Standard Stormwater Facility Inspection Report

City Of Berkeley Toxics Management Division
1947 Center Street, First Floor
Berkeley, CA 94704
(510) 981-7460
toxics@cityofberkeley.info

Reason For Inspection: ☐ First Inspection ■ Routine Inspection ☐ Response to Complaint ☐ Follow-up **Follow-up Date:**

NAME OF FACILITY	ADDRESS	CITY/STATE	ZIP CODE	DATE
UNIVERSE PAINTING	705 Bancroft WAY	BERKELEY, CA	94710	6/14/2017

CONTACT NAME	TELEPHONE	BUSINESS TYPE / ACTIVITY	SIC
Hristo Angelov	(510) 367-7094		

Is the property owner different than the facility owner? ■ Yes ☐ No **PHONE:** ☐ High Priority

NAME: **MAILING ADDDRESS:**

Is the facility covered under any other programs or permits? (Check all that apply.)

☐ None ☐ Sanitary Sewer
☐ Air Quality ■ Hazmat Business Plan ☐ Underground Storage Tanks ☐ Aboveground Storage Tanks
■ Fire Department (Hazmat Storage) ■ Hazmat Waste Generator ☐ Retail Food Facility ☐ Other:

Is the facility covered under a storm water permit? ■ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General Does the facility have a SWPPP? ☐ Yes ☐ No

N/A = Not Applicable; **PTNL** = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP Effectiveness: 0 = BMPs are effective, 1= BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. OUTDOOR PROCESSING/MANUFACTURING	■			☐	☐
B. OUTDOOR MATERIAL STORAGE AREAS	■			☐	☐
C. OUTDOOR WASTE/DISPOSAL AREAS	☐	2	0	☐	☐
D. OUTDOOR VEHICLE AND HEAVY EQUIPMENT STORAGE, MAINTENANCE AREA	■			☐	☐
E. OUTDOOR PARKING AREAS AND ACCESS ROADS	☐	1	0	☐	☐
F. OUTDOOR WASH AREAS	■			☐	☐
G. ROOFTOP EQUIPMENT	■			☐	☐
H. OUTDOOR DRAINAGE FROM INDOOR AREAS	☐	1	0	☐	☐
I. OTHER (DESCRIBE)	■			☐	☐

DRAFT

Structural Control Present ☐ Maintenance required in storm drain system ☐ Yes ■ No

Number of BMP brochures distributed? Describe BMP:

Comments/Remarks/Requirements:

PRIORITY FOR RE-INSPECTION: ☐ 1: First ☐ 2: Second ☐ 3: Third Referred to :

ENFORCEMENT: ■ None ☐ Verbal Notice ☐ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

Violations will be copied to property owner.

Signatures

Inspector: Carrie Estadt
HAZARDOUS MATERIALS SPECIALIST II

FINANCE CUSTOMER SERVICE
MISCELLANEOUS RECEIVABLES
CHARGE ENTRY ADJUSTMENTS
FN-MRA: REQUEST FOR CORRECTIONS

COMPLETED COPY

DATE: 8/16/17
DOC/REF/NO.: HZFY18-005

CUSTOMER TYPE/CODE/DESCRIPTION: HZ

CUST. ID# / ALT #: 117143
CUSTOMER NAME: UNIVERSE PAINTING & CONSTRUCTION
CUSTOMER ADDRESS: 705 BANCROFT WAY

ORIGINAL BILL DATE	REMOVE	ADD	ADJUSTMENT DESCRIPTION	FOR TMD REFERENCE ONLY	ADD	REMOVE	NOTES
07/02/15		CUPA1	STATE SURCHARGE		$35.00		Not billed for FY16
07/02/15		HMPA1	HAZMAT STORAGE PERMIT		$315.00		
07/02/15		HWG13	HAZWASTE GENERATOR PERMIT		$260.00		
07/29/16		CUPA1	STATE SURCHARGE		$35.00		Not billed for FY17
07/29/16		HMPA1	HAZMAT STORAGE PERMIT		$315.00		
07/29/16		HWG13	HAZWASTE GENERATOR PERMIT		$260.00		
				SUBTOTALS:	ADD	REMOVE	
					$1,220.00	$0.00	
				TOTAL ADJUSTED AMOUNT: $1,220.00			

REASON FOR ADJUSTMENT: Open 2+ years, bill for for HazMat Storage, HazWaste Generator & CUPA state surcharge for FY 16, 17 per 6/9/17 Fee Summary by CE. [NOTE: Adjustment originally submitted 6/29/17 as HZFY17-116, not processed as of 8/16/17 - pm.]

DEPARTMENT SIGNATURES: Paul Miller — Prepared by: — 8/16/17 Date

Approved by: — 8/21/17 Date

FINANCE/CUSTOMER SERVICE:

Adjusted by: — Date

Approved by: — Date

DRAFT

Planning and Development Department
Toxics Management Division

January 27, 2017

Universe Alliance Painting Construction
705 Bancroft Way
Berkeley, CA 94710-2225

And

DC Properties
2027 4th St. #201
Berkeley CA 94710-1912

Second Notice of Violation: Failure to Respond to Hazardous Materials Storage Reporting Requirements at 705 Bancroft Way Berkeley, CA 94710. Correction due by February 27, 2017.

Dear Berkeley Business Owner/Operator,

Toxics Management Division (TMD) has determined that your facility is storing or using hazardous materials in quantities that require reporting under fire and hazardous materials regulations.

TMD is required to collect information on the types and quantities of hazardous materials and hazardous wastes used, stored or generated within the City's jurisdiction. To satisfy these requirements, all facilities that generate **any** quantity of hazardous materials must complete a *Hazardous Materials Business plan*. Facilities that use or store **aggregate** quantities of hazardous materials (including hazardous wastes) equal to or greater than 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet of compressed gases are required to electronically submit a *Hazardous Materials Business Plan (HMBP)* through http://cers.calepa.ca.gov/. **Please note, hazardous materials include less dangerous materials such as cylinders of carbon dioxide, oxygen, and nitrogen as well as paint, oil (cooking oil), and parts cleaner.** This information must be submitted at the time a facility begins operations, or at the time it first begins to handle a hazardous material or waste that meets the above thresholds.

A first Notice of Violation was issued on November 16, 2016 for failure to submit the HMBP. This letter serves as a **Second Notice of Violation** and requires that you submit the forms to TMD by **February 27, 2017**. If TMD does not receive your submittal by **February 27, 2017,** you will be fined a late filing fee in accordance with the approved fee schedule for TMD. The fee schedule can be found at "Downloads" on TMD's website: http://www.cityofberkeley.info/toxics. In addition, non-compliance with hazardous materials reporting requirements of Section 25514 (a), Chapter 6.95 of Division 20 of the California Health and Safety Code is a violation and can result in fines of **$2,000 fine per day**.

TMD is the Certified Unified Program Agency (CUPA) for the City of Berkeley. We are authorized to implement Chapters 6.5, 6.7, 6.75, 6.95, and Division 20 of the State Health and Safety Code in addition to the City ordinances. If you have questions about these requirements, please call (510) 981-7460 and ask to speak with a Hazardous Materials Specialist.

Sincerely,

DRAFT

Jewel Mauricio
Hazardous Material Specialist I

Attachment: Hazardous Materials Business Plan Information and Instructions

DRAFT

FA0001115

For Dept Use Only
Entered: 10/27/jm
by: jm
Scanned by: _____

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 10/04/16 Time: 09:00 AM Page: 1 of 2

Facility Name: UNIVERSE PAINTING CONSTRUCTION

Address: 705 BANCROFT WAY BERKELEY, CA 94710 Phone: 510.367.7094

Owner/Operator Name: _____

Facility Representative(s): CHRIS (HRISTO) ANGELOV

Permitted CUPA Activities: ☐ HMBP ☐HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☐HMBP ☐HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☐SW
Unannounced: ☑Yes ☐ No
Purpose of Inspection: ☐Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☑Permit Screen ☐Other_____
Consent Granted for: ☑Inspection ☑Photos (include log) ☐Samples; Consent Granted By: ~~HA~~

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		CONDUCTED SCREENING FOR HAZARDOUS MATERIALS AND HAZARDOUS WASTE. IF THE FACILITY
		STORE OR HANDLE HAZARDOUS MATERIALS AND HAZARDOUS WASTE IN COMBINED
		QUANTITIES IN AMOUNT ≥ 55gal (LIQUIDS), 500lbs (SOLIDS), 200ft³ (COMPRESSED GAS)
		MUST SUBMIT HMBP
	HMBP	
II	HSC 6.95 25507; BMC 15.12.050	FACILITY FAILED TO ESTABLISH REQUIRED HAZARDOUS
		MATERIALS BUSINESS PLAN. THE FACILITY EXCEED THE SPECIFIED THRESHOLDS OF
		HAZARDOUS MATERIALS REQUIRED TO SUBMIT HMBP IN ACCORDANCE WITH
		BMC 15.12.050. THEREFORE THE FACILITY MEET THE REQUIREMENT TO
		REPORT ~~all~~ HAZARDOUS MATERIALS AND SUBMIT HMBP.
		CORRECTIVE ACTION: PLEASE SUBMIT REQUIRED HAZARDOUS MATERIALS BUSINESS PLAN (HMBP)
		GO TO cers.calepa.ca.gov AND CREATE AN ACCOUNT.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☑CUPA violations cited on page(s) 1 shall be corrected within 30 days. Due NOV 27, 2016
☐ SW violations cited shall be corrected within ____ days or before the next rain event.
☑Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: _____ Title: CFO

Inspector's Signature: _____ Inspector's Name: JEWEL MAURICIO

DRAFT

Date: 10/04/16 Page: 2 of 2

Facility Name: UNIVERSE PAINTING CONSTRUCTION

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
	OBSERVATION	OBSERVED GALLONS OF PAINTS OUTSIDE / PARKING LOT OF UNIVERSE PAINTING CONSTRUCTION. (SEE PHOTOS ATTACHED). THE FACILITY CLAIMS THAT THEY USE THE STATE PROGRAM "PAINT CARE" TO RECYCLE THEIR PAINTS. HOWEVER THE FACILITY DO HANDLE HAZARDOUS MATERIALS AND HAZARDOUS WASTE ≥ 55gal FOR LIQUIDS AND THEREFORE THE FACILITY IS REQUIRED TO SUBMIT A HMBP

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Facility Representative Signature: _____

Saved to Site File: 7/18/17
EC Updated: 7/18/17
Finance Updated: —
Admin Initials: LGC

FEE SUMMARY SHEET

For Permit Period FY18 (Base Reporting Period: 2017)

CERS ID: 10711396

Facility: Universe Painting and Construction CID: 117143

Address: 705 Bancroft Way

Total Aggregate Quantities Stored or Handled at This Facility

(1) The row heading "Hazardous Materials" requires a sum of *all* amounts reported on the Chemical Description pages, including data reported for hazardous wastes. (2) Please don't leave any quantity box blank; if the total number for a particular category is zero, enter 0. (3) If additional programs should be billed (CalARP, APSA, etc.), place an X in the box under the program name.

Quantities Summarized:

Chemicals	CY2017	CY2017	CY2017	Last Reported	FY2018 Permit
	LIQUID	**SOLIDS**	**GASES**		
Total number of all chemicals:	2	-	-		2
Total number of waste chemicals:	1	-			
	GALLONS All liquids	**POUNDS** All solids	**CU. FT.** All gasses		
Hazardous Materials: *ALL* Chemicals. Sum of *all* Box 218s—Max. Daily Amt	200	-	-	—	HMPA1
Hazardous Wastes: *ONLY* Wastes. Sum of *all* Box 219s— Annual Waste Amt	150	-		—	HWG13

CalARP			Tiered Permit			APSA	
Program 1	Program 2	Program 3	Conditionally Exempt	Conditionally Authorized	Permit by Rule	< 10,000	≥ 10,000
Undergrnd Stor. Tanks		**Acute HW**	**Inert Gas**	**Etiologic**	**Radiologic**	**Nano**	**EPCRA**
# of USTs:							

Additional Billing FY 2016: X FY 2017: X

Reason:

Inspector: Carrie Estadt Date: 6/9/2017

DRAFT

1947 Center St., Ste. 114, Berkeley, CA 94704 TEL: 510-981-7460 TDD: 510-981-6903 FAX: 510-981-7470

Planning and Development
Toxics Management Division

SECOND NOTICE OF VIOLATION

FAILURE TO SUBMIT AN ELECTRONIC HAZARDOUS MATERIALS BUSINESS PLAN (HMBP) BY MARCH 1ST.

April 2, 2018

RE: UNIVERSE PAINTING CONSTRUCTION
705 BANCROFT WAY
BERKELEY, CA 94710

Dear Berkeley Business Owner/Operator:

The Toxics Management Division (TMD) is the Certified Unified Program Agency (CUPA) per California Health & Safety Code, Division 20, Chapter 6.11.

On January 1, 2018, TMD sent you a courtesy email reminding you to comply with the annual submittal of the Hazardous Materials Business Plan (HMBP) by March 1, 2017. A second reminder was mailed to you via US Mail on January 16, 2018. These courtesy notices provided instructions on how to submit the HMBP to the California Environmental Reporting System (CERS) website and offered individualized support for this purpose. A First Notice of Violation was sent to your facility on March 9, 2018 for failure to submit the HMBP, the new deadline provided on First Notice of Violation was March 31, 2018.

As of this date, your facility has not submitted the HMBP and is in violation of California Health and Safety Code (HSC) section 25508 and Berkeley Municipal Code Title 15. A late-filing penalty of 10% or $50, whichever is greater, will be added to your billing every month past the deadline.

You are now instructed to submit your HMBP by **April 18, 2018**. If you have not finalized the HMBP submittal to CERS by **April 18, 2018**, TMD will issue an **administrative enforcement penalty** not to exceed **$2000 per day of violation**.

If you need assistance, you may visit the CERS Help page online or, for personalized assistance, contact us at (510) 981-7460.

Sincerely,

Nabil Al-Hadithy
Hazardous Materials Manager

cc: Christo Angelov, 1029-A 2nd St., Oakland, CA 94608

DRAFT

ERKELEY

partment of Planning and Development
XICS MANAGEMENT DIVISION
Certified Unified Program Agency

INSPECTION REPORT SUMMARY

Street Address:	2216 Fifth Street		
Name of Facility:	Berkeley Engineering and Research		
Contact Person:	PAIGE CHANT	*Telephone:*	549-3300
Type of Business:	ENGINEERING TESTING LABORATORY		

UNIFIED PROGRAM SUMMARY	Program	Inspection	COMMENTS
Stormwater Program	✓	✓	
Hazardous Materials Business Plan	✓	✓	
Risk Management Plan / CalARP			
Underground Storage Tank			
Aboveground Petroleum Storage Tank			
Does the facility have an SPCC Plan?			
Hazardous Waste Generator			
Tiered Permit: Permit-by-Rule			
Conditionally Authorized			
Conditionally Exempt, Specified Waste Stream			
Conditionally Exempt, Small Quantity Treatment			
Conditionally Exempt, Limited			
Conditionally Exempt, Commercial Laundry			

INSPECTION CHECKLISTS COMPLETED AND ATTACHED		
☑ HMBP Inspection Checklist		
☐ Hazardous Waste Generator Inspection Checklist		
☐ Tiered Permit Inspection Checklist		
☑ Stormwater Inspection Report Form		
☐ Underground Storage Tank Checklist(s)		
☑ Summary of Violations		
☐ Inspection Form		
☐ Other Attachments-List		
Was permission granted by a facility representative for this inspection?	☑ YES	☐ NO

Submit written Corrective Action Plan within N/A days. Complete corrections described on page/s 4 by 8/14/05

Re-inspection of the facility to verify compliance with all requirements may be conducted on or after N/A.

Submit Certification of Return to Compliance for all minor HazWaste & other violations within 30 days 8/14/05

Failure to comply with requirements established in this inspection report or in subsequent correspondence may result in the issuance of a Notice of Noncompliance. Noncompliance is punishable by criminal and/or civil penalties under applicable local, state and/or federal laws or regulations.

7/14/05 — *Date of Inspection*

ANDREW BLOCK — *Inspector*

Paige Eve Chant 7/14/05 — *Signature of Facility Representative*

DRAFT

2118 Milvia Street, Suite 300, Ph.: (510) 981-7460 Fax: (510) 981-7470 TDD (510) 981-7474

Non-Waste Hazardous Materials Inventory Spreadsheet

May 20

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: | 200 Add ☐ Revise ☒

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class
Semi Room #1	Nitrogen compressed gas	☑ Same as first column ✓	7727-37-9	☐ Yes ☒ No	CRY NFG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	460 / 460 / 460	365	C-1	☐ lbs ☐ gal ☒ cu. ft ☐ µ curie ☐ other	☐ Fire ☒ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
Shelf Indoor #2	Acetone	☑ Same as first column	67-64-1	☐ Yes ☒ No	FL IRR	☐ solid ☑ liquid ☐ gas ☑ pure ☐ mixture ☐ radioactive	1 / 1 / 1	☑ 365	C	☐ lbs ☒ gal ☐ cu. ft ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
Fire Cabinet Indoor #3	Miscgb Gearlube Iso68	☑ Same as first column		☐ Yes ☐ No		☐ solid ☑ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	70 / 70 / 70	☑ 365	PD	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	/ /	☐ 365		☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable Reactive, **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic Nonmetallic Drum, **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

May 2006

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: | 200 Add ☒ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 213, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	208 SARA Class
Lab Flammables Cabinet #3	Wood Preservative	☐ Same as first column Termin-8		☐ Yes ☒ No	TX	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	.25	.25	.25 222 Days on site: ☒ 365 223 Storage Container: BC	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
	Expanding Foam	☐ Same as first column		☐ Yes ☒ No	IRR	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	2	2	2 222 Days on site: ☒ 365 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
	misc Oil based paints and finishes	☐ Same as first column		☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	7.25	7.25	7.25 222 Days on site: ☒ 365 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed
	Misc Oils and Lubricants	☐ Same as first column		☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	9	9	9 222 Days on site: ☒ 365 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed

DRAFT

210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive; FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer; PYRO – Pyrophoric; SENS – Sensitizer; TX – Toxic; UR – Unstable/Reactive; WR – Water Reactive

223 Storage Container Codes: AGT – Above Ground Tank; B – Bag; BX – Box; C – Can; CB – Carboy; CYL – Cylinder; FD – Fiber Drum; GB – Glass Bottle; PB – Plastic Bottle; PD – Plastic/Nonmetallic Drum; SD – Steel Drum; S – Silo; RC – Rail Car; TB – Tote Bin; TW – Tank Wagon; UST – Underground Tank; O – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

May 2006

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: | 200 Add ☒ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	Pressure & Temp
Lab Flammables Cabinet #3	MISC Liquid Solvents	☐ Same as first column		☐ Yes ☒ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	7	7	7	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb ☐ < Amb Temp ☒ Ambient ☐ > Amb ☐ < Amb ☐ Cryog
	MISC Spray Solvents	☐ Same as first column		☐ Yes ☒ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	.5	.5	.5	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☐ Ambient ☒ > Amb ☐ < Amb Temp ☒ Ambient ☐ > Amb ☐ < Amb ☐ Cryog
	Tar Pitch	☐ Same as first column		☐ Yes ☒ No		☒ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	.25	.25	.25	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb ☐ < Amb Temp ☒ Ambient ☐ > Amb ☐ < Amb ☐ Cryog
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive				☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogen

222 Days on site: ☐ 365 (☒ 365 on Tar Pitch)

223 Storage Container: C (Tar Pitch)

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223 Storage Container Codes: AGT – Above Ground Tank; B – Bag; BX – Box; C – Can; CB – Carboy; CYL – Cylinder; FD – Fiber Drum; GB – Glass Bottle; PB – Plastic Bottle; PD – Plastic/Nonmetallic Drum; SD – Steel Drum; S – Silo; RC – Rail Car; TB – Tote Bin; TW – Tank Wagon; UST – Underground Tank; O – Other

SEM Room
Liquid Nitrogen Storage
HM
Access to SEM Room
Access to "Clean Room" and Lab
sink
FE
"Clean Room"
E sink
toilet
toilet/ sink
Access to Clean Room
Offices
Front door
Gate to Street
Lab with Loft defined by dotted lines
Helium
Propane
Large roll-up door
metal cabinet
Outdoor Storage
Access to Lab from offices
Access to Lab and Outdoor
STAGING
Parking area
NORTH
Berkeley Enginnering and Research, Inc. 2216 5th Street, Berkeley, CA 94710
5th ST.
1" = 11'
DRAFT

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency
2118 Milvia Street, Suite 200, Berkeley, California 94704
TEL: (510) 705 8150
TDD: (510) 644 6915
FAX: (510) 540 5672

6-15-01 DGL

Facility Name: IRONIES Date: 5/31/01 Page: 1 of 4

Address: 2222 5th Street Contact: Dan McClennand

Phone: 644-2100 x111 Contact Title: Production Manager

SUMMARY OF VIOLATIONS:

(1) ~~check TMD~~ double chaining of compressed gas ~~not~~ in ~~use~~ CART

(2) tanks of compressed gas stored must be double chained per fire code.

(3) Update chemical inventory: Plastic Filler/Resin, Mold Release Spray Enamel, Rust Proofing ~~Spray~~ other ~~materials~~ materials w/ MSDS

(4) TMD will check to see if Hydrostone should be included on inventory.

(5) TMD will check on requirements for neutralizing acid wash solution

(6) TRAING PROGRAM NEEDS TO PROPERLY IMPLEMENTED AND DOCUMENTED (7) HMBP Needs to be kept on site

NOTICE TO COMPLY:

(1) COMPRESSED GAS NEEDS TO BE DOUBLE CHAINED 1ST THIRD OF TANK AND LAST THIRD OF TANK TO CART CART WITH BOTTOM LIP IS OK TO HAVE SINGLE CHAINED

(2) COMPRESSED GAS STORED NEEDS TO BE DOUBLE CHAINED 1ST THIRD / LAST THIRD

(3) TMD will send blank copies of inventory sheets. If you have questions on filling them out call TMD (Brian Lenz @ 510-705-8158)

(4) TMD will contact Ironies regarding this ~~requirement~~.

(5) TMD will contact Ironies regarding this

(6) ~~CERTIFIED~~ TMD will send training documentation TRAINING MUST BE DOCUMENTED ~~ANNUALLY~~ NEW EMPLOYEES MUST BE TRAINED W/IN 6 MONTHS ANNUAL REFRESHER REQUIRED FOR ALL EMPLOYEES WORKING WITH HAZARDOUS MATERIALS

(7) HMBP needs to be kept on site

PLEASE CORRECT ABOVE DEFICIENCIES WITHIN 30 DAYS AND SEND TMD DOCUMENTATION VERIFYING THAT CORRECTIONS HAVE BEEN MADE.

Facility Contact Signature: _____

Inspector: _____ Reinspect Date: _____
Hazardous Materials Specialist

DRAFT

Planning and Development Department
Toxics Management Division

INTER-AGENCY REFERRAL FORM

Subject of Referral:

Facility Address: 2222 Fifth Street
Business Name: Ironies, Inc. Tel: 510-644-2100
Contact Person: Kiat Tjong Fax:

Referred By: City of Berkeley Toxics Management Division

Inspecting Officer: Carrie Estadt Date Referred: 3/15/04
Tel: 510-981-7471 Fax: 510-981-7470 Inspection Type: Routine

Referred To:

Agency / Department	*To the Attention of*	*FAX Number*
EBMUD	Molly Ong	510-763-6823

Reason for Referral:

Facility is washing iron parts in an enclosure. Water drains to two secondary containment pallets. Water is then discharged to sewer.

Action Taken:

Inspecting Officer: Date Received:
Comments:

F:\TOXICS\HMBP\ALAMFRMS\REFERRAL.DOC

PLEASE SEND THE CITY OF BERKELEY TOXICS MANAGEMENT AN UPDATE OF ACTIONS TAKEN BY YOUR AGENCY. THE CITY IS REQUIRED TO TRACK COMPLAINTS AS PART OF IT'S CUPA AND OTHER DUTIES. RETURN FAX 510-981-7470 OR E-MAIL TOXICS@CI.BERKELEY.CA.US

DRAFT

Planning and Development Department
Toxics Management Division

February 26, 2004

Kiat Tjong
Ironies, Inc.
2222 Fifth Street
Berkeley, CA

Dear Mr. Tjong:

As we discussed on the phone, I am sending you this fact sheet on Managing Paint Booth Filters. It contains a lot of information that will help you to manage your paint booth filters properly. While it is a good fact sheet, there are specific requirements for California that are not covered. The information below will help you to comply with California requirements.

According to the California Code of Regulations Section 66262.11, "A person who generates waste…shall determine if that waste is a hazardous waste." This can be done by applying professional knowledge to the waste and to the processes generating the waste, or by testing according to the methods contained in 22 CCR, Chapter 11.

If your filters are shown to be hazardous, you must manage them correctly, including storing them in a closed, labeled container. I have included a fact sheet on "Hazardous Waste Generator Requirements" and have highlighted the main points. Section D of the Generator Requirements fact sheet indicates that all hazardous waste containers must be labeled. Please use the label enclosed to comply with this section. In addition, the waste must be transported by a registered hauler and disposed of at a permitted facility. Please consult with the supplier of your paint booth filters for disposal companies.

If your filters are shown to be non-hazardous, you may continue to dispose of them in the dumpster. However, you are responsible for ensuring paint booth filters are not disposed of in a manner that could cause a fire. We recommend that you minimize or eliminate the contact between the filters and natural fibers, such a paper and prevent mixing with combustible materials. DO NOT wet down the filters. Substances, other than stormwater, discharged or posing a threat to discharge to the municipal storm drain system is a violation of Berkeley Municipal Code Chapter 17.52, the state Porter-Cologne Act, and the Federal Clean Water Act. You are required to take precautions

The City of Berkeley Toxics Management Division is the Certified Unified Program Agency (CUPA) for the City of Berkeley. We are authorized to implement Chapters 6.5, 6.7, 6.75, 6.95, and Division 20 of the State Health and Safety Code in addition to the City ordinances. If you have questions about these requirements, please call me at (510) 981-7460.

