



Alaska Department of Environmental Conservation

Vulnerability Assessment and Emergency Response Plan Compliance Certification

I. Instructions

- Use of this form is **ONLY** for Community Water Systems (CWS) serving 1,000 persons or more. CWS serving less than 1,000 persons **DO NOT USE THIS FORM**. Use the Priority Measures Plan Compliance Certification Form.
- Complete this form (pages 1-2) and submit to the DEC.
- Keep a copy of this form with your Emergency Response Plan.

II. General Information

CWS Name:		PWSID #:
Mailing Address:		
Contact Name:	Phone #:	
E-mail:	Fax #:	

III. Security Vulnerability Assessment (VA) Certification Checklist

Do NOT leave ANY items blank in this section. Per the emergency preparedness requirement, a VA must be completed. A VA shall include an evaluation of the vulnerability of the water system to a range of emergencies, including intentional acts and natural hazards. At a minimum, a VA shall consider the potential risks to:

- pipes and constructed conveyances;
- physical barriers
- water collection, pretreatment, treatment, storage, and distribution facilities, including fire hydrants;
- electronic, computer, and other automated systems;
- the use, storage or handling of chemicals;
- the operation and maintenance of the water system;
- the resiliency and ability of the water system to ensure continuity of operations in the event of a disruption caused by an emergency.

Has a VA, as described above, been completed for your community water system?

Yes No Date Completed:

IV. Emergency Response Plan (ERP) Certification Checklist

Do NOT leave ANY items blank in this section. Per the emergency preparedness requirement, elements listed below are required to be addressed in your Emergency Response Plan. An ERP shall describe the system's immediate response to emergencies, plans on how to return to regular service as soon as possible after an emergency, and how drinking water from an alternate water supply will be made available to a system's customers/consumers during an emergency.

NOTE: You are required to enter the page number on which the information (as described in the questions below) is addressed in your ERP.

Does the ERP incorporate the finding of the VA?

Yes No

1. A record of system-specific information critical to safe operation of the system. (This information must be stored in a form that will remain accessible if the system loses power).

Yes Page:

2. A provision for loss or inoperability of equipment, including:

a. identification of critical system components:

Yes Page:

b. An inventory of equipment needs and availability in an emergency, including:

- The location of existing emergency equipment, generators, and spill response materials;
- Identification of additional emergency equipment needs;
- Procedures for obtaining additional services and equipment, including critical spare parts.

Yes No

3. A description of the duties and responsibilities of key water system personnel in emergencies, including an established chain of command which designates authority and takes into account the possible absence of any given individual.

Yes Page:

4. An outline of communication pathways among system personnel and between system personnel and non-system personnel who might be expected to respond to an emergency, including the location of up-to-date emergency contact lists.

Yes Page:

5. Identification of alternate drinking water supplies sufficiency to meet the needs of the water system's individual customers/consumers during an emergency, including:

a. A plan to provide an alternate water supply for durations ranging from days to months;

Yes Page:

b. Procedures for obtaining, testing, treating, and distributing water from each identified alternate water supply, as needed:

Yes Page:

c. Provide a brief description of short-term alternate water supply.

d. Provide a brief description of long-term alternate water supply.

6. A plan for responding to complete or partial power loss.

Yes Page:

V. Certification

I submit this Vulnerability Assessment and Emergency Response Plan Compliance Certification in accordance with 18 AAC 80.055. I certify under penalty of law that I am the person authorized to fill out this form and the information contained herein is true, accurate, and complete to the best of my knowledge and belief.

Owner or Authorized Representative, *Signature*

Owner or Authorized Representative, *Print Name*

Date:

Please send this form to your local DEC Drinking Water Program Office.

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