E-Plan Tier 2 Reporting System Users Guide for Florida Facilities

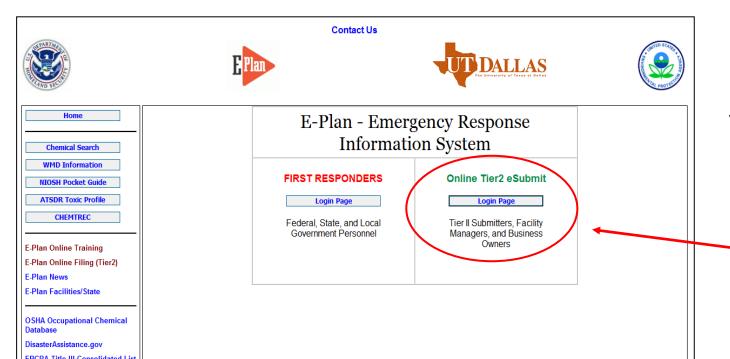


State of Florida Emergency Response Commission 2555 Shumard Oak Boulevard Tallahassee, FL 32399 (850) 815-4000

Getting Started



To begin your filing, go the E-Plan website at https://erplan.net/eplan/home.htm



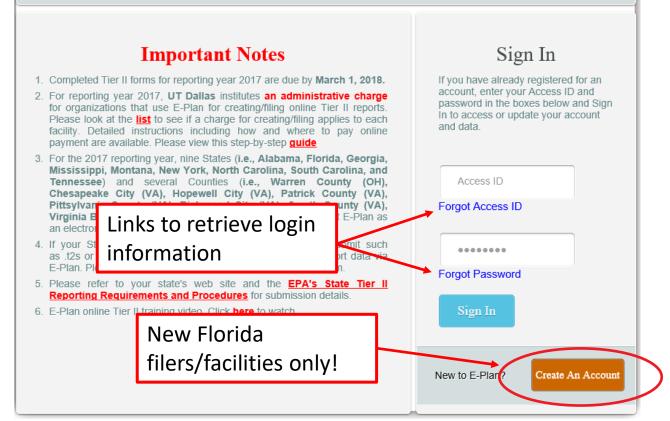
Your page should look like this. Filers click on the Login Page button under Online Tier2 eSubmit.

Click here to file Tier 2 report in E-Plan.

Welcome to E-Plan's Online Tier II Reporting System

This easy E-Plan online reporting system will allow you to create a report you can submit to your state to meet their requirement for filing of (SARA Title III) Tier II Emergency and Hazardous Chemical Inventory Reports. This system is for Tier II filing organizations to file their Tier II reports to the State each year. However, filing Tier II report via E-Plan may not fulfill the mandate per your state SERC and/or county LEPC and local fire department. Contact your State and County officials to see if they accept E-Plan as a form of electronic filing.

If you have comments or questions, please use the Contact Us buton on any E-Plan website page.



If you already have an account, you will enter your login information here. If you do not know your login, or if you are uncertain if your facility has an existing account, click on Forgot Access ID or Forgot Password to retrieve your login information. Note: Your email address must match the email that is reflected as the account owner, or the information will not be provided.

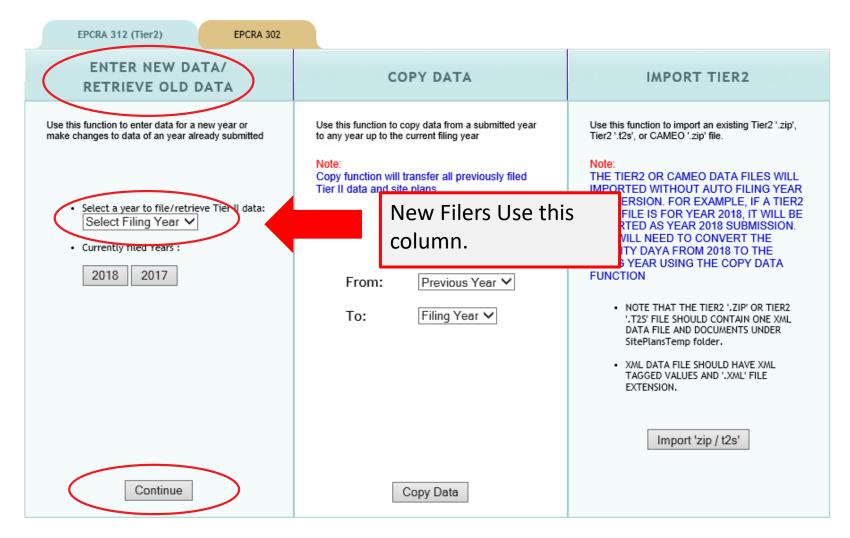
If you are assuming filing responsibilities from someone else, you will need to submit a request to E-Plan by clicking on the **Contact Us** link. E-Plan will ask you to verify your affiliation with the facility/company via email before providing login information.

If your facility is a new filer in the State of Florida, you will click on the orange 'Request New Account' button. Fill in the requested information and your account information will be emailed to you.

Do not create a new account if your company filed last year!

E-Plan Online Filing Submission Management

Access ID: 1058002 (Wendy Reynolds)



Do not click the gold EPCRA 302 tab.

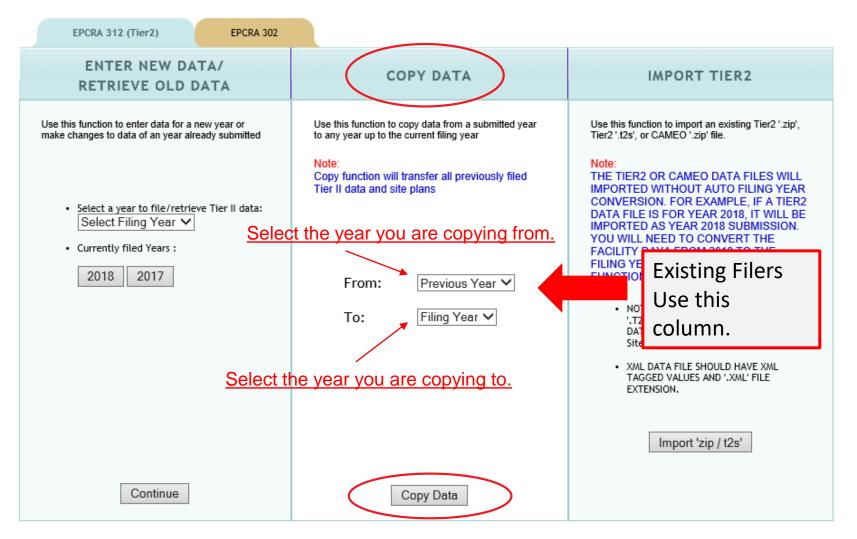
Instructions on how to file a Section 302

Notification in E-Plan may be found on our
Technical Resources page at
https://www.floridadisaster.org/dem/resp
hazards/epcra/technical-resources/.

