**TOP-SCREEN UPDATE INSTRUMENT**



# Paperwork Reduction Act Statement

In accordance with the Paperwork Reduction Act, no one is required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) Control Number. The valid OMB Control Number for this information collection is 1670-0014. The time required to complete this information collection is estimated to average 0.08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

# PRIVACY NOTICE

**Authority:** 6 U.S.C. §§ 621-29 (Protecting and Securing Chemical Facilities from Terrorist Attacks Act of 2014) and the Chemical Facility Anti-Terrorism Standards, 6 C.F.R. Part 27 authorize the collection of this information.

**Purpose:** The primary purpose of this collection is to obtain information regarding a covered chemical facility, including the submitter's contact information, in order to ensure compliance with the DHS Chemical Facility Anti-Terrorism Standards.

**Routine Uses:** This information will be used by and disclosed to DHS personnel, contractors, stakeholders outside the Federal government, or other agents, including but not limited to other Federal, state, and local officials; to assist in fulfilling the request, contacting the submitter, any administrative follow up actions required to ensure compliance with the DHS Chemical Facility Anti-Terrorism Standards, provided the recipient demonstrates a need to know in order to carry out official duties.

**Disclosure:** Providing this information is mandatory. If a covered chemical facility does not provide this information, then DHS has authority to pursue administrative enforcement action against the facility for failure to submit a revised Top-Screen, including the issuance of an administrative order, penalty order assessing a civil penalty, and/or an order to cease operations. *See* 6 U.S.C. § 624; 6 C.F.R. § 27.300.

# BASIC REPORTING FIELDS

The following basic reporting fields are required by the Top-Screen Update instrument:

* Is the Submitter a CVI Authorized User (Yes/No).
* If yes, CVI Authorization Number of Submitter.
* Name of the Submitter: (Last, First, MI).
* Phone Number of the Submitter.
* CSAT Facility ID #.
* Facility Name.
* Facility's Address (Street, City, State, Zip Code).
* Date Submitted.

# TOP-SCREEN UPDATE

In this section, a CFATS covered chemical facility provides a reason why the facility believes it needs to submit a revised Top-Screen. This instrument also covers the resubmission of a Top-Screen pursuant to the schedule provided in 6 CFR § 27.210(b). Chemical facilities may select any of the following options:

* Closure or sale of the facility,
* Addition of a new Chemical of Interest (COI),
* Elimination or changes to the amount of existing COI.
* Facility’s Top-Screen accompanies a Request for Redetermination based on selection of only one of the following options:
1. Material modification either to operations or site, which has reduced the quantity of one or more of the COI(s) since the previous submission.
2. Material modification either to operations or site, which has increased the quantity of one or more of the COI(s) since the previous submission.
3. Material modification either to operations or site, which has eliminated of at least one COI, but not all of the COI(s) since the previous submission.
4. Material modification either to operations or site, which has eliminated all COI(s) since the previous submission.
5. Material modification either to operations or site, which has added at least one COI since the previous submission.
* Other (Narrative).

In addition, the facility will provide a narrative for the following fields:

* Explanation for Submission.
* Desired Outcome for Request.