Sincerely,

Carrie Estadt

Carrie Estadt
Hazardous Materials Specialist I

Enclosures: Managing Paint Booth Filters (Minnesota Pollution Control Agency)
Hazardous Waste Generator Requirements (DTSC)

2118 Milvia Street, Suite 200, Berkeley, California 94704 ♦ TEL: (510) 981-7460 ♦ FAX: (510) 981-7470 ♦ TDD: (510) 981-7474

DRAFT

CITY OF BERKELEY
OFFICE OF SPECIAL COMMUNITY SERVICES
TOXICS PROGRAM
2180 MILVIA, BERKELEY, CA 94704
(415) 644-6510

Fax # 644-6015

HAZARDOUS MATERIALS DIVISION INSPECTION FORM

Site ID# _____ Site Name Berkeley Jet Drive Today's Date 9/19/91

Site Address 2222 5th Street EPA ID# _____

City Berkeley Zip 94710 Phone ~~549-1808~~ out-of-Service

MAX. AMT. Stored > 500 lbs/55/gal/200cf?
Yes ✓ No ____

Hazardous Waste Generated per month?
_____

Inspection Categories:
✓ I. Haz.Mat./Waste GENERATOR/TRANSPORTER
___ II. Business Plans, Acute Hazardous Materials
___ III. Underground Tanks

Marked items represent violations of the CA Administration Code (CAC) or the Health & Safety Code (HS&C).

IA. GENERATOR (TITLE 22)

___ 1. Waste ID	*66471
___ 2. EPA ID	66472
___ 3. >90 Days	66508
___ 4. Label dates	66508
___ 5. Biennial	66493
Manifest	
___ 6. Records	66492
___ 7. Correct	66484
___ 8. Copy Sent	66492
___ 9. Exception	66484
___ 10. Copies Received	66492
Miscellaneous	
___ 11. Treatment	66371
___ 12. On-site Disp. (H.S.&C.)	26189.5
___ 13. Ex Haz. Waste	66570
Prevention	
___ 14. Communications	67121
___ 15. Aisle Space	67124
___ 16. Local Authority	67126
___ 17. Maintenance	67120
___ 18. Training	67105
Contingency	
___ 19. Prepared	67140
___ 20. Name List	67141
___ 21. Copies	67141
___ 22. Emg. Coord. Trng.	67144
Containers, Tanks	
___ 23. Condition	67241
___ 24. Compatibility	67242
___ 25. Maintenance	67243
___ 26. Inspection	67244
___ 27. Buffer Zone	67246
___ 28. Tank Inspection	67259
___ 29. Containment	67245
___ 30. Safe Storage	67261
___ 31. Freeboard	67257

IB. TRANSPORTER (TITLE 22)

___ 32. Applic./Insurance	66428
___ 33. Comp. Cert./CHP Insp.	66448
___ 34. Containers	66465
Manifest	
___ 35. Vehicles	66465
___ 36. EPA ID #'s	66531
___ 37. Correct	66541
___ 38. HW Delivery	66543
___ 39. Records	66544
Containers	
___ 40. Name/Covers	66545
___ 41. Recyclables	66800

Comments:

Waste paint 7 Barrels. Want to dispose off.
Polane paint 8 gallons.
Polyurethane, enamal paint, hardner (5 gallons)
Bam accelerator (xylene) 2 gln
Catalyst (polyisocyanate) 3 gln
Reducer (MEK) 4 gln.
Lacquer thinner 6 gallons
Machine oil. 3 gallons
xylene 4 gallons.

(*) Waste oil paint not labelled as hazardous waste
(*) Dave Leonard will fax me EPA Waste ID#.

Contact: DAVID B LEONARD
Title: MOG. MGR.
Signature: David B Leonard

Inspector: _____
Signature: _____

White - Toxics Program
Yellow - Facility
Pink - Files

rev. 8/91kt

DRAFT

Department of Planning and Development
Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 / FAX (510) 981-7470
E-mail: Toxics@cityofberkeley.info

SCANNED
For Dept Use Only – Log In Date Stamp
RECEIVED
MAR 01 2017
TOXICS MANAGEMENT DIVISION

RTC entered on: 3/1/17 by: KB

CERTIFICATION OF RETURN TO COMPLIANCE

Date: March 1, 2017
Owner/Operator: IRONIES INC.
Facility Name: IRONIES, INC.
Address: 2222 FIFTH STREET **Zip Code:** 94710

In the matter of the Violation(s) cited on the Hazardous Materials Inspection and Violation Report (Notice to Comply) and/or the Stormwater Facility Inspection Report issued:

On: Feb 3, 2017 (Date) **By:** Karl Busche (Inspector)

List all the violation(s) and correction(s) specified on the Hazardous Materials Inspection and Violation Report (Notice to Comply). Attach additional supporting documentation (e.g. photos, copies of manifests/disposal receipts, or other original paperwork).

Compliance Date:	Violation Code:	Corrective Action: (Identify how the violation was corrected)
3.1.2017	CCR6626234	A supervisor from other departments will take the responsibility to inspect and maintain the eye wash station. Complete monthly inspection checklist, replace water every 4 months and test annually.
3.1.2017	CCR2732	For better recordkeeping, reorganized the training record, and stored inside file cabinet. ✓

I have personally examined and am familiar with the information submitted and believe the information is true, accurate and complete. I am authorized to file this certification for the facility. I am aware that there are significant penalties for submitting false information and/or for non-compliance with the violations noted, including the possibility of fines and imprisonment.

Name: Kiat Tjong Title: Operation

Signature: [signature] Date Signed: 3/1/2017

Failure to submit this Certification within the time specified on the Hazardous Materials Inspection and Violation Report (Notice to Comply) and the Stormwater Facility Inspection Report Form may result in a re-inspection of the facility, to be charged at an hourly rate and fines up to $25,000 per day of non-compliance (HSC Sections 25188 & 25514 and BMC Section 17.20.160).

DRAFT

TOXICS MANAGEMENT
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 • TDD: (510) 981-6903 • FAX: (510) 981-7470

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 2-3 2017 Time: AM Page: 1 of 3

Facility Name: Ironies, INC.

Address: 2222 Fifth Street Phone: 644-2100

Owner/Operator Name: Ironies INC

Facility Representative(s): Kathy Sung + Kiat Tjong

Permitted CUPA Activities: X HMBP X HW (| LQG | SQG | CESQG) | UW | TP (TIER: _____) | UST | APSA | CalARP

Inspections Conducted: X HMBP X HW (| RCRA LQG) | UW | TP (TIER: _____) | UST | APSA | CalARP X SW

Unannounced: | Yes X No

Purpose of Inspection: X Routine | Follow-up Inspection | RTC QA | Closure | Permit Screen | Other _____

Consent Granted for: X Inspection X Photos (include log) | Samples; Consent Granted By: X KT.

CHW Drum Area

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
	Observations	Routine Hazardous Materials Business Plan, Hazardous waste and Storm Water facility Compliance inspection. The 2016 CERS Submittal was done on 1.29.2016. Please note the 2017 Submittal will be due by March 1, 2017. It was noted during inspection currently there are no painters employed so the amount of Hazardous waste generated is significantly reduced. The Hazardous waste Accumulation Area was properly labeled and the drums were Sealed. A picture was taken of the Drum Area. Hazardous Waste Disposal records were Available for Review and three years of Disposal Records was present.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

X CUPA violations cited on page(s) 2 shall be corrected within 30 days.

| | SW violations cited shall be corrected within ____ days or before the next rain event.

X Submit Certification of Return to Compliance form within 30 days. – will Email Form

Facility Representative Signature: Kiat Tjong Title: operation.

Inspector's Signature: _____ Inspector's Name: Karl Busche

DRAFT

Facility Name: [redacted]

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
	Observation	Secondary Containment of Hazardous Waste drumned area was dry and clean. Emergency eye wash stations were present.
M	Hazardous Waste CCR66262.34	As discussed maintain monthy inspections of emergency equipment. Paint Area eye wash inspection was overdue for inspection
M	Hazardous ~~Waste~~ Material CCR 2752	Annual Hazardous ~~Waste~~ Material training records for HA2 Com + Haz. Waste & were available for 2014. Please provide proof of ~~the~~ the annual training for 2015 + 2016 - Haz. Com. 5.26.16 H W - Training provided
	Observation	the buiding property owner was notified of the business implementing an HMBP (H+S Code 25505.1. Business has recently downsized ~~to~~ 50%.

Facility Representative Signature: Kiat Tjong

DRAFT

KELEY
Planning and Development Department
Toxics Management Division

October 9, 2014

Darrell de Tienne
3435 Cesar Chavez, #312
San Francisco, CA 94110

Subject: Close out of Violation HW3030030
2222 Fifth Street, Berkeley

Dear Mr. de Tienne:

The Toxics Management Division (TMD) conducted an inspection of Ironies, Inc., 2222 Fifth Street, Berkeley, on November 15, 2013. TMD was informed that the sump pump in the metal shop collects water intrusion and discharges it to the exterior. TMD issued a notice of violation, noted as violation HW3030030, and required correction to ensure no release of hazardous waste or materials to the environment, as there is potential for the water to become contaminated in the shop and for spills to enter this sump and discharge to the exterior. Ironies, Inc. confirmed that the sump pumps had been disabled December 19, 2013, and indicated they had requested the landlord correct the water intrusion problem.

The documentation you provided during our meeting on Wednesday confirms that the repairs to the building have been completed. TMD believes this will ensure no release of hazardous materials or waste to the environment, and considers the violation and water intrusion issue to be closed.

Sincerely,

Carie Estadt

Carrie Estadt
Hazardous Materials Specialist II

cc: Jenny Ambrosio, Ironies, Inc., 2222 Fifth Street, Berkeley, CA

DRAFT

To: Jenny Ambrosio, Ironies

From: Darrell de Tienne

Date: 10/7/14

RE: 2222 Fifth Street Ironies Repair Documentation to Close-out "Water intrusion" Complaint by Environmental Health.

As requested, attached for your records are the documents I will be presenting to the City tomorrow, 10/8/14.

1. Your original email to Doug Herst outlining the water intrusion issue and a visit by a City inspector.
2. Trip report from Fidelity Roofing with photo of exploratory work outlining recommended fix.
3. Photo documentation of the repairs before and after metal cladding and new gutters.
4. 4/23/14 City of Berkeley Building & Safety Field Inspection job card signed off for permit #14-1788.
5. 4/23/14 City of Berkeley Engineering Permit Application approved for #14-1788.
6. 4/23/14 Mechanical Permit Application approved for #14-1788.

DRAFT

In addition, I'll send you and Doug a recap of my conversation with the Hazardous Materials Specialist inspector and any additional paperwork the City believes is relevant.

If you have any questions please call me at 415.407.1005.

cc: Mike Valentine
Doug Herst



PHOTO BEFORE
SIDING-A
10/06/14

Date: 10/6/14
File name: 10-06-14 IRONIES PROGRESS PHOTOS-TWO.mcd

Planning and Development Department
Toxics Management Division

In the Matter of:

Ironies
2222 Fifth Street
Berkeley, CA 94710
ID No. 87052

Respondent.

Docket No. TMD14-005

CONSENT ORDER

Health and Safety Code
Section 25404.1.1

DRAFT

The City of Berkeley Toxics Management Division (Agency) and Ironies (Respondent) enter into this Consent Order and agree as follows:

1. Respondent stores and handles hazardous materials, and generates hazardous wastes at the following site: 2222 Fifth Street, Berkeley, CA (Site).

2. The Agency inspected the Site on November 15, 2013 and November 22, 2013.

3. The Agency alleges the following violations:

3.1. The Respondent violated California Code of Regulations Title 22 (22 CCR) section 66262.34(f) in that on November 15, 2013, the Respondent failed to properly label hazardous waste accumulation containers.

3.2. The Respondent violated Health and Safety Code section 25189.5(a) in that on or about November 15, 2013, the Respondent failed to properly dispose of hazardous waste at an authorized location.

3.3. The Respondent violated 22 CCR in that on or about November 15, 2013, the Respondent failed to capture and classify rinseate from rinsing empty containers in accordance

3.4. The Respondent violated 22 CCR section 66262.34(d)(2) and Code of Federal Regulations Title 40, section 265.31 in that on or about November 15, 2013, the Respondent failed to maintain and operate the facility to minimize the possibility of fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste to the air, soil or surface water.

4. A dispute exists regarding the alleged violations.

5. The parties wish to avoid the expense of litigation and to ensure prompt compliance.

6. Jurisdiction exists pursuant to Health and Safety Code (HSC) section 25404.1.1.

7. Respondent waives any right to a hearing in this matter.

8. This Consent Order shall constitute full settlement of the violations alleged above, but does not limit the Agency from taking appropriate enforcement action concerning other violations.

SCHEDULE FOR COMPLIANCE

9. Respondent has provided documentation showing corrections of all violations.

9.1. Liability: Nothing in this Consent Order shall constitute or be construed as a satisfaction or release from liability for any conditions or claims arising as a result of past, current, or future operations of Respondent, except as provided in this Consent Order. Notwithstanding compliance with the terms of this Consent Order, Respondent may be required to take further actions as are necessary to protect public health or welfare or the environment.

9.2. Site Access: Access to the Site shall be provided at all reasonable times to employees, contractors, and consultants of the Agency, and any agency having jurisdiction. Nothing in this Consent Order is intended to limit in any way the right of entry or inspection that

DRAFT

Planning and Development Department
Toxics Management Division

Meeting with Ironies, 2222 Fifth Street

Case #TMD14-005
December 10, 2013

Attendees: Michael Schneider, Operations Manager, Ironies
Nabil Al-Hadithy, Carrie Estadt, City of Berkeley

Authority to consent for Respondent is: Michael Schneider

I. Violation Description per Toxics Management Division

II. Violations

III. Administrative Costs

IV. Respondent's comments

V. Settlement Discussions

DRAFT

Discussion notes:

① Drain has been terminated in the acid wash area. Michael indicates they will most likely collect for haz waste disposal. Possibly do treatment but they will need to notify TMD.

② Rinsing - ~~still rinsing cans~~ Michael indicates they haven't discontinued practice. Check rinseate for hw & ebmud.

③ Rags/Coveralls - Aramark will be taking these.

④ Sump pump in metal shop - have asked property owner to determine where drain goes to and to stop intrusion of rainwater.

2118 Milvia Street, 3rd Floor, Berkeley, California 94704 ♦ TEL: (510) 981-7460 ♦ FAX: (510) 981-7470 ♦ TDD: (510) 981-6903
e-mail: toxics@ci.berkeley.ca.us

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

SCANNED

For Dept Use Only
Entered: 11/25/13
by: CAE
Scanned by: TC

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: ~~11/15/13~~ 11/22/13 CAE Time: 2:30PM Page: 1 of 1

Facility Name: Ironies, Inc.

Address: 2222 5th Street Phone: 510-644-2100

Owner/Operator Name: Brad Huntzinger / Kate McIntyre

Facility Representative(s): Michael Schneider

Permitted CUPA Activities: ☑ HMBP ☑ HW (☐ LQG ☐ SQG ☐ CESQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP
Inspections Conducted: ☑ HMBP ☑ HW (☐ RCRA LQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP ☐ SW
Unannounced: ☐ Yes ☑ No
Purpose of Inspection: ☐ Routine ☑ Follow-up Inspection ☐ RTC QA ☐ Closure ☐ Permit Screen ☐ Other _____
Consent Granted for: ☑ Inspection ☐ Photos (include log) ☐ Samples; Consent Granted By: Michael Schneider

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		Onsite to finalize inspection from 11/15/13.
		Preliminary test results of the sampling conducted 11/15/13, show that the pH of the liquid in the secondary containment pallets is 1.7. This is at hazardous waste levels.
I	HW3050002	~~CAC 22 CCR~~ HSC 25189.5(a)
		Failure to properly dispose of hazardous waste at an authorized location.
		Corrective action: Immediately cease discharge and Provide TMD a plan to manage properly
		Chemical wash area
		Clarification on process. Bay is used about 3 times per week. Every couple months Michael indicates the ~~liquid is vacuumed out. about~~ solids are taken out and thrown in trash.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☑ CUPA violations cited on page(s) 1 shall be corrected within 30 days.
☐ SW violations cited shall be corrected within ____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: _____ Title: Operations Manager
Inspector's Signature: Carrie Estadt Inspector's Name: Carrie Estadt

DRAFT

Above Ground Petroleum Storage Act
California Accidental Release Program
Certified Unified Program Agency
Hazardous Materials Business Plan
Hazardous Waste
CUPA Program Element
Storm Water Program
CalARP
CUPA
HMBP
HW
PE
SW

Entered: 11/25/13
by: CAc
Scanned by: TC

...S MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

SCANNED

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 11/15/13 Time: 10:30 AM Page: 1 of 9

Facility Name: Ironies, Inc.

Address: 2222 5th Street Phone: 510-644-2100

Owner/Operator Name: Brad Huntzinger / Kate McIntyre

Facility Representative(s): Jenny Ambrosio, Michael Schneider, Tracy Emayan

Permitted CUPA Activities: ☑ HMBP ☑ HW (☐ LQG ☐ SQG ☐ CESQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP

Inspections Conducted: ☑ HMBP ☑ HW (☐ RCRA LQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP ☐ SW

Unannounced: ☑ Yes ☐ No

Purpose of Inspection: ☑ Routine ☐ Follow-up Inspection ☐ RTC QA ☐ Closure ☐ Permit Screen ☐ Other _____

Consent Granted for: ☑ Inspection ☑ Photos (include log) ☑ Samples; Consent Granted By: Jenny Ambrosio

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		Onsite to conduct routine inspection of facility. Larry Luna is no longer with the company. The new contact is Michael Schneider.
		Paint Room
		Met with Jose Manuel Ryuon. Observed a red pail in cabinet with liquid. The pail is unlabeled and does not have a lid. Jose indicates this is used thinner. He states that in order to clean out the gun, he runs thinner through the gun and collects it in the pail. The used thinner is eventually transferred to the 55 gallon waste paint drum, per Jose, but usually not immediately. The used thinner was transfered to the 55 gallon drum at the time of inspection. The accumulation start date on the waste

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☑ CUPA violations cited on page(s) 5-8 shall be corrected within 30 days.

☐ SW violations cited shall be corrected within ____ days or before the next rain event.

☐ Submit Certification of Return to Compliance form within 30 days.

Date Signed 11/22/13

Facility Representative Signature: _____ Title: Operations Manager

Inspector's Signature: _____ Inspector's Name: Carrie Estadt

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		paint drum is noted as 3/20/13 and the drum appears to be 1/4 full. Jose indicates he cleans the gun at least once every 1-2 weeks.
		Soiled rags are placed in two bags and put in the garbage. The rags contained in the can appear to be soiled with paint and smell of thinner. Jose indicates he launders his uniform at home.
		According to Jose, the paint booth filters are changed out every 1-2 weeks. The filters are placed in a drum labeled as hazardous waste. The label did not include an accumulation start date. A date was added at the time of inspection, as they indicate the contractor was there recently to remove the filters.
		When they have completed a job, the left over paint is disposed of in the waste paint drum, according to Jose. TMD suggests finding a reuse option.
		Emergency Evacuation Personnel lists are posted throughout the building. The list still lists Larry Luna, who is no longer with the company.
		The fire extinguisher in this room has a tag that lists the last annual service date as Nov. 5, 2012.
		Stone Room
		Met with Rovolofo. In this area they do molding, inlays and pouring. According to Rovolofo, they rinse the pieces in a large

Facility Representative Signature: Michael Schneider

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		bin near the faucet. The bin holds approximately 250 gallons. Once this bin gets full, Rovolofo indicates liquid is transferred to a smaller drum and transported to the chemical wash area for disposal to sanitary.
		Observed storage of Hydrostone and white cement, both of which have a high pH, ~12-13.
		The fire esptinguisher in this room has a tag- that lists the last annual service as Nov. 5, 2012.
		Metal Shop
		Met with Ernesto. He indicates scrap metal is taken to a recycler in Richmond. Provide TMD with name of recycler.
		Observed cans of anti-spatter (contains methylene Cbride). Ernesto states they use up the material in the can and then puncture the can.
		Coolant, Kutwell 40 used for the metal working is changed out about every 2 weeks. ~~The waste coolant is transferred to a bucket~~ Ernesto indicates they have not had to dispose of this material. If so, he indicates they would place in the waste paint drum
		Ernesto indicates the lacquer thinner cans, once empty, are rinsed at the chemical wash area. He then cuts off the top and uses the cans to hold scrap metal.
		There is a covered pit on the south side of the shop. The pit has a sump pump that discharges collected liquid through a pipe that is outside and into ground goes

Facility Representative Signature: [signature]

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		Michael indicates this area gets rainwater intrusion and the sump collects it for discharge.
		Chemical Wash Area
		The employee responsible for this area is unavailable at the time of inspection.
		The chemical wash area consists of a sink on the right side and on the left a work station under which are two spill containment pallets containing liquid. Michael indicates employees clean metal parts in the work station using the acid wash Metal Prep 79, containing phosphoric acid
		pH of the solution/acid wash in the yellow bucket is about 1. The wash drains to the back of the work station to the spill containment pallets. The spill containment pallet closest to the sink has a hose connection that appears to run to the sanitary sewer, through a hole in the ground, which is near the sink's drain. Two samples were collected from the spill containment pallet closest to the sink to determine pH and metals content.

Facility Representative Signature: Richard Schneider

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
M	HMBP1010003	19 CCR 2729.2(a)(1) Business activities page is inaccurate in that it does not state the business generates hazardous waste. Corrective action: Submit a correct business activities page.
M	HMBP1010003	19CCR 2729.2(a)(1) Business owner/operator ID page is inaccurate in that the environmental contact and primary emergency contact, Larry Luna, is no longer at the company. Corrective action: Submit a corrected Business Owner/operator form.
M	HMBP1010004	Hazardous materials Inventory Statement is incomplete and inaccurate. Fields are missing on chemical entries, including wt. %, CAS #, annual waste amount. Coolant is not listed Corrective action: Ensure all fields are completed on the inventory and add the text to the chemical location indicating area each is located.
M	HMBP1010005	19 CCR 2729.2(a)(3) HSC 25504 Site plan does not show sanitary drains nor the sump pump that discharges to storm. Corrective action: Submit an updated site map. In addition, confirm the drainage of drains onsite, including the ones in the chemical wash area.
M	HW3030017	22 CCR 66262.34(d)(2); 40 CFR 265.173 Failure to properly close hazardous waste containers when not in active use. The red pail containing used thinner did not have a lid. Corrective action: Used thinner was poured into

Facility Representative Signature: Michael Schmeda

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		55 gallon waste drum at time of inspection. In future, either provide a lid for the pail, or immediately transfer contents to a closed hazardous waste container. The transfer should be made using a dedicated funnel to prevent spilling.
II	HW3030007 Repeat	~~F~~ 22 CCR 66262.34(f) Failure to properly label hazardous waste accumulation containers. The red pail containing used thinner was not labeled. The paint booth filter drum did not have an accumulation start date. Corrective action: The used thinner was transferred to a hazardous waste container with a label. An accumulation start date was added to the paint booth filter drum.
M	HW3010022	22 CCR 66262.34(d)(2); 40 CFR 262.34(d)(5)(ii) Failure to post, next to the telephone, ~~emera~~ accurate emergency information containing location of emergency equipment, contact names and numbers. Corrective action: Update and post emergency evacuation personnel list and include all required items.
M	HW3030034	22 CCR 66262.34(d)(2); 40 CFR 265.33 Failure of facility to test fire protection equipme fire extinguishers, annually. The fire extinguish were last tested Nov. 5, 2012. Corrective action: ~~Test~~ Have fire extinguishers tested.

Facility Representative Signature: Michael Schmidt

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
I	HW 3050002	HSC 25189.5(a) Failure to properly dispose of hazardous waste at an authorized location. The rags Jose indicates are used in the paint area with paints and thinner are thrown in the trash. Corrective action: Either begin managing the contaminated rags as hazardous waste or meet the requirements for exemption of "reusable soiled textile materials" in HSC 25144.6.
	HW	22 CCR 66261.7(c) Business rinses empty Lacquer Thinner cans in the chemical wash area, discharges the rinseate to sanitary and reuses the cans. The rinseate has not been classified in accordance with the provisions of Division 4.5 of 22 CCR and any applicable waste discharge requirements. Corrective action: Capture and classify the rinseate. Provide TMD with a plan for classification.
M	HW 3030028 CAC	~~22 CCR 66268.34(d)(2); 40 CFR 265.17(b) Failure to ensure incompatible materials wastes are not placed in the same container.~~ The

Facility Representative Signature: [signature]

Ironies, Inc.

SITE ADDRESS: 2222 5th Street

CONTACT NAME: Michael Schneider | PHONE: 510-644-2100 | BUSINESS TYPE/ACTIVITY: Furniture Production | SIC: | ☐ High Priority Facility

Is the property owner different than the facility owner? ☐ yes ☐ no If yes, complete the following:

NAME PHONE

MAILING ADDRESS

Is the facility covered under any other programs or permits? (Check all that apply.)

☐ Air quality ☑ Hazmat business plan ☐ None ☐ Sanitary sewer

☑ Fire department(hazmat storage) ☑ Hazmat waste generator ☐ Underground storage tanks ☐ Aboveground storage tanks

☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☐ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)

☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas	✓				☐
B. Outdoor Material Storage Areas		2	1		☐
C. Outdoor Waste Storage/Disposal Areas		2	1		☐
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				☐
E. Outdoor Parking Areas and Access Roads	✓				☐
F. Outdoor Wash Areas	✓				☐
G. Rooftop Equipment	✓				☐
H. Outdoor Drainage from Indoor Areas		3	3		☐ Sump pump in metal shop appears to drain to storm
I. Other (describe):	✓				☐

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☐ Maintenance required in storm drain system ☐ yes ☐ no

☐ See attached for more comments.

Number of BMP brochures distributed? ☐ Describe:

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☑ 3; Third ☐ Referred to; Details:

ENFORCEMENT: ☐ None ☐ Verbal Notice ☑ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

F:\A14x\A149.03\Database Revision\InspForm final 9-22-05.doc

Facility Representative: [signature] Inspector: Carrie Ettrodt

DRAFT

Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 1 of 12



Picture description: Red pail of used thinner in cabinet in paint room

Picture 2 of 12



Picture description: Interior drain on south side of metal shop to collect rainwater. Sump pump discharges to street.



