

2021 Registration Form

EMERGENCY RESPONSE SYSTEM (ERS)

The APA Emergency Response System (ERS) system is designed to handle emergency response involving consumer fireworks, display fireworks, and proximate pyrotechnics.

If you wish to participate in this system, your shipping papers must be marked with each of the following statements as required by the U.S. Department of Transportation/PHMSA.

- 1) For emergency response information during transporation, call CHEMTEL at either 1 -800-255-3924 (North America) or + 01- 813-248-0585 (Worldwide Intl.)
- 2) Shipping papers **must also include** the name of the offeror/shipper of the Hazardous Material including:
 - Your Unique ChemTel Contract Number - Your Company Name

NOTE: DOT/PHMSA requires this information to be on the shipping paper in addition to the ChemTel ERS information.

The APA is providing an emergency response system through its provider, ChemTel. The ultimate responsibility for providing emergency response information remains with you, the shipper. Thus, it is necessary for each participating company to provide our system with the names and evening telephone numbers of three persons whom ChemTel can attempt to reach in the event of an emergency involving one of your shipments.

ChemTel will try to handle all calls without calling your representatives, but there may be instances when the shipper must be reached (such as how to proceed with a cleanup, or what a driver should do in the event of a breakdown). Please provide names and cell phone numbers of three persons who will serve as your company's evening/weekend emergency contacts.

Please copy this form if you need to register more than one entity to cover multiple divisions, subsidiaries, D.B.A.'s or any other names that may appear on shipping papers other than parent company name provided. These entities must be part of your corporate structure.

Member Company Name:		
Address/City/State/Zip:		
Telephone:		
E-mail:	Website:	
Emergency Contacts:		Cell Phone Number
1)		
2)		
3)		
I understand that participation in the APA Emergency I responsibility for emergency response under U.S. Dep APA, its directors, contractors, and agents from any ar agree to notify the APA immediately of any changes in well as changes of company contacts or their telephon	artment of Transportation od all damages and liabili the Safety Data Sheets (n (DOT) regulations. I agree to hold harmless the ty arising from my participation in the APA ERS. I

Title:

Date:

(Signature of Company Official)

Name:



2021 ERS Participation Form

Please complete and return to the APA

Agillespie@americanpyro.com

APA 7910 Woodmont Ave., Suite 1220 Bethesda, MD 20814

- Yes, my company would like to participate in the 2021 APA ERS 24-hour emergency notification program administered by ChemTel. I have enclosed a registration form (one for each entity or location you wish to register) and agree to pay the \$125 fee for each entity/location registered. (For example 1 location \$125, 2 locations \$250 3 locations \$375, etc.)
 - ___ Check Enclosed
 - ____ Please charge my credit card (Visa, Master Card, or Amex only)

Credit Card Number

Expiration Date

Security Code

□ No, we do not require ERS coverage at this time. **PLEASE NOTE:** If you elect to receive coverage from an alternative provider, make sure that all your shipping papers are updated so they no longer reference ChemTel and ChemTel issued *contract number(s)*.

Company Name: _____

Address: _____

City, State, Zip: _____

Contact: _____