



**CUPA**  
**San Bernardino County Fire Department • Hazardous Materials Division**  
**620 South 'E' Street, San Bernardino, CA 92415-0153**  
**(909) 386-8401 • FAX (909) 386-8460 • [www.sbcfire.org](http://www.sbcfire.org)**

**OFFICE USE ONLY**

- CERS \_\_\_\_\_
- Envision \_\_\_\_\_
- Email Notification \_\_\_\_\_
- Approved  Denied
- CUPA File

## ELECTRONIC REPORTING INITIAL LEAD BUSINESS USER AUTHORIZATION FORM

For more information, see: <http://www.sbcfire.org/hazmat/efile.asp> or <http://www.calepa.ca.gov/CUPA/EReporting/>

Note: All Unified Program data identified in Title 27 of the California Code of Regulations must be filed electronically by January 1, 2013. This includes the business activities declaration, owner/operator identification, and chemical inventory from the business emergency/contingency plan; the underground storage tank facility, tank, and monitoring forms; recyclable materials forms; onsite hazardous waste treatment and remote waste consolidation site notifications; and hazardous waste tank closure certifications. The purpose of the Electronic Reporting Initial Lead Business User Authorization Form is to ensure that only individuals designated by the facility owner/operator are authorized by the CUPA to create, edit, and submit electronic data on the owner's behalf to the statewide system, known as the California Environmental Reporting System (CERS). The initial business user authorized by the CUPA to have access to a facility on CERS is designated as a lead business user. Lead business users have the ability to add additional lead or standard business users, approve or reject other access requests, or delete other users for any facility for which they are listed as a lead user.

Check box if user is authorized to establish **new** sites for this owner.

<input checked="" type="checkbox"/>	<b>AUTHORIZED INITIAL LEAD BUSINESS USER</b>		
<input type="checkbox"/>	Name	Title	
<input type="checkbox"/>	Email Address	Contact Phone	

OWNER NAME	OWNER EMAIL ADDRESS			
OWNER MAILING ADDRESS	CITY	STATE	ZIP CODE	OWNER PHONE

Fill out the boxes below or attach a list of sites included in this authorization.  List of sites with the information below attached.

FACILITY ID (e.g., FA0123456)	FACILITY NAME (e.g., CUPA AUTO)	SITE ADDRESS (e.g., 123 N. MAIN ST.)	CITY (e.g., ANYTOWN)

I authorize the person and email address listed above to be the initial lead business user for the listed facilities. This includes the ability to create, edit, and submit compliance data for the listed facilities under their CUPA-designated facility ID numbers. I understand that as a lead business user this person may approve additional lead business users or standard business users, grant or reject facility access requests, and delete users from the facilities listed on this authorization form. I also understand the following conditions:

- The Electronic Reporting System does not contain all of the documents that are required for a facility to be in compliance. The San Bernardino County CUPA may require additional documentation in order to implement local, state, and federal laws and regulations.
- Documents are still required to be maintained at each facility site in accordance with the statutes and regulations.
- At this time, the San Bernardino County CUPA requires all documents prepared on any electronic system to be signed and submitted on paper.

Comments:

**Certification – I certify that I am the owner/operator or legal representative of each facility listed on this form. I understand that compliance documents prepared or submitted electronically are held to the same standard as their former paper equivalents.**

SIGNATURE OF OWNER/OPERATOR OR LEGALLY DESIGNATED REPRESENTATIVE	DATE	NAME OF DOCUMENT PREPARER
NAME OF SIGNER (print)	TITLE OF SIGNER	

OFFICE USE Notes:	OFFICE USE ONLY: DATE STAMP
Form Revised 5/25/11	Completed by: _____ Date: _____