

CCR Emergency Action Plan Annual Meeting Documentation

Use this form to document the CCR Rule required annual face to face meeting.

Meeting was held to discuss the Emergency Action Plan for the following CCR unit(s): _____

Mitchell Bottom Ash Pond Complex

Plant Personnel conducting the meeting: Danielle Roski

Date: 10/21/20 Time Held: 09:00

Attending Organization: MARSHALL COUNTY EMERGENCY MANAGEMENT

Print Name: Tom Hart Sign: [Signature]

Print Name: Tracey White Sign: [Signature]

Print Name: Tony Novel Sign: Tony Novel

Attending Organization: MARSHALL COUNTY 911

Print Name: Kathy Snyder Sign: Kathy Snyder

Print Name: Carol Robinson Sign: Carol Robinson

Print Name: _____ Sign: _____

Attending Organization: MARSHALL Co. S.O.

Print Name: William Helms Sign: [Signature]

Print Name: _____ Sign: _____

Print Name: _____ Sign: _____

Attending Organization: _____

Print Name: _____ Sign: _____

Print Name: _____ Sign: _____

Print Name: _____ Sign: _____

Use multiple pages to document additional organizations or attendees.