

PENNSYLVANIA TIER II EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Reporting Per	riod from January 1,	to Decem	ber 31, OR	for Initial 5 Day Report	, indicate Current Year _		
Report Type:	☐ Initial 5 Day Report	☐ Annua	al [Revision	☐ Facility I	nformation is Changed from Last Submission	
Facility Iden	ntification (Both Boxes Be	elow are Mandatory	/ Information)	Owner/Operator De	etails (Mandatory Inf	ormation)	
PA Facility ID Name Company Nar Street		City		Name Address	E-	nail	
LEPC Name	ounty Municipality EPC Name			Phone Email Parent Company Details (If Applicable)			
State PA Z Phone FAX Maximum Occ		Lat/Long (Decimal) Email Unmanned	/ Manned	Name Address Phone Dun and Brad #		nail	
SIC Code		Dun and Brad # TRIFID		Facility Emergency	Coordinator (For 302	Planning Facilities)	
NAICS TRIFID 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)? When the section 313 of EPCRA (40 CFR Part 372)? When the section 313 of EPCRA (40 CFR Part 372)? When the section 313 of EPCRA (40 CFR Part 372)? When the section 313 of EPCRA (40 CFR Part 372)? When the section 313 of EPCRA (40 CFR Part 372)?				Name Title Phone 24 Hr. Phone Email			
Mailing Add	ress (only if Different fro	om Facility Physica	l Address Above)	Tier II Information	Contact (Mandatory)		
Name Attn Address Street Address 2 City State Zip Code Phone Country				Name Title Phone 24 Hr. Phone Email			
Emergency	Contacts (Mandatory)						
SI.No 1 2	Name	-	Γitle	Phone	24 Hr. Phone	Email	
						<u> </u>	
	inquiry of those individuals		ally examined and am familia ning the information, I believ			Attachments Site Plan (Mandatory)	
	ficial Title of Owner/Operato	or or Authorized Repr	esentative Date	Signature		☐ Site Coordinate Abbreviations ☐ Other Safeguard Measures ☐ Facility Emergency Response Plan	

Chemical Description	Inventory				
	Max Daily Amount (lbs) Max Daily Amount Code Ave. Daily Amount (lbs) Ave. Daily Amount Code Number of Days on Site				
Physical	Hazards				
Check all t	hat apply:				
☐ Combustible dust	☐ Pyrophoric gas				
☐ Corrosive to metal	☐ In contact with water emits flamn	nable gas			
☐ Oxidizer (liquid, solid, gas)	☐ Explosive				
☐ Gas under pressure	☐ Pyrophoric (liquid or solid)				
☐ Self-heating	☐ Hazard Not Otherwise Classified (HNOC)				
☐ Organic peroxide	☐ Self-reactive				
☐ Flammable (gases, aerosols, liquids, or solids)					
	Ave. Daily Amount (lbs) Ave. Daily Amount Code Number of Days on Site Mix				
Health I	Check all that apply: Solid Pyrophoric gas				
Check all t	hat apply:				
☐ Acute toxicity (any route of exposure)	\square Simple asphyxiant				
☐ Respiratory or skin sensitization	☐ Aspiration hazard				
☐ Germ cell mutagenicity	\square Serious eye damage or eye irritat	ion			
☐ Skin Corrosion or irritation	☐ Hazard Not Otherwise Classified (HNOC)				
☐ Reproductive toxicity	☐ Specific target organ toxicity (sing	gle or repeated exposure)			
□ Carcinogenicity					

Storage Codes & Locations								
Container Type Code	Pressure Code	Temperature Code	Storage Location	Description	Lat/Long of this Location Optional	Max Amt at This Location (Ibs) Optional	Confidential Location Optional check off	

Reporting Ranges (Weight Range In Pounds)					
Range Code	From	То			
01	0	99			
02	100	499			
03	500	999			
04	1,000	4,999			
05	5,000	9,999			
06	10,000	24,999			
07	25,000	49,999			
08	50,000	74,999			
09	75,000	99,999			
10	100,000	499,999			
11	500,000	999,999			
12	1,000,000	9,999,999			
13	10,000,000	Greater than 10 million			

MIXTURE COMPONENTS for Chemical Name					- Percentage Total Cannot Exceed 100.			
Chemical Name	%	CAS #	EHS	EHS Name	Amount (lbs)	Code	Size? < 100 microns/Powder/Molten/Solution	