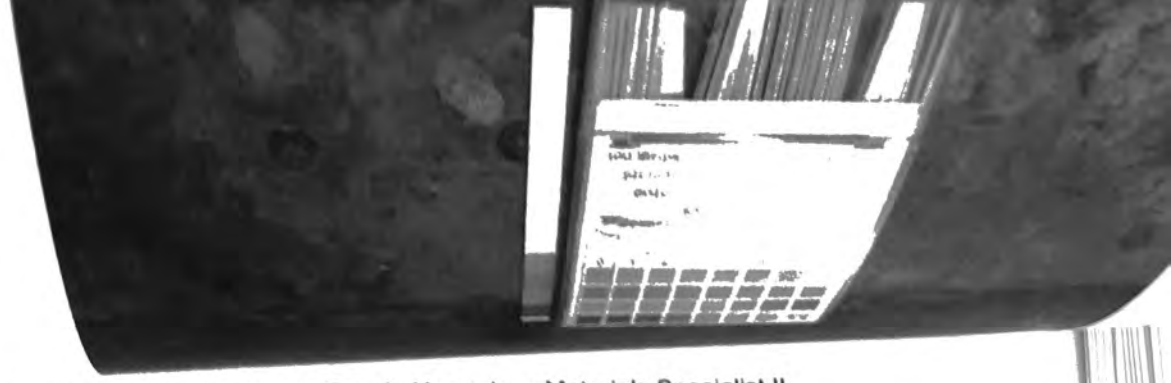
Picture Description: Secondary containment pallets under chemical was

DRAFT

Picture 6 of 12



Picture Description: Bucket containing acid wash solution



Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 9 of 12



Picture Description: Chemical wash area, showing samples taken from secondary containment pallet

Picture 10 of 12



Picture Description: Chemical wash area, showing samples taken from secondary containment pallet

DRAFT

Toxics Management Division

SCANNED

ENTERED 10/12/12 DS Multi-day Inspection

INSPECTION FORM

Facility Name: Ironies
Address: 2222 5th St
Phone: 6443100

Date: 10/5/12
Contact: Kiat Pyong
Page ___ of ___

Inspection continued from 9/26/12.

Obs 1 Training records satisfactory

M HW.5.4, HW 5.5 CCR 66262.23(a)(4), HSC 25123.6(b)(2)
The following manifest records do not have signed copy from destination (TSDF) facility:
5/24/12 005571314 FLE
11/10/11 004868728 FLE
4/14/11 004769562 FLE
Make legible copy of the manifest + submit a copy to DTSC - DTSC Generator Manifests, P.O. Box 400, Sacramento, CA 95812-0400
Facility failed to contact TSDF and/or make proper notification to DTSC after not receiving the TSDF-signed copy

~~Provide is obtained~~ signed copies + mail copy to ~~FD~~ DTSC w/in 30 days

Facility Contact Signature: Kiat Tjong
Title: Manager
Inspector: [signature]
Hazardous Materials Specialist
~~Reinspect Date: 2015~~
next routine 2015

Obs 2 Waste drums satisfactorily labeled.

2118 Milvia Street, Suite 300, Berkeley, CA 94704 Tel: 510.981-7460 TDD: 510.981-6903 Fax: 510.981-7470
Email: Toxics@cityofberkeley.info

DRAFT

Hands-On Electronic Reporting System Training Workshops
Please bring your Hazardous Materials Business Plan and Materials Safety Data Sheets to the training.

Where: City of Berkeley Computer Training Room
1947 Center Street, 3rd Floor
Berkeley, CA 94704

When: Wednesday, January 20, 2010

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIGS | Business Address: 2222 5th St. BERKELEY | 200 Add ☐ Revise ☑ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(1) G6	PROPYLENE	☐ Same as first column ------- 799 ------- ------- -------	-- 115-07-1 -- --	☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas — ☐ pure ☐ mixture — ☐ radioactive	130 gal	65 gal	65 gal	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryog.
								222 Days on site ☒ 365	223 Storage Container CYL			
(2) E6	OXYGEN	☐ Same as first column ------- 799 ------- ------- -------	--- -- 7782.44-7 -- --	☐ Yes ☒ No	OX	☐ solid ☐ liquid ☒ gas — ☐ pure ☐ mixture — ☐ radioactive	1000 ft³	500 ft³	250 ft³	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryog.
								222 Days on site ☒ 365	223 Storage Container CYL			
(7) D6	ARGON/CO2	☐ Same as first column ARGON 75 CO2 25 ------ ------	--- 7440-37-1 -- --	☐ Yes ☒ No	NFG	☐ solid ☐ liquid ☒ gas — ☐ pure ☐ mixture — ☐ radioactive	1000 ft³	500 ft³	250 ft³	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☐ Fire ☒ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryog.
								222 Days on site ☒ 365	223 Storage Container CYL			
		☐ Same as first column ------ ------ ------ ------	--- -- -- --	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas — ☐ pure ☐ mixture — ☐ radioactive				☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryog.
								222 Days on site ☐ 365	223 Storage Container			

DRAFT

210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive; FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer, PYRO – Pyrophoric, SENS – Sensitizer; TX – Toxic, UR – Unstable/Reactive; WR – Water Reactive

223 Storage Container Codes: AGT – Above Ground Tank; B – Bag; BX – Box; C – Can; CB – Carboy; CYL – Cylinder; FD – Fiber Drum; GB – Glass Bottle, PB – Plastic Bottle, PD – Plastic/Nonmetallic Drum, SD – Steel Drum; S – Silo; RC – Rail Car; TB – Tote Bin; TW – Tank Wagon; UST – Underground Tank; O – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: 2222 5th Street, BERKELEY | 200 Add ☐ Revise ☐ Delete

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	256 SARA Class	254 Pressure & Temp
(9) A4	HYDROSTONE	☐ Same as first column Plaster of PARIS 90 Portland Cement 5		☐ Yes ☐ No	IRR	☒ solid ☐ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	5000 lbs	2500 lbs 222 Days on site: ☒ 365	50 lbs 223 Storage Container: B	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(9) A4	WHITE CEMENT	☐ Same as first column 3CaOSO2 3CaOSO2 3CaO AL2O3Fe2O3 4CaO AL2O3Fe2O3 CaSO4 2H2O	12168-85-3 10034-772 12042-78-3 12068-35-8 13397-24-5	☐ Yes ☐ No	TX	☒ solid ☐ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	1000 lbs	500 lbs 222 Days on site: ☒ 365	100 lbs 223 Storage Container: B	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	PMC - 744 Rubber MOLD	☐ Same as first column 2,4 toluenediisocyanate 2,6 toluenediisocyanate bis (2-ethylhexy	584-84-9 -91-08-7 T17-817	☐ Yes ☐ No	TX	☒ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	80 lbs	40 lbs 222 Days on site: ☒ 365	40 lbs 223 Storage Container: PD	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	IRON OXIDE	☐ Same as first column	1309 371	☐ Yes ☐ No		☒ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	50 lbs	100 lbs 222 Days on site: ☒ 365	100 lbs 223 Storage Container: PD	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: 2222 5TH St BERKELEY | 200 Add ☐ Revise ☑ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	208, 217, 218 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	206 SARA Class	204, 2 Press & Te
(3) B3	Breakthrough	☐ Same as first column 2 Butoxy Ethanol N-Butyl Alcohol — —	— — — —	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	30 gal	15 gal	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ g ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☒ Acute ☐ Delayed	Pressure: ☒ Ambi ☐ > Ambi Temp: ☒ Ambi ☐ > Ambi ☐ < Ambi ☐ Cryo
(4) A2	HAMMERITE	☐ Same as first column XYLENE 11 C8 AROMATIS 4 PROPANE 11 ISO BUTANE 11 ACCETONE 39	01330207 14742956 00074986 00075285 00067641	☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	30 gal	15 gal 223 Days on site: 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ g ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health ☒ Acute ☐ Delayed	Pressure: ☒ Ambi ☐ > Ambi Temp: ☒ Ambi ☐ > Ambi ☐ < Ambi ☐ Cryo
(5) A2	XYLOL THINNER (XYLENE)	☐ Same as first column — XYLENES Ethylbenzene —	— 1330-20-7 100-41-4 —	☐ Yes ☒ No	FL TX	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	5 gal	3 gal 223 Days on site: 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ g ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health ☒ Acute ☐ Delayed	Pressure: ☒ Ambi ☐ > Ambi Temp: ☒ Ambi ☐ > Ambi ☐ < Ambi ☐ Cryo
(6) D1	METAL PREP 79	☐ Same as first column Phosphoric acid 10 2 Butoxyethanol 10 Diethylene glycol monobutyl ether 5 Surfactant 1	7664-38-2 111-76-2 112-34-5 Proprietary	☐ Yes ☒ No	IRR	☐ solid ☐ liquid ☐ gas ☒ pure ☐ mixture ☐ radioactive	8 gal	4 gal 223 Days on site: 365	1 gal 223 Storage Container: PB	☐ lbs ☒ gal ☐ cu. ft. ☐ g ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☒ Acute ☐ Delayed	Pressure: ☒ Ambi ☐ > Ambi ☐ < Ambi Temp: ☒ Ambi ☐ > Ambi ☐ < Ambi ☐ Cryo

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3-Business Name: IRONIES | Business Address: 2222 5th St BERKELEY | 200 Add ☐ | Revise ☒ | Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	215, 217, 219 Quantity Stored: Max Daily	Average Daily	Largest Container	223 Units	220 SARA Class	Pressure & Temp
(4) A2	LACQUER THINNER	☐ Same as first column Methyl ethyl 12 Butyl acetate 5 Ethyl Alcohol 5 Glycol ETHER	78-93-3 123-86-4 64-17-5 111-76-2	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	15 gal	8 gal 223 Days on site: ☒ 365	5 gal 223 Storage Container: C	☐ lbs ☐ gal ☐ cu. ft. ☐ g. curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	
(4) A2	Triprime Black	☐ Same as first column Xylene 15 Microcrystalline 10 Methyl Propyl Ketone 5 Methyl Isobutyl Ketones Methyl N-Propyl Ketones	1330-207 1317-954 107-87-9 108-10-1 707879	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	30 gal	15 gal 223 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☐ gal ☐ cu. ft. ☐ g. curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	
(8) B2	AERIOL Spraycan.	☐ Same as first column Xylene 13 Ethyl Benzene 1 Acetone 39 Propane 16 Isobutane 2 Mineral Spirit 1	1330-20-7 100-24-14 67-641 74.986 75285 8052413	☐ Yes ☐ No	FL	☐ solid ☐ liquid ☒ gas ☐ pure ☒ mixture ☐ radioactive	40 can	20 can 223 Days on site: ☒ 365	1 lb 223 Storage Container: C	☐ lbs ☐ gal ☐ cu. ft. ☐ g. curie ☐ other: grams	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	
(8) B2	MOHAWK WOOD STAIN M520	☐ Same as first column ACETONE 70 WATER 1 PROPYLENE glycol 1 ethanol 1	67-64-1 7732-185 57-55-6 64-17-5	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	25 QTR =6.25 gal	=3.75 gal 15 QTR 223 Days on site: ☒ 365	=0.25 gal 1 QTR 223 Storage Container: PB	☐ lbs ☐ gal ☐ cu. ft. ☐ g. curie ☒ other: QUART	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	

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DRAFT

Pigment Mixtures - see 5/10/12 email

~~Hazardous Waste Inventory Spreadsheet~~

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here: | 200 Add ☐ Revise ☐ Delete

3 Business Name: IRONIES | Business Address: 2222 5th St. BERKELEY

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224 Pressure & Temp
STONE ROOM	RAW UMBER	☐ Same as first column RED IRON OXIDE RAW UMBER -------	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	7 gram/gal / 5.8 gr/gal / 1 gal 85 different bottle / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Amb ☐ > Amb ☐ < Amb Temp: ☒ Amb ☐ > Amb ☐ < Amb ☐ Cryo
STONE ROOM	YELLOW IRON OXIDE	☐ Same as first column IRON OXIDE ------- ------- -------	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5 gr/gal / 3-13 gram/gal / 1 gal 91 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Amb ☐ > Amb ☐ < Amb Temp: ☒ Amb ☐ > Amb ☐ < Amb ☐ Cryo
STONE ROOM	ORANGE IRON OXIDE	☐ Same as first column IRON OXIDE Fe 203 ------- -------	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	4gr/gal / 2.4gr per gal / 1 gal 53 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	CHROMIUM OXIDE green	☐ Same as first column CHROMIC OXIDE C203 ------- -------	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5gr/gal / 36gr per gal / 1 gal 42 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive; FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer; PYRO – Pyrophoric; SENS – Sensitizer; TX – Toxic; UR – Unstable/Reactive; WR – Water Reactive

223 Storage Container Codes: AGT – Above Ground Tank; B – Bag; BX – Box; C – Can; CB – Carboy; CYL – Cylinder; FD – Fiber Drum; GB – Glass Bottle; PB – Plastic Bottle; PD – Plastic/Nonmetallic Drum; SD – Steel Drum; S – Silo; RC – Rail Car; TB – Tote Bin; TW – Tank Wagon; UST – Underground Tank; O – Other

DRAFT

Pigment Mixtures - See 5/10/12 email

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th st BERKELEY | 200 Add ☐ Revise ☐ Delete

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	Pressure & Temp
STONE ROOM	Ultramarine Blue	☐ Same as first column Sodium Aluminum Selpho Silicate — —	— — —	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas — M ☐ radioactive	10grms per gal. / 6.7gr per gal / 1 gal 29 different bottles / 222 Days on site: ☒ 365 / 223 Storage Container: PB / 224 Waste Code	225	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Press: ☐ Ambient ☐ Amb. ☐ < Amb. Temp: ☐ Ambient ☐ Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Medium Red	☐ Same as first column IRON oxide Fe 203 — —	— — —	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas — P ☐ radioactive	8.7gr/gal / 8.7 gr per gal / 1 gal 13 different bottles / 222 Days on site: ☒ 365 / 223 Storage Container: PB / 224 Waste Code	225	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Press: ☐ Ambient ☐ Amb. ☐ < Amb. Temp: ☐ Ambient ☐ Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Carbon Black	☐ Same as first column Carbon black Water 15-20% Sulfat —	1335-86-4 — — —	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas — M ☐ radioactive	55gr per gal / 5.5 gr per gal / 1 gal 23 different Containers / 222 Days on site: ☒ 365 / 223 Storage Container: PB / 224 Waste Code	225	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Press: ☐ Ambient ☐ Amb. ☐ < Amb. Temp: ☐ Ambient ☐ Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	BURNT Sienna.	☐ Same as first column IRON oxide (Fe203) Silicon dioxide aluminum oxide Fe203, SiO2, AL203	— 1309-37-1 — —	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas — M ☐ radioactive	14gr per gal / 14gr per gal / 1 gal 3 different Containers / 222 Days on site: ☒ 365 / 223 Storage Container: PB / 224 Waste Code	225	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Press: ☐ Ambient ☐ Amb. ☐ < Amb. Temp: ☐ Ambient ☐ Amb. ☐ < Amb. ☐ Cryogenic

210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive; FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer; PYRO – Pyrophoric; SENS – Sensitizer; TX – Toxic; UR – Unstable/Reactive; WR – Water Reactive

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DRAFT

APRIL 2012

Pigment Mixtures - see 5/10/12 email

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	Pressure & Temp
Store Room	Venetian Red	☐ Same as first column Iron Oxide. Fe 203 --- ---	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ P ☐ radioactive	7.5 gram / 1 gal 7 different bottles 223: 365 / PB		☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☐ Acute ☐ Delayed	☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	Cadmium medium Red	☐ Same as first column Cadmium Sulfide Cadmium Selenid Barium Sulfate Zinc Sulfate	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ M ☐ radioactive	15gm per gal / 15 gram per gal / 1 gal 1 bottle 223: 365 / PB		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☐ Acute ☐ Delayed	☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	Cobalt Yellow	☐ Same as first column Cobalt oxide Potassium --- ---	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ M ☐ radioactive	0.25 gram per gal / 0.25 gram per gal / 1 gal 2 different bottles 223: 365 / PB		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☐ Acute ☐ Delayed	☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	Cadmium medium light Red	☐ Same as first column Cadmium sulfide Cadmium Sulfide Barium sulfide Zinc Sulfide	--- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ M ☐ radioactive	35gm per gal / 35 gram per gal / 1 gal 1 Bottle 223: 365 / PB		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health ☐ Acute ☐ Delayed	☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive, FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer; PYRO – Pyrophoric; SENS – Sensitizer; TX – Toxic; UR – Unstable/Reactive; WR – Water Reactive

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April 2012

DRAFT

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: 2222 5th st Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 2 Pressu & Te
BS	Fiberglass Spray Booth Filter	☐ Same as first column		☐ Yes ☐ No	FS	☑ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum ≈440#	55 gal drum	55 gal drum	3 ≈1,377#	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Amb ☐ > Amb ☐ < Amb Temp ☐ Amb ☐ > Amb ☐ < Amb ☐ Cryo
							222 Days on site ☑ 365	223 Storage Container SD	220 State Waste Code				
BS	Oil Based Paint Waste	☐ Same as first column		☐ Yes ☐ No	FL	☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum	55 gal drum	55 gal drum	28	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Amb ☐ > Amb ☐ < Amb Temp ☐ Amb ☐ > Amb ☐ < Amb ☐ Cryo
							222 Days on site ☑ 365	223 Storage Container SD	220 State Waste Code				
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive					☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other _____	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambien ☐ > Amb. ☐ < Amb. Temp ☐ Ambien ☐ > Amb. ☐ < Amb. ☐ Cryo
							222 Days on site ☐ 365	223 Storage Container	220 State Waste Code				
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive					☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other _____	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
							222 Days on site ☐ 365	223 Storage Container	220 State Waste Code				

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive, **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

DRAFT

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency
2118 Milvia Street, Suite 200, Berkeley, California 94704
TEL: (510) 705 8150
TDD: (510) 644 6915
FAX: (510) 540 5672

Facility Name: IRONIES Date: 5/31/01 Page: 4 of 4

Address: 2222 5th Street Contact: Dan McClennand

Phone: 644-2100 x111 Contact Title: Production Manager

SUMMARY OF VIOLATIONS:

(1) ~~check~~ TMD will check on fire code for double chaining of compressed gas ~~on cart~~ in use CART

(2) tanks of compressed gas stored must be double chained per fire code.

(3) Update chemical inventory: Plastic Filler/Resin, Mold Release SPRAY ENAMEL RUST PROOFING, ~~&~~ other ~~hazard~~ materials w/ MSDS

(4) TMD will check to see if Hydrostone should be included on inventory.

(5) TMD will check on requirements for neutralizing acid wash solution

(6) TRAING PROGRAM NEEDS TO PROPERLY IMPLEMENTED AND DOCUMENTED (7) HMBP Needs to be kept on site

NOTICE TO COMPLY:

(1) COMPRESSED GAS NEEDS TO BE DOUBLE CHAINED 1ST THIRD OF TANK AND LAST THIRD OF TANK TO CART CART WITH BOTTOM UP IS OK TO HAVE SINGE CHAINED

(2) COMPRESSED GAS STORED NEEDS TO BE DOUBLE CHAINED 1ST THIRD / LAST THIRD

(3) TMD will send blank copies of inventory sheets. If you have questions on filling them out Call TMD (Drew Lerer @ 510-705-8158)

(4) TMD will contact Ironies regarding this ~~requirement~~

(5) TMD will contact Ironies regarding this

(6) ~~CORRECT ASAP~~ TMD will send training documentation TRAINING MUST BE DOCUMENTED ~~ASAP~~ NEW EMPLOYEES MUST BE TRAINED W/IN 6 MONTHS ANNUAL REFRESHER REQUIRED FOR ALL EMPLOYEES WORKING WITH HAZARDOUS MATERIALS

(7) HMBP needs to be kept on site

PLEASE CORRECT ABOVE DEFICIENCIES WITHIN 30 DAYS AND SEND TMD DOCUMENTATION VERIFYING THAT CORRECTIONS HAVE BEEN MADE.

Facility Contact Signature: [signature]

Inspector: [signature] Reinspect Date:

Hazardous Materials Specialist

DRAFT

October 15, 2013

CITY MANAGER

2013 NOV -1 AM 11:02

City of Berkeley

c/o City Manager Office Christine Daniel

2180 Milvia Street

Berkeley, CA 94704

Re: Ironies Furniture at 2222 5th Street, Berkeley, CA.

I am not sure who to contact but feel morally and ethically obligated as a former employee of the subject company to inform the authorities and leadership of Berkeley of a very unfortunate situation relating to a local employer (Ironies Furniture, a.k.a. Art of Muse and Oly Studio) who is located at 2222 5th Street, Berkeley, California. This is my former employer who has for years and years been blatantly disregarding laws, their moral duty/obligations, city/county/state laws/codes, employment laws, local building codes/health codes – among others. Information about this company can be located at Website: http://www.ironies.com/bio.html

This company's owners (Kate & Brad) have a complete disregard for the well being of their employees (some of which are my former co-workers who I consider friends who are still there, many have complained to management about illness/health concerns and building safety/health issues without any positive response by the business owners, some have serious health issues and have left the company due to long term illness, others are being hired and under informed and most do not realize their health/safety is in danger, and better options exist.

This company's owners for years has knowing made very poor/unethical/immoral/unlawful decisions. There are many, you might start by investigating these;

I have watched this company's owners allow and instruct their managers/employees to pour large quantities (over years) of various toxic chemicals; toxic solvents and acid wash down drains without any environmental regard for proper disposal or filtering. We would even let this fluid flow directly into the street and onto neighboring properties.

They have allowed unregulated toxic fumes to circulate throughout the entire office facility without proper mechanisms to contain these cancer causing fumes. These fumes are also released into the air, directly to the residents/neighborhood, etc.

DRAFT

Ongoing code violations for electrical machines/wiring/outlets/cords – exposed, open, laying all over the open walkways, floors (I have heard of many employees who have inadvertently been severely shocked by accident) due to accidentally touching open/exposed wiring outside the walls – some while standing in and /or walking in water due to leaking roofs/puddles,

There is no formal training or protective plan for employee's safety that are involved and surrounded by toxic materials (I have watched employees screaming with their skin & eyes burning, many ongoing complaints of severe headaches due to fumes or contact with toxic substances). Do not provide safety/health guidance education or safety equipment/devices for workers.

A complete lack of wheel chair accessible throughout bathrooms, entrance/exits (we intentionally avoided hiring these people)

Keeps the building completely unnamed/unmarked from the outside of the building so people do not know what is "really happening" inside. We continually were directly by the owner's to lie to city/county folks to avoid being caught with our many code violations which they are aware of, but just prefer to look the other way as they believe Berkeley officials do not have the authority to enforce.

Among others, the owners are hiring illegals, unlicensed people with a complete lack of regard for hiring laws, labor laws, health & building codes, etc. Owner's feel it is ok to look the other way, every day!

This company also has similar issues within their employees and other locations in Indonesia and Nevada.

I am well aware of this company as I am a former employee who watched the owner's consistent actions over years. I also learned a great deal over time through the managers and watching the turn over. It was extremely difficult to be a part of this. You will need a very strong handed approach at reaching the owners who will try their best to evade you and your attempts to reach them – and will pretend to not know anything about anything. The owner's will probably inform you that they are not involved in the company or only investors which is "not the case". This is how they will try to avoid any responsibility by stating they had no idea their managers were doing this. Your letters will likely go unread or unresponded to. Your calls will likely go unreturned by the owners. I left the company because I couldn't stand to watch the owner's continual and blatant disregard of their obligations, laws, their consistent decisions to avoid doing the right thing to ensure the safety and health of their people and their selfish attitude towards their social duty to the community and Berkeley.

Thank you for recognizing that this is a serious matter, I would hope our local authorities will address this head on. I thank you for your support and now feel good that I have done what's right!

DRAFT

FILE COPY

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

Issued to

Name of Facility: IRONIES, INC.	*Customer Identification Number:* CID# 87052
Street Address: 2222 FIFTH STREET	*Mailing Address:* 2222 FIFTH STREET
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* BERKELEY, CA 94710

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan: **C2**	Hazardous Waste Generator Program: **<5**
Above Ground Petroleum Storage, SPCC Plan:	Tiered Permit Program for Onsite Treatment of Hazardous Waste:
Universal Waste:	California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP):
Underground Storage Tank Program No. of USTs:	Radiological Agents: Etiological Agents:

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date:	**Expiration Date:**		*Machine Validation / Official Receipt*
January 01, 2011	March 1, 2013	**Approved By: Nabil Al-Hadithy**	
Issue Date: December 28, 2011			

G:\TOXICS\CUPA\PERMIT\00PERMTS\

DRAFT

FILE COPY

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION
City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

1073. This permit is subject to all applicable local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

1074. This permit is not transferable. Any permit or registration issued to a particular person or for a designated place, operation, purpose or object shall not be valid for use by or for any other person, place, operation, purpose or object.

1075. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

1076. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

1077. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

1078. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

1079. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

1080. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

CITY OF BERKELEY

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

FEE SUMMARY SHEET
For Permit Period FY14 (Base Reporting Period: 2013)

Business Name: Ironies, Inc. [CID: 87052]

Address: 2222 5th Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2013	CY2013	CY2013	Last Reported	FY2014 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	20	7	3		30
Total no. of ***waste*** chemicals:	—	1			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	C275	6445	2224	C2	C2
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	—	30-60		<5	<55
Underground Storage Tanks: No. of USTs: _____					
Universal Waste:	CESQUWG	HANDLER	DESTINATION	Date entered into HTE (and initials)	
	—	—	—		
Other Billing Categories:	Tiered	etiologic	radiologic		
	—	—	—		
inert gas fee / nano	CalARP	EPCRA	APSA		
—	—	—	—		

Completed by: [signature] Date: 8/2/13

DRAFT



Click on the forms button in the bar at the top of the page to view individual forms

From: IRONIES, INC.(2222 FIFTH ST /FA0000398) Submitted: Fri Aug 2 2013, 7:44 PM

Print the form contents View a submission summary

Status: ACCEPTED Accept Decline Delete

Data Transformation Services

Data last migrated Fri Aug 2 2013, 7:46 PM Migrate Data

Review

Make sure to save your Review form by clicking on the Save Changes button before accepting or declining a submission.

Save Changes Cancel Changes

Cover Page Comments: Hello Debbie,

I went through and completed the list you gave me. Let me know if there is anything else I need to do.
Thank you.

Larry Luna
Operations Manager
510-612-6625

Facility ID: FA0000398
Facility Name: IRONIES, INC.
Site Address: 2222 FIFTH ST
City: BERKELEY
Program ID: PR0000288
Program Element: 4200

8/2/13 : Date Tech Review Completed
8/5/13 : Date Scanned
8/5/13 : Date Copied for BFD
8/5/13 : Date Data Entry Completed
_____ : Date Filed
(Initial each line)

Agency's Review Comments: Thank you.

