

Appendix C

BMP Plan Forms

Form B Site Map

- Property Boundary** *(the City's GIS site may be useful for identification of boundaries)*
- Entrance(s), Streets, and Adjacent Properties** *(indicate the entrance(s) to the property and names of adjacent streets and businesses)*
- Chemical & Material Storage Areas**
- Waste Disposal Areas**
- Storm Water Flow Directions** *(show based on site topography, 'flow arrows' that indicate the anticipated direction that a spill would flow if it occurred)*

If Applicable:

- Storm Water Drainage Structures & Nearby Canals, Streams or Ocean** *(show locations of storm drain structures such as catch basins, or grate/drain inlets)*
- Location of Structural BMPs** *(structural, vegetative or managerial practices used to treat, prevent or reduce water pollution. Examples include infiltration basins, porous concrete, and grassed swales or ditches for vegetative BMPs)*

Site Map



Form C Potential Control Strategies

Potential Pollutant Activities	BMPs: Spill Prevention and Pollutant Control Strategies
General Operations	A-1 Spill Prevention Control & Clean-ups
	A-2 Waste Handling & Disposal
	A-3 Housekeeping Practices
	A-4 Employee Training

Include all applicable BMP Activity Sheets in BMP Plan. Highlight the BMPs in the BMP Activity Sheets that are applicable to the business activities.

Form D Spill Response Plan

SPILL RESPONSE AND CLEAN-UP PLAN		
Company:		Date:
Site Address:		Runoff drains to:
CONTACTS:		
Title	Name	Phone Numbers
Site Manager		
Business Owner		
Clean-up Contractor		

1. Potential Spill Areas

Location	Hazardous Materials

2. Spill Material/Spill Kit Locations

<p>Additional Information</p> <p>Provide a description of any additional emergency clean-up and disposal procedures not listed above that you will use at your site, or any other special conditions that exist:</p>

3. Spill Clean-Up Procedures

1. Alert the manager/owner of property where the spill has occurred.
2. Obtain personal protective equipment, as appropriate to the hazards. Refer to Safety Data Sheet or other references for information.
3. Stop the source of the spill (upright container, plug leak, etc.).
4. Seal off storm drains with berms or drain covers and stop any spread of the spill.
5. Protect floor drains or other means for environmental release. Spill socks and absorbents may be placed around drains, as needed.
6. Use pads and/or granular sorbent to clean up spilled material. Loose spill-control material should be distributed over the entire spill area, working from the outside, scoop to place materials in an appropriate container.
7. Let pads sit on spill to absorb spilled material.
8. Remove spent pads and/or sorbent and dispose of properly.

If a spill or release cannot be controlled or injuries have occurred due to the release:

1. Evacuate the immediate area and provide care to the injured – Call 911.
2. Be prepared to provide Safety Data Sheet information to the responders if asked.
3. Notify the appropriate agency if release has entered the environment. Refer to the Spill Reporting Table.

4. Spill Reporting Instructions

Notification Checklist	
Spill in any amount	
Facility Supervisor:	Phone:
Discharge in amount exceeding “reportable quantity”* and not affecting a water body or groundwater	
Honolulu Fire Department including HAZMAT: 911	
State of Hawai‘i Department of Health, Hazard Evaluation and Emergency Response Office (DOH HEER)	808-586-4249 808-247-2191 (after business hours)
Honolulu Local Emergency Planning Committee (LEPC)	808-723-8960
Discharge in any amount and affecting (or threatening to affect) a water body	
Honolulu Fire Department including HAZMAT: 911	
Hawai‘i State Emergency Response Commission (HSERC)/ State of Hawai‘i Department of Health, Hazard Evaluation and Emergency Response Office (DOH HEER)	808-586-4249 808-247-2191 (after business hours)
National Response Center	1-800-424-8802
Honolulu Local Emergency Planning Committee (LEPC)	808-723-8960
Discharge onto City Street	
City and County of Honolulu, Storm Water Quality Division	808-768-3242

* The State of Hawai‘i Department of Health Hazard Evaluation Emergency Response Office website contains a link to the Reportable Quantities List for hazardous substance releases.

To the best of your ability, please be ready with the following information:

- Where is the spill?
- What spilled?
- How much spilled?
- How concentrated is the spilled material?
- Who spilled the material?
- Is anyone cleaning up the spill?
- Are there resource damages (e.g. dead fish or oiled birds)?
- Who is reporting the spill?
- How can we get back to you?

After a spill, assess whether the Spill Response Plan is adequate and areas for improvement.

Form E Self-Inspections

Facility Storm Water Self Inspection Checklist

Facility:	
Inspector(s) Name and Title:	
Date and Time of Inspection:	

Issue/Objective	Yes	No	N/A	Comment	
Training					
1.	Has annual training been conducted and documented for all employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Good Housekeeping					
1.	Are loose debris, garbage, and waste regularly removed off facility's grounds?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are dumpsters and trash/recycle bins kept covered and inspected regularly for leaks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are work areas and storage areas neat and clean?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are washing activities minimized and contained within the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Are vehicles and equipment inspected daily for leaks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Are equipment and vehicles serviced/maintained indoors or under cover?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Are BMPs (i.e. absorbents, drip pans, drip pads, etc.) used under leaking vehicles and equipment to prevent tracking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	During the last observed rain event, was the runoff leaving the facility discolored or observed to contain some type of contaminants? If so, please describe.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Were there any other good housekeeping measures not described above that may have been an issue? If so, please describe.				

Issue/Objective	Yes	No	N/A	Comment	
Material/Chemical Inventory and Storage					
1.	Are containers/drums properly stored under cover and within secondary containment structures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are potential pollutants, chemical containers, and drums properly labeled and identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are Safety Data Sheets readily available for all chemicals/products/materials stored onsite? Are Safety Data Sheets located in an accessible location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spill Prevention and Response Plan					
1.	Are parking lots and paved areas visually inspected regularly for spills and leaks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Are spills promptly cleaned up using absorbent materials? Has the appropriate action taken place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Is the facility equipped with spill kits or are absorbent materials readily available? Are the spill kits well maintained and adequately stocked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are above-ground storage tanks and facilities clean and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Are proper spill prevention control measures in place at the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Structural BMP Maintenance					
1.	Are structural BMPs being properly maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other Inspection Areas (Loading/Unloading)					
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Comments			Corrective Actions		
1.					
2.					
3.					
4.					
5.					

Form F Training Plan/Log

Business Name: _____

Trainer/Supervisor: _____

Training Topics:	
	Industrial/Commercial BMP Plan Purpose
	Sources of Potential Pollutants that Could Affect Storm Water
	BMPs to Address Pollutant Sources
	Spill Response Plan
	Monthly Self-Inspections

Add additional training topics that are applicable to your business activities above

I have participated in this training on the Industrial/Commercial BMP Plan which presented information on storm water discharges and what can be done to prevent or minimize contamination of storm water runoff.

Date	Name (print clearly)	Signature