

Appendix B- Emergency Plan Delivery Document (form CD 355)



DOCUMENTATION OF EMERGENCY PLAN DELIVERY
Regulations 3270.27(f); 3280.26(f) and 3290.24(f)

Facilities must retain documentation that they submitted their initial emergency plan and any updated plan to their local and county municipalities.

Facility Location/Name						
Location Physical Address						
Legal Entity/Person responsible for the Legal Entity						
Local Municipality (i.e. borough, township, city, district)						
Name:						
Address:						
Phone Number:						
Email Address (if available):						
Fax Number (if available):						
Method Submitted (i.e. mail, fax, email, hand delivered):						
Date Submitted:						
County Municipality						
Name:						
Address:						
Phone Number:						
Email Address (if available):						
Fax Number (if available):						
Method Submitted (i.e. mail, fax, email, hand delivered):						
Date Submitted:						
Self-Certification						
I hereby swear/affirm that the information provided is true and correct to the best of my knowledge.						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">_____</td> <td style="width: 33%; border: none;">_____</td> <td style="width: 33%; border: none;">_____</td> </tr> <tr> <td style="border: none;">Signature</td> <td style="border: none;">Title</td> <td style="border: none;">Date</td> </tr> </table>	_____	_____	_____	Signature	Title	Date
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Signature	Title	Date				