New filers will go to the first column and select a filing year from the drop-down box and click 'Continue'. From there, you will enter your data in the same order as described for existing filers.

E-Plan Online Filing Submission Management

Access ID: 1058002 (Wendy Reynolds)



Do not click the gold EPCRA 302 tab.

Instructions on how to file a Section 302 Notification in E-Plan may be found on our Technical Resources page at

https://www.floridadisaster.org/dem/response/technological-hazards/epcra/technical-resources/.

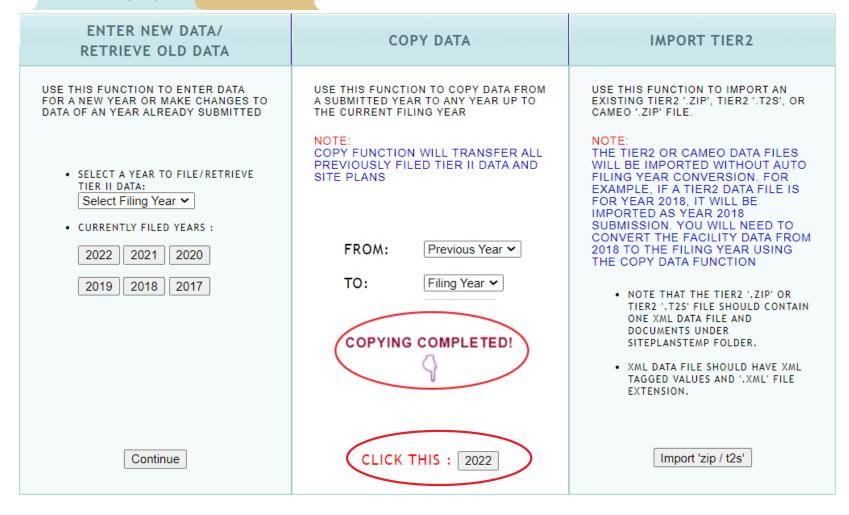
Existing facilities will go to the 2nd column and copy from the previous year to the next filing year and click 'Copy Data'.

E-Plan Online Filing Submission Management

Access ID: 1058002 (Wendy Reynolds)

EPCRA 312 (Tier2)

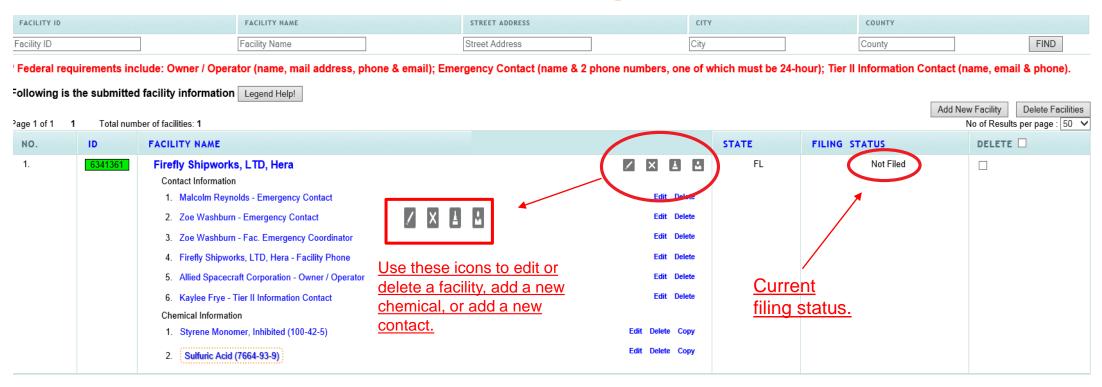
EPCRA 302



When your data is finished copying 'COPYING COMPLETED!' will flash. Click on the button beneath this message for the current filing year. This will take you to the Online Filing Home page.

Online Filing Home Overview

20XX Online Filing Home



Important: On Completion of data entry please click on "Validate Record" to finalize filing



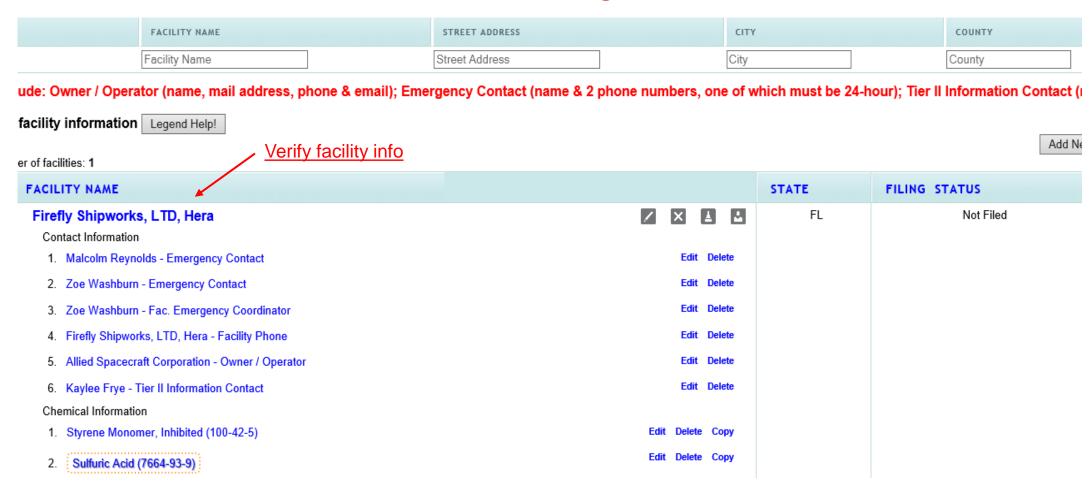
The Online Filing Home page is where you will review/update the Tier 2 data. You may return to this page from any page in your Tier 2 by clicking on 'Tier2 Filing Management' in the gray header bar at the top of the page (not shown). **Be sure you have saved your information or changes first!**

If you are a new filer or need to file for new facilities, click 'Add New Facility' on the right side of the page. To edit or delete a facility, add a new chemical, or add a new contact, click on one of the four gray icons next to the facility name. This page also reflects your filing status. After completing the steps described in these instructions, return to this page to confirm that the status has change from 'Not Filed' to 'Filed'.

Confirm Facility Information

Begin your filing by clicking on the facility's name to review the Facility Information. You will do this for each facility in your Tier 2.

20XX Online Filing Home



button after updating any information on this page. Otherwise, the changes will not be saved.

