



**METROPOLITAN  
FIRE  
SERVICE  
SOUTH AUSTRALIA**



# SOUTH AUSTRALIAN FIRE SERVICES

## DANGEROUS GOODS EMERGENCY PLAN SUBMISSION

Under the Work Health and Safety Regulation 2012 - Regulations 43, 361 and 557.

### 1. PREMISES

Premises Name:	<input type="text"/>		
Premises Street and No:	<input type="text"/>		
Premises Suburb:	<input type="text"/>	Postcode:	<input type="text"/>
Local Council:	<input type="text"/>	Premises Telephone:	<input type="text"/>

### 2. APPLICANT

Applicant's Name:	<input type="text"/>		
Company:	<input type="text"/>		
Applicant's Postal Address:	<input type="text"/>		
Premises Suburb:	<input type="text"/>	Postcode:	<input type="text"/>
Telephone:	<input type="text"/>		
Email Address:	<input type="text"/>		

### 3. DESCRIPTION OF MAJOR HAZARD CLASSIFICATION

Safework SA Dangerous Goods Notification/Licence Number:	<input type="text"/>		
Is the facility a service station:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is the facility a Major Hazard Facility (MHF) or Potential MHF:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If Yes, what is the MHF Registration Number:	<input type="text"/>		
Is the facility an explosives site:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If Yes, what is the Explosives Licence Number:	<input type="text"/>		

### 4. APPLICANT'S SIGNATURE

Signed:	<input type="text"/>	Date:	<input type="text"/>
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Submit your draft Emergency Plan in either hard copy to:

Scientific Officer, Special Operations Department  
SA Metropolitan Fire Service  
99 Wakefield Street  
Adelaide SA 5000

or you can complete and scan and submit your draft  
Emergency Plan by email to:  
[SAMFSScientificOfficer@sa.gov.au](mailto:SAMFSScientificOfficer@sa.gov.au)