel employed by plan holder	1		Edit Delete
- add to ICS Position	- add to ICS Position ficer Personnel employed by plan holder Personnel employed by plan holder's Personnel employed by plan holder's Parent Corp. XYZ Edit Delete Parent company or other affiliated entity		parent company or other affiliated	1	Parent Corp. XYZ	Edit Delete
Assistant Liaison Officer Personnel employed by plan holder 1 Edit Delete	Personnel employed by plan holder's 1 Parent Corp. XYZ Edit Delete parent company or other affiliated entity	Safety Officer	Personnel employed by plan holder	2		
	parent company or other affiliated entity	Assistant Liaison Officer	Personnel employed by plan holder	1		Edit Delete
parent company or other affiliated	Make sure you choose all the positions before submitting		parent company or other affiliated	1	Parent Corp. XYZ	Edit Delete
Add Assistant Public Information Officer Add Operations Section Chief						
Ad Operations Section Chief	Chief	and the station of the other				
		Add Logistics Section Uniet				



Adding Cascading Response Positions

Select the "Create New ICS Position" button near the bottom of the page to enter each Cascading ICS position.

	Cas	cading Per	sonnel
system (ICS) positions, who 330.4(a)(1)(B), (a)(2)(B), and which the applicant is request personnel not employed by the he plan holder's place of bus	can arrive on-scene within 24 hours of bein (a)(3)(B), and who have the qualifications sting certification. Refer to subsections 830, he plan holder, indicate the provider of the siness and made available to the Administre	g notified of a spill, a described in subsec 4(a)(1)(C), (a)(2)(C) personnel. A list of th ator upon request. P	scluding alternates, who can perform the following incident command is described in Title 14, california Code of Regulations, subsections ions 830.5(d) and (d) through (b), as applicable to the tier classification for 1, and (a)(3)(C) for the required alternates for cascading positions. For e names of personnel employed by the plan holder shall be maintained at ersonnel must be located in the continental United States, available on a 2.
 Tier I spill managemen Tier II spill managemen 	It required to retain cascading response pe t teams. The total number of personnel shu It teams. The total number of personnel shu nt teams. The total number of personnel sh	rsonnel and may lea all not be fewer than all not be fewer than	12 individuals. 10 individuals.
 Tier I spill managemen Tier II spill managemen 	It required to retain cascading response pe t teams: The total number of personnel she In teams: The total number of personnel sh	rsonnel and may lea all not be fewer than all not be fewer than	ve this section blank. 12 individuals. 10 individuals.

You will be taken to a screen where you will select the ICS Position from the dropdown menu and enter the type of personnel, the number trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."

If personnel on your team still need training at the time you submit your application, indicate the number of personnel who plan to complete the required training by the end of the interim certification period (December 31, 2025 for applications submitted by June 30, 2022).

After you have finished entering information on this screen, select "Create" to save the position and return to the Cascading Personnel screen to continue adding the other required positions.

	Create ICS	Position	
ICS Position	Select	~	
Type of Personnel	 Personnel employed by p Personnel employed by p Contracted personnel 	olan holder olan holder's parent company	or other affiliated entity
Number Trained			
Provider of Personnel (if other than plan holder)			
	Back	Creale	

If you have added all of the required Cascading Response positions, select "Next" to proceed to the Attestation screen.



Adding Positions Using Position Name Links

You can also add positions using the blue text links. To add each position, select its corresponding link.

ICS Position	Type of Personnel	Number <u>Trained</u> P	Personnel Provider
Add Incident Commander	7		
Add Safety Officer			
Add Assistant Liason Officer			
Add Assistant Public Information Officer.			
Add Operations Section Chief			
Add Planning Section Chief			
Add Logistics Section Chief			
Add Finance Section Chief			

After selecting the blue text link, you will be taken to a screen to enter the type of personnel, the number trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."

If personnel on your team still need training at the time you submit your application, indicate the number of personnel who plan to complete the required training by the end of the interim certification period (December 31, 2025 for applications submitted by June 30, 2022).

After you have finished entering the information on this screen, select "Create" to save the position. You will be returned to the Cascading Personnel screen where you can continue to add or edit Cascading Response positions.