Facility Information

* Fields are Federal mandatory fields

Remember to press the

Save & Continue

** Fields are E-Plan mandatory fields

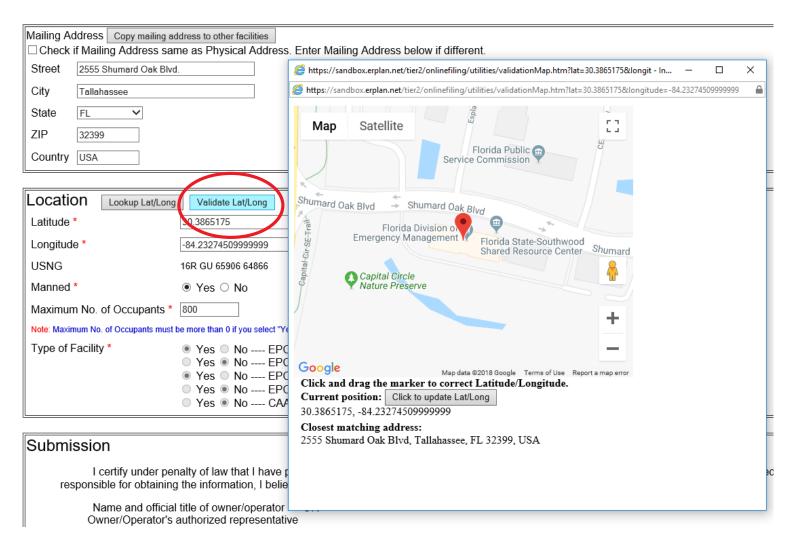
| Facility Details | | |
|---------------------|------------------------------|---------------------------------------|
| Facility Name * | Firefly Shipworks, LTD, Hera | |
| Department | | |
| Company Name ** | Allied Space Corporation | Copy company name to other facilities |
| Facility Email | | Add to notes if facility: |
| Fire District | | 1. Has been sold |
| Report Year | 2018 | Changed Name |
| Facility Phone Numb | er 850-555-5555 | 3. Chemicals were removed |
| Facility Notes | | 4. No longer operational. |
| | | |
| Physical Address | | |
| Street * 2555 Shu | ımard Oak Blvd. | |
| City * Tallahass | see | |
| State * FL | ~ | |

At the top of the page confirm that any required information, indicated by red asterisks, is correct. You may also enter in other relevant information to the Facility Notes field, such as if the facility was sold (with the date), if the name has changed, if chemicals were removed (with the date), or if the facility is no longer operational. If you have selected 'Hazards Not Otherwise Classified' on any of your chemicals, you will need to note the specific hazard here as well.

If you removed a previously reported chemical or your facility has closed, you will also need to complete a Statement of Determination/ Deregistration Form and upload it to the documents section in your report. Please also email a copy of the form to our office, your Local Emergency Planning Committee (LEPC), and the local fire department. The Statement of Determination/ Deregistration Form and map of the LEPCs may be found at the links below:

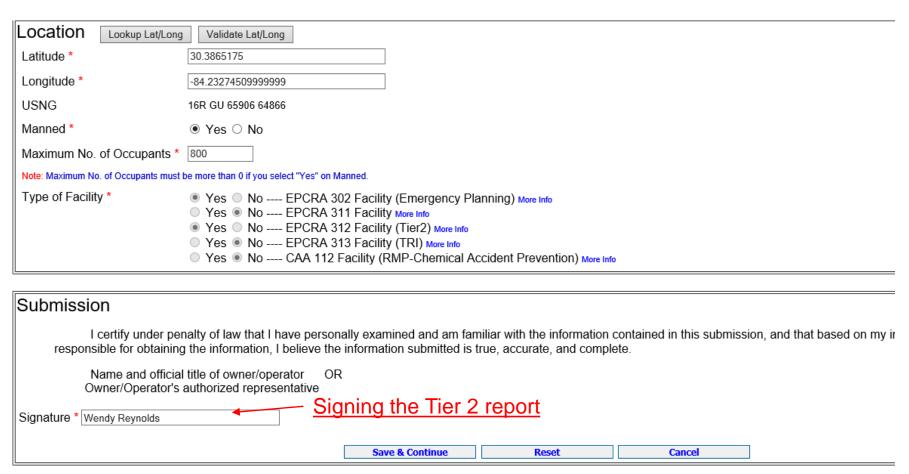
https://www.floridadisaster.org/dem/response/technological-hazards/epcra/technical-resources/

https://www.floridadisaster.org/globalassets/maps/lepcmap.pdf



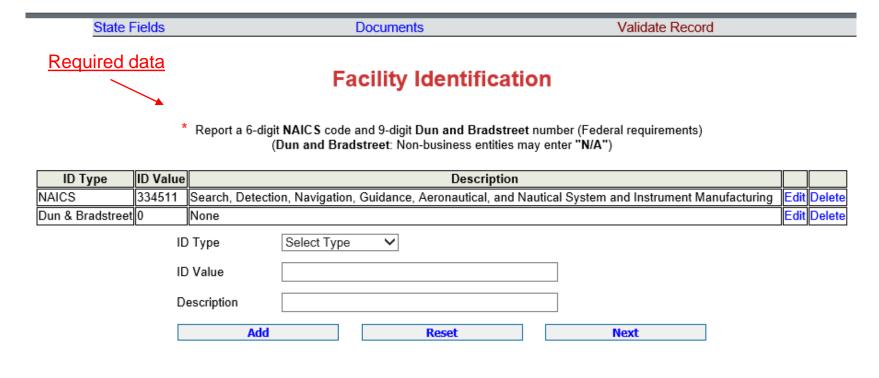
Scroll down the page to continue reviewing the facility's information.

In the Location box, validate the latitude and longitude location of your facility. When you click on the Validate Lat/Long button you are presented with a Google map with a pin indicating the position of your facility based on the address you entered. If your facility is in a complex or industrial park that shares a common address, but has multiple buildings, you may drag the pin to the exact location of your facility within the complex.



Maximum No. of Occupants refers to the number of people permitted in the building at any one time by state building codes. For more information on Florida Building Codes go to https://floridabuilding.org/c/default.a spx

At the bottom of this page, enter or confirm the name of the person signing the report. This should be the Owner/Operator or an Authorized Representative with knowledge and/or responsibility for materials stored at the facility. Click 'Save & Continue' when finished.



To find your Dun and Bradstreet number go here: https://www.dnb.com/duns-number/lookup.html

On the next page you will list the Facility Identification information. Federal law requires, at a minimum, the 6-digit North American Industry Code System (NAICS) number and the 9-digit Dun and Bradstreet number. You may look up your NAICS code at https://www.naics.com/search/.

If you do not have a Dun and Bradstreet, simply enter '0'.

