

To make an online TRI payment, do the following:

- 1.) Go to: <https://erplan.net/eplan/home.htm>
- 2.) Login using your Access ID & Password:
- 3.) Click on the “2017” tab;
- 4.) At the “2017 Online Filing Home” screen, click on “Invoice for 2017” (upper middle part of screen);
- 5.) At the Invoice screen, click on the “HERE (FL TRI REG” button;
- 6.) Fill out the Toxic Chemical Release Inventory (TRI) registration form;
- 7.) Enter the number of Form R reports as well as the number of Form A chemicals (enter zero if none are reported).
- 8.) Then click on the “Calculate” tab to get the total owed;
- 9.) Then click on “Submit”;
- 10.) At the next screen, click on the “Here” tab – will be directed to the Bank of America payment screen.



Click here to log in with
your assigned Access ID
and Password

E-Plan - Emergency Response Information System

FIRST RESPONDERS

[Login](#)

Federal, State, and Local Government Personnel

Online Tier2 eSubmit

[Login Page](#)

Tier II Submitters, Facility Managers, and Business Owners

E-Plan Online Filing Submission Management

Click on the “2017” tab

ENTER NEW DATA/ RETRIEVE OLD DATA	COPY DATA	IMPORT TIER2
Use this function to enter data for a new year or make changes to data of an year already submitted - Select a year to file/retrieve Tier II data: Select Filing Year ▼ - Previously filed Years : 2017 2016 Continue	Use this function to copy data from a submitted year to any year up to the current filing year Note: Copy function will transfer all previously filed Tier II data and site plans From: Previous Year ▼ To: Filing Year ▼ Copy Data	Use this function to import an existing Tier2 '.zip', Tier2 '.t2s', or CAMEO '.zip' file. - Note that the Tier2 '.zip' or Tier2 '.t2s' file should contain up to ten (10) data files and CAMEO '.zip' file should contain 16 data files. - These data files should have comma-separated values and '.mer' file extensions or xml tagged values and '.xml' file extension. Import 'zip / t2s'

Click Invoice for 2017

Submission Home Tier2 Filing Management Validate Record **Invoice for 2017** Invoice History

2017 Online Filing Home

Search Existing Facilities

FACILITY ID	FACILITY NAME	STREET ADDRESS	CITY	COUNTY
Facility ID	Facility Name	Street Address	City	County

* Federal requirements include: Owner / Operator (name, mail address, phone & email); Emergency Contact (name & 2 phone numbers, one of which must be 24-hour); Tier II Information

Following is the submitted facility information [Legend Help!](#)

Page 1 of 1 1 Total number of facilities: 1

NO.	ID	FACILITY NAME	STATE	FILING STATUS
1.	6255751	Company Name Contact Information 1. Emergency Contact Edit Delete 2. - Owner / Operator Edit Delete 3. - Tier II Information Contact Edit Delete Chemical Information 1. TOLUENE Edit Delete Copy 2. XYLENE (MIXED ISOMERS) Edit Delete Copy	FL	No

Important: On Completion of data entry please click on "Validate Record" to finalize filing

[Validate Record](#)

[First Responder View](#)

Tier2 Filing Management Validate Record Invoice for 2017 Invoice History

Click [HERE \(FL SERC REG\)](#) for Florida SERC CONSOLIDATED ANNUAL REGISTR/

Click here on
"FL TRI Reg"



Click

[HERE \(FL TRI REG\)](#)

for Florida TOXIC CHEMICAL RELEASE INVENTORY (TRI) ANNUA

FLORIDA STATE TOXIC CHEMICAL RELEASE INVENTORY (TRI) REGISTRATION FORM

Submission Information

Filing Year 2017

Facility Name *

Owner Name *

Operator Name *

TRI Identification Number *

Business Address (Street or P.O. Box) *

City *

State *

Zip *

Physical Address *

City *

State *

Zip *

Contact Person *

Title *

Telephone *

Fill out completely

Registration Fee

Calculated Fees

FORM R: Number of Form R Reports Submitted: X \$150 = \$

FORM A: Number of Total Chemicals Submitted: X \$75 = \$

TOTAL = \$

Calculate

Reset

Submit

Enter the # of Form R reports as well as Form A to Calculate fee (enter zero if non are reported). Hit **submit** and it will take you to the Bank of America site for payment.



[Management](#) [Validate Record](#) [Invoice for 2017](#) [Invoice History](#)

Online Payment

Please click

Here

to process an online payment.

[| Contact Us](#) [| FAQ](#) [| E-PLAN ONLINE TIER2 SUBMIT - USER'S GUIDE](#) [| E-PLAN ONLINE 302 SUBMIT - USER'S GUIDE](#)

Enter Payment Information

Your account details are shown below. Please enter details of the payment you want to make, and then select **Continue** to proceed.

Enter Payment Information

Retrieved Account Details

Account Number : 1030631

Email Address * :

Funding Source Details

Payment Method* :

Card Account



Name on Card* :

Card Number* :



Expiry Date* :

(mm/yy)

Card CVV No* :

What is this?

Address Line 1* :

Address Line 2 :

City* :

State* :

-Select-



Country* :

USA



Please enter your Country

Zip* :

Enter Payment Details

Payment Date: 10/18/2017

Payment Amount* :

- ☐ Current Balance (\$2,000.00) This is Current Balance as of today
- ☐ Minimum Payment Amount Due (\$2,000.00) This is the Minimum Amount Due based on your statement
- ☐ Payment Amount Past Due (\$0.00) This is the Past Amount Due based on your statement
- ☐ Current Statement Balance Amount (\$2,000.00) This is Current Statement Balance based on your statement

Your Account will not be charged until the Payment is confirmed on the next page

Cancel

Continue