Reviewer's Name: Debbie Andersen
Reviewer Email: dandersen@cityofberkeley.info
Review Date: 08/02/2013
Status: 01

Form Deficiencies

- ☐ Owner Operator Form: Invalid/Missing Business Name/Address
- ☐ Owner Operator Form: Invalid/Missing Business Owner Name/Address
- ☐ Owner Operator Form: Invalid/Missing Environmental Contact
- ☐ Owner Operator Form: Invalid/Missing Emergency Contacts
- ☐ Chemical Description Form: Invalid/Missing Location - Map# and/or Grid#
- ☐ Chemical Description Form: Invalid/Missing Fire Code Hazard Classes
- ☐ Chemical Description Form: Invalid/Missing Physical state
- ☐ Chemical Description Form: Invalid/Missing Average daily amount and or Maximum daily amount
- ☐ Chemical Description Form: Invalid/Missing Units
- ☐ Emergency Plan Form: The plan does not adequately address Release Prevention, Immediate Notification and Evacuation, and Emergency Response Procedures and Cleanup Procedures
- ☐ None

Other Form Deficiencies

_____ : Date Tech Review Completed
_____ : Date Scanned
_____ : Date Copied for BFD
_____ : Date Data Entry Completed
_____ : Date Filed
(Initial each line)

Map Deficiencies

- ☐ Map is illegible (or does not scan well)
- ☐ Map lacks orientation (North arrow)

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

Issued to

Name of Facility: IRONIES, INC.		*Customer Identification Number:* CID# 87052
Street Address: 2222 FIFTH STREET	*Mailing Address:* Kiat Tjong 2222 Fifth Street	
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* Berkeley, CA 94710	

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan: **HMPC2**	Hazardous Waste Generator Program: **<55**
Above Ground Petroleum Storage, SPCC Plan:	Tiered Permit Program for Onsite Treatment of Hazardous Waste:
Universal Waste: **CESQUWG**	California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP):
Underground Storage Tank Program No. of USTs:	Radiological Agents: Etiological Agents: Other:

DRAFT

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date: March 1, 2013	**Expiration Date:** March 1, 2014		*Machine Validation / Official Receipt*
Issue Date: July 1, 2013		**Approved By: Nabil Al-Hadithy**	

G:\TOXICS\CUPA\PERMIT\00PERMTS\

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION
City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

1. This permit is subject to all applicable local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

2. This permit is not transferable. Any permit or registration issued to a particular person or for a designated place, operation, purpose or object shall not be valid for use by or for any other person, place, operation, purpose or object.

3. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

4. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

5. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

6. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

7. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

8. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

NOV 0 5 2013

RECEIVED
NOV 1 3 2013
TOXICS MGMT. DIVISION

October 15, 2013

Please forward to Toxics 11/12/13

Fire Administration / Attn: Fire Chief

2100 Martin Luther King Jr. Way

Berkeley, Ca. 94704

Re: Ironies Furniture at 2222 5th Street, Berkeley, CA. Website: http://www.ironies.com/bio.html

I am not sure who to contact but feel morally and ethically obligated as a former employee of the subject company to inform the authorities and leadership of Berkeley and the Fire District of a very unfortunate situation relating to a local employer (Ironies Furniture, a.k.a. Art of Muse and Oly Studio) who is located at 2222 5th Street, Berkeley, California in Alameda County. This is my former employer who has for years and years been blatantly disregarding laws, their moral duty/obligations, city/county/state laws/codes, employment laws, local building codes/health codes – among others.

This company's owners (Kate & Brad) have a complete disregard for the well being of their employees (some of which are my former co-workers who I consider friends who are still there, many have complained to management about illness/health concerns and building safety issues without any positive response by the business owners, some have serious health issues and have left the company due to illness, others are under informed and do not realize their health is in danger and better options exist.

This company has for years and continues to make poor decisions. Such as I have watched them pour various chemicals and acid wash water down drains without proper filtering into who knows where and in the past into the streets, allowing unregulated toxic fumes to circulate throughout the facility without proper mechanisms to contain such and then fumes into the air (into the neighborhood), allowing code violations for electrical outlets/cords to lay all over the floors and exposed in walls with leaking roofs, no formal training or protective plan for employees safety, a lack of wheel chair accessible bathrooms and entrance/exits, do not provide safety/health guidance or safety equipment/devices for workers, keeps the building completely unnamed/unmarked from the outside of the building so people do not know what is "really happening" inside. Among others the owners are hiring illegal's, with a complete lack of regard for hiring laws, labor laws, etc.

This company also has employees and issues within their other locations in Indonesia and Nevada.

I am well aware of this company as I am a former employee. You will need a strong handed approach at reaching the owners who will try their best to evade you and your attempts to reach them – and will pretend to not know anything about anything. Will probably inform you that they are not involved in the company or only investors which is not the case and how they will try to avoid any responsibility. Your letters will likely go unread or unresponded to. Your calls will likely go unreturned by the owners. I left the company because I couldn't stand to watch the owner's continual and blatant disregard of their obligations, laws, their consistent decisions to avoid doing the right thing to ensure the safety and health of their people and their selfish attitude towards their social duty to the community and Berkeley.

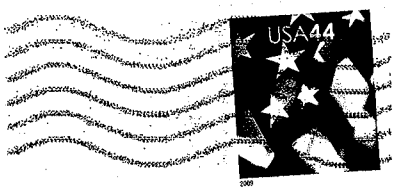
Thank you for recognizing that this is a serious matter, I know the County will address this. I thank you for your support of our County!

CC: City of Berkeley

DRAFT

OAKLAND CA 945

31 OCT 2013 PM 4 L



FIRE ADMINISTRATION
C/O FIRE CHIEF
2100 MARTIN LUTHER KING JR WY
BERKELEY, CA 94704

DRAFT

94704110900

FINANCE CUSTOMER SERVICE
MISCELLANEOUS RECEIVABLES
CHARGE ENTRY ADJUSTMENTS
FN-MRA: REQUEST FOR CORRECTIONS

DATE: 3/6/14
DOC/REF/NO.: HZFY14-039

CUSTOMER TYPE/CODE/DESCRIPTION: HZ

CUST. ID# / ALT #: 87052
CUSTOMER NAME: Ironies, Inc.
CUSTOMER ADDRESS: 2222 Fifth Street

ORIGINAL BILL DATE	REMOVE	ADD	ADJUSTMENT DESCRIPTION
08/28/13	HMC2		HazMat Storage Permit
		HMPC3	HazMat Storage Permit
08/28/13	HWG1		Haz Waste Generator Permit
		HWG2	Haz Waste Generator Permit

FOR TMD REFERENCE ONLY			
	ADD	REMOVE	NOTES
		($855.00)	
	$1,710.00		
		($149.00)	
	$292.00		
SUBTOTALS:	ADD	REMOVE	
	$2,002.00	($1,004.00)	
TOTAL ADJUSTED AMOUNT: $998.00			

REASON FOR ADJUSTMENT: Per Carrie's calculations following facility's return to compliance, inventory for FY14 increased.

DO NOT ADJUST DOLLAR AMOUNTS - CHARGE CODES MUST BE REMOVED AND ADDED AS NOTED ABOVE.

DEPARTMENT SIGNATURES:

Prepared by: Melanie E. Beasley — 3/6/14 (Date)

Approved by: Sandra Hardaway — 3/6/14 (Date)

FINANCE/CUSTOMER SERVICE:

Adjusted by: _____ Date _____

Approved by: _____ Date _____

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

Name of Facility: IRONIES, INC.		*Customer Identification Number:* CID# 87052
Street Address: 2222 FIFTH STREET	*Mailing Address:* Kiat Tjong 2222 Fifth Street	
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* Berkeley, CA 94710	

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan: **HMPC3**	Hazardous Waste Generator Program: **<5**
Above Ground Petroleum Storage, SPCC Plan **(If blank then none reported)**:	Tiered Permit Program for Onsite Treatment of Hazardous Waste **(If blank, none reported)**:
Universal Waste **(If blank, no UW reported)**: **CESQUWG**	California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP): **N/A**
Underground Storage Tank Program No. of USTs: **None**	Radiological Agents: None Etiological Agents: None Other: None

DRAFT

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date: March 1, 2014	**Expiration Date:** June 30, 2015	**Approved By: Nabil Al-Hadithy**	*Machine Validation / Official Receipt*
Issue Date: May 13, 2014			

2118 Milvia Street, Suite 300, Berkeley, CA 94704
Phone: (510) 981-7460 Fax (510) 981-7470 www.cityofberkeley.info/toxics

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION
City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

1073. This permit is subject to all applicable local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

1074. This permit is not transferable. Any permit or registration issued to a particular person or for a designated place, operation, purpose or object shall not be valid for use by or for any other person, place, operation, purpose or object.

1075. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

1076. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

1077. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

1078. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

1079. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

1080. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

FEE SUMMARY SHEET
For Permit Period FY15 (Base Reporting Period: 2014)

Business Name: Ironite, Inc. [CID: 87052]

Address: 2222 Fifth St.

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2014	CY2014	CY2014	Last Reported	FY2015 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	29	15	3	30	47
Total no. of ***waste*** chemicals:	2	1			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	656	6,555	3238	C3	C3
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	365	190		<5	<2

CalARP			Tiered Permit			APSA	
Program 1	Program 2	Program 3	Conditionally Exempt	Conditionally Authorized	Permit by Rule	≤10,000	≥10,000
☐	☐	☐	☐	☐	☐	☐	☐
Underground Storage Tank			inert gas	nano	etiologic	radiologic	EPCRA
No. of USTs _____			☐	☐	☐	☐	☐
Additional Billing			FY13 ☐			FY14 ☐	

Completed by: Michael Dills Date: 7/21/14

DRAFT

FILE COPY

Planning & Development Department
Toxics Management Division

October 29, 2014

Attention: Kiat Tjong
2222 Fifth Street
Berkeley, CA 94710

Subject: Revised Unified Program Consolidated Permit and Registration Permit for 2014-FY2015 for IRONIES, INC. (CID# 87052)
2222 FIFTH STREET

Dear Berkeley Business Operator:

Enclosed is your revised CUPA Permit for **2014-FY2015**. This permit has been updated to reflect a changed in the Hazardous Waste category, and is your record showing that you have notified Toxics Management Division (TMD) of your facility's activities involving hazardous materials and/or hazardous waste. Please replace any previous version of the 2014-FY2015 CUPA permit you may have received with this one.

Please sign the Unified Program Consolidated Permit and Registration Permit and maintain it at your facility.

DO NOT RETURN THE PERMIT TO THE TOXICS MANAGEMENT DIVISION.

If you have any questions about the permit, please contact one of our Hazardous Materials Specialists at (510) 981-7460.

Sincerely,

Nabil Al-Hadithy
Hazardous Materials Manager

Enclosure: Unified Program Consolidated Permit and Registration for 2014-FY2015

DRAFT

FILE COPY

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

RE-ISSUED FOR CHANGE IN HAZARDOUS WASTE CATEGORY

Name of Facility: IRONIES, INC.		*Customer Identification Number:* CID# 87052
Street Address: 2222 FIFTH STREET	*Mailing Address:* Kiat Tjong 2222 Fifth Street	
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* Berkeley, CA 94710	

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan: **HMPC3**	Hazardous Waste Generator Program: **<2**
California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP): **N/A**	Tiered Permit Program for Onsite Treatment of Hazardous Waste **(If blank, none reported)**:
Above Ground Petroleum Storage, SPCC Plan **(If blank then none reported)**:	Underground Storage Tank Program No. of USTs: **None**
Radiological Agents: **None** Etiological Agents: **None** Other: **None**	

DRAFT

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date: March 1, 2014	**Expiration Date:** June 30, 2015		*Machine Validation / Official Receipt*
Re-Issue Date: October 29, 2014		**Approved By: Nabil Al-Hadithy**	

2118 Milvia Street, Suite 300, Berkeley, CA 94704
Phone: (510) 981-7460 Fax (510) 981-7470 www.cityofberkeley.info/toxics

FILE COPY

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

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3. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

4. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

5. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

6. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

7. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

8. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

FEE SUMMARY SHEET
For Permit Period FY16 (Base Reporting Period: 2015)

Business Name: Ironies, Inc. [CID: 87052]

Address: 2222 Fifth Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2015	CY2015	CY2015	Last Reported	FY2016 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	26	15	3		44
Total no. of ***waste*** chemicals:	2	1			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	504	3,407	3,520	C3	C2✓
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	365	150		<2	<2

CalARP			Tiered Permit			APSA	
Program 1	Program 2	Program 3	Conditionally Exempt	Conditionally Authorized	Permit by Rule	<10,000	≥10,000
☐	☐	☐	☐	☐	☐	☐	☐
Underground Storage Tank			inert gas	nano	etiologic	radiologic	EPCRA
No. of USTs _____			☐	☐	☐	☐	☐

Additional Billing: FY14 ☐ FY15 ☐
Reason:

Completed by: Caie Estadt Date: 3/30/15

DRAFT

2118 Milvia Street, Suite 300, Berkeley, California 94704 TEL: (510) 981-7460 TDD: (510) 981-6903 FAX: (510) 981-7470

From: IRONIES, INC.(2222 FIFTH ST /FA0000398)
Print the form contents
Submission History
Status: ACCEPTED Accept Decline Delete

Submitted: Fri Feb 27 2015, 3:30 PM
View a submission summary

Data Transformation Services

Migrate Data

Review

Make sure to save your Review form by clicking on the Save Changes button before accepting or declining a submission.

Save Changes Cancel Changes

Cover Page Comments	Hello, On behalf of Ironies, Inc,, and pursuant to the requirements of Article 1. Chapter 6.95, Division 20 of the California Health and Safety Code, I hereby submit the Hazardous Materials Business Plan (HMBP) for the facility located at 2222 Fifth Street, Berkeley, Californian This represents minor changes to the existing HMBP(s) your agency has on file for the facility. Should you have any questions on our submission, please contact me at (510) 644-2100(x1805) or Kiat Tjong, Regulatory at 510-644-2100 x1952. Regards, Mike Valentine, Operations Manager; OLY and Ironies LLC.
Facility ID	FA0000398
Facility Name	IRONIES, INC.
Site Address	2222 FIFTH ST
City	BERKELEY
Program ID	PR0000288
Program Element	4200
Agency's Review Comments	
Reviewer's Name	Carrie Estadt
Reviewer Email	cestadt@cityofberkeley.info
Review Date	03/30/2015
Status	01

DRAFT

Department of Planning and Development
Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 / FAX (510) 981-7470
E-mail: Toxics@cityofberkeley.info

For Dept Use Only – Log In/Date Stamp

MAR 01 2017

TOXICS MANAGEMENT DIVISION

RTC entered on: 3/1/17 by: KB

CERTIFICATION OF RETURN TO COMPLIANCE

Date: March 1, 2017

Owner/Operator: IRONIES INC.

Facility Name: IRONIES, INC.

Address: 2222 FIFTH STREET **Zip Code :** 94710

In the matter of the Violation(s) cited on the Hazardous Materials Inspection and Violation Report (Notice to Comply) and/or the Stormwater Facility Inspection Report issued:

On: Feb 3, 2017 (Date) **By:** Karl Busche (Inspector)

List all the violation(s) and correction(s) specified on the Hazardous Materials Inspection and Violation Report (Notice to Comply). Attach additional supporting documentation (e.g. photos, copies of manifests/disposal receipts, or other original paperwork).

Compliance Date:	Violation Code:	Corrective Action: (Identify how the violation was corrected)
3.1.2017	CCR6626234	A supervisor from other departments will take the responsibility to inspect and maintain the eye wash station. complete monthly inspection checklist, replace water every 4 months and test annually.
3.1.2017	CCR2732	For better recordkeeping, reorganized the training record, and stored inside file cabinet.

I have personally examined and am familiar with the information submitted and believe the information is true, accurate and complete. I am authorized to file this certification for the facility. I am aware that there are significant penalties for submitting false information and/or for non-compliance with the violations noted, including the possibility of fines and imprisonment.

Name: Kiat Tjong Title: Operation

Signature: [signature] Date Signed: 3/1/2017

Failure to submit this Certification within the time specified on the Hazardous Materials Inspection and Violation Report (Notice to Comply) and the Stormwater Facility Inspection Report Form may result in a re-inspection of the facility, to be charged at an hourly rate and fines up to $25,000 per day of non-compliance (HSC Sections 25188 & 25514 and BMC Section 17.20.160).

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency (CUPA)

Toxics Management Division
Administrative Enforcement
Payment Transmittal Form

PERMIT SERVICE CENTER
MAR 10 2014
RECEIVED BY

Date: March 7, 2014

Submitted To: Permit Service Center

Submitted By: Melanie E. Beasley
TMD – Please PRINT Name

Transaction Information Description:
For PSC Staff's Transaction Entry

Facility Name:	**Ironies, Inc.**			**CID #:**	**87052**
Address:	**2222 Fifth Street**				
Date of Order:	**11/27/13**	**TMD Docket #:**	**TMD14-005**		
If DA Originated:	**DA Case Name:**				
	DA Case No.:		**DA File No.:**		

PAYMENT ALLOCATION

Program Code	Description	Account Number	Amount
☒ AE	ADMIN ENFORCEMENT (07PD01)	845-8305-353-2707	$5,000
☒ RECOV	CUPA – COST RECOVERY	845-8305-342-2711	$750

Total Amount of All Payments Attached: **$5,750**

Payment received as:
☒ Check Payable to City of Berkeley
☐ Cash
☐ Debit/Credit Card

If paid by check, check #: 47719

PSC Staff Processing Payment: Avotya L.
Please PRINT name

Oper: REGISTER1
Date: 3/10/14 Rcpt Receipt no: 215722
Total tendered $5750.00
Total payment $5750.00

SCANNED

DRAFT

2118 Milvia Street, 3rd Floor, Berkeley, CA 94704 Tel: 510.981-7400 TDD: 510.981.6903 Fax: 510.981-7470
E-mail: toxics@cityofberkeley.info
Revised Form 09/19/13 meb

[redacted]: [redacted]
Total [redacted]10i Receipt no:[redacted]

City of Berkeley
*** CUSTOMER RECEIPT ***

Oper: REGISTER1 Type: OC Drawer: 1
Date: 3/10/14 01 Receipt no: 215722

Description	Quantity	Amount
AE	TOXICS: ADMIN ENFORCEMENT	
	1.00	$5000.00
Trans number:		3082337

G/L account number:
84583053532707
84500001010000
2222 FIFTH ST

RECOV	CUPA RECOVERY PAYMENTS	
	1.00	$750.00
Trans number:		3082338

G/L account number:
84583053422711
84500001010000
2222 FIFTH ST

ADMIN ENFORC / CUPA COST RECOV
2222 FIFTH ST / TMD#TMD14-005
$$ALJ

Tender detail

CK CHECK, REGUL	47719	$5750.00
Total tendered		$5750.00
Total payment		$5750.00

Trans date: 3/10/14 Time: 14:26:43

*** THANK YOU FOR YOUR PAYMENT ***

DRAFT

INVOICE

Planning and Development Department
Toxics Management Division

FILE COPY

INVOICE DATE: FEBRUARY 18, 2014

Ironies
2222 Fifth Street
Berkeley, CA 94710
CID# 87052

CONSENT ORDER: Ironies
DOCKET NO: TMD14-005

DESCRIPTION	HOURS	RATE	AMOUNT
Penalty for violations noted in Enforcement Order			$5,000.00
Administrative Costs	5	$150/hr	$750.00
		TOTAL	$5,750.00

DRAFT

Make all checks payable to the City of Berkeley and mail to 2118 Milvia Street, Suite 300, Berkeley, CA 94704

Total due 30 days after the consent order is signed by the Toxics Management Division (TMD). Failure to pay on-time will result in the assessment of interest at the rate established pursuant to HSC §25360.1 Respondent will also be responsible for paying all costs incurred by TMD in pursuing collection including attorney's fees.

SCANNED

IRONIES, LLC 2222 - 5TH STREET BERKELEY, CA 94710-2217

47719

03/04/14 V005023

City of Berkeley

16300	03/04/14	5,750.00	TMD14-005	5,750.00

CD# 87052
TMD14-005

FILE COPY

5,750.00 5,750.00

TRUE WATERMARK PAPER - HOLD TO LIGHT TO VIEW - HEAT SENSITIVE RED IMAGE DISAPPEARS WITH HEAT

47719

IRONIES, LLC
2222 - 5TH STREET
BERKELEY, CA 94710-2217
(510) 644-2100 FAX (510) 644-2178

WELLS FARGO BANK, N.A.
11-4288-1210

Five thousand seven hundred and fifty Dollars and 00 /100 Cents********

DATE 03/04/14

AMOUNT ***$ 5,750.00

Details on back.

PAY TO THE ORDER OF

City of Berkeley
Toxics Management Devision
2118 Milvia Street Suite 300
Berkeley CA 94704
USA

AUTHORIZED SIGNATURE

⑈047719⑈ ⑆121042882⑆ 878771713 4⑈

IRONIES, LLC 2222 - 5TH STREET BERKELEY, CA 94710-2217

47719

03/04/14 V005023

City of Berkeley

16300	03/04/14	5,750.00	TMD14-005	5,750.00

5,750.00 5,750.00

SCANNED

DRAFT

STATE OF CALIFORNIA
OFFICE OF ADMINISTRATIVE HEARINGS
TDD/TYY 800-735-2929

2349 GATEWAY OAKS DR., SUITE 200
SACRAMENTO, CA 95833
Phone 916-263-0550 FAX 916-376-6349
sacfilings@dgs.ca.gov

1515 CLAY STREET, SUITE 206
OAKLAND, CA 94612
Phone 510-622-2722 FAX 916-376-6323
oakfilings@dgs.ca.gov

320 WEST FOURTH STREET, SUITE 630
LOS ANGELES, CA 90013
Phone 213-576-7200 FAX 916-376-6324
laxfilings@dgs.ca.gov

1350 FRONT STREET, ROOM 3005
SAN DIEGO, CA 92101
Phone 619-525-4475 FAX 916-376-6325
sanfilings@dgs.ca.gov

STATE AGENCY REQUEST TO SET (Cal. Code Regs., tit. 1, § 1018) (rev 9/12)

DATE: January 30, 2014

FROM: Carrie Estadt

CASE TITLE: Ironies

OAH CASE NO.:

NAME OF AGENCY: City of Berkeley Toxics Management Division - CUPA

AGENCY CASE NO.: TMD14-005

AGENCY ATTORNEY/REPRESENTATIVE
Name, Address, Telephone, E-mail & Fax Nos.

Nabil Al-Hadithy
Hazardous Materials Manager
City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
P: (510) 981-7460 F: (510) 981-7470
toxics@cityofberkeley.info

Preferred Method of Service:
[✓]Email [ ]Fax [ ]U.S. Mail

RESPONDENT/APPELLANT/PETITIONER
Name, Address, Telephone, E-mail & Fax Nos.

Ironies
2222 Fifth Street
Berkeley, CA 94710
P: (510) 644-2100 F: (510) 644-2170
See attached for additional parties
Preferred Method of Service:
[✓]Email [ ]Fax [✓]U.S. Mail

PLEASE LIST EACH PARTY SEPARATELY – USE ADDITIONAL SHEETS IF NECESSARY

RESPONDENT/ATTORNEY/REPRESENTATIVE
Name, Address, Telephone, E-mail & Fax Nos.

Preferred Method of Service:
[ ]Email [ ]Fax [ ]U.S. Mail

[ ] ACCUSATION [ ] STATEMENT OF ISSUES [✓] OTHER INITIAL PLEADINGS (Attach Accusation, SOI, or other pleading)

IF PLEADINGS ARE NOT ATTACHED A HEARING MAY NOT BE SET

STATUTORY TIME LIMIT
[✓] YES [ ] NO

IF YES, PROVIDE LEGAL AUTHORITY (Code & Section No.): CHSC 25404.1.1(e)

IF YES, DATE BY WHICH CASE MUST BE HEARD (MONTH/DAY/YEAR): 03/17/2014

TIME ESTIMATE FOR HEARING
HOURS 4 DAYS

HEARING LOCATION: City of Berkeley Planning, 2118 Milvia Street, Suite 300, Berkeley, CA 94704

DATES PREFERRED (ALL PARTIES)

February 20-21, 2014
February 24-28, 2014
March 4-7, 2014

DATES COORDINATED WITH ALL PARTIES?
[✓] YES [ ] NO

If no, attach Form 21.1 (Statement of Agency's Reasonable Efforts to Confer). Failure to coordinate dates or provide an explanation may result in a delay in processing your request and/or assignment of hearing dates without the input of the parties.

DATES UNAVAILABLE FOR AT LEAST 6 MONTHS (ALL PARTIES)

ADDITIONAL COMMENTS AND/OR INSTRUCTIONS WHICH WOULD AFFECT CALENDARING, REQUEST FOR ACCOMMODATION, SECURITY, ETC., ANY LISTED RESPONDENTS WHO DID NOT FILE A NOTICE OF DEFENSE?

Copies of Enforcement Order and signed Notice of Defense (NOD) are enclosed. Billing Address is California Environmental Protection Agency Unified Program Office, P.O. Box 2815, Sacramento, CA 92512; Contract 12-001

[ ] ELECTRONIC RECORDING BY CONSENT (Gov. Code, § 11512, subd. (d)) (attach copy of written consent)

[✓] OAH TO REQUEST COURT REPORTER [ ] AGENCY TO PROVIDE COURT REPORTER
(If no selection is made a Court Reporter will be ordered and the agency will be charged.)

NOTICE: This is not a reservation of dates. Completion of this form does not guarantee that you will receive the hearing dates requested. Dates are subject to availability at the time a Request to Set or other calendar request is processed by OAH.

*For more information visit www.**dgs.ca.gov/oah***

DRAFT

City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 FAX (510) 981-7470

Hazardous Materials Business Plan (HMBP) Certification Statement

For Dept Use Only - Mail In Date Stamp

RECEIVED
MAR 28 2011
TOXICS MGMT. DIVISION

I. IDENTIFICATION

01 010

BUSINESS NAME (Same as Facility Name or DBA-Doing Business As): IRONIES, INC

BUSINESS SITE ADDRESS: 2222 FIFTH STREET

CITY: BERKELEY | CA | ZIP CODE: 94710

II. CERTIFICATION STATEMENT

Check the appropriate boxes below and sign the certification statement.