	Create Incident Commander
Type of Personnel	Personnel employed by plan holder Personnel employed by plan holder's parent company or other affiliated entity Contracted personnel
NumberTrained	
Provider of Personnel (if other than plan holder)	Back Create

If you have added all of the required Cascading Response positions, select "Next" to proceed to the Attestation screen.

Adding to ICS Positions

You can select the "add to ICS Position" on the right side of the Cascading Personnel table to add a second provider for a position. Note that you can also select "Edit" to make changes to existing entries and "Delete" to remove them.



OFFICE OF SPILL PREVENTION AND RESPONSE PLAN HOLDER SPILL MANAGEMENT TEAM APPLICATION JOB AID

ICS Position	Type of Personnel	Number <u>Trained</u>	Personnel Provider	
Incident Commander	Personnel employed by plan holder's parent company or other affiliated entity	2	Parent Corp. XYZ	Edit Delete - add to ICS Position
Safety Officer	Personnel employed by plan holder	1		Edit Delete - add to ICS Position
Assistant Liaison Officer	Personnel employed by plan holder's parent company or other affiliated entity	1	Parent Corp. XYZ	Edit Delete - add to ICS Position

After selecting the "add to ICS Position screen," you will be taken to a screen to enter the type of personnel, the number that will be trained, and the provider, if the personnel are not employed by the plan holder. All of the fields on this screen are required, except for the Provider of Personnel if you selected "Personnel employed by plan holder."

Add to ICS Position
 Personnel employed by plan holder
O Personnel employed by plan holder's parent company or other affiliated entity
O Contracted personnel
Back Create

The example below shows the Cascading Personnel table after the applicant used the "add to ICS Position" link to add a second Safety Officer from a contracted SMT.

CS Position	Type of Personnel	Number <u>Trained</u>	Personnel Provider	
Incident Commander	Personnel employed by plan holder	2		Edit Delete - add to ICS Position
Safety Officer	Personnel employed by plan holder	1		Edit Delete
	Contracted personnel	1	ABC SMT	Edit Delete

If you have added all of the required Cascading Response positions, select "Next" to proceed to the Attestation screen.



Attestation Screen

This is the final page of the application. The Attestation screen corresponds to Section F of DFW Form 1005.

Applicants must enter their title, name, and electronic signature attesting to the veracity of the information provided on the application and their intent to participate in the SMT certification program. Consultants may complete the attestation if they are filling out the application on behalf of the plan holder.

	Attestation
allow Office of Spill Pre process, prior and sub- records identified for ce	ed regarding spill management team personnel and capabilities is factual and correct to the best of my knowledge and belief. I a evention and Response personnel access to my facility and documentation associated with the spill management team certificati sequent to receiving a certification, for the purpose of venfying information contained in this application. I understand that all train etification purposes are subject to venfication. I agree to participate in announced and unannounced exercises as set forth in Tit julations, sections 630.6 and 630.7, to venfy any or all information contained in this application, prior and subsequent to receiving
Title	
First Name	
Last Name	
Signature	1

Application Submission

Once you have entered all of the required personnel and other information on each of the application screens, select the "Submit Form" button to complete your application. You may then close the window or select the "Back to Index" button to return to the Index page. Your application status will be listed as submitted.

	Application Submitted						
	Your application has been submitted.						
	OSPR will contact you to request documentation of training, experience, and/or a training plan. Please be prepared to provide these documents. You may submit documentation to OSPRSMT@wildlife.ca.gov with your SMT number in the subject line.						
	Back to Index						
Plan Ho	older Spill Management T	eam					
Create New	v Plan Holder Application						
Name		SMT Number	Status				
OilCo Ope	erators LLC	PH00035	Submitted	Edit	Print Preview		

Once your application has been submitted, it will be reviewed by OSPR's SMT Team, who will let you know if your application was fully completed, or if there are any deficiencies that you need to correct.



Returning to an Existing Application

You can access return to an application you previously started by selecting "Edit" next to the application on the Index screen.

reate New Plan Holder Application				
Name	SMT Number	Status		
ime ICo Operators LLC	PH11	In Progress	Edit	Print Preview
CPC Pipeline Company	PH20	Submitted	Edit	Print Preview

When you return to an application you previously created, you will be prompted to select an option that represents your application status. If you are returning to an application that you have previously submitted, the signature on your attestation will be cleared. You must continue through the application and submit it to re-attest to the application's contents.