You may also see additional ID numbers listed here if your facility has filed over a number of years, including the 'Florida Facility ID', or Florida SERC Number. This is a number assigned by our office and will remain at that location in perpetuity. If you relocate to a new location, and there are no previous Tier 2 reports for that location, the state will assign a new SERC number to that location.

| | CURRENT FACILITY CONTACT LIST CHEMICAL LIST | |
|------------|--|-----------------|
| | Firefly Shipworks, LTD., Hera (FacID: 7308618) EDIT DELETE 2555 Shumard Oak Blvd. Tallahassee, FL 32399, USA | |
| ate Fields | Documents | Validate Record |
| | State Applicable Fields * Fields are State mandatory fields | |
| | Does your facility have a written emergency response plan? | ○ Yes ○ No |
| | Does your facility have a hazardous materials response team? | ○ Yes ○ No |
| | Does your local fire department have an up-to-date pre-plan for your facility? | ○ Yes ○ No |
| | Update & Continue Reset | |

Answering these questions <u>is</u>
not mandatory in Florida.
However, providing this information is helpful for first responders. Please contact our office for if you need additional guidance.

Document Upload

Fields are Federal mandatory fields

- □ I have submitted a site plan.
- I have attached a description of dikes and other safeguard measures.
- I have attached a list of site coordinate abbreviations.

| No. | Document ID | File Name | File Type | File Category | File Description | Download | |
|-----|-------------|------------------------------------|-----------|---------------|-------------------|----------|--------|
| 1 | 986469 | Styrene Monomer, Inhibited SDS.pdf | File | SDS | Safety Data Sheet | Laters | Delete |
| 2 | 986470 | Sulfuric Acid SDS.pdf | File | SDS | Safety Data Sheet | <u></u> | Delete |

File types: PDF, DOC, JPG are only allowed. If entering a link, choose File type as Link Please upload a site and put the link as http://somewebsite in the description field. drawing. You may also add All Fields are Mandatory SDSs, SODs, and other File Type File 🗸 documents. SDS File Category File Browse. Max file size 9 Mb File Description Upload Next (Add Contact)

Upload any relevant documentation on this page, including Safety Data Sheets (SDS), facility site plans or maps, and the previously mentioned Statement of Determination/Deregistration Form.

Select the type of document you wish to upload from the File Category dropdown menu, browse your computer for the document, then select the desired file. Finally, enter a description and click 'Upload'.

Confirm Contact Information

20XX Online Filing Home

ude: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of w

facility information | Legend Help!

er of facilities: 1



To review an existing contact's information, click on the contact's name, or the 'Edit' link to the right of the name. This will take you to the pages to make any changes to their email, title, and phone number.

If the contact person has changed, you may overwrite the information in these screens instead of adding a new contact from the Online Filing Home page.

Click on name or 'Edit' to confirm or update contact info.

Confirm Contact Information (cont'd.)

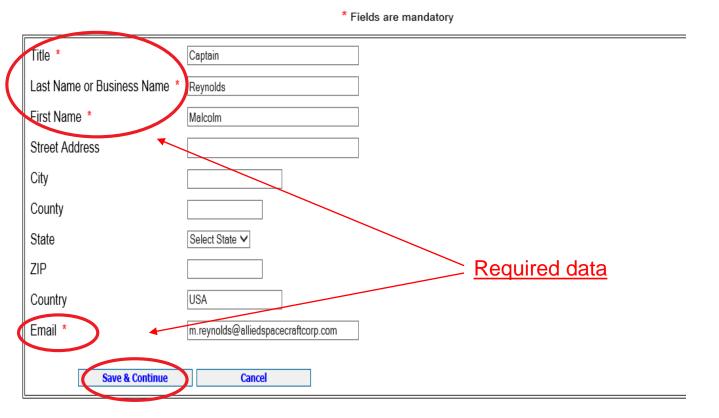
Contact Information

Malcolm Reynolds (Emergency Contact)

* Federal requirements include: Owner / Operator (name, mail address, phone & email)

Emergency Contact (title, name & 2 phone numbers, one of which must be 24-hour)

Tier II Information Contact (title, name, email & phone).



Review/update the title, last name or business name, first name, and valid email address are required information.

If you are entering the Owner/Operator information, enter the name of the entity that owns or operates the facility in the Last Name or Business Name field. Do not enter a specific person's name as the Owner/Operator unless it is the name of the business.

Click Save & Continue to advance to the next page.

Confirm Contact Information (cont'd.)

Minimum Federal requirements.



To change a phone number, click 'Edit' next to the number. This will populate in the Phone Number field below the table and the 'Add' button will change to 'Update'. Make the desired changes and click the 'Update' button. When finished, click 'Next' to be taken to the next screen.



The Owner/Operator, Emergency Contact, and Tier 2 Information Contact are all required under federal law.

Facilities with an Extremely Hazardous Substance must also provide contact information for the Facility Emergency Coordinator. If this applies to your facility, click on the 'Tier2 Filing Management' in the gray header bar at the top of the page (not shown) and add a new contact using the fourth gray icon next to the facility's name (see slide 7).

The Emergency Contact and the Facility Emergency Coordinator are both required to have two phone numbers entered into E-Plan, one of which must be designated '24-hour' as the Phone Type. E-Plan will not accept the Tier 2 when the record is validated if this requirement is not met.

Confirm Contact Information (cont'd.)

Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE
2555 Shumard Oak Blvd.
Tallahassee, FL 32399, USA

Documents

Validate Record

Associate Contact With Facility

Malcolm Reynolds (Emergency Contact)

Note: You can associate "Malcolm Reynolds" with other facilities such that the contact information can be copied to the other associated facilities.

Facility Name

Contact Type

| | r denity is | Contact Typ | _ | | | |
|---|-------------|-------------|---|--|--|--|
| (FacID:5894462) Firefly Shipworks, LTD., Hera Emergency Contact Edit Delete | | | | | | |
| ☐ Select All Facilities and Contact Type Select Contact Type ✓ | | | | | | |
| (FacID:5894462) Firefly Shipworks, LTD., Hera (Current facility) | | | | | | |
| Add Reset Next | | | | | | |
| | | | | | | |

In some cases, one person may be the contact for multiple facilities or may serve in multiple contact roles at the same facility. The facility you are working on will be highlighted in yellow.

If the contact is, for example, the Emergency Contact for multiple facilities, you may add them to those facilities by selecting the contact type from the drop-down menu and then checking the box next to the facility you wish to add them to. Do not check the highlighted facility. You will then click the 'Add' button.