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is, to the best of my knowledge, true and correct. I understand that I will be required to show proof of compliance during any facility inspection conducted by City, County, State, or Federal authorities. I understand that whenever there are changes in address, ownership, business name, or operations (closure, addition of undisclosed hazardous materials or hazardous wastes, and/or contingency planning provisions), a notification of such must be made to Toxics Management Division within 30 days of the change.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE
Kiat Tong	3/23/2011
NAME OF SIGNER (print): KIAT TONG.	TITLE OF SIGNER: MANAGER
EMAIL OF SIGNER OR ENVIRONMENTAL CONTACT: kiatt@ironies.com	

Agency Use Only

- ☑ HMBP accepted as submitted
- ☐ HMBP requires revisions. Letter sent

HMBP ACCEPTED: 5/4/11 BY: Andy

DRAFT

6-4-11 : Date Tech Review Completed:
_____: Date Copied for BFD
_____: Date Scanned
_____: Date Data Entry Completed
_____: Date Filed

City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM – FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # 01 0010 [1]		EPA ID # (Hazardous Waste Only) CAL000282470 [2]	
BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) IRONIES, INC [3]			
BUSINESS SITE ADDRESS 2222 5th st [103]			
BUSINESS SITE CITY BERKELEY [104]	CA	ZIP CODE 94710 [105]	

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☐ YES ☒ NO 4	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release Prevention Program (CalARP)?	☐ YES ☒ NO 4a	Coordinate with your local agency responsible for CalARP
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES ☒ NO 5	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES ☒ NO 8	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE		
1. Generate hazardous waste?	☒ YES ☐ NO 9	EPA ID NUMBER – provide at the top of this page
2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES ☒ NO 10	RECYCLABLE MATERIALS REPORT (one per recycler)
3. Treat hazardous waste on site?	☐ YES ☒ NO 11	ONSITE HAZARDOUS WASTE TREATMENT – FACILITY ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES ☒ NO 12	CERTIFICATION OF FINANCIAL ASSURANCE
5. Consolidate hazardous waste generated at a remote site?	☐ YES ☒ NO 13	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐ YES ☒ NO 14	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (20 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES ☒ NO 14a	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☒ YES ☐ NO 14b	See CUPA for required forms.
E. LOCAL REQUIREMENTS		
1. Use or store hazardous materials or hazardous wastes in combined (aggregate) quantities equal to or greater than 55 gallons for liquids, 500 pounds for solids or 200 cubic feet for compressed gases?	☐ YES ☒ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
2. Use or store any quantity of etiological agents, radioactive materials or perchlorate materials?	☐ YES ☒ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
3. Below E.1. thresholds above, but generate any quantity of hazardous waste?	☐ YES ☐ NO 15	HAZARDOUS WASTE GENERATOR REPORTING PACKET
4. Generate any quantity of Universal Waste (mercury containing devices, non-empty aerosols, electronic devices, fluorescent tubes, batteries, dental amalgam wastes, etc.)?	☒ YES ☐ NO 15	SEE THE UNIVERSAL WASTE REPORTING REQUIREMENTS PAGE FOR INSTRUCTIONS
5. Treat any quantity of photochemical waste on-site (x-ray and photo imaging processors)?	☐ YES ☒ NO 15	

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Business Activities

Please submit the Business Activities page, the Business Owner/Operator Identification page (OES Form 2730), and Hazardous Materials Inventory -Chemical Description pages (OES Form 2731) for all submissions. (Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.) Please number all pages of your submittal. This helps your CUPA or AA identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the Certified Unified Program Agency (CUPA) or Administering Agency (AA). This is the unique number which identifies your facility.
2. EPA ID NUMBER - If you generate, recycle, or treat hazardous waste, enter your facility's 12-character U.S. Environmental Protection Agency (U.S. EPA) or California identification number. For facilities in California, the number usually starts with the letters CA. If you do not have a number, contact the Department of Toxic Substances Control (DTSC) Telephone Information Center at (916) 324-1781, (800) 61-TOXIC or (800) 61-86942, to obtain one.
3. BUSINESS NAME - Enter the full legal name of the business. This is the same as the terms Facility Name or DBA - Doing Business As that might have been used in the past.
4. HAZARDOUS MATERIALS ONSITE - Check the box to indicate whether you have a hazardous material onsite. You have a hazardous material onsite if:
   - Your total aggregate quantities of hazardous materials stored or handled at your facility equal or exceed 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (calculated at standard temperature and pressure),
   - It is handled in quantities equal to or greater than the applicable federal threshold planning quantity for an extremely hazardous substance listed in 40 CFR Part 355, Appendix A,
   - You store or use any quantity of radioactive materials or etiological agents.

   If you have a hazardous material onsite, then you must complete the Business Owner/Operator Identification page (OES Form 2730) and the Hazardous Materials Inventory - Chemical Description page(s) (OES Form 2731), as well as an Emergency Response Plan.
5. OWN OR OPERATE UNDERGROUND STORAGE TANK (UST) - Check the appropriate box to indicate whether you own or operate USTs containing hazardous substances as defined in Health and Safety Code (HSC) Section 25316. If "YES", then you must complete one UST Facility page and UST Tank pages for each tank. You must also submit a plot plan and a monitoring program plan.
6. UPGRADE/INSTALL UST - Check the appropriate box to indicate whether you intend to install or upgrade USTs containing hazardous substances as defined in HSC Section 25316. If "YES", then you must complete the UST Installation - Certificate of Compliance page in addition to UST Facility and Tank pages, plot plan and monitoring program plan.
7. UST CLOSURE - Check the appropriate box if you are closing an UST and complete the closure portion of the UST Tank pages for each tank. (CUPAs may require additional information.)
8. OWN OR OPERATE ABOVEGROUND PETROLEUM STORAGE TANK (AST) - Check the appropriate box to indicate whether there are ASTs onsite which exceed the regulatory thresholds. (There is no UPCF page for ASTs.) This program applies to all facilities storing petroleum in aboveground tanks. Petroleum means crude oil, or any fraction thereof, which is liquid at 60 degrees Fahrenheit temperature and 14.7 pounds per square inch absolute pressure (HSC Section 25270.2 (g)). The facility must have a single tank greater than 1,320 gallons, or cumulative storage capacity greater than 1,320 gallons for all ASTs. NOT Subject to the Act (exemptions):
   An aboveground petroleum storage tank (AST) facility with one or more of the following (see HSC Section 25270.2 (k)) is not subject to this act and is exempt:
   - A pressure vessel or boiler which is subject to Division 5 of the Labor Code,
   - A storage tank containing hazardous waste if a hazardous waste facility permit has been issued for the storage tank by DTSC,
   - An aboveground oil production tank which is regulated by the Division of Oil and Gas,
   - Certain oil-filled electrical equipment including but not limited to transformers, circuit breakers, or capacitors.
9. HAZARDOUS WASTE GENERATOR - Check the appropriate box to indicate whether your facility generates hazardous waste. A generator is the person or business whose acts or processes produce a hazardous waste or who causes a hazardous substance or waste to become subject to State hazardous waste law. If your facility generates hazardous waste, you must obtain and use an EPA Identification number (ID) in order to properly transport and dispose of it. Report your EPA ID number in #2. Hazardous waste means a waste that meets any of the criteria for the identification of a hazardous waste adopted by DTSC pursuant to HSC Section 25141. "Hazardous waste" includes, but is not limited to, federally regulated hazardous waste. Federal hazardous waste law is known as the Resource Conservation and Recovery Act (RCRA). Unless explicitly stated otherwise, the term "hazardous waste" also includes extremely hazardous waste and acutely hazardous waste.
10. RECYCLE - Check the appropriate box to indicate whether your facility recycles more than 100 kilograms per month of recyclable material under a claim that the material is excluded or exempt per HSC Section 25143.2. Check "YES" and complete the Recyclable Materials Report pages, if you either recycled onsite or recycled excluded recyclable materials which were generated offsite. Check "NO" if you only send recyclable materials to an offsite recycler. You do not need to report.
11. ONSITE HAZARDOUS WASTE TREATMENT - Check the appropriate box to indicate whether your facility engages in onsite treatment of hazardous waste. "Treatment" means any method, technique, or process which is designed to change the physical, chemical, or biological character or composition of any hazardous waste or any material contained therein, or removes or reduces its harmful properties or characteristics for any purpose. "Treatment" does not include the removal of residues from manufacturing process equipment for the purposes of cleaning that equipment. Amendments (effective 1/1/99) add exemptions from the definition of treatment for certain processes under specific, limited conditions. Refer to HSC Section 25123.5 (b) for these specific exemptions. Treatment of certain laboratory hazardous wastes do not require authorization. Refer to HSC Section 25200.3.1 for specific information. Please contact your CUPA to determine if any exemptions apply to your facility. If your facility engages in onsite treatment of hazardous waste then complete the Onsite Hazardous Waste Treatment Notification - Facility page and one set of Onsite Hazardous Waste Treatment Notification - Unit pages with waste and treatment process information for each unit.
12. FINANCIAL ASSURANCE - Check the appropriate box to indicate whether your facility is subject to financial assurance requirements for closure of an onsite treatment unit. Unless they are exempt, Permit by Rule (PBR) and Conditionally Authorized (CA) operations are required to provide financial assurance for closure costs (per 22 CCR Section 67450.13 (b) and HSC Section 25245.4). If your facility is subject to financial assurance requirements or claiming an exemption, then complete the Certification of Financial Assurance page.
13. REMOTE WASTE CONSOLIDATION SITE - Check the appropriate box to indicate whether your facility consolidates hazardous waste generated at a remote site. Answer "YES" if you are a hazardous waste generator that collects hazardous waste initially at remote sites and subsequently transports the hazardous waste to a consolidation site you also operate. You must be eligible pursuant to the conditions in HSC Section 25110.10. If your facility consolidates hazardous waste generated at a remote site, then complete the Remote Waste Consolidation Site Annual Notification page.
14. HAZARDOUS WASTE TANK CLOSURE - Check the appropriate box to indicate whether the tank being closed would be classified as hazardous waste after its contents are removed. Classification could be based on:
   - Your knowledge of the tank and its contents
   - Testing of the tank
   - Inability to remove hazardous materials stored in the tank.
   - The mixture rule
   - The listed wastes in 40 CFR 261.31 or 40 CFR 261.32.

   If the tank being closed would be classified as hazardous waste after its contents are removed, then you must complete the Hazardous Waste Tank Closure Certification page.
15. LOCAL REQUIREMENTS - Some CUPAs or AAs may require additional information. Check with your CUPA before submitting the UPCF to determine if any supplemental information is required.

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM - FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

Page ___ of ___

I. IDENTIFICATION

FACILITY ID# 1: 01 010	BEGINNING DATE 100: 1/1/2010	ENDING DATE 101: 12/31/2010	
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: IRONIES, INC		BUSINESS PHONE 102: 510-644-2100	
BUSINESS SITE ADDRESS 103: 2222 5th st.		BUSINESS FAX 102a: 510-644-2170	
BUSINESS SITE CITY 104: BERKELEY	CA	ZIP CODE 105: 94710	COUNTY 108: Alameda
DUN & BRADSTREET 106: 80-680-6469		PRIMARY SIC 107:	PRIMARY NAICS 107a:
BUSINESS MAILING ADDRESS 108a: 2222 5th St			
BUSINESS MAILING CITY 108b: BERKELEY		STATE 108c: CA	ZIP CODE 108d: 94710
BUSINESS OPERATOR NAME 109: BRAD HUNTZINGER / KATE MCINTYRE		BUSINESS OPERATOR PHONE 110: SAME AS ABOVE	

II. BUSINESS OWNER

OWNER NAME 111: BRAD HUNTZINGER / KATE MCINTYRE		OWNER PHONE 112: SAME AS ABOVE	
OWNER MAILING ADDRESS 113: 2222 5th street			
OWNER MAILING CITY 114: BERKELEY		STATE 115: CA	ZIP CODE 116: 94710

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: KIAT TJONG		CONTACT PHONE 118: 510-644-2100	
CONTACT MAILING ADDRESS 119: 2222 5th Street		CONTACT EMAIL 119a: kiatt@ironies.com	
CONTACT MAILING CITY 120: BERKELEY		STATE 121: CA	ZIP CODE 122: 94710

IV. EMERGENCY CONTACTS

-PRIMARY-		-SECONDARY-	
NAME 123: Kiat Tjong		NAME 128: Robert Cyr	
TITLE 124: MANAGER		TITLE 129: DIRECTOR of operation	
BUSINESS PHONE 125: 510-644-2100		BUSINESS PHONE 130: 510-644-2100	
24-HOUR PHONE 126: 415-939-6460		24-HOUR PHONE 131: 510-418-8534	
PAGER # 127: N/A		PAGER # 132: N/A	

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134: 3/23/11	NAME OF DOCUMENT PREPARER 135: KIAT TJONG
NAME OF SIGNER (print) 136: KIAT TJONG	TITLE OF SIGNER 137: MANAGER	

DRAFT

Business Owner/Operator Identification

Please submit the Business Activities page, the Business Owner/Operator Identification page, and Hazardous Materials Inventory - Chemical Description pages for all hazardous materials inventory submissions. For the inventory to be considered complete this page must be signed by the appropriate individual.
(Note: the numbering of the instructions follows the data element numbers that are on the Unified Program Consolidated Form (UPCF) pages. These data element numbers are used for electronic submission and are the same as the numbering used in Division 3, Electronic Submittal of Information.)
Please number all pages of your submittal. This helps Unified Program Agency (UPA) identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER – Leave this blank. This number is assigned by the UPA. This is the unique number which identifies your facility.
3. BUSINESS NAME - Enter the doing business as name.
100. BEGINNING DATE - Enter the beginning year and date of the report. (YYYYMMDD)
101. ENDING DATE - Enter the ending year and date of the report. (YYYYMMDD)
102. BUSINESS PHONE - Enter the phone number, area code first, and any extension.
102a. BUSINESS FAX - Enter the business fax number, area code first.
103. BUSINESS SITE ADDRESS - Enter the street address where the facility is located. No post office box numbers are allowed. This information must provide a means to geographically locate the facility.
104. BUSINESS SITE CITY - Enter the city or unincorporated area in which business site is located.
105. ZIP CODE - Enter the zip code of business site. The extra 4 digit zip may also be added.
106. DUN & BRADSTREET – If subject to EPCRA, enter the Dun & Bradstreet number for the facility. The Dun & Bradstreet number may be obtained by calling (610) 882-7748 or on the web at www.dnb.com.
107. SIC NUMBER - Enter the primary Standard Industrial Classification System Number. Required for EPCRA.
107a. NAICS NUMBER - Enter the primary North American Industrial Classification System Number.
108. COUNTY - Enter the county in which the business site is located.
108a. BUSINESS MAILING ADDRESS – Enter the mailing address to be used for all official business correspondence. This mailing address must be filled in.
108b. BUSINESS MAILING CITY - Enter the name of the city for the business mailing address.
108c. STATE - Enter the two character abbreviation of the state for the business mailing address.
108d. ZIP CODE - Enter the zip code for the business mailing address. The extra 4 digit zip may also be added.
109. BUSINESS OPERATOR NAME - Enter the name of the business operator.
110. BUSINESS OPERATOR PHONE - Enter business operator phone number, if different from business phone, area code first, and any extension.
111. BUSINESS OWNER NAME - Enter name of business owner, if different from business operator.
112. BUSINESS OWNER PHONE - Enter the business owner's phone number if different from business phone, area code first, and any extension.
113. BUSINESS OWNER MAILING ADDRESS - Enter the owner's mailing address, if different from business mailing address.
114. BUSINESS OWNER CITY - Enter the name of the city for the owner's mailing address, if different from business mailing address.
115. BUSINESS OWNER STATE - Enter the 2 character state abbreviation for the owner's mailing address, if different from business mailing address.
116. BUSINESS OWNER ZIP CODE - Enter the zip code for the owner's address, if different from business mailing address. The extra 4 digit zip may also be added.
117. ENVIRONMENTAL CONTACT NAME - Enter the name of the person, who receives all environmental correspondence.
118. CONTACT PHONE - Enter the phone number, if different from Owner or Operator, for the environmental contact, area code first, and any extension.
119. CONTACT MAILING ADDRESS - Enter the mailing address where all environmental contact correspondence should be sent.
119a CONTACT EMAIL – Enter the email address of the environmental contact in 117, if the contact has one.
120. CONTACT MAILING CITY - Enter the name of the city for the environmental contact's mailing address.
121. STATE - Enter the 2 character state abbreviation for the environmental contact's mailing address.
122. ZIP CODE - Enter the zip code for the environmental contact's mailing address. The extra 4 digit zip may also be added.
123. PRIMARY EMERGENCY CONTACT NAME - Enter the name of a representative to be contacted in case there is an emergency involving hazardous materials at the business site. The contact shall have FULL facility access, site familiarity, and authority to make decisions for the business regarding incident mitigation.
124. TITLE - Enter the title of the primary emergency contact.
125. BUSINESS PHONE - Enter the business number for the primary emergency contact, area code first, and any extensions.
126. 24-HOUR PHONE - Enter a 24-hour phone number for the primary emergency contact. The 24-hour phone number must be one which is answered 24 hours a day. If it is not the contact's home phone number, then the service answering the phone must be able to immediately contact the individual stated above.
127. PAGER NUMBER - Enter the pager number for the primary emergency contact, if available.
128. SECONDARY EMERGENCY CONTACT NAME - Enter the name of a secondary representative that can be contacted in the event that the primary emergency contact is not available. The contact shall have FULL facility access, site familiarity, and authority to make decisions for the business regarding incident mitigation.
129. TITLE - Enter the title of the secondary emergency contact.
130. BUSINESS PHONE - Enter the business telephone number for the secondary emergency contact, area code first, and any extension.
131. 24-HOUR PHONE - Enter a 24-hour phone number for the secondary emergency contact. The 24 hour phone number must be one which is answered 24 hours a day. If it is not the contact's home phone number, then the service answering the phone must be able to immediately contact the individual stated above.
132. PAGER NUMBER - Enter the pager number for the secondary emergency contact, if available.
133. ADDITIONAL LOCALLY COLLECTED INFORMATION - This space may be used for UPA to collect any additional information necessary to meet the requirements of their individual programs. Contact UPA for guidance.
134. DATE - Enter the date that the document was signed. (YYYYMMDD)
135. NAME OF DOCUMENT PREPARER - Enter the full name of the person who prepared the inventory submittal information.
136. NAME OF SIGNER - Enter the full printed name of the person signing the page. The signer certifies to a familiarity with the information submitted and that based on the signer's inquiry of those individuals responsible for obtaining the information, all the information submitted is true, accurate and complete.
SIGNATURE OF OWNER/ OPERATOR OR DESIGNATED REPRESENTATIVE - The Business Owner/Operator, or officially designated representative of the Owner/Operator, shall sign in the space provided. This signature certifies that the signer is familiar with the information submitted and that based on the signer's inquiry of those individuals responsible for obtaining the information it is the signer's belief that the submitted information is true, accurate and complete.
137. TITLE OF SIGNER - Enter the title of the person signing the page.

DRAFT

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th st Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(1) G6	PROPYLENE	☒ Same as first column 799	115-07-1	☐ Yes ☒ No	FG	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	130gal / 65gal / 65gal	☒ 365	cyl.	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(2) E6	OXYGEN	☐ Same as first column 799	7782.44-7	☐ Yes ☒ No	OX	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	1000 ft³ / 500 ft³ / 250 ft³	☒ 365	cyl.	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☒ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(7) D6	ARGON/CO2	☐ Same as first column ARGON 75 CO2 25	7440-37-1	☐ Yes ☒ No		☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	1000 ft³ / 500 ft³ / 250 ft³	☒ 365	cyl.	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☐ Fire ☒ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☒ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		☐ 365		☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th Street, BERKELEY | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(9) A4	HYDROSTONE	☐ Same as first column Plaster of PARIS 90 PORTland Cement 5	—	☐ Yes ☐ No	IRR	☒ solid ☐ liquid ☐ gas; ☐ pure ☒ mixture; ☐ radioactive	5000 lbs	250 lbs 222 Days on site: ☒ 365	50 lbs 223 Storage Container: B	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(9) A4	WHITE CEMENT	☐ Same as first column 3CaOSO2 2CaOSO2 3CaOAL2O 4CaOAL2O3Fe2O3 CaSO4 2H2O	12168-85-3 10034-772 12042-78-3 12068-35-8 13397-24-5	☐ Yes ☐ No	TX	☒ solid ☐ liquid ☐ gas; ☐ pure ☒ mixture; ☐ radioactive	1000 lbs	500 lbs 222 Days on site: ☒ 365	100 lbs 223 Storage Container: B	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	PMC-744 RUBBER MOLD	☐ Same as first column 2,4 toluenediisocyanate 2,6 toluenediisocyanate bis(2-ethylhexy	584-84-9 91-08-7 117-817	☐ Yes ☐ No	TX	☐ solid ☒ liquid ☐ gas; ☐ pure ☒ mixture; ☐ radioactive	80 lbs	40 lbs 222 Days on site: ☐ 365	40 lbs 223 Storage Container: PD	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	IRON OXIDE	☒ Same as first column	1309 37 1	☐ Yes ☐ No		☒ solid ☐ liquid ☐ gas; ☐ pure ☐ mixture; ☐ radioactive	50 lbs	100 lbs 222 Days on site: ☒ 365	100 lbs 223 Storage Container: PD	☒ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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3/18-9

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONLES INC | Business Address: 2222 5th street, Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(3) B3	Breakthrough	☐ Same as first column 2 Butoxy Ethanol N-Butyl Alcohol	—	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	30 gal	15 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(4) A2	Hammerite	☐ Same as first column Xylene 11 C8 Aromatis 4 Propane 11 Isobutane 11 Acetone 39	01330207 14742956 000 74986 0075285 006764	☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	30 gal	15 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(5) A2	Xylene	☒ Same as first column	01330-207	☐ Yes ☒ No	FL TX	☐ solid ☒ liquid ☐ gas ☒ pure ☐ mixture ☐ radioactive	5 gal	3 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(6) D1	Metal Etch	☐ Same as first column Ethyleneglycol Butylether 9 Phosporic Acid 39	111-762 7664-38-2	☐ Yes ☒ No	IRR	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	8 gal	4 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	☐ lbs ☒ gal ☐ cu. ft. ☐ μ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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3/28-4

Non-Waste Hazardous Materials Inventory Spreadsheet

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3 Business Name: IRONIES | Business Address: 2222 5th street BERKeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(4) A2	LACQUER THINNER	☐ Same as first column Methyl ethyl 12 Butyl Acetate 5 Ethyl Alcohol 5 GlycoLETHER <5	78-93-3 123-86-4 64-17-5 111-76-2	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	15 gal	8 gal 222 Days on site ☒ 365	5 gal 223 Storage Container C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(4) A2	TRIPRIME Black	☐ Same as first column Xylene 15 Microcystalline 10 Methyl Propyl Keytone 5 Methyl IsoBOthyl Ketone 5 Methly N-Propyl ketone 5	1330-20-7 1317-95-9 107-87-9 108-10-1 707879	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	30 gal	15 gal 222 Days on site ☒ 365	1 gal 223 Storage Container C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(8) B2	AERVOE Spraycan	☐ Same as first column Xylene 13 Ethyl Benzene 1 Acetone 39 PROPane 16 ISO Butane 2 Mineral Spirit 1	1330-20-7 100.24-14 67.641 74.986 75289 8052413	☐ Yes ☐ No	FL	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	40 cans	20 cans 222 Days on site ☒ 365	1 lb 223 Storage Container C	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other grams	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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3/28-1

CITY OF BERKELEY, TOXICS MANAGEMENT DIVISION
HAZARDOUS MATERIALS UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) IRONIES, INC. 3

CHEMICAL LOCATION 2222 5th St, Berkeley 201 | CHEMICAL LOCATION CONFIDENTIAL EPCRA 202 ☐ YES ☒ NO

FACILITY ID # D1 [redacted] 010 [redacted] 1 | MAP# (optional) 203 | GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205 | TRADE SECRET ☐ Yes ☐ No 206 (If Subject to EPCRA, refer to instructions)

COMMON NAME Oil base paint 207 | EHS* ☐ Yes ☐ No 208

CAS# 209 | *If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211 | RADIOACTIVE ☐ Yes ☐ No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214 | LARGEST CONTAINER 55 gal drum 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
N/A	N/A	1/2 drum	FL

UNITS* (Check one item only) ☑ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221 * If EHS, amount must be in pounds. | DAYS ON SITE: 365 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☑ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes ☐ No 228	229
2 230	231	☐ Yes ☐ No 232	233
3 234	235	☐ Yes ☐ No 236	237
4 238	239	☐ Yes ☐ No 240	241
5 242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

CITY OF BERKELEY, TOXICS MANAGEMENT DIVISION
HAZARDOUS MATERIALS UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: IRONIES INC

CHEMICAL LOCATION 201: 2222 5th st, BERKELEY | CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES ☒ NO

FACILITY ID # 1: 01 [redacted] 010 [redacted] | MAP# (optional) 203 | GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205 | TRADE SECRET 206: ☐ Yes ☒ No (If Subject to EPCRA, refer to instructions)

COMMON NAME 207: FIBER glass - Spray Booth filter | EHS* 208: ☐ Yes ☐ No

CAS# 209 | *If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE | RADIOACTIVE 212: ☐ Yes ☒ No | CURIES 213

PHYSICAL STATE (Check one item only) 214: ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS | LARGEST CONTAINER 215: 55 gal / drum

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
N/A	N/A	3 drums	F.S

UNITS* (Check one item only) 221: ☑ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS (* If EHS, amount must be in pounds.) | DAYS ON SITE: 222: 365

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☑ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes ☐ No 228	229
2	230	231	☐ Yes ☐ No 232	233
3	234	235	☐ Yes ☐ No 236	237
4	238	239	☐ Yes ☐ No 240	241
5	242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

Hazardous Materials Inventory - Chemical Description

You must complete a separate Hazardous Materials Inventory - Chemical Description page for each hazardous material (hazardous substances and hazardous waste) that you handle at your facility in aggregate quantities equal to or greater than 500 pounds, 55 gallons, 200 cubic feet of gas (calculated at standard temperature and pressure) or the federal threshold planning quantity for Extremely Hazardous Substances, whichever is less. Also complete a page for each radioactive material handled over quantities for which an emergency plan is required to be adopted pursuant to 10 CFR Parts 30, 40, or 70. The completed inventory should reflect all reportable quantities of hazardous materials at your facility, reported **separately** for each building or outside adjacent area, with **separate** pages for unique occurrences of physical state, storage temperature and storage pressure. (Note: the numbering of the instructions follows the data element numbers that are on the Unified Program Consolidated Form (UPCF) pages. These data element numbers are used for electronic submission and are the same as the numbering used in Division 3, Electronic Submittal of Information.) Please number all pages of your submittal. This helps your CUPA or AA identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER - This number is assigned by the CUPA or AA. This is the unique number which identifies your facility.
3. BUSINESS NAME - Enter the full legal name of the business.
200. ADD/DELETE/ REVISE - Indicate if the material is being added to the inventory, deleted from the inventory, or if the information previously submitted is being revised. NOTE: You may choose to leave this blank if you resubmit your entire inventory annually.
201. CHEMICAL LOCATION - Enter the building or outside/ adjacent area where the hazardous material is handled. A chemical that is stored at the same pressure and temperature, in multiple locations within a building, can be reported on a single page. NOTE: This information is not subject to public disclosure pursuant to HSC §25506.
202. CHEMICAL LOCATION CONFIDENTIAL - EPCRA - All businesses which are subject to the Emergency Planning and Community Right to Know Act (EPCRA) must check "Yes" to keep chemical location information confidential. If the business does not wish to keep chemical location information confidential check "No".
203. MAP NUMBER - If a map is included, enter the number of the map on which the location of the hazardous material is shown.
204. GRID NUMBER - If grid coordinates are used, enter the grid coordinates of the map that correspond to the location of the hazardous material. If applicable, multiple grid coordinates can be listed.
205. CHEMICAL NAME - Enter the proper chemical name associated with the Chemical Abstract Service (CAS) number of the hazardous material. This should be the International Union of Pure and Applied Chemistry (IUPAC) name found on the Material Safety Data Sheet (MSDS). NOTE: If the chemical is a mixture, do not complete this field; complete the ACOMMON NAME" field instead.
206. TRADE SECRET - Check "Yes" if the information in this section is declared a trade secret, or "No" if it is not.
State requirement: If yes, and business is not subject to EPCRA, disclosure of the designated trade secret information is bound by HSC §25511.
Federal requirement: If yes, and business is subject to EPCRA, disclosure of the designated Trade Secret information is bound by 40 CFR and the business must submit a "Substantiation to Accompany Claims of Trade Secrecy" form (40 CFR 350.27) to USEPA.
207. COMMON NAME - Enter the common name or trade name of the hazardous material or mixture containing a hazardous material.
208. EHS - Check "Yes" if the hazardous material is an Extremely Hazardous Substance (EHS), as defined in 40 CFR, Part 355, Appendix A. If the material is a mixture containing an EHS, leave this section blank and complete the section on hazardous components below.
209. CAS # - Enter the Chemical Abstract Service (CAS) number for the hazardous material. For mixtures, enter the CAS number of the mixture if it has been assigned a number distinct from its components. If the mixture has no CAS number, leave this column blank and report the CAS numbers of the individual hazardous components in the appropriate section below.
210. FIRE CODE HAZARD CLASSES - Fire Code Hazard Classes describe to first responders the type and level of hazardous materials which a business handles. This information shall only be provided if the local fire chief deems it necessary and requests the CUPA or AA to collect it. A list of the hazard classes and instructions on how to determine which class a material falls under are included in the appendices of Article 80 of the Uniform Fire Code. If a material has more than one applicable hazard class, include all. Contact CUPA or AA for guidance.
211. HAZARDOUS MATERIAL TYPE - Check the one box that best describes the type of hazardous material: pure, mixture or waste. If waste material, check only that box. If mixture or waste, complete hazardous components section.
212. RADIOACTIVE - Check "Yes" if the hazardous material is radioactive or "No" if it is not.
213. CURIES - If the hazardous material is radioactive, use this area to report the activity in curies. You may use up to nine digits with a floating decimal point to report activity in curies.
214. PHYSICAL STATE - Check the one box that best describes the state in which the hazardous material is handled: solid, liquid or gas.
215. LARGEST CONTAINER - Enter the total capacity of the largest container in which the material is stored.
216. FEDERAL HAZARD CATEGORIES - Check all categories that describe the physical and health hazards associated with the hazardous material.

