

New Jersey Department of Environmental Protection Toxic Catastrophe Prevention Act (TCPA) Program



TCPA FACILITY SECURITY ADMINISTRATOR (FSA) REQUEST FORM

Prior to submission of this form you must create a User Profile for the NJDEPOnline Portal at www.njdeponline.com. Please specify the User ID below.

The TCPA FSA is a designated employee of the facility who is responsible to manage the security of the facility's Risk Management Plan (RMP). The facility can have only one TCPA FSA. The RMP is accessed through the Department's online application, eNJRMP. The TCPA FSA controls access for other personnel to the facility's RMP and eNJRMP using the Department's NJDEPOnline application; the TCPA FSA grants and revokes access to eNJRMP. The Department recommends that the TCPA FSA be a member of the facility's management who has the technical ability to work with the NJDEPOnline and eNJRMP applications, an understanding of the contents of the RMP, and authority to grant and revoke access to eNJRMP for other designated personnel. The RMP includes offsite consequence analysis data that is critical for Homeland Security, and the TCPA FSA plays a crucial role in maintaining the security of the RMP.

Section A: Facility Information		
Facility Legal Name:		
Street Address:		
City:		Zip:
TCPA ID#:		-
Reason for FSA Request (check one): Initial TCPA FSA Request		
Change in TCPA FSA. Reason for change	::	
Section B: Facility Administrator Informati	ion and Certification (Note: You	must be an employee of the above facility.)
Name of Person Requesting FSA Rights: Email address:		Phone:
User ID (NJDEPOnline Login ID):		
Signature		Date
Please Submit via Email to: tcpa@dep.nj.gov (Include "TCPA FSA Form" in the email subject line)		
OR		
	Below This Line – For DEP Use (•
Date Received: Revie	wed by:	
Ammound Dainated Decree Control	Name	Title
Approved Rejected Reason, if reject Date Forwarded to OIRM:		
OIRM Staff Processing form:		Date: