

Updating Facility Contacts in Your Next Online Submittal

Help sheet for the Industrial Online Reporting System

Updating Facility Contacts in Your Next Online Submittal

To effectively manage your permit with MCES, it is important to keep your contacts up to date. Contacts can only be updated using the Industrial Online Reporting System (IORS) when submitting self-monitoring reports, permit renewal applications, and dental clinic annual statements. This help sheet provides step-by-step instructions on how to update your facility contacts and covers the following permit types and submittal types.

Permit Type	Submittal Type
Standard Discharge Permit	Reporting Period Information SMR for Standard Discharges Permit Renewal Application for Standard Discharges
Special Discharge Permit	Reporting Period Information SMR for Special Discharges Permit Renewal Application for Special Discharges
General Permit – Microbrewery/Brewpub	Annual SMR for Microbreweries & Brewpubs Permit Renewal Application for Microbreweries & Brewpubs
General Permit – Hospital	Annual SMR for Healthcare Facilities Permit Renewal Application for Healthcare Facilities
General Permit – Water Treatment Plants	Annual SMR for Water Treatment Plants Permit Renewal Application for Water Treatment Plants
General Permit – Zero Discharge CIUs	Annual SMR for Zero Discharge Categorical Industrial Users Permit Renewal Application for Zero Discharge Categorical Industrial Users
General Permit – Sewer Cleaning Waste Haulers	Sewer Cleaning Waste Hauler SMR Permit Renewal Application for Sewer Cleaning Waste Haulers
Liquid Waste Hauler Permit	Liquid Waste Hauler Discharge Report Permit Renewal Application for Liquid Waste Haulers
Dental Clinics	Dental Office Amalgam Recovery Program Annual Statement

Step 1: Getting Started

Log into your account in the MCES Industrial Online Reporting System at: metro council.org/IORS

Step 2: Open your upcoming submittal

Please start by opening your upcoming submittal from the Upcoming Submittal Obligations grid in your dashboard. Click on the edit button in the “**Edit**” column for the respective submittal.

Upcoming Submittal Obligations							
1 - 15 of 30 item(s)							
Edit	Facility	Submittal Type	Monitoring Point	Monitoring Period	Due Date	Status	Submit Date
Edit	Test Food Producer	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/20/2015	Over Due	
Edit	Test Fortune 500 Company	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/20/2015	Over Due	
Edit	Test Food Producer	Sampling Results SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
Edit	Test Fortune 500 Company	Sampling Results SMR - Standard Discharges	SP-02	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
Edit	Test Fortune 500 Company	Sampling Results SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
Edit	##TEST - Microbrew 2	Annual SMR - Microbrewery/Brewpubs	SP-01	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	##TEST - Standard 2	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 12/31/2015	01/20/2016	Over Due	



Step 3: Review the current contact information for your facility







Below the grey header is a blue table that displays the facility's contact information.

Note: Scroll to the right of the screen to see all the information for each contact.

General Information

Facility Name: #WTEST - Standard 6	Facility Location: 6 TEST LN, ST PAUL, MN 55101	Permit No.: #006
Mailing Address: 6 TEST Lane Box 1, ST PAUL, MN 55101	County:	Reporting Period: 01/01/2016 - 12/31/2016

Carefully review your Facility's contact information below. To make updates to a contact, click on the  icon to the very left. If a contact is no longer active at your facility, click on the  icon to inactivate them.

	Responsibility Type	Status	Salutation	First Name	Middle Initial	Last Name	Job Title	Contact Mailing Address	Address Line 2
	IU - Primary		Mrs	Primary	C	Contact	Boss	6 Test Lane	Box 2
	IU - Alternate IU - Field		Mr	Alternate	E	Person	Minion	6 Test Lane	Box 2
	IU - Billing		Mr	John	C	Smith	Accountant	6 Test Lane	Box 1

Add New Contact

* 1. Is there any change in Facility Mailing address? Yes No









Step 4: Make the needed changes in the blue table

Changes to contacts will fall into one of three categories:

1. A contact no longer works at your facility and needs to be inactivated.
2. You need to add a new contact for your facility.
3. You need to update information about a contact in the blue table.

Scenario 1: A contact no longer works at your facility

If a person listed in the blue table no longer works at your facility, simply change the status from “**Active**” to “**Inactive**” by clicking on the **green** check mark button in the status column of the table. The **green** check mark button will change to a **red** “X” mark. If you make a mistake inactivating someone, simply check the **red** “X” mark to make it a **green** check mark button again.

	Responsibility Type	Status	Salutation	First Name	Middle Initial	Last Name	Job Title
	Field		Mr	Test	E	Person	Primary
	Signatory Authority		Mrs	Jane	E	Doe	Boss
	Primary		Mr	Test	E	Person	Primary
	Billing			John		Smith	Billing Specialist

Scenario 2: I need to add a new contact for my facility

Click on the **yellow** “Add New Contact” button located beneath the blue table.

	Responsibility Type	Status	Salutation	Firs
	Signatory Authority Billing Primary	<input checked="" type="checkbox"/>		
	Alternate Field	<input checked="" type="checkbox"/>		

Add New Contact

* 1. Is there any change in Facility Mailing address? Yes No

The page will display a pop-up window for you to enter in the information for a new contact. The required fields of information are denoted with a **red** asterisk. You must select at least one- (1) responsibility (located in the bottom righthand quadrant of the pop-up window. When you are finished entering all the information, click on the blue “**Save**” button.

Facility Contact

Please fill in the form, all (*) fields are required.

Salutation: Job Title:

* First Name: Mid Initial: * Last Name:

Status:
 Active

* Contact Mailing Address: Mailing Address Line 2:

* City: * State: * Zip:

* Phone No.: (XXX-XXX-XXXX) Ext: Fax No.: (XXX-XXX-XXXX)

* Email:

* Responsibility:
 Alternate
 Billing
 Designated Signatory
 Environmental Consultant
 Field
 Primary
 Signatory Authority

Save **Cancel**

The blue table will be updated with the new contact person.

Scenario 3: I need to update information for a facility contact

Click on the “**edit**” symbol (paper and pencil icon in the far-left column) in the row of the person whose information needs to be updated. A pop-up window will appear for you to enter in the updated information. The required fields of information are denoted with a **red** asterisk. When you are finished with your updates, click on the blue “**Save**” button.

If you wish to update a contact’s first or last name, enter in the correct/updated name in the box labeled ‘**Name Change and Reason:**’ Please also include a reason for the name correction. To save the record, click on the blue “**Save**” button.

Facility Contact

Please fill in the form, all (*) fields are required.

Salutation: Mrs Job Title: Boss

* First Name: Jane * Last Name: Doe

Status: Active Name Change and Reason: Name is now Jane Smith Recently married

* Contact Mailing Address: 12 TEST Lane Mailing Address Line 2:

* City: ST PAUL * State: Minnesota * Zip: 55101

* Phone No.: (XXX-XXX-XXXX) Ext: Fax No.: (XXX-XXX-XXXX)

* Email:

* Responsibility:

- Alternate
- Billing
- Designated Signatory
- Environmental Consultant
- Field
- Primary
- Signatory Authority

Save Cancel

The blue table will be updated with the information that was provided in the pop-up window.