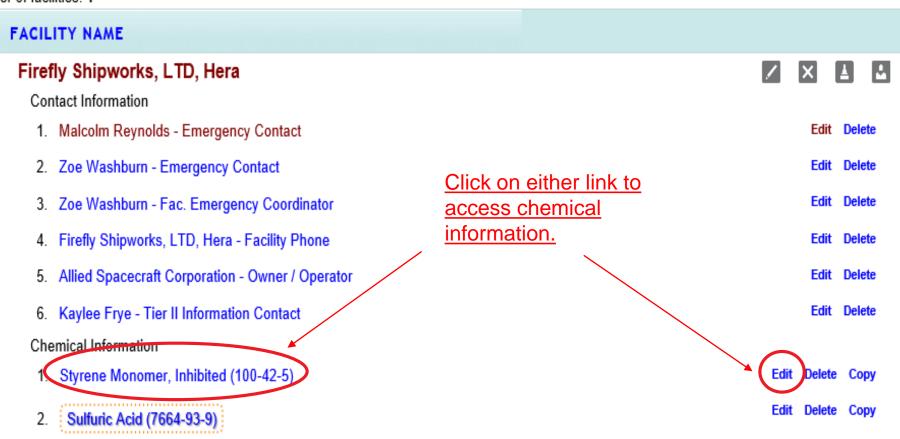
If the person will serve in multiple contact roles for the current (highlighted) facility, click the drop-down arrow, select the contact type, check the box for the current facility, then click the 'Add' button.

After you have completed changes to this page, or there are no changes, click on 'Tier2 Filing Management' in the gray header bar at the top of the page to return to the Online Filing Home screen.

Confirm Chemical Information

20XX Online Filing Home

ber of facilities: 1



Click on the chemical name, or the 'Edit' link to the right of the chemical, to edit or verify the existing chemical information. You may also copy chemical data to another facility in this Tier 2 report by clicking 'Copy'.

Chemical Information

- * Fields are Federal mandatory fields
- ** Fields are E-Plan mandatory fields

Remember to press the Save & Continue button after updating any information on this page. Otherwise, the changes will not be saved.

Physical State *(Check all that apply)

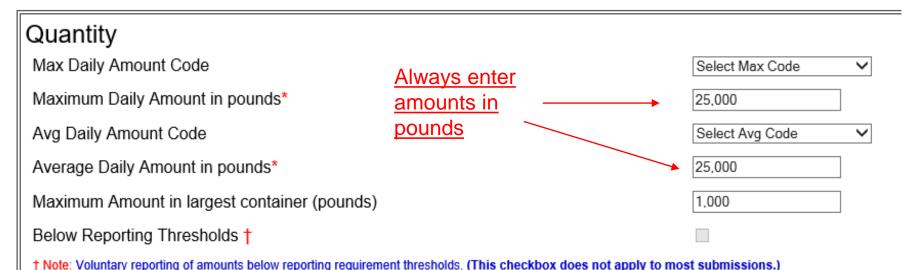
□ Pure ☑ Mixture

□ Solid ☑ Liquid □ Gas

If the chemical is an Extremely Hazardous Substance, the EHS box is automatically checked based on the CAS Number entered. Enter or confirm the number of days on site and the physical states of the chemical.

| | Physical Hazards *(Check all that apply) | Health Hazards *(Check all the | nat apply) | | |
|---|---|--|--|--|--|
| Copy chemical hazards to other chemicals Explosive | | ☐ Acute toxicity (any route of exposure) | | | |
| | | ☑ Skin corrosion or irritation | | | |
| | ☐ Flammable (gases, aerosols, liquids, or solids) | ☑ Serious eye damage or eye irritation | | | |
| | ☐ Oxidizer (liquid, solid or gas) | □ Respiratory or skin sensitization | | | |
| | ☐ Self-reactive | ☐ Germ cell mutagenicity | | | |
| | ☐ Pyrophoric (liquid or solid) | | | | |
| | ☐ Pyrophoric Gas | ☐ Carcinogenicity | | | |
| ☐ Self-heating | | ☐ Reproductive toxicity | | | |
| | ☐ Organic peroxide | ☐ Specific target organ toxicity (sing | gle or repeated exposure) | | |
| | ✓ Corrosive to metal | ☐ Aspiration hazard | If you select 'Hazard Not Otherwise Classified | | |
| | ☐ Gas under pressure (compressed gas) | ☐ Simple Asphyxiant | you will need to enter the specific hazard in the Facility Notes portion of the Facility | | |
| | $\hfill\square$ In contact with water emits flammable gas | | Information. | | |
| | ☐ Combustible Dust | ☐ Hazard Not Otherwise Classified | | | |
| | | | | | |

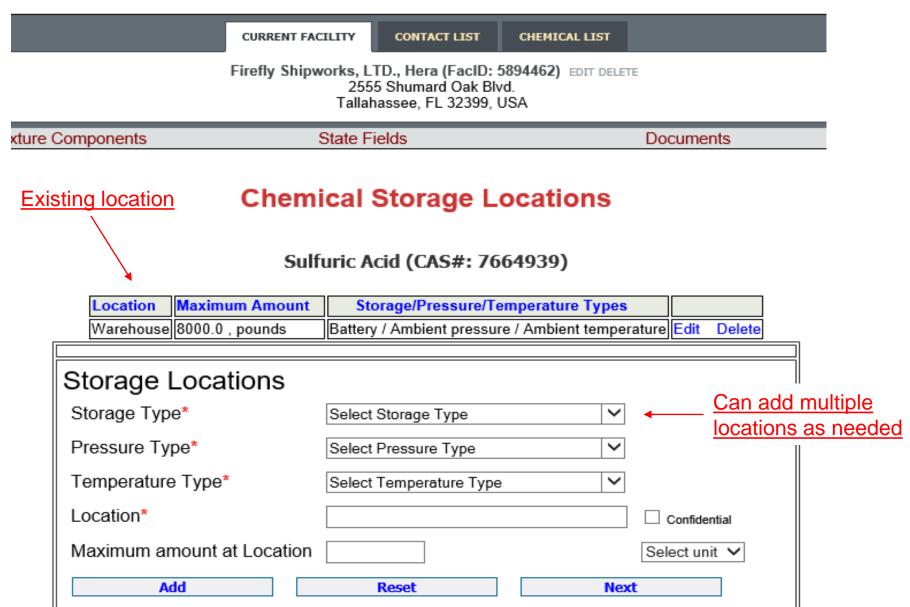
At least one Physical or Health Hazard must be selected. If 'Hazard Not Otherwise Classified' is selected, you will need to enter the specific hazard in the Facility Notes portion of the Facility Information. This information is available on the Safety Data Sheet for the chemical.



