

Community right-to-know number (12 digits, begins with CRK or WA):

# Specific Information by Chemical



Fmail address: encra@ecv wa gov

Under the Emergency Planning & Community Right-to-Know Act (EPCRA) Section 312, you must submit a Tier Two report for your facility if the hazardous or extremely hazardous substances (EHS) you store on site meet or exceed the reporting threshold. **Hazardous substances** are any materials that the Occupational Safety and Health Administration requires you to maintain a safety data sheet (SDS) for under the Hazard Communication Standard. **Extremely hazardous substances** are listed under 40 CFR Part 355, <u>Appendix A</u><sup>1</sup> and <u>Appendix B</u>.<sup>2</sup> Your Tier Two report is due by March 1 each year.

Email or mail this form to Ecology. Also send copies to your Local Emergency Planning Committee<sup>3</sup> (LEPC) and fire department.

Mailing address: Community Right-to-Know Unit Department of Ecology PO Box 47659 Olympia, WA 98504-7659	Reporting period: January 1 to December 31, 20  Subject to emergency planning under section 302 of EPCRA (40 CFR part 355)? Yes No  Subject to chemical accident prevention under section 112(r) of CAA  (40 CFR part 68, Risk Management Program)? Yes No			
	RMP Facility ID:	Not applicable	TRI Facility ID:	Not applicable
Facility information Name:	County:		Phone:	
Physical address Street:  City:	LEPC: Latitude (in decimals) Longitude (in decimal		Dun & Bradstreet nu NAICS code: Maximum number o Manned Unma	of occupants:
State: WA Zip Code:  Tier Two contact			Wallinea Official	mica
Name:		Email:		
Title:		Phone:		
Mailing address (must be included if different than facility address)				
Street:	City	<i>y</i> :	State:	Zip code:
1 https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.28.355&rgn=div5#ap40.30.355_161.a 2 https://www.ecfr.gov/cgi-bin/text-idx?node=pt40.28.355&rgn=div5#ap40.30.355_161.b 3 https://ecology.wa.gov/LEPCcontacts				
·	To request an ADA accommodation, contact Ecology by phone at 360-407-6700 or email at hwtrpubs@ecy.wa.gov, or visit https://ecology.wa.gov/accessibility. For Relay Service or TTY call 711 or 877-833-6341.			

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Hazardous Waste and Toxics Reduction Program



Owner/operator			Emergency contact one	
Name:			Name:	
Address:			Title:	
City:	State:	Zip code:	Phone:	24-hour phone:
Phone:	Email:		Email:	
Parent company info	rmation		Emergency contact two	
Name:			Name:	
Address:			Title:	
City:			Phone:	24-hour phone:
State:			Email:	
Zip code:			Facility emergency coordinato	r (if applicable)
Phone:			Name:	
Email:			Title:	
Dun & Bradstreet numb	per:		Phone:	24-hour phone:
			Email:	

#### Certification

#### Read and sign after completing all sections.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report, and that based on my inquiry of the individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator's authorized representative:

Signature: Date signed:

Optional attachments

I have attached a site plan

I have attached a list of site coordinate abbreviations

I have attached a description of dikes or other safeguard measures

**Pyrophoric** 

Hazardous Waste and Toxics Reduction Program





### Tier Two Chemical Inventory: Complete for Each Chemical

Trade secret

Chemical description Check all that apply: If chemical is an EHS: EHS name (if different):

**Pure** Liquid **EHS EHS CAS number (if different):** Mix **Chemical name:** 

Organic peroxide

Solid

Gas

Contact with water

Physical hazards (check all that apply)

(liquid or solid) emits flammable gas **Flammable** Corrosive to metal **Pyrophoric** gas **Combustible dust** Gas under pressure Oxidizer **Hazard** not **Self-heating** (compressed gas) Self-reactive otherwise classified

Health hazards (check all that apply)

**Acute toxicity Respiratory or** Reproductive toxicity Simple asphyxiant skin sensitization **Skin corrosion Specific target Hazard not** or irritation Germ cell organ toxicity otherwise classified mutagenicity **Aspiration hazard** 

Serious eye damage or eye irritation Carcinogenicity

Inventory

**CAS** number:

**Explosive** 

Maximum amount (pounds): Number of days on site:

Average amount (pounds):

Storage codes and location

Container	Pressure	Temp. (°F)	Storage Location

# **Storage Codes**

Container types

Code	Type of Storage
А	Above ground tank
В	Below ground tank
С	Tank inside building
D	Steel drum
E	Plastic or non- metallic drum
F	Can
G	Carboy
Н	Silo
1	Fiber drum
J	Bag

	Code	Type of Storage
1	K	Box
4	L	Cylinder
	М	Glass bottles or jugs
	Ν	Plastic bottles or jugs
1	0	Tote bin
4	Р	Tank wagon
4	Q	Rail car
	R	Other
	S	Sulfuric acid in batteries only.
1		

Temperature conditions codes

Storage conditions Pressure conditions codes

	Pressure conditions codes		
	Code	Pressure	
	1	Ambient pressure	
	2	Greater than ambient pressure	
	3	Less than ambient pressure	

Code	Temperature
4	Ambient temperature
5	Greater than ambient temperature
6	Less than ambient temperature, but not cryogenic
7	Cryogenic conditions

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Hazardous Waste and Toxics Reduction Program





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