



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

ACCESS REQUEST to FACILITY RECORD IN CERS - SINGLE FACILITY*

For more information, see: <http://www.sbcfire.org/hazmat/efile.aspx> or call CERS help line (909) 386-8432

The purpose of the ACCESS REQUEST is to ensure that only individuals designated by the facility owner/operator are authorized by the CUPA to access facility records and 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.				
AUTHORIZED LEAD BUSINESS USER				
Name			Title	
Email Address			Contact Phone	
OWNER NAME		OWNER EMAIL ADDRESS		
OWNER MAILING ADDRESS		CITY	STATE	ZIP CODE
OWNER PHONE				
Fill out the following information for the facility				
FACILITY ID (e.g., FA0123456)	FACILITY NAME (e.g., CUPA AUTO)	SITE ADDRESS (e.g., 123 N. MAIN ST.)		CITY (e.g., ANYTOWN)
<input type="checkbox"/> I authorize the person and email address listed above to be a lead business user for the listed facility. This includes the ability to create, edit, and submit compliance data for the listed facility. 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 facility listed on this authorization form.				

Certification – I certify that I am the owner/operator or legal representative of the 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	

*Each facility record that is entered into CERS is assigned to a business/organization. Multiple facilities that have the same owner/operator and that will have the same users managing the facility record in CERS can be grouped together into a single "umbrella" business/organization. If you own or operate multiple facilities and if the same users will be managing all of the facilities in CERS, you may want them to be grouped into a single business/organization. For more information please contact the San Bernardino CERS help line at (909) 386-8432.

Return completed form by Mail: San Bernardino County Fire Department or Fax: (909) 386-8460 or Email: Efile@sbcfire.org
 Hazardous Materials Division
 620 South E Street
 San Bernardino, CA 92415-0153

OFFICE USE	Notes:
Form Revised 11/14/12	Completed by: _____ Date: _____

OFFICE USE ONLY: DATE STAMP