PHYSICAL HAZARDS	HEALTH HAZARDS
Fire: Flammable Liquids and Solids, Combustible Liquids, Pyrophorics, Oxidizers	**Acute Health (Immediate):** Highly Toxic, Toxic, Irritants, Sensitizers, Corrosives, other hazardous chemicals with an adverse effect with short term exposure
Reactive: Unstable Reactive, Organic Peroxides, Water Reactive, Radioactive	
Pressure Release: Explosives, Compressed Gases, Blasting Agents	**Chronic Health (Delayed):** Carcinogens, other hazardous chemicals with an adverse effect with long term exposure

217. AVERAGE DAILY AMOUNT - Calculate the average daily amount of the hazardous material or mixture containing a hazardous material, in each building or adjacent/ outside area. Calculations shall be based on the previous year's inventory of material reported on this page. Total all daily amounts and divide by the number of days the chemical will be on site. If this is a material that has not previously been present at this location, the amount shall be the average daily amount you project to be on hand during the course of the year. This amount should be consistent with the units reported in box 221 and should not exceed that of maximum daily amount.
218. MAXIMUM DAILY AMOUNT - Enter the maximum amount of each hazardous material or mixture containing a hazardous material, which is handled in a building or adjacent/outside area at any one time over the course of the year. This amount must contain at a minimum last year's inventory of the material reported on this page, with the reflection of additions, deletions, or revisions projected for the current year. This amount should be consistent with the units reported in box 221.
219. ANNUAL WASTE AMOUNT - If the hazardous material being inventoried is a waste, provide an estimate of the annual amount handled.
220. STATE WASTE CODE - If the hazardous material is a waste, enter the appropriate California 3-digit hazardous waste code as listed on the back of the Uniform Hazardous Waste Manifest.
221. UNITS - Check the unit of measure that is most appropriate for the material being reported on this page: gallons, pounds, cubic feet or tons. NOTE: If the material is a federally defined Extremely Hazardous Substance (EHS), all amounts must be reported in pounds. If material is a mixture containing an EHS, report the units that the material is stored in (gallons, pounds, cubic feet, or tons).
222. DAYS ON SITE - List the total number of days during the year that the material is on site.
223. STORAGE CONTAINER - Check all boxes that describe the type of storage containers in which the hazardous material is stored. NOTE: If appropriate, you may choose more than one.
224. STORAGE PRESSURE - Check the one box that best describes the pressure at which the hazardous material is stored.
225. STORAGE TEMPERATURE - Check the one box that best describes the temperature at which the hazardous material is stored.
226. HAZARDOUS COMPONENTS 1-5 (% BY WEIGHT) - Enter the percentage weight of the hazardous component in a mixture. If a range of percentages is available, report the highest percentage in that range. (Report for components 2 through 5 in 230, 234, 238, and 242.)
227. HAZARDOUS COMPONENTS 1-5 NAME - When reporting a hazardous material that is a mixture, list up to five chemical names of hazardous components in that mixture by percent weight (refer to MSDS or, in the case of trade secrets, refer to manufacturer). All hazardous components in the mixture present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, should be reported. If more than five hazardous components are present above these percentages, you may attach an additional sheet of paper to capture the required information. When reporting waste mixtures, mineral and chemical composition should be listed. (Report for components 2 through 5 in 231, 235, 239, and 243.)
228. HAZARDOUS COMPONENTS 1-5 EHS - Check "Yes" if the component of the mixture is considered an Extremely Hazardous Substance as defined in 40 CFR, Part 355, or "No" if it is not. (Report for components 2 through 5 in 232, 236, 240, and 244.)
229. HAZARDOUS COMPONENTS 1-5 CAS - List the Chemical Abstract Service (CAS) numbers as related to the hazardous components in the mixture. (Repeat for 2-5.)
246. LOCALLY COLLECTED INFORMATION - This space may be used by the CUPA or AA to collect any additional information necessary to meet the requirements of their individual programs. Contact the CUPA or AA for guidance.

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St, Berkeley | 200 Add ☐ Revise ☒ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
B8	FIBERGLASS SPRAY BOOTH FILTER	☐ Same as first column ---		☐ Yes ☐ No	FS	☒ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum	55 gal drum 222 Days on site: ☒ 365	55 gal drum 223 Storage Container: SD	3 220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
B8	OIL BASED PAINT WASTE	☐ Same as first column ---		☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum	55 gal drum 222 Days on site: ☒ 365	55 gal drum 223 Storage Container: SD	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column ---		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive		222 Days on site: ☐ 365	223 Storage Container	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☐ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column ---		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive		222 Days on site: ☐ 365	223 Storage Container	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☐ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

3/28-11

Hazardous Waste Inventory Spreadsheet

(Modified UPCF Hazardous Materials Inventory – Chemical Description Page)

You must complete a Hazardous Waste Inventory Spreadsheet for all hazardous wastes that you handle at your facility. The completed inventory should reflect all quantities of hazardous wastes at your facility, reported **separately** for each building or outside adjacent area, with **separate** pages for unique occurrences of physical state, storage temperature and storage pressure.

Please number all pages of your submittal. This helps your CUPA identify whether the submittal is complete and if any pages are separated. Alternatively, you may report your hazardous wastes on the Hazardous Materials Inventory – Chemical Description page.

3. BUSINESS NAME - Enter the full legal name of the business.
200. ADD/DELETE/ REVISE - Indicate if the waste is being added to the inventory, deleted from the inventory, or if the information previously submitted is being revised. NOTE: You may choose to leave this blank if you resubmit your entire inventory annually.
201. CHEMICAL LOCATION - Enter the building or outside/ adjacent area where the hazardous waste is handled. A chemical that is stored at the same pressure and temperature, in multiple locations within a building, can be reported on a single page. NOTE: This information is not subject to public disclosure pursuant to HSC Section 25506.
202. CHEMICAL LOCATION CONFIDENTIAL - EPCRA - All businesses which are subject to the Emergency Planning and Community Right to Know Act (EPCRA) must check "Yes" to keep chemical location information confidential. If the business does not wish to keep chemical location information confidential check "No".
203. MAP NUMBER - If a map is included, enter the number of the map on which the location of the hazardous waste is shown.
204. GRID NUMBER - If grid coordinates are used, enter the grid coordinates of the map that correspond to the location of the hazardous waste. If applicable, multiple grid coordinates can be listed.
205. WASTE STREAM NAME - Enter the waste stream name. NOTE: If the waste is a mixture, do not complete this field; complete the "COMMON NAME" field instead.
206. TRADE SECRET - Check "Yes" if the information in this section is declared a trade secret, or "No" if it is not.
    State requirement: If yes, and business is not subject to EPCRA, disclosure of the designated trade secret information is bound by HSC Section25511.
    Federal requirement: If yes, and business is subject to EPCRA, disclosure of the designated Trade Secret information is bound by 40 CFR and the business must submit a "Substantiation to Accompany Claims of Trade Secrecy" form (40 CFR 350.27) to USEPA.
207. COMMON NAME - Enter the common name or trade name of the hazardous waste or mixture containing a hazardous waste.
208. EHS - Check "Yes" if the hazardous waste is an Extremely Hazardous Substance (EHS), as defined in 40 CFR, Part 355, Appendix A. If the waste is a mixture containing an EHS, leave this section blank and complete the section on hazardous components below.
209. CAS # - Enter the Chemical Abstract Service (CAS) number for the hazardous waste. For mixtures, enter the CAS number of the mixture if it has been assigned a number distinct from its components. If the mixture has no CAS number, leave this column blank and report the CAS numbers of the individual hazardous components in the appropriate section below.
210. FIRE CODE HAZARD CLASSES – Enter the fire codes hazard classes for each hazardous waste. Fire Code Hazard Classes describe to first responders the type and level of hazardous materials which a business handles. See the key at the bottom of the spreadsheet. A list of the hazard classes and instructions on how to determine which class a material falls under are included in the appendices of Article 80 of the Uniform Fire Code. If a waste has more than one applicable hazard class, include all. Contact CUPA or AA for guidance.
211. HAZARDOUS MATERIAL TYPE – This has been completed for you. If waste, complete hazardous components section.
212. RADIOACTIVE - Check the box if the hazardous material is radioactive.
213. CURIES - If the hazardous waste is radioactive, please report the activity in curies in the max daily quantity stored box. You may use up to nine digits with a floating decimal point to report activity in curies.
214. PHYSICAL STATE - Check the one box that best describes the state in which the hazardous waste is handled: solid, liquid or gas.
215. LARGEST CONTAINER - Enter the total capacity of the largest container in which the waste is stored.
216. FEDERAL HAZARD CATEGORIES - Check all categories that describe the physical and health hazards associated with the hazardous waste.

PHYSICAL HAZARDS

Fire: Flammable Liquids and Solids, Combustible Liquids, Pyrophorics, Oxidizers

Reactive: Unstable Reactive, Organic Peroxides, Water Reactive, Radioactive

Pressure Release: Explosives, Compressed Gases, Blasting Agents

HEALTH HAZARDS

Acute Health (Immediate): Highly Toxic, Toxic, Irritants, Sensitizers, Corrosives, other hazardous chemicals with an adverse effect with short term exposure

Chronic Health (Delayed): Carcinogens, other hazardous chemicals with an adverse effect with long term exposure

217. AVERAGE DAILY AMOUNT - Calculate the average daily amount of the hazardous waste, in each building or adjacent/ outside area. Calculations shall be based on the previous year's inventory of waste reported on this page. Total all daily amounts and divide by the number of days the chemical will be on site. If this is a waste that has not previously been present at this location, the amount shall be the average daily amount you project to be on hand during the course of the year. This amount should be consistent with the units reported in box 221 and should not exceed that of maximum daily amount.
218. MAXIMUM DAILY AMOUNT - Enter the maximum amount of each hazardous waste, which is handled in a building or adjacent/outside area at any one time over the course of the year. This amount must contain at a minimum last year's inventory of the waste reported on this page, with the reflection of additions, deletions, or revisions projected for the current year. This amount should be consistent with the units reported in box 221.
219. ANNUAL WASTE AMOUNT - Provide an estimate of the annual amount handled.
220. STATE WASTE CODE - Enter the appropriate California 3-digit hazardous waste code as listed on the back of the Uniform Hazardous Waste Manifest.
221. UNITS - Check the unit of measure that is most appropriate for the waste being reported on this page: gallons, pounds, cubic feet or tons. NOTE: If the material is a federally defined Extremely Hazardous Substance (EHS), all amounts must be reported in pounds. If material is a mixture containing an EHS, report the units that the material is stored in (gallons, pounds, cubic feet, or tons).
222. DAYS ON SITE - List the total number of days during the year that the waste is on site.
223. STORAGE CONTAINER – Enter the storage container codes that describe the type of storage containers in which the hazardous material is stored. NOTE: If appropriate, you may choose more than one. Refer to the key at the bottom of the spreadsheet.
224. STORAGE PRESSURE - Check the one box that best describes the pressure at which the hazardous waste is stored.
225. STORAGE TEMPERATURE - Check the one box that best describes the temperature at which the hazardous waste is stored.
226. HAZARDOUS COMPONENTS 1-5 (% BY WEIGHT) - Enter the percentage weight of the hazardous component in a mixture. If a range of percentages is available, report the highest percentage in that range. (Report for components 2 through 5 in 230, 234, 238, and 242.)
227. HAZARDOUS COMPONENTS 1-5 NAME - When reporting a hazardous waste that is a mixture, list up to five chemical names of hazardous components in that mixture by percent weight (refer to MSDS or, in the case of trade secrets, refer to manufacturer). All hazardous components in the mixture present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, should be reported. If more than five hazardous components are present above these percentages, you may attach an additional sheet of paper to capture the required information. When reporting waste mixtures, mineral and chemical composition should be listed. (Report for components 2 through 5 in 231, 235, 239, and 243.)
228. HAZARDOUS COMPONENTS 1-5 EHS - Check "Yes" if the component of the mixture is considered an Extremely Hazardous Substance as defined in 40 CFR,
    Part 355, or "No" if it is not. (Report for components 2 through 5 in 232, 236, 240, and 244.)
229. HAZARDOUS COMPONENTS 1-5 CAS - List the Chemical Abstract Service (CAS) numbers as related to the hazardous components in the mixture. (Repeat for 2-5.)

DRAFT

FILTER RECYCLING SERVICES INC

P.O. Box 449
Colton, CA 92324-0449
1-800-698-4377

"PRESERVING OUR NATURAL RESOURCES"

DATE	INVOICE NUMBER
July 13, 2010	134471N
CUSTOMER NUMBER	

CUSTOMER NAME	PHONE NO.	BILL TO	PHONE NO.
IRONIES	510-644-2100	SAME	
SITE ADDRESS		BILLING ADDRESS	
2222 FIFTH ST			
CITY / STATE / ZIP		CITY / STATE / ZIP	
BERKELEY, CA 94710			

SALES REP.	SITE CONTACT	C.O.D.	ON ACCOUNT	PURCHASE ORDER NO.	BILLING CONTACT	REQUESTED BY

QUANTITY	MATERIAL DESCRIPTION	MANIFEST NO.	UNIT PRICE	TOTAL PRICE

DRAFT

FACILITY NAME:	Filter Recycling Services, Inc.	DRIVER START TIME:	
ADDRESS:	180 West Monte Avenue	TIME LEFT YARD:	11:00Am
	Bloomington, CA 92316	JOB START TIME:	11:30Am
EPA ID NUMBER:	CAD982444481	JOB END TIME:	
VER'S SIGNATURE:	[illegible] - #369	DRIVER END TIME:	

It is the Generator's responsibility to correctly identify chemical composition.
If material is rejected by disposal site, generator agrees to pay all testing, disposal & transportation charges.
Invoice is subject to a 1.5% monthly interest rate, on past due amount.

RECEIVED BY:	Jose Manuel Reyn	PRINT NAME:	Jose Manuel Reyn

Subtotal	
TOTAL ▶	

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Waste Tracking Number
CAL000230179	1	(925) 231-2000	[illegible]

GENERATOR

5. Generator's Name and Mailing Address
IRONHILL
2222 FIFTH ST
BERKELEY CA 94710
Generator's Phone: 510 841 2100

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: ENVIRONMENTAL LOGISTICS INC
U.S. EPA ID Number: CAD000[illegible]

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: PETER MOTT LANDFILL INC
180 WEST MONTE AVENUE
MANTECA CA 95336-9604
Facility's Phone: 209 825 1377
U.S. EPA ID Number: CAD982446445

	9. Waste Shipping Name and Description	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	
1.	NON HAZARDOUS WASTE SOLID (SAFE BOOTH FEES)	001	DM	125	T	
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information
SAFE BOOTH FEES #050020[illegible] 1X55 WEIGH APPROPRIATE DOT PO# [illegible]

14. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name: Joe Manuel Rayon
Signature: Joe Manuel Rayon
Month: 7 Day: 13 Year: 10

INT'L

15. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter Signature (for exports only): Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Marcial Barragan
Signature: [signature]
Month: 7 Day: 13 Year: 10

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

17c. Signature of Alternate Facility (or Generator)
Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name
Signature
Month Day Year

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NON – Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONITE | Business Address: 2222 5th street Berkley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
Store Room	Raw Umber	☐ Same as first column ted Iron Oxide raw umber		☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	7 gram/gal 85 different bottles	5.8 gr/gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	Yellow IRON Oxide	☐ Same as first column IRON Oxide		☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5 gr/gal 91 different bottles	3.13 gram/gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	ORANG IRON OXide	☐ Same as first column Iron oxide. Fe 2O3		☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	4 gram per gal 53 different bottles	2.4gr per gal. 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Store Room	Chromium Oxide green.	☐ Same as first column chromic oxide C 2O3		☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5 grams per gal. 42 different bottles	3.6gr per gal 222 Days on site: ☒ 365	1 gal. 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

DRAFT

3/28-1

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
Stone Room	Ultramarine Blue	☐ Same as first column Sodium Aluminum Selpho Silicate	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	10 grams per gal 29 different bottles	6.7gr per gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Medium Red	☐ Same as first column IRON Oxide Fe 203	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	8.7gr per gal 13 different bottles	8.7 gram per gallon 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Carbon Black	☐ Same as first column Carbon Black. Water 15-20% Sunfat	1333-86-4	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5.5gm per gal 23 different containers	5.5 gram per gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Burnt Sienna	☐ Same as first column IRON Oxide (Fe 203) Silica dioxide. aluminum oxide. Fe203, SiO2, Al203	1309-37-1	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	14 gram/gal 3 different cont	14 gram per gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

3/28-11

Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☐ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☐ No | If EPCRA, please sign here:

3 Business Name: RONIES | Business Address: 2222 5th St Berkely | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
Stone Room	Venetian Red	☐ Same as first column IRON OXIDE FE 203	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	7.5 gram per gal / 7.3 gram per gal / 1 gal 7 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Cadmium medium Red	☐ Same as first column Cadmium Sulfide Cadmium Selenide Barium Sulfate Zinc Sulfide	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	15 gram per gal / 15 gram per gal / 1 gal 1 Bottle / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Cobalt Yellow	☐ Same as first column Cobalt Oxide Potassium	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	0.25 gram per gal / 0.25gr per gal / 1 gal 2 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Stone Room	Cadmium medium light Red	☐ Same as first column Cadmium Sulfide Cadmium Selenide Barium Sulfate Zinc Sulfide	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	35 grams per gal / 35 grams per gal / 1 gal 1 Bottle / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

3/28-6

UNIVERSAL WASTE GENERATOR REPORTING FORM

Facility Name: IRONIES INC.

Facility Address: 2222 5th St, BERKELEY, CA 94710

Reporting Period: calendar year 2010 (January 1 through December 31, 2010)

Report all quantities of the following Universal Wastes (UWs):	**Annual UW Generation** (in pounds)
1. Electronic devices (e.g. cell phones, televisions, VCRs, computer CPUs, portable DVD players)	80 lbs
2. Batteries (all batteries except auto, including AAA, AA, A, C, D, 9-volt, silver button cell, alkaline, nickel-cadmium, rechargeable)	2 lbs
3. Mercury-containing equipment (e.g. dental amalgam, mercury switches, mercury-added novelties, counterweights, thermostats)	
4. Electric lamps (fluorescent tubes and bulbs, high-intensity discharge lamps, sodium vapor lamps)	50 LF
Fluorescent tubes and bulbs [report in linear feet]	
5. CRTs [cathode ray tubes] (glass picture tubes removed from televisions, monitors)	
6. CRT glass (cathode ray tube, broken or processed for recycling)	
7. Non-empty aerosol cans	
8. Other	
Annual Throughput - Total Pounds:	82 lbs
Annual Throughput - Total Linear Feet:	50 LF

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Universal wastes represent a serious potential health hazard due to significant amounts of arsenic, beryllium, cadmium, copper, lead, mercury, nickel, zinc and other materials.

For detailed requirements on Universal Waste handling and management requirements please refer to the California Department of Toxics Substances Control (DTSC) website at:

http://www.dtsc.ca.gov/HazardousWaste/UniversalWaste/upload/UW_Factsheet1.pdf

Universal Wastes may not be disposed of in the trash!

FACILITY SITE PLAN/STORAGE MAP INSTRUCTIONS

A facility site plan and storage map must be included with your HMBP. The facility maps are intended to aid firefighters in the event of fires or other disasters. The maps should be clearly drawn and legible. The symbol library must be used to locate all safety items, hazardous materials storage areas and shutoffs, monitors and alarms as they are meaningful to the emergency responders that will be responding in the case of an emergency. A blank *Facility Site Plan/Storage Map* has been provided. You may complete that page or attach any other drawing(s) which contain(s) the information required below.

- For relatively small facilities, these documents may be combined into one drawing.
- Large facilities should provide an overall Site Plan and a separate Storage Map for each building or area.

1. **Facility Site Plan:** This drawing shall contain, <u>at a minimum</u>, the following information:

    a. North direction arrow;
    b. Approximate scale (*e.g. 1" = 10 feet*);
    c. Locations and names of adjacent streets and alleys;
    d. Locations of all buildings, other structures and adjacent properties;
    e. Parking lots and internal access roads;
    f. Outside hazardous materials storage areas;
    g. Storm and sewer drains;
    h. Primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas;
    i. Loading areas.

2. **Storage Map(s):** The map(s) shall contain, <u>at a minimum</u>, the following information:

    a. North direction arrow;
    b. Approximate scale (*e.g. 1" = 10 feet*);
    c. General purpose of each area within each building (*e.g. "Office Area", "Manufacturing Area", etc.*);
    d. Location of each hazardous material / waste storage, dispensing, use, or handling area (*e.g. underground tanks, aboveground tanks, storage rooms, etc.*);
    e. Entrances to and exits from each building and hazardous material/waste room or area;
    f. Location of each utility emergency shut-off point (*i.e. gas, water, electric*);
    g. Location of emergency response and safety equipment including eye wash stations, emergency showers, fire extinguishers and first aid kits;
    h. Location of each monitoring control panel (underground tank monitoring, toxic gas monitoring, fire alarm, etc.).

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SYMBOL LIBRARY

Use the following symbols to locate features on the site and facility maps. These must be used on the facility site plan/storage map(s) because they are meaningful to the emergency responders that will be responding in the case of an emergency. If you add additional symbol items on the map(s), provide an explanation of those symbols below.

SAFETY ITEMS

- FE — Fire Extinguisher
- H — Fire Hydrant
- S — Spill Equipment
- Eye Wash Station
- First Aid Kit
- Sanitary Sewer
- Storm Drain
- Staging — Staging Area
- AS — Sprinkler System Connection
- Standpipe Connection
- MSDS — Materials Safety Data Sheet
- K — Knox Box (Fire Department Key Box)

HAZMAT STORAGE

- UST — Underground Tank
- AST — Aboveground Tank
- HazMat Storage Area (assign a number, letter, or name to area)

SHUTOFFS/MONITORS/ALARMS

- W — Water Shutoff
- E — Electrical Shutoff
- G — Natural Gas Shutoff
- ESO — Emergency Shutoff
- PANEL — Monitoring System Or Fire Alarm Panel

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ADDITIONAL SYMBOLS

Symbol	Description

Emergency Response Plan/Contingency Plan

The following items are elements of a comprehensive emergency response plan/contingency plan that meets state requirements. If your facility has a written plan, or if you are to prepare one, make sure all the elements listed are covered by your plan. Small facilities with simple operations may complete the boxes below to be in compliance with the written emergency plan requirement. Please submit a copy of your written response plan or complete and submit this form.