By checking this box, you are certifying that this chemical is not of a reportable quantity under **Section 312 of the Emergency Planning and Community Righ** chemicals, only check this box if the quantity is below the TPQ or 500 lbs., whichever is less. (For a list of EHS chemicals and TPQs, please reference the EPA's hazardous substances (anything with a MSDS), only check this box if the quantity is below 10,000 lbs. In addition, this box may be checked if the chemical you a

exemption from Tier II reporting under 40 CFR 370.10-13.

Confirm or enter chemical quantities in pounds. Do not enter Range Codes. If chemicals are stored in multiple containers, enter the maximum amount in the largest container in the last field in the box. If the quantities are not above TPQ, the Below Reporting Thresholds box is checked automatically.

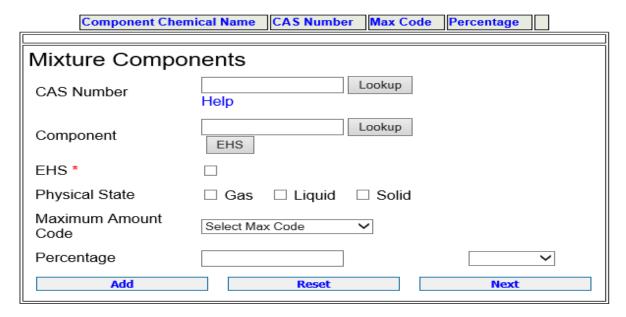


If the storage location has changed, update the location by clicking on 'Edit' in the far-right column. The information will populate in the box below and the 'Add' button will change to 'Update'. Make the necessary changes and click 'Update'. To add a location, simply complete the fields in this same box and click 'Add'.

Important: Please be detailed when describing the location. Ex: Tank Farm in Northwest Corner of property. A separate location should be entered for each area where chemicals are stored. All fields must be completed for E-Plan to accept the entry.

Chemical Components

Sulfuric Acid (CAS#: 7664939)



It is not necessary to enter mixture components for all chemicals reported on the Tier 2, especially common substances like gasoline or diesel fuel. However, this screen is useful for reporting specialty or name-brand substances that are a mixture of several chemicals. Just be aware that all of the components listed should add up to 100%. It may also be simpler to aggregate the chemicals and only report those substances that are at or above TPQ. Please contact our office if you need additional guidance.

| CURRENT FACILITY CONT. | ACT LIST CHEMICAL LIST | | | | | |
|--|------------------------|--|--|--|--|--|
| Firefly Shipworks, LTD., Hera (FacID: 5894462) EDIT DELETE 2555 Shumard Oak Blvd. Tallahassee, FL 32399, USA | | | | | | |
| State Fields | Docu | | | | | |
| State Applic | able Fields | | | | | |
| Sulfuric Acid (C | AS#: 7664939) | | | | | |
| Frequency of Shipments | Annually | | | | | |
| Mode of Shipments (Check all that | apply): | | | | | |
| Highway | | | | | | |
| Rail | | | | | | |
| Pipeline | | | | | | |
| Ship or Barge | | | | | | |
| Other | ✓ | | | | | |
| Update & continue | Reset | | | | | |

Frequency and Mode of Shipments refers to how often chemicals are shipped to the site.

Enter or confirm the frequency with which the facility receives this substance and how it is transported.

Validate Record

clude: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of which must be 24-hour); Tier II Information

d facility information Legend Help!

nber of facilities: 1



After you have finished updating your Tier 2 report, return to the Online Filing Home page by clicking on Tier2 Filing Management in the gray header bar at the top of the page. Note that your status is still 'Not Filed'. Next, click on the 'Validate Record' button Validate Record at the bottom of the Online Filing Home page.

Important: On Completion of data entry please click on "Validate Record" to finalize filing

Validate Record

First Responder View

Validate Record (cont'd.)

Submission Report for Access ID 1066584

Errors indicated on this page identify required fields not completed. While Federal and State requirements are mandatory E-Plan requirements provide extremely needed information to first responders in emergency scenarios. FacID 7308618 : Firefly Shipworks, LTD., Hera Chemical : Lead Acid Batteries

Error: Missing Chemical Storage Location. Click here to fix this error.

Once your report has passed ALL submission tests for filing year 2022,

Click Upload Data to E-Plan to complete your submission.

Exporting Tier II report to: Tier2 zip file .t2s File PDF file

If an error message occurs, click the blue link next to the requirement.

This will take you to the appropriate page to correct the error.

Notes:

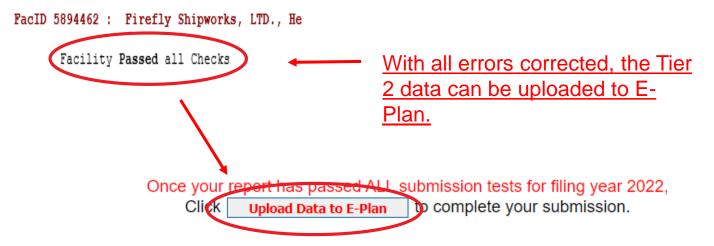
In the example to the left, you can see that the validation process discovered an error. To fix any errors that you encounter, click on the blue text. This will take you to the page where the error occurred where you can make the corrections. When finished, save your work, and re-validate your record by clicking on the 'Validate Record' link in the gray header bar at the top of the page.

Validate Record (cont'd.)

Submission Report for Access ID 1058002

Notes:

Errors indicated on this page identify required fields not completed. While Federal and State requirements are mandatory, E-Plan requirements provide extremely needed information to first responders in emergency scenarios.



Once the facility has passed all checks, click the 'Upload Data to E-Plan' button in the center of the page. If you wish to review a draft of the report before uploading, you may download a copy in the desired file format.

Important: The report is not filed yet!

Exporting Tier II report to:

Tier2 zip file

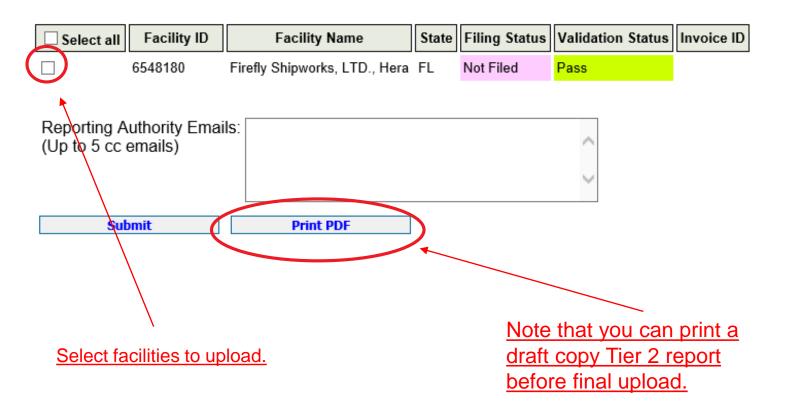
.t2s File

PDF file

Validate Record (cont'd.)