- In Progress: Select this option if you are editing a previous application that you have not yet submitted. This is the default option when you open an existing application.
- **Correction:** Select this option if you received an email from OSPR instructing you to correct a deficiency with your application. You will also need to add a note to the User Notes section at the bottom of the screen.
- **Update:** Select this option if you are updating contact information or other nonsignificant changes only (see § 830.8(c)).
- **Revision:** Select this option to request changes to the geographic region(s), tier, or number/provider of personnel associated with an existing certification (see § 830.8(a)).
- **Renewal:** Select this option to submit an application for renewal of a full certification (*Note: The Renewal option will be added to the submission system in coming years as renewals become due*).

Returning to an Application in Progress

If you are returning to an application that you have started but not yet submitted, the radio button will be set to In Progress, so there is no need to change the selection.



Proceed through the application screens and continue completing your application. Do not enter any text into the User Notes section, as OSPR will not see this text unless you are making a correction or requesting a revision. If you need to send the SMT Team a note with a new application, email <u>OSPRSMT@wildlife.ca.gov</u>.

When you have completed the Attestation, select the "Submit Form" button to complete your application and submit it to OSPR for review. You may then close the window or select the "Back to Index" button to return to the Index page. Your application status will be listed as submitted.

Correcting a Deficiency

Select the "Correction" radio button if you received an email from OSPR instructing you to correct a deficiency with your application. When you return to a submitted application, your signature on the attestation is re-set. You must continue to the end of the application and submit it to re-attest to the application's contents.

Before selecting the "Next" button, type an entry in the User Notes section describing the changes you are making to correct the deficiency.

User Notes (For Updates or Revision click "Next.")	only. Please indicate the change(s) to your application. Your note will be submitted	i when you
User Notes		
	Back Next	

After selecting "Next," proceed through the application screens and correct the deficiencies as directed by OSPR. When you have finished making corrections, you must select the "Submit Form" on the Attestation screen to re-complete your application and submit it to OSPR for review. You may then close the window or select the "Back to Index" button to return to the Index screen. Your application status will be listed as submitted.

Making a Non-significant Update

Select the "Update" radio button if you are updating applicant information such your mailing address, phone number, or email address, or point of contact.

Update the applicable information and click "Next" to proceed through the application. You may add text into the User Notes section, but OSPR will not be notified unless you are making a correction or requesting a revision. If you need to send the SMT Team a note regarding your application update, email <u>OSPRSMT@wildlife.ca.gov</u>.

When you return to a submitted application, your signature on the attestation is re-set. You must continue to the end of the application and submit it to re-attest to the application's contents. When you reach the Attestation screen, select the "Submit Form"



button to complete your update. You may then close the window or select the "Back to Index" button to return to the Index screen. Your application status will be listed as submitted.

Requesting a Revision

Select the "Revision" button on if you are requesting a change to the geographic region(s), Tier, or the number and/or provider of personnel associated with an existing interim or full certification.

Before selecting the "Next" button on the Applicant Information screen, type an entry in the User Notes section describing the revision that you are requesting.

User Notes (For I click "Next.")	Updates or Revisions	only. Please indi	icate the chi	ange(s) to	your applicatio	n. Your note v	ill be submitted when	you
User Notes								
					ß			
			Back	Next				

After selecting "Next," proceed through the application screens and revise the applicable sections of your application. When you have finished making the requested changes, you must continue to the end of the application and re-attest to the application's contents. Select the "Submit Form" on the Attestation screen to complete your application and submit it to OSPR for review.. You may then close the window or select the "Back to Index" button to return to the Index screen. Your application status will be listed as submitted.

Once your request has been submitted, it will be reviewed by OSPR's SMT Team, who will let you know if there are any deficiencies that you need to correct or whether your revision is approved. The application for revision will be subject to verification as appropriate to the details of your request. For example, if an additional facility in a different geographic region is added, a mobilization exercise will be conducted to verify the SMT's expanded capabilities.

END