I. Facility Information

Facility Name: IRONIES	Phone: 510-644-2106
Address: 2222 5th street	
City: Berkeley	Zip: CA 94710

II. Emergency Coordinators

Primary Coordinator	Secondary Coordinator
Name: KIAT TONG	Name: Robert CYR
Title: MANAGER	Title: Director of operation
Work Phone: 510-644-2100	Work Phone: 510-644-2100
After hours Phone: 415-939-6460	After hours Phone: 510-418-8534
Pager: N/A	Pager: N/A

III. Emergency Telephone Numbers and Arrangements

The emergency coordinator shall immediately notify the following whenever a release, fire, or explosion threatens human health or the environment:

Agency	Phone
Fire Department	911
California Emergency Management Agency	(916) 845-8911
City of Berkeley Toxics Management Division	(510) 981-7460 or 911
Hospital/Medical Center (if injuries) US. Healthwork	(510) 845-5170
EBMUD Waste Water Treatment Facility (if to sewer)	(510) 287-1651
Hazardous Waste Contractor (if clean up needed)	
Bay Area Air Quality Management District	(800) 334-6367
Other agencies:	

Arrangements: (Please check one box)

- ☑ We have no formalized written agreements with any emergency response agency or contractor.
- ☐ We have formalized written agreements with _____

  Telephone: _____ for emergency response.

IV. Earthquake Response

Identify the areas and/or mechanical equipment or other systems that could require immediate inspection or isolation because of their vulnerability to earthquake related ground motion.

Areas/equipment identified to be inspected immediately after an earthquake:	FIRE sprinkle System

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V. Emergency Equipment Inventory Table

EQUIPMENT CATEGORY	✓ if these are provided	Equipment	Location*	Description**
Personal Protective Equipment, Safety Equipment, First Aid Equipment	✓	Chemical Protective Boots		
	✓	Chemical Protective Gloves		
	✓	Safety Glasses/Goggles/Face shields		
	✓	Chemical Protective Clothing		
		Hard Hats		
		Chemical Monitoring Equipment (describe)		
	✓	First Aid Kits		
	✓	Eye Wash Stations		
	✓	Safety Showers		
	✓	Cartridge Respirators and Cartridges (describe)		
		Self-Contained Breathing Apparatus (SCBA)		
		Other (describe)		
Fire Extinguishing Systems	✓	Fire Extinguishers		
	✓	Automatic Fire Systems		
		Fire Alarm Boxes		
Spill Control Equipment, Decontamination Equipment		Absorbents, Neutralizers (describe)		
		Shovels/Brooms/Squeegees		
		Overpack drum/Spill drum		
		Berms/Dikes (describe)		
		Decontamination Equipment (describe)		
		Gas cylinder leak repair kits (describe)		
		Other (describe)		
Communications and Alarm Systems	✓	Telephones		
		Intercoms/PA systems		
		Portable 2 way radios		
		UST leak detection monitors		
		Chemical alarms (describe)		
Additional Equipment (Use additional pages if needed)				

* If appropriate, use the location code(s) from your Hazardous Materials Business Plan.

** Describe the equipment, such as type and quantity, and its capabilities. If applicable, specify any testing/maintenance procedures/intervals.

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VI. Evacuation Information:

Evacuation Announcement	☐ Bell ☐ PA System Other _____ ☐ Horn ☑ Shouting
Evacuation Route	☑ Map Other ✓
Assembly Area	Location: Parking lot, across the street from the OFFICE
Re-entry Procedures	

VII. Emergency Procedures:

Emergency Coordinator Responsibilities:

1. Whenever there is an imminent or actual emergency situation such as a explosion, fire, or release, the emergency coordinator *(or his/her designee when the emergency coordinator is on call)* shall:
   a. Identify the character, exact source, amount, and aerial extent of any released hazardous materials.
   b. Assess possible hazards to human health or the environment that may result from the explosion, fire, or release. This assessment must consider both direct and indirect effects *(e.g. the effects of any toxic, irritating, or asphyxiating gases that are generated, the effects of any hazardous surface water run-off from water or chemical agents used to control fire, etc.)*.
   c. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
   d. Notify appropriate local authorities *(i.e., call 911)*.
   e. Notify the State Office of Emergency Services at 1-800-852-7550.
   f. Monitor for leaks, pressure build-up, gas generation, or ruptures in valves, pipes, or other equipment shut down in response to the incident.
   g. Take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous materials at the facility.

2. Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall:
   a. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from a explosion, fire, or release at the facility.
   b. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.
   c. Ensure that all emergency equipment is cleaned, fit for its intended use, and available for use.
   d. Notify the Cal/EPA's Department of Toxic Substances Control and the City of Berkeley Toxics Management Division that the facility is in compliance with requirements 2-a and 2-b, above.

Special site specific procedures:

Emergency	Response Action
Hazardous Material & Hazardous Waste Spills/Releases:	
Fire	
Explosion	
Earthquake	
Other	

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Employee Training Plan

1. Scope

This plan is designed to provide employees with training on hazardous materials and hazardous waste that will satisfy the requirements of the California Health and Safety Code Chapter 6.95 and Chapter 6.5.

Facility Name:	IRONIES
Address:	2222 5th Street, Berkeley, CA 94806
Main Activity:	
Building or Areas where hazardous materials/wastes are found:	PAINT ROOM

2. Responsibilities

The following persons are responsible for ensuring that this Training Plan is implemented:

Name/Title	Training Responsibility
KIAT TONG	initial / refresher training, work safety
Rye ALLen / maintenance	FIRE safety & Emergency evacuation

3. Employees/New Employees

New employees are trained during orientation, before starting on a job? ☑ YES ☐ NO

New employees who handle hazardous waste are trained in hazardous waste management within six months of hire date? ☑ YES ☐ NO

4. New Assignments or Changes in Operations

In the event of new assignments or of changes in operation, affected employees are trained before the new assignment or the change in operation takes place. ☑ YES ☐ NO

5. Refresher Training

Refresher training will be provided informal (how often). The method used will be: *(check all that apply)*

- ☐ Outside classes
- ☑ In-house classes provided by contractor BEST FIRE by Bryan ROSANO
- ☑ Safety meetings
- ☐ In-house classes conducted by in-house trainers

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6. Training Topics

The following table indicates the training topics covered for this facility, as indicated with a ☑. Other documentation on these training topics is maintained and are available to the inspector upon request.

All employees are trained to do the following procedures, as appropriate:	
❑	1. Initiate, activate, or recognize internal alarms and other emergency announcements.
❑	2. Notify internal or on-site emergency responders listed in the emergency response/contingency plan.
❑	3. Notify agencies listed in the emergency/contingency plan.
❑	4. Locate and review contents of written emergency response/contingency plan.
❑	5. Initiate, conduct, or follow evacuation procedures as described in the emergency response/contingency plan.
Hazardous materials/waste handlers are additionally trained in the following subjects:	
❑	1. Safe methods for handling and storage of hazardous materials and hazardous waste.
❑	2. Locations and proper use of personal protective equipment.
❑	3. Locations and proper use of fire and spill control equipment.
❑	4. Specific hazards of each chemical or waste to which they may be exposed, including the pathways of exposure (i.e. skin absorption, inhalation, ingestion).
❑	5. Follow emergency procedures for chemical/waste spills, earthquake, fire, and/or medical emergencies as described in the emergency response/contingency plan.
❑	6. Hazardous waste handlers/managers are also trained in all aspects of hazardous waste management specific to their job duties (e.g. accumulation time, storage period, labels, inspection of containers and storage areas, uniform hazardous waste manifests, etc.)

7. Emergency Response Team

This facility has a formally organized Emergency Response Team. ❑ YES ❑ NO

Emergency Response Team members are additionally trained for the following activities:	
❑	1. Personnel rescue procedures.
❑	2. Shutdown of operations.
❑	3. Liaison with emergency response agencies.
❑	4. Use, maintenance, and replacement of emergency response equipment.
❑	5. Emergency response drills are conducted, at least *(specify frequency)* [ ] times a year.
❑	6. Refresher training is provided, at least annually.

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8. Recordkeeping

Employee training and other records are maintained at the facility. These include the following:

☑	1. Record of training for each employee (date and duration of training, subject matter covered, instructor, etc.).
☑	2. Training records of current and former employees. (For current employees, records are to be retained until closure of the facility. For former employees, training records are to be retained for at least 3 years after termination of employment.
☑	3. Description of introductory and continuing training programs for each employee classification.
☐	4. Current emergency response, contingency, and/or spill response plan (for underground or aboveground tanks).
☑	5. Description and documentation of emergency response drills.
☐	6. Record of reportable/recordable accidental releases of hazardous material/waste.
☑	7. Record of inspections of hazardous material/waste storage areas.
☐	8. Record of daily inspection of hazardous waste tanks.
☐	9. Inspection procedures for identified earthquake-sensitive areas and systems in the facility.

Note: *The above list does not necessarily include every type of record required to be maintained by your facility.*

Training records are maintained in the following location: _____.

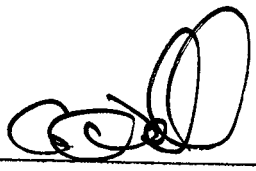
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TRAINING RECORD - INITIAL TRAINING

DATE: 9/24/2010

PLACE: Berkeley

TRAINER: Kiat Tjoa

TRAINEE NAME: Chris O'Neill SIGNATURE: 

TRAINEE TITLE: upholstery

PURPOSE FOR TRAINING:

✓ New employee

___ New/modified equipment, operation. Describe:

TOPICS COVERED:

✓ Methods of safe handling of hazardous materials
✓ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

___ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- X Off-site transportation requirements
- ✓ Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- ___ Key parameters for automatic waste feed cut off systems (if applicable)
- X Response to ground water contamination incidents (if applicable)
- ___ Shutdown of operations (if applicable)

DRAFT

TRAINING RECORD - INITIAL TRAINING

DATE: 9/8/2010

PLACE: Berkeley

TRAINER: Kiat Tjong

TRAINEE NAME: Rolando Gross SIGNATURE: 

TRAINEE TITLE: Upholster

PURPOSE FOR TRAINING:

✓ New employee

___ New/modified equipment, operation. Describe:

TOPICS COVERED:

✓ Methods of safe handling of hazardous materials
✓ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

___ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- ✓ Off-site transportation requirements
- ✓ Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- ✓ Key parameters for automatic waste feed cut off systems (if applicable)
- ✓ Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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TRAINING RECORD - INITIAL TRAINING

DATE: 7·12·2010 NEW employee

PLACE: 2225 5th st. Berkeley

TRAINER: Kiat Tjong

TRAINEE NAME: Elin Zuleta SIGNATURE: Elin Zuleta

TRAINEE TITLE: Maintance tech.

PURPOSE FOR TRAINING:

✓ New employee

___ New/modified equipment, operation. Describe:

TOPICS COVERED:

✓ Methods of safe handling of hazardous materials
✓ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

___ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- ✓ Off-site transportation requirements
- ✓ Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- ✓ Key parameters for automatic waste feed cut off systems (if applicable)
- ✓ Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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Refresher.

TRAINING RECORD - ~~INITIAL~~ TRAINING

Upholstery

DATE: 7/12- 2010

PLACE: 2222 5th St Berkeley.

TRAINER: Kat Tong

TRAINEE NAME: _____ SIGNATURE: ✓

TRAINEE TITLE: ✓

PURPOSE FOR TRAINING:

X New employee

✓ New/modified equipment, operation. Describe:

TOPICS COVERED:

✓ Methods of safe handling of hazardous materials
✓ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

✓ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- ✓ Off-site transportation requirements
- ✓ Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- ✓ Key parameters for automatic waste feed cut off systems (if applicable)
- ✓ Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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TRAINING RECORD - REFRESHER TRAINING

DATE: 7/12 - 2010

PLACE: 2222 5th Street, Berkely

TRAINER: Kiat Tory

TRAINER SIGNATURE:

TRAINEE(S):

NAME	TITLE	SIGNATURE
Ricardo Rodriguez	uph	Ricardo Rodriguez
Gabriel Cruz	uph	Gabriel Cruz
Heriberto Reyes	uph	
Isabel Alvarado	uph	
DAVID RODRIGUEZ	upholstery	

TOPICS COVERED:

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TRAINING RECORD - REFRESHER TRAINING

DATE: 7/12/2016

PLACE: 2222 5th Street, Berkely

TRAINER: Kigi Tjong

TRAINER SIGNATURE:

TRAINEE(S):

NAME	TITLE	SIGNATURE
Dario Estrada	Uphostery	
JOSE SANCHEZ	UPhostery	SANCHEZ, JOSE
Elisa Rojas	Uplostery	
Gustavo Gutierrez	Upostery	

TOPICS COVERED:

DRAFT

Refresher.

TRAINING RECORD - ~~INITIAL~~ TRAINING

- Stone Room
- Paint Room
- Metal Shop
- Shipping

DATE: 7/12 - 2010

PLACE: 2222 5th St Berkeley

TRAINER: Rick Zyg

TRAINEE NAME: ✓ SIGNATURE: —

TRAINEE TITLE: ✓

PURPOSE FOR TRAINING:

☒ New employee

✓ New/modified equipment, operation. Describe:

TOPICS COVERED:

✓ Methods of safe handling of hazardous materials
✓ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

✓ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- ✓ Off-site transportation requirements
- ✓ Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- ✓ Key parameters for automatic waste feed cut off systems (if applicable)
- ✓ Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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TRAINING RECORD - REFRESHER TRAINING

DATE: 7/12-10

PLACE: 2222 5th St Berkely

TRAINER: Igal Tzor

TRAINER SIGNATURE:

TRAINEE(S):

NAME	TITLE	SIGNATURE
Jose de Jesus Rodriguez	paint Room	
Gilberto Calixto ANZO	Paint Room	Gilberto CA
Luis M F.	Shipping R.	
Yuri Mercado	Stonroom	
Jose Manuel Payan	paint Room	
Juan R. Trujillo	stone Room	Juan R Tru

TOPICS COVERED:

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TRAINING RECORD - REFRESHER TRAINING

DATE: 7/12 - 2010

PLACE: 2222 5th St Berkely, CA

TRAINER: Kiat Tong

TRAINER SIGNATURE:

TRAINEE(S):

NAME	TITLE	SIGNATURE
Roberto Garcia T	OLY	Roberto
Abner Suarez R	IRONIES	Abner Suarez R.
Ricardo Gutierrez	SHIPPIN	Ricardo Gutierrez
Riego Gutierrez	Metal	Riego Gutierrez
Daniel Lopez	OLY	Daniel Lopez
Ernesto Gutierrez	Metal	Ernesto Gutierrez

TOPICS COVERED:

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Manager Fire Safety and Emergency Action Plan Training 3/24/10 Sign in Form
Trainer: Rye Allen

Name:

MICHAEL MENDOZA
Jenny Ambrosio
Mark Gambino

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Fire Extinguisher Training 3/9-2010

Ricardo E M.
Gustavo Gutierrez Sanchez
Yuri Mercado
Jesus Rodriguez
Gilberto calixto
Diego Gutierrez
Heriberto Reyes
Elias Lopez
Jose SANCHEZ
Isabel Alvarado
Roberto Garcia
CHACON JOSE MANUEL RAYON

Danica Lopez
CHRIS MORRIS
Diana Gonzalez
Jen Kleppe
Ricardo Rodriguez
Gabriel Cruz
Vemetria Monroe
Kiat Tong
Javier Estrada.
ABNER SUAREZ
DAVID RODRIGUEZ
Isaac
Luis MI

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Bryan A. Rosano (Partner)
Best Equipment Company
? FIRE ?
EXTINGUISHER SALES & SERVICE
3101 San Pablo Avenue, Berkeley, CA (510) 652-9932
C# 510-772-6624

Training done by Bryan at BEST FIRE Equipment Co.

Emergency Action Plan

- Emergency escape procedures: In case of fire, follow designated safety route to nearest, safest exit indicated by emergency escape route. Evacuate in a safe, orderly manner being cautious of obstacles, danger, and other persons. Employees exiting from 5th street will gather in parking lot across the street from our building. Employees exiting from 4th street will walk around the block to 5th street and gather in the same parking lot across from our building.

- Procedure to account for all employees after evacuation: Supervisors are to count persons from their area and coordinate with other supervisors for an overall personnel count. If a supervisor is not present, a supervisor from another area will coordinate with the personnel for a person count. Highest level office manager will get person total from supervisors.

- Rescue and medical duties: Any injuries need to be addressed and reported to the company. If the injury is beyond standard first aid then injured person needs to be brought to the attention of emergency services.

- Means of reporting fires and other emergencies: call 911

- Contacts for plan info or explanation: Rye Allen 510 457 8260 ; Mike Mendoza 510 220 4969

- Trained persons to assist in safe and orderly evacuation: Warehouse supervisors

>>>>>Personnel List on Opposite Side<<<<<

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Emergency Evacuation
Personnel List for Warehouse Shops 3/3/10

	Everyone Accounted For (check line)
Upholstery: 9 people	✓✓
Ironies Shipping: 5 persons	✓
Oly Shipping: 3 people	✓
Paint Room: 3 people	✓
Stone Room: 3 people	✓
Iron Room: 2 people	✓

Personnel List for Warehouse Offices 3/3/10

4th st. Office: 11 people (with Brad and Kate)	✓
5th st. Office: 6 people	✓
Account & IT Office: 5 people	✓
Interns: 1 – 5 people (may vary)	✓

>>>Emergency Action Plan on Opposite Side<<<

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Just because fire extinguishers are located in the workplace does not mean that you are allowed to use them. **DON'T use fire extinguishers unless your employer has provided you with the necessary basic training.** Without proper training, you will not be able to use the extinguisher to effectively fight the fire and will be vulnerable to serious injury and even death.

Remember, your first priority in a fire is to make sure that anyone in immediate danger gets to safety—including you! **Whenever you smell smoke or see fire, act quickly—RACE!**

R – Rescue
A – Alert
C – Confine
E – Extinguish

R Is for Rescue

When a fire occurs, every second counts. A fire can double in size every 30 seconds. This means that a fire can grow more than a thousand-fold in five minutes! Any delay could be fatal to you and others.

When you smell smoke or see fire, [redacted] This might be the nearest exit or beyond the closest firewall or fire door.

All exit routes from buildings must be properly marked. Know at least two different routes to safety in the event of a fire, and keep these corridors and doorways clear and free from obstruction [redacted] **loors.** Remember that if the corridor fills with smoke, you may have to crawl out—could you find your way to safety if you had to crawl?

During evacuation, [redacted] Breathing them can render you unconscious and leave you at the mercy of the flames. Remember that all fires consume oxygen when they burn. Many fire fatalities result from suffocation due to a lack of oxygen.

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Follow these procedures to ensure your safety and the safety of others while you are evacuating to a safe area:

- [redacted] The safest air is near the floor.
- [redacted] yourself from smoke.
- If you come to a closed door, feel it with the back of your hand before [redacted]
- [redacted]



- Get away from billowing smoke and flames if your [redacted]
- Remain available so that a head count can be taken and you can give information, if necessary, to firefighters about the location and [redacted]

If your clothes catch on fire, DON'T panic and run! Running to a shower or fire blanket will only fan the flames and aggravate the situation. Instead, **cover your face with your hands and [redacted] on the ground to extinguish the flames.**

A Is for Alert

[redacted] which will alert the fire department to respond, and also alert other employees and visitors that there is an emergency in the building.

Your employer should establish an employee alarm system as part of its Emergency Action Plan. The alarm may operate by voice, by sound signal, or both. Depending on how recently your facility was constructed, and what its primary use category is, activating the alarm or the sprinkler system may also automatically notify the fire department, shut down portions of the ventilation system, and close fire doors.

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If an alarm activated by another employee is the first you hear of a fire in your building, be sure you know what to do. Find out where the fire is, and decide whether you need to begin evacuating, stay sheltered in place behind fire doors and fire walls, or wait for more information. Your employer should provide drills on all shifts so that all employees know exactly what to do when the fire alarm is activated.

C Is for Confine

Once individuals in immediate danger have been safely evacuated, and the alarm has been activated, the next step is to begin trying to [redacted]. In recently constructed buildings, [redacted], and ventilation systems that could spread smoke should automatically shut down. Even in these buildings, it is important to [redacted] (or doors) to the room where the fire began, confining the fire and limiting its oxygen supply. In older buildings, closing the door may not fully confine the fire or the smoke, but it will help to slow the blaze down. So, [redacted] and make sure any fire doors (which are supposed to be closed) have not been blocked open.

E Is for Extinguish

Once endangered individuals have been removed to safety, fire alarms have been activated, and the fire has been confined, evaluate whether you can safely attempt to extinguish the fire. [redacted] For example, perhaps the fire began in a laundry room or bathroom, and no one present requires assistance to evacuate to safety. If the fire alarm pull is within reach and the door to the area of the fire is closed, then extinguishing the fire may be an option. **However, do not try to extinguish a fire unless the appropriate type of fire extinguisher is available and you have been trained in its use.**

You are only allowed to use a fire extinguisher if you have been trained in its proper use. You will receive fire extinguisher training if:

- you have been designated to receive such training as part of your employer's Emergency Action Plan; or
- your employer has:
  - chosen to provide portable fire extinguishers in the workplace, and
  - designated them for use by all employees.

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Even if fire extinguishers are available for your use, they are intended simply as a first line of defense. Fire extinguishers are not a replacement for the professionals in the fire department. **Sound the [redacted]**

Situations When Fire Extinguishers Should NOT Be Used

The fact that you have been trained to use fire extinguishers does not mean that you should always attempt to fight the particular blaze. In fact, you should err on the side of caution. Fire spreads very rapidly and can quickly trap an opponent. **DON'T attempt to extinguish a fire unless you are sure that it is safe to do so.** One-third of all people who are hurt in fires are injured trying to extinguish the flames.

Don't attempt to extinguish a fire if **any** of the following apply:

- [redacted]
- [redacted] Section 12.21).
- [redacted] (i.e., the fire has spread beyond its place of origin).
- [redacted]

12.20 Basics of Fire Extinguisher Use

To correctly use the typical portable fire extinguisher, just remember the acronym **PASS**:

- **P**ull the pin.
- **A**im the nozzle at the base of the fire.
- **S**queeze the handle (lever).
- **S**weep nozzle from side to side at the base of the fire.

Don't aim high at the smoke and the top of the flames; you won't put out the fire. Spray low at the fire's base. Remember also that most extinguishers have a very limited operation time, as little as 8 to 10 seconds. Don't panic and spray incorrectly. You will squander any possible chance to stop the fire.

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Planning and Development Department
Toxics Management Division

February 20, 2011

HAZARDOUS MATERIALS BUSINESS PLAN
FULL SUBMITTAL REQUIRED BY MARCH 28, 2011

Dear Berkeley Business Operator:

The City of Berkeley Toxics Management Division is requiring a full submittal of your Hazardous Materials Business Plan (HMBP) by March 28, 2011.

What you need to do:

Please complete and return the enclosed forms and return to the TMD by **MARCH 28, 2011.**

Forms are also available in the "downloads" section of our website:
http://www.cityofberkeley.info/toxics/

PENALTY: A late penalty will be assessed if you submit your HMBP after the March 28th deadline. If you are unable to submit your HMBP by the deadline you must write in advance (by letter or email toxics@cityofberkeley.info) requesting an extension and precisely describe the circumstances and length of time needed. Failing to submit or submitting false information in the HMBP is a crime punishable by up to $5,000 per violation per day per California Health & Safety Code Chapter 6.95 Div 20.

ASSISTANCE: You can call (510) 981-7460 and request assistance from a Hazardous Materials Specialist if you need assistance in filling out the forms.

Please note that TMD is moving toward electronic filing. Over the next 12 months we will be setting up a web portal for submitting HMBPs electronically.

Sincerely,

Nabil Al-Hadithy, Ph.D.
Manager, Toxics Management Division

Enclosures: Hazardous Materials Business Plan, Survey

DRAFT

City of Berkeley Toxics Management Division
A Certified Unified Program Agency
2118 Milvia Street, Suite 300, Berkeley, CA 94704
PHONE: (510) 981-7460 TDD: (510) 981-7474 FAX: (510) 981-7470
www.ci.berkeley.ca.us/toxics

Hazardous Materials Business Plan Information and Forms

TABLE OF CONTENTS

INFORMATIONAL ITEMS

- General Information
- Special Hazards Registration
- Non-Waste Hazardous Materials Inventory Spreadsheet Example
- Hazardous Waste Inventory Spreadsheet Example
- Universal Waste Information

FORMS TO BE COMPLETED

- ❑ Hazardous Materials Business Plan Certification Statement* (submit each time)
  (Complete one for your facility)
- ❑ Business Activities*
  (Complete one for your facility)
- ❑ Business Owner/Operator Identification*
  (Complete one for your facility)
- ❑ Hazardous Materials Inventory
  Option 1: One Chemical per page (Hazardous Materials Inventory – Chemical Description)*
  or
  Option 2: Spreadsheet (Non-Waste Hazardous Materials Inventory Spreadsheet and Hazardous Waste Inventory Spreadsheet)*
  (Complete for all hazardous materials and hazardous wastes)
- ❑ Universal Waste Generator Reporting Form
- ❑ Facility Site Plan/Storage Map
  (Large facilities should complete a Facility Site Plan and a separate page for each storage area. Small facilities may combine the two into one drawing.)
- ❑ Emergency Response Plan/Contingency Plan
  (Complete one for your facility)
- ❑ Employee Training Plan
  (Complete one for your facility, or if your facility has a written plan, ensure that it includes all of the elements listed in our "model" training plan.)

* Directions are on the back of the form

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This form was developed by the CUPA as an alternative version of the Unified Program Consolidated Form (UPCF). Businesses have the option to use it or the UPCF adopted in state regulations. The CUPA must accept the state UPCF and cannot require a business to use the alternative version developed by the CUPA. The CUPA can require businesses to provide additional information on either the UPCF or a supplemental page to that document. To access the UPCF go to: http://www.calepa.ca.gov/Publications/Title27.

GENERAL INFORMATION

What is the purpose of the Hazardous Materials Business Plan?

The intent of the Hazardous Materials Business Plan (HMBP) is to satisfy federal and state Community Right-To-Know laws and provide detailed information for use by emergency responders. All persons at the facility qualified to serve as emergency coordinators must be thoroughly familiar with the contents and use of the HMBP, with the operations and activities of the facility, and with the locations of all hazardous materials records maintained by the facility.

This HMBP has been developed to assist you in complying with the State requirements and to provide emergency responders adequate information about the type, quantity of, storage location – and management practices regarding – hazardous materials that are stored at your facility.

Who needs to file a Hazardous Material Business Plan?

A hazardous material is any substance which, if released, can cause harm to human health or the environment. This includes less dangerous materials such as oil (including cooking oil), oxygen, antifreeze, cleaning solvents, etc. Hazardous wastes are also hazardous materials.