Submit Facility Information

Access ID: 1058002 (Wendy Reynolds)



On the next screen, check the boxes for the facilities you wish to upload. You may also click the box for 'Select All'. If there are other parties to whom you wish to provide a copy of the Tier 2, you may enter them in the 'Reporting Authority Emails' box below the facilities. This is especially useful if the local fire department prefers to receive a digital copy of the Tier 2 via email.

Consolidated Annual Registration Form

FLORIDA STATE EMERGENCY RESPONSE COMMISSION (SERC) CONSOLIDATED ANNUAL REGISTRATION FORM

Owner/Operator Information

| | | • | | |
|---|-------------------------------|-------------------------------|--|--|
| Filing Year | | 20XX | | |
| Company Name * | | Allied Spacecraft Corporation | | |
| Business Mailing Address (Street or P.O. Box) * | | () * 2555 Shumard Oak Blvd. | | |
| City * | | Tallahassee | | |
| State * | Note all fields are | FL • | | |
| Zip * | required. | 32399 | | |
| NAICS Code * | | 334511 | | |
| Telephone * | | | | |
| Contact Person * | | | | |
| Title * | | | | |
| Check this box to ge | nerate a Payment Link (withou | ıt Login) 🗆 | | |

If someone other than the person completing the filing is responsible for paying the fee via credit card or electronic check, click this box to generate a payment link that does not require a login. Once you click 'Submit' you will be redirected to a page to enter the email address of the card or bank account holder.

Consolidated Annual Registration Form cont'd.

Note the fee rate is determined by your reported chemicals and answers to these questions.

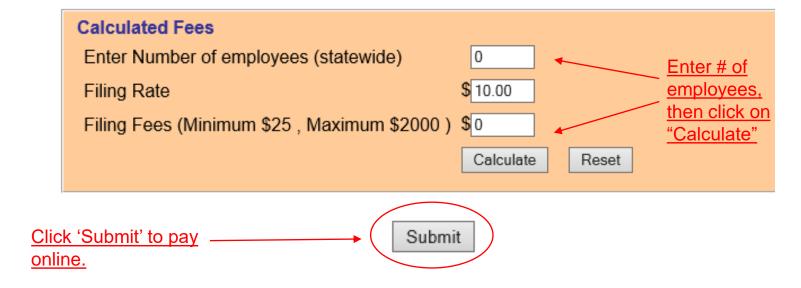
Registration Fee

Please answer questions below to calculate the filing fees applicable for your submission

Is your facility a governmental body (federal, state, country or local) facility?

Does your facility have an extremely hazardous substance at or above threshold planning quantity?

Please have your method of payment ready BEFORE clicking on the Submit button.



Under 'Registration Fee' answer all questions until no other questions pop up. Note that some questions, as in the case of the extremely hazardous substance question in the example, are prepopulated based on the chemicals reported.

○Yes

No

Yes

No

Government entities do not pay an annual fee.

Enter the number of employees statewide and click the 'Calculate' button to determine the total fee for the year. Finally, click the 'Submit' button to be taken to the payment module.

Other Fee Questions

Is your facility regulated by the Department of Environmental Protection for storage tanks (Section 376.303 of the Florida Statutes)?

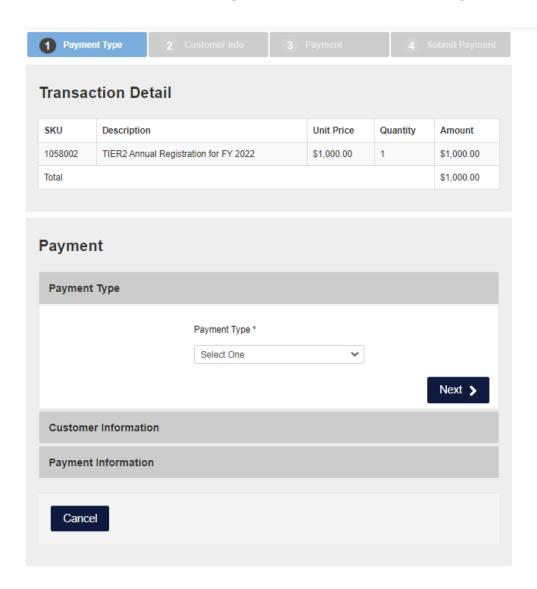
Is your facility regulated by the Department of Agriculture and Consumer Services (Chapter 527, Florida Statutes)?

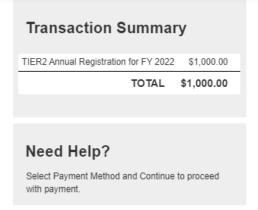
Is your facility regulated by the Public Service Commission for gas transmission and distribution lines (Chapter 368, Florida Statutes)?

Is your facility's primary function to grow crops or raise farm animals?

The questions above are examples of the additional questions that may pop up as you answer the Registration Fee questions. These questions determine the amount per employee your facility is required to pay. The minimum fee for any facility is \$25.00. Facilities with Extremely Hazardous Substances, or that do not qualify for a fee reduction based on the above questions, pay \$10.00 per employee, but not more than \$2,000.00 per year. Facilities that qualify for a fee reduction pay \$2.50 per employee, but not more than \$500.00 per year.

NIC Payment System



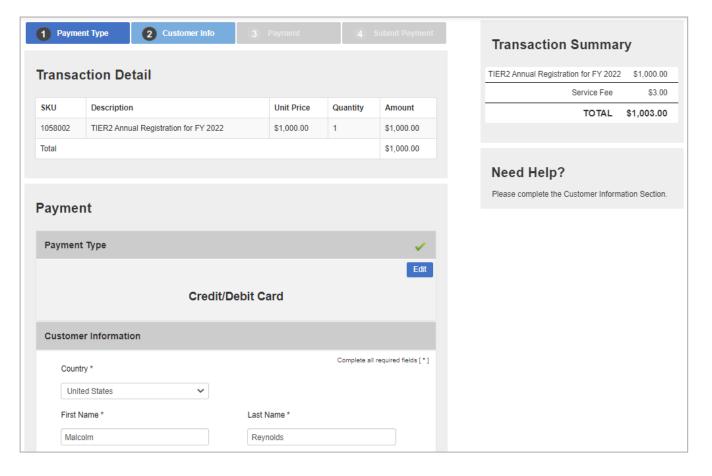


After clicking 'Submit' you will be redirected to the NIC e-payment system. The Payment Type tab displays the fee type and amount and asks for the payment method. Select the method of payment (credit card or bank account) from the drop-down menu and click the 'Next' button.