You must file a HMBP if you meet any of the following:

1. At any one time during the year, you use, handle, store, or generate combined (aggregate) quantities of hazardous materials or hazardous wastes in an amount equal to or greater than:
    - 55 gallons for liquids
    - 500 pounds for solids
    - 200 cubic feet (at normal temperature and pressure) for compressed gases

2. Your facility handles any amount of perchlorate material, pursuant to California Health & Safety Code (CHSC) Section 25504.1.

3. Your facility has any quantity of radioactive materials or etiological agents, pursuant to Berkeley Municipal Code Title 15 (See the Special Hazards Registration page).

4. Your facility exceeds reportable thresholds for Extremely Hazardous Substances (EHSs), as defined in 40 CFR, Part 355, Appendix A.

HMBP Exemption:

1. Hazardous materials contained solely in a consumer product for direct distribution to and use by the general public are exempt. Warehouse quantities are not exempt. Materials in warehouses and bulk storage areas of retail facilities equal to or greater than the above thresholds must be reported in a HMBP.

Uniform Fire Code (UFC) Hazards

In addition to Health and Safety Code reporting requirements, the UFC has its own reporting thresholds. If you use or store hazardous materials or wastes in quantities equal to or greater than the UFC thresholds specified below, you may be required by the Fire Chief or Hazardous Materials Manager to submit a Hazardous Materials Business Plan. Contact TMD at (510) 981-7460.

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If my quantities are below the reporting thresholds listed above, do any other requirements apply?

If your facility exceeds the Uniform Fire Code (UFC) thresholds specified in the attached UFC Hazards table, you may be required by the Fire Chief or Hazardous Materials Manager to submit a HMBP. Contact Toxics Management Division at (510) 981-7460.

If you are **below** the HMBP threshold and generate **any quantity of hazardous waste**, you are required to complete a Hazardous Waste Generator Reporting packet. If this applies to your facility and you did not receive a Hazardous Waste Generator Reporting packet, please call (510) 981-7460 to request one. Or you may obtain one by visiting our website at www.cityofberkeley.info/toxics.

Are there any other reporting requirements?

If your facility owns or operates an underground storage tank, you are required to complete an *Underground Storage Tanks – Facility* page and *Underground Storage Tanks – Tanks* page.

If your facility claims a recycling exclusion or exemption (per Health and Safety Code Section 25143.2) for a material or process from the hazardous waste generator or tiered permitting programs and you recycle more than 100 kilograms per month, you must complete the *Recyclable Materials Report.*

If your facility treats hazardous waste on site, you are required to submit the *Onsite Hazardous Waste Treatment* forms.

You may obtain additionally required paperwork by calling us at 510-981-7460 or by visiting our website at www.cityofberkeley.info/toxics.

When must Hazardous Materials Business Plans be updated?
The entire HMBP must be **reviewed and updated every three (3) years. This reporting year (2011) you are required to submit a new full HMBP.**

In addition to the annual requirements, the HMBP must be updated and resubmitted within 30 days of any of the following changes:

- Business Name;
- Owner or Operator Name;
- Business location;
- 100% increase of any previously reported hazardous material or waste;
- Any previously undisclosed hazardous material or waste at or above reporting quantities;
- Substantial change in structure or layout of the facility as shown on the site map.

Submit one original signed copy of the HMBP or required sections to TMD. Keep a copy on-site which should be made available to representatives of TMD, if requested, during an inspection.

What if my facility has closed or will be closing in the next 45 days?

If your hazardous materials/waste facility is closed or planning to close, or your facility is discontinuing any storage, use, handling or processing of hazardous materials/waste, please contact TMD to implement the closure process. TMD requires submittal of a *Closure Application* no less than 45 days prior to the intended date of closure. The *Closure Application* demonstrates that hazardous materials and wastes at a closed facility have been transported, disposed of or reused in a manner that eliminates the need for further maintenance and any threat to public health and safety or the environment.

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How much does it cost?

Each regulated business is required to pay a fee annually. The fee is billed based on the fiscal year. The City's fiscal year runs July 1 – June 30. A detailed Fee Schedule can be found on our website at www.cityofberkeley.info/toxics. There are separate fees for each of the Unified Program elements. In addition, there is a State Surcharge assessed on all businesses regulated under any Unified Program element.

Since fees are based upon the amount or types of hazardous materials or wastes you store or generate, any measures you take to reduce these quantities may lower your fees.

Please note that fees associated with each Unified Program element are all inclusive. There are no additional fees for routine state-mandated facility inspections. Extraordinary activities such as enforcement activities that may be required to bring a business into compliance may be billed at the rate of $150 per hour. Such actions may result in additional fines and penalties.

Penalties for Non-Compliance

Businesses that submit their HMBP after the deadline established by TMD will be assessed a late filing penalty equal to 10% of their annual permit fee (with a minimum penalty of $50), per month their HMBP is delinquent. Any business that handles hazardous materials in quantities that require them to submit a HMBP and operates without completing the HMBP will be charged double their annual permit fees.

Any business that violates any provision of the HMBP shall be civilly liable in an amount of not more than two thousand dollars ($2,000) for each day of the violation. Any business that knowingly and willfully violates any provision of the HMBP shall be civilly liable in an amount not to exceed five thousand dollars ($5,000) for each day of the violation. Any person who willfully prevents, interferes with, or attempts to impede the enforcement of this chapter by any authorized representative of an Administering Agency is, upon conviction, guilty of a misdemeanor (Health and Safety Code, Section 25515.1). If the violation results in, or significantly contributes to an emergency, including a fire to which the city is required to respond, the person(s) shall also be assessed the full cost of the city emergency response as well as the cost of clean up and disposal.

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SPECIAL HAZARDS REGISTRATION

According to BMC Title 15, the following special hazards require registration and compliance with the ordinance. For copies of the compliance requirements, please contact your inspector for a copy of the ordinance.

I. Etiological Agents Disclosure:

Etiological agents can be microorganisms which cause disease. The BMC defines an etiologic agent as an infectious substance, which is any viable microorganism, or its toxin, which causes or may cause disease in humans or animals, and includes those agents listed in 42 CFR Section 72.3 or the regulations of the Department of Health and Human Services, or any other agent that causes or may cause severe, disabling or fatal disease.

If your facility stores or handles an etiological agent on site, you must report the agent name, quantity and storage location to the TMD.

II. Radioactive Materials:

Any quantity of Radioactive Materials must be reported on the Hazardous Materials Inventory page of the HMBP.

III. Manufactured Nanoscale Material:

If your facility stores or handles manufactured nanoscale materials you may be subject to reporting requirements per the BMC Title 15. Please contact TMD to determine if you are required to submit reporting documentation. Reporting requirements can be found at www.cityofberkeley.info/toxics.

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CID# 87052

City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 FAX (510) 981-7470

Hazardous Materials Business Plan (HMBP) Certification Statement

For Dept Use Only – Date Time Stamp

RECEIVED
APR 16 2012
TOXICS MGMT. DIVISION

I. IDENTIFICATION

FACILITY ID # 1	01 010
BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) 3	IRONIES, INC
BUSINESS SITE ADDRESS 103	2222 FIFTH STREET
CITY 104	BERKELEY
CA	
ZIP CODE 105	94710

II. CERTIFICATION STATEMENT

Check the appropriate boxes below and sign the certification statement.

☐ INITIAL SUBMITTAL: This new HMBP is being submitted for the following:
- ☐ New facility
- ☐ Change of ownership
- ☐ Change of business address

☑ CERTIFICATION OF CHANGES/REVISIONS: This is to certify that the HMBP has been reviewed and revisions, amendments and/or additions are necessary and are being submitted with this document. The following areas of the HBMP are affected:
- ☑ Entire HMBP revision
- ☐ Business Activities page
- ☐ Business Owner/Operator Identification page
- ☐ Hazardous Materials Inventory
- ☐ Facility Site Plan/Storage Map(s)
- ☐ Emergency Response Plan/Contingency Plan
- ☐ Other (Specify): _____

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is, to the best of my knowledge, true and correct. I understand that I will be required to show proof of compliance during any facility inspection conducted by City, County, State, or Federal authorities. I understand that whenever there are changes in address, ownership, business name, or operations (closure, addition of undisclosed hazardous materials or hazardous wastes, and/or contingency planning provisions), a notification of such must be made to Toxics Management Division within 30 days of the change.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 4/13/2012
NAME OF SIGNER (print) KIAT TONG	TITLE OF SIGNER MANAGER

Agency Use Only
- ☑ HMBP accepted as submitted
- ☐ HMBP requires revisions – Letter sent

HMBP ACCEPTED: 5/14/12 BY: Carie Ettadt

5/14/12: Date Tech Review Completed
_____: Date Scanned
_____: Date Copied for BFD
_____: Date Data Entry Completed
_____: Date Filed *(Initial each line)*

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM – FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # 01 010 (1)		EPA ID # (Hazardous Waste Only) CAL000282470 (2)	
BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) IRONIES, INC (3)			
BUSINESS SITE ADDRESS 2222 5th St. (103)			
BUSINESS SITE CITY BERKELEY (104)	CA	ZIP CODE 94710 (105)	

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES ☐ NO 4	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release Prevention Program (CalARP)?	☐ YES ☒ NO 4a	Coordinate with your local agency responsible for CalARP
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES ☒ NO 5	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES ☒ NO 8	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE		
1. Generate hazardous waste?	☒ YES ☐ NO 9	EPA ID NUMBER – provide at the top of this page
2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES ☒ NO 10	RECYCLABLE MATERIALS REPORT (one per recycler)
3. Treat hazardous waste on site?	☐ YES ☒ NO 11	ONSITE HAZARDOUS WASTE TREATMENT – FACILITY ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES ☒ NO 12	CERTIFICATION OF FINANCIAL ASSURANCE
5. Consolidate hazardous waste generated at a remote site?	☐ YES ☒ NO 13	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐ YES ☒ NO 14	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
7. Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (20 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES ☒ NO 14a	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
8. Household Hazardous Waste (HHW) Collection site?	☒ YES ☐ NO 14b	See CUPA for required forms.
F. LOCAL REQUIREMENTS		
1. Use or store hazardous materials or hazardous wastes in combined (aggregate) quantities equal to or greater than 55 gallons for liquids, 500 pounds for solids or 200 cubic feet for compressed gases?	☒ YES ☒ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
2. Use or store any quantity of etiological agents, radioactive materials or perchlorate materials?	☐ YES ☒ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
3. Generate any quantity of Universal Waste (mercury containing devices, non-empty aerosols, electronic devices, fluorescent tubes, batteries, dental amalgam wastes, etc.)?	☒ YES ☐ NO 15	SEE THE UNIVERSAL WASTE REPORTING REQUIREMENTS PAGE FOR INSTRUCTIONS
4. Treat any quantity of photochemical waste on-site (x-ray and photo imaging processors)?	☐ YES ☒ NO 15	

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM - FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID# 01 010	I	BEGINNING DATE 100: 1/1/2011	ENDING DATE 101: 12/31/2011
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: IRONIES, INC			BUSINESS PHONE 102: 510-644-2100
BUSINESS SITE ADDRESS 103: 2222 5th St.			BUSINESS FAX 102a: 510-644-2170
BUSINESS SITE CITY 104: BERKELEY	CA	ZIP CODE 105: 94710	COUNTY 108: ALAMEDA
DUN & BRADSTREET 106: 80-680-6469		PRIMARY SIC 107:	PRIMARY NAICS 107a:
BUSINESS MAILING ADDRESS 108a: 2222 5th st, BERKELEY			
BUSINESS MAILING CITY 108b: BERKELEY		STATE 108c: CA	ZIP CODE 108d: 94710
BUSINESS OPERATOR NAME 109: BRAD HUNTZINGER / KATE MCINTYRE			BUSINESS OPERATOR PHONE 110: SAME AS ABOVE

II. BUSINESS OWNER

OWNER NAME 111: BRAD HUNTZINGER / KATE MCINTYRE	OWNER PHONE 112: SAME AS ABOVE
OWNER MAILING ADDRESS 113: 2222 5th street	
OWNER MAILING CITY 114: BERKELEY	STATE 115: CA / ZIP CODE 116: 94710

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: KIAT TJONG	CONTACT PHONE 118: 510-644-2100
CONTACT MAILING ADDRESS 119: 2222 5th St.	CONTACT EMAIL 119a: kiatt@ironies.com
CONTACT MAILING CITY 120: BERKELEY	STATE 121: CA / ZIP CODE 122: 94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Kiat Tjong.	NAME 128: Robert Cyr.
TITLE 124: MANAGER	TITLE 129: Director of operation.
BUSINESS PHONE 125: 510-644-2100	BUSINESS PHONE 130: 510-644-2100
24-HOUR PHONE 126: 415-939-6460	24-HOUR PHONE 131: 510-418-8534
PAGER # 127: N/A	PAGER # 132: N/A

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE: Kiat Tjong.	DATE 134: 4/13/12	NAME OF DOCUMENT PREPARER 135: Kiat Tjong
NAME OF SIGNER (print) 136: Kiat Tjong	TITLE OF SIGNER 137: Manager.	

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

FEE SUMMARY SHEET
For Permit Period FY13 (Base Reporting Period: 2012)

Business Name: Ironies, Inc. [CID: 87052]

Address: 2222 Fifth Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2012	CY2012	CY2012	Last Reported	FY2013 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	21	4	3		28
Total no. of ***waste*** chemicals:	1	1			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	450	6,520	2,000	C2	C2
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	28	1,377		<5	<5
Underground Storage Tanks: No. of USTs: 0					
Universal Waste:	CESQUWG X	HANDLER	DESTINATION	Date entered into HTE (and initials)	
Other Billing Categories:	Tiered	etiologic	radiologic		
inert gas fee / nano	CalARP	EPCRA	APSA		

Completed by: Carie Ostadt Date: 5/11/12

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St. BERKELEY | 200 Add ☐ | Revise ☑ | Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(1) G6	PROPYLENE	☐ Same as first column 799	115-07-1	☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	130 gal	65 gal 222 Days on site: ☒ 365	65 gal 223 Storage Container: CYL	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(2) E6	OXYGEN	☐ Same as first column 799	7782.44-7	☐ Yes ☒ No	OX	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	1000 ft³	500 ft³ 222 Days on site: ☒ 365	250 ft³ 223 Storage Container: CYL	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(7) D6	ARGON / CO2	☐ Same as first column ARGON 75 CO2 25	7440-37-1	☐ Yes ☒ No	NFG	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	1000 ft³	500 ft³ 222 Days on site: ☒ 365	250 ft³ 223 Storage Container: CYL	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☐ Fire ☒ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		222 Days on site: ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Non-Waste Hazardous Materials Inventory Spreadsheet

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201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(9) A4	HYDROSTONE	☐ Same as first column Plaster of PARIS 90 Portland Cement 5		☐ Yes ☐ No	IRR	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	5000 lbs	2500 lbs 222 Days on site: ☒ 365	50 lbs 223 Storage Container: B	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(9) A4	WHITE CEMENT	☐ Same as first column 3CaOSiO2 3CaOSiO2 3CaO Al2O3Fe2O3 4CaO Al2O3Fe2O3 CaSO4 2H2O	12168-85-3 10034-77-2 12042-78-3 12068-35-8 13397-24-5	☐ Yes ☐ No	TX	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1000 lbs	500 lbs 222 Days on site: ☒ 365	100 lbs 223 Storage Container: B	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	PMC - 744 Rubber MOLD	☐ Same as first column 2,4 toluene diisocyanate 2,6 toluene diisocyanate Bis (2-ethylhexy	584-84-9 91-08-7 117-817	☐ Yes ☐ No	TX	☑ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	80 lbs	40 lbs 222 Days on site: ☒ 365	40 lbs 223 Storage Container: PD	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(10) A3	IRON OXIDE	☐ Same as first column	1309 37 1	☐ Yes ☐ No		☒ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	50 lbs	100 lbs 222 Days on site: ☑ 365	100 lbs 223 Storage Container: PD	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: 2222 5th St Berkeley | 200 Add ☐ Revise ☑ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
(3) B3	Breakthrough	☐ Same as first column 2 Butoxy Ethanol N-Butyl Alcohol	--- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	30 gal	15 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(4) A2	Hammerite	☐ Same as first column Xylene II C8 Aromatis 4 Propane II Isobutane II Acetone 39	01330207 14742956 00074986 0075285 0067641	☐ Yes ☒ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	30 gal	15 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(5) A2	Xylol Thinner (Xylene)	☐ Same as first column Xylenes Ethylbenzene	1330-20-7 100-41-4	☐ Yes ☒ No	FL TX	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	5 gal	3 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(6) D1	Metal Prep 79	☐ Same as first column Phosphoric acid 10 2 Butoxyethanol 10 Diethylene glycol monobutyl ether 5 Surfactant 1	7664-38-2 111-76-2 112-34-5 Proprietary	☐ Yes ☒ No	IRR	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	8 gal	4 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: PB	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St BERICELEY | 200 Add ☐ | Revise ☒ | Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	219 SARA Class	224, 225 Pressure & Temp
(4) A2	LACQUER THINNER	☐ Same as first column Methyl ethyl 12 Butyl acetate 5 Ethyl ALCOHOL 5 GLYCOLETHEL	78-93-3 123-86-4 64-17-5 111-76-2	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	15 gal	8 gal 222 Days on site: ☒ 365	5 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(4) A2	TRIPRIME BLACK	☐ Same as first column Xylene 15 MICROCYSTALLINE 10 METHYL PROPYL KETONE 5 METHYL ISOBOTHYL KETONE 5 METHYL N-PROPYLKETONE 5	1330-207 1317-95-9 107-87-9 108-10-1 707879	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☐ pure ☒ mixture ☐ radioactive	30 gal	15 gal 222 Days on site: ☒ 365	1 gal 223 Storage Container: C	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☒ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(8) B2	AERIOL SPRAYCAN.	☐ Same as first column Xylene 13 Ethyl Benzene 1 ACETONE 39 PROPANE 16 ISOBUTANE 2 MINERAL SPIRIT 1	1330-20-7 100-24-14 67-641 74.986 75285 8052413	☐ Yes ☐ No	FL	☐ solid ☐ liquid ☒ gas ☐ pure ☒ mixture ☐ radioactive	40 cans	20 cans 222 Days on site: ☒ 365	1 lb 223 Storage Container: C	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other grams	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☒ Ambient ☐ > Amb. ☐ < Amb. Temp: ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
(8) B2	MOHAWK WOOD STAIN M520	☐ Same as first column ACETONE 70 WATER 1 PROPYLENE GLYCOL 1 ETHANOL 1	67-64-1 7732-185 57-55-6 64-17-5	☐ Yes ☐ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	25 QTR =6.25 gal	=3.75gal 15 QTR 222 Days on site: ☑ 365	=0.25gal 1 QTR 223 Storage Container: PB	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☒ other QUART	☒ Fire ☐ Pressure ☐ Reactive Health: ☒ Acute ☐ Delayed	Pressure: ☐ Ambient ☐ > Amb. ☐ < Amb. Temp: ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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DRAFT

Pigment Mixtures - see 5/10/12 email

~~Hazardous Waste Inventory Spreadsheet~~

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201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
STONE ROOM	Raw Umber	☐ Same as first column RED IRON OXIDE RAW UMBER	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	7 gram/gal / 5.8 gr/gl / 1 gal 85 different bottle / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Yellow IRON OXIDE	☐ Same as first column IRON OXIDE	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5gr/gal / 3.13 gram/gal / 1gal 91 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	ORange. IRON oxide	☐ Same as first column IRON OXIDE Fe 2O3	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	4gr/gal / 2-4gr per gal / 1gal. 53 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Chromium. OXIDE green	☐ Same as first column Chromic Oxide C2O3	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	5gr/gal / 3.6gr per gal. / 1gal. 42 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB / 220 State Waste Code		☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Pigment Mixtures - See 5/10/12 email

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201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container / Days on site / Storage Container	219 Annual Waste Amount / State Waste Code	221 Units	216 SARA Class	224, 225 Pressure & Temp
STONE ROOM	Ultramarine Blue	☐ Same as first column Sodium Aluminum Selpho Silicate	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ M waste ☐ radioactive	10 grms per gal / 6.7gr per gal / 1 gal / 29 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Medium Red	☐ Same as first column IRON oxide Fe 203	---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ P waste ☐ radioactive	8.7gr/gal / 8.7 gram per gal / 1 gal / 13 different bottles / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	Carbon Black	☐ Same as first column Carbon black Water 15-20% Sulfat	1335-86-4	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ M waste ☐ radioactive	5.5gr per gal / 5.5 gr per gal / 1 gal / 23 different Containe / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STONE ROOM	BURNT Sienna.	☐ Same as first column IRON oxide (Fe203) Silicon dioxide aluminum oxide Fe203, SIO2, AL203	--- 1309-37-1	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ M waste ☐ radioactive	14 gr per gal / 14 gr per gal / 1 gal / 3 different Containe / 222 Days on site ☒ 365 / 223 Storage Container PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

April 2012

Pigment Mixtures - see 5/10/12 email

~~Hazardous Waste Inventory Spreadsheet~~

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: IRONIES | Business Address: 2222 5th St Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
STORE ROOM	Venetian Red	☐ Same as first column IRON OXIDE. Fe 2O3	--- --- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ ~~waste~~ ☐ radioactive	7.5 gram / 1 gal 7 different bottles 222 Days on site: ☒ 365 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STORE ROOM	Cadmium medium Red	☐ Same as first column Cadmium Sulfide Cadmium Selenid Barium Sulfate Zinc Sulfate	--- --- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ ~~waste~~ ☐ radioactive	15grm per gal 1 bottle 222 Days on site: ☒ 365 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STORE ROOM	Cobalt Yellow	☐ Same as first column Cobalt oxide Potassium	--- --- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ ~~waste~~ ☐ radioactive	0.25 gram per gal 2 different bottles 222 Days on site: ☒ 365 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
STORE ROOM	Cadmium medium light Red	☐ Same as first column Endmium Sulfide Cadmium Sulfide Barium Sulfide Zinc Sulfide	--- --- --- --- ---	☐ Yes ☒ No		☐ solid ☒ liquid ☐ gas ☒ ~~waste~~ ☐ radioactive	35grm per gal 1 Bottle 222 Days on site: ☒ 365 223 Storage Container: PB	220 State Waste Code	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

April 202

From: Kiat Tjong [mailto:kiatt@ironies.com]
Sent: Thursday, May 10, 2012 2:46 PM
To: Estadt, Carrie
Subject: RE:

Hi Carrie,
Attached please find photos of pigment mixture in the glass container.
We have a total of 141 containers.
Please let me know if you have more question.

Thnaks,

Kiat



Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☒ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☒ No | If EPCRA, please sign here:

3 Business Name: | Business Address: 2222 5th St Berkeley | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
Bg	Fiberglass Spray Booth Filter	☐ Same as first column -------- -------- -------- --------	--- --- --- ---	☐ Yes ☐ No — —	FS	☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum ≈440#	55 gal drum 222 Days on site ☑ 365	55 gal drum 223 Storage Container SD	3 ≈1377# 220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
Bg	Oil Based Paint Waste	☐ Same as first column -------- -------- -------- --------	--- --- --- ---	☐ Yes ☐ No	FL	☐ solid ☒ liquid ☐ gas ☒ waste ☐ radioactive	55 gal drum	55 gal drum 222 Days on site ☑ 365	55 gal drum 223 Storage Container SD	28 220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other 55 gal drum	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column -------- -------- -------- --------	--- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other _____	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column -------- -------- -------- --------	--- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	220 State Waste Code	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other _____	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

CITY OF BERKELEY, TOXICS MANAGEMENT DIVISION
HAZARDOUS MATERIALS UNIFIED PROGRAM CONSOLIDATED FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) IRONIES, INC. 3

CHEMICAL LOCATION 2222 5th St, BERKELEY 201 | CHEMICAL LOCATION CONFIDENTIAL EPCRA 202 ☐ YES ☒ NO

FACILITY ID # 01 0 910 1 | MAP# (optional) 203 | GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205 | TRADE SECRET ☐ Yes ☐ No 206 (If Subject to EPCRA, refer to instructions)

COMMON NAME OIL BASE PAINT 207 | EHS* ☐ Yes ☐ No 208

CAS# 209 | *If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211 | RADIOACTIVE ☐ Yes ☒ No 212 | CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214 | LARGEST CONTAINER 55 gal drum 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
N/A	N/A	1/2 drum	FL

UNITS* (Check one item only) ☑ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221 * If EHS, amount must be in pounds. | DAYS ON SITE: 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☑ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER 223

STORAGE PRESSURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes ☐ No 228	229
2 230	231	☐ Yes ☐ No 232	233
3 234	235	☐ Yes ☐ No 236	237
4 238	239	☐ Yes ☐ No 240	241
5 242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

Note: Duplicate of spreadsheet

If EPCRA, Please Sign Here

UPCF (Rev. 12/2007)

DRAFT

0B451018 SC PPW 3/3/2011

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
CAL000282470	1	(800) 483-3718	004769562 FLE

GENERATOR

5. Generator's Name and Mailing Address
Ironies
2222 5th Street
Berkeley, CA 94710
Generator's Phone: (510) 644-2100

Generator's Site Address (if different than mailing address)
SAME

6. Transporter 1 Company Name
Clean Harbors Environmental Services Inc
U.S. EPA ID Number: MAD039322250

7. Transporter 2 Company Name
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
Clean Harbors Env Services Inc
2247 South Highway 71
Kimball, NE 69145
Facility's Phone: (308) 235-4012
U.S. EPA ID Number: NED981723613

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1. UN1263, WASTE PAINT, 3, PG III	001	DM	0055	G	491	D001	F003
						F005		
	2. NON RCRA HAZARDOUS WASTE SOLIDS, (PAPER SPRAY BOOTH FILTERS, MINERAL SPIRITS)	001	DM	0055	P	352		
	3.							
	4.							

14. Special Handling Instructions and Additional Information
1. CH448442 AAI ERG#128
2. CH448717 AAI

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month 4 | Day 11 | Year 11

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: [illegible] | Signature | Month 4 | Day 11 | Year 11

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

18b. Alternate Facility (or Generator) | Manifest Reference Number: | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H040	H040		

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name | Signature | Month | Day | Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

GENERATOR'S INITIAL COPY

Clean Harbors has the appropriate permits for and will accept the waste the generator is shipping

DRAFT

Land Disposal Restriction Notification Form

Printed Date :Apr 11, 2011

MANIFEST INFORMATION

Generator