NIC Payment System (continued)

Enter the customer information on the Customer Info tab and click 'Next'. Please note that NIC assesses a \$3.00 service fee for each transaction. If you do not wish to pay the services fee, you may cancel the transaction and mail in a check.

Top of Page

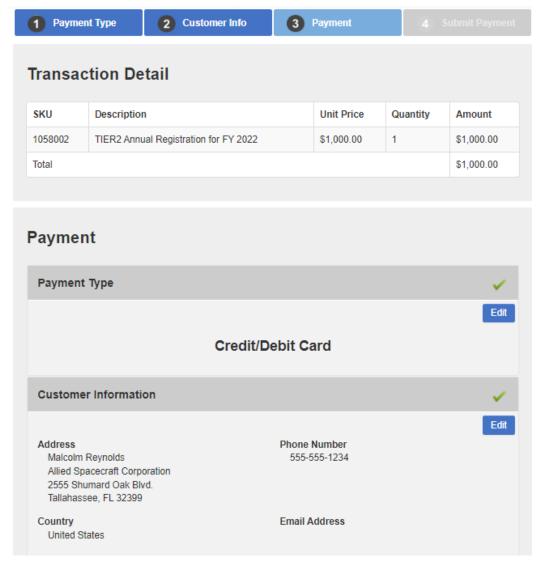


Bottom of Page

| Address * | | |
|------------------------|---------|------|
| 2555 Shumard Oak Blvd. | | |
| Address 2 | | |
| Oib. * | Obala * | |
| City * Tallahassee | State * | ~ |
| ZIP/Postal Code * | | |
| 32399 | | |
| Phone Number * | | |
| 555-555-1234 | | |
| Email 7 | | |
| | | |
| | | Next |
| ment Information | | |
| mont morniadon | | |
| | | |

NIC Payment System (continued)

Top of Page

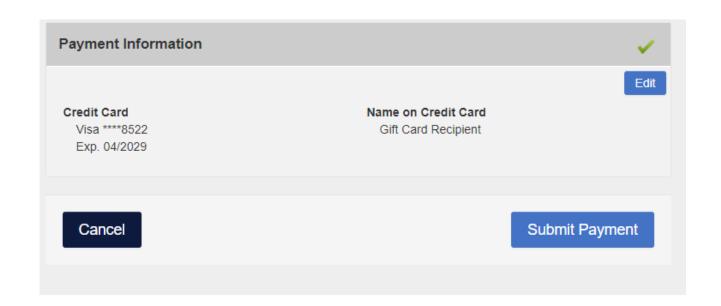


Bottom of Page

| Credit Card Number * ② | Credit Cord Type | Comple | te all required fields |
|------------------------|-------------------|----------|--|
| Credit Card Number | Credit Card Type | | |
| | VISA | DISCOVER | DESCRIPTION OF THE PROPERTY OF |
| Expiration Month * | Expiration Year * | | |
| Select a Month | Select a Year | ~ | |
| | | | |
| | | | Next > |
| | | | |
| | | | |

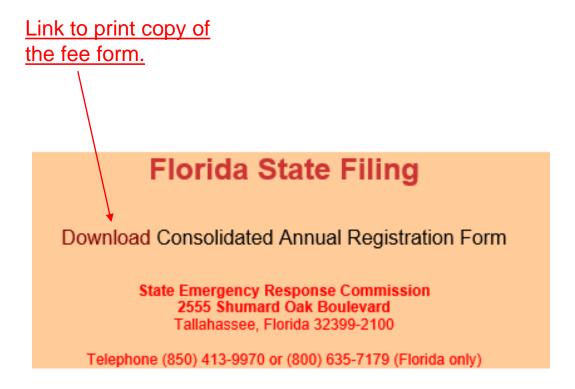
Enter the credit card information on the Payment tab and click 'Next'. As previously mentioned, **NIC assesses a \$3.00 service fee**for each transaction. If you do not wish to pay the services fee, you may cancel the transaction and mail in a check.

NIC Payment System (continued)



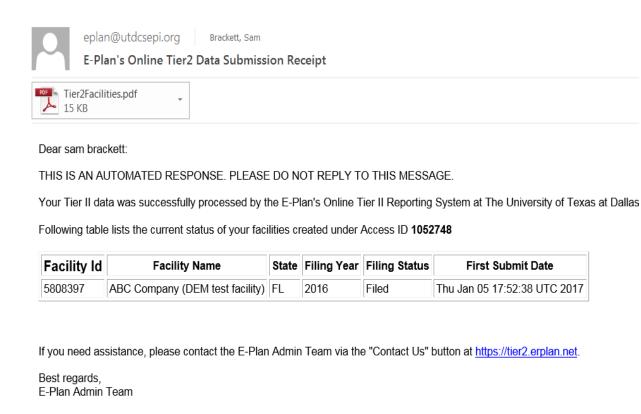
On the final page click 'Submit Payment' to complete your transaction. Once the transaction is complete, you will be automatically redirected back to E-Plan. You will also receive a payment confirmation email.

Invoice - Wendy Reynolds (1058002)



Once you are back in E-Plan, click the 'Invoice for 20XX' link in the gray bar at the top of the page to download the Consolidated Annual Registration Form. The Consolidated Annual Registration Form serves as the invoice you will need to submit to your accounting department.

Email Confirmation – Tier 2 Filed



Finally, the submitter will receive an email with an electronic copy of the filed Tier 2 and the status will show 'Filed' on the Online Filing Home page.

Congratulations! Your filing is now complete!

State Tier 2 Unit

| Representative | Representative |
|--|--|
| Wendy Reynolds | Sylvester Williams |
| 850-815-4317 | 850-815-4309 |
| Wendy.Reynolds@em.myflorida.com | Sylvester.Williams@em.myflorida.com |
| NAICE Codes & Industry Sectors | NAICS Codes & Industry Sectors |
| NAICS Codes & Industry Sectors | NAICS Codes & Mudstry Sectors |
| 11 – Agriculture, Forestry, Fishing and Hunting | 42 – Wholesale Trade |
| 21 – Mining | 44-45 – Retail Trade |
| 22 – Utilities | 48-49 – Transportation and Warehousing |
| 23 – Construction | 55 – Management of Companies and Enterprises |
| 31-33 – Manufacturing | 61 – Educational Services |
| 51 – Information | 62 – Health Care and Social Assistance |
| 52 – Finance and Insurance | 71 – Arts, Entertainment, and Recreation |
| 53 – Real Estate Rental and Leasing | |
| 54 – Professional, Scientific, and Technical Services | |
| 56 – Administrative and Support and Waste Management and | |
| Remediation Services | |
| 72 – Accommodation and Food Services | |
| 81 – Other Services (except Public Administration) | |
| 92 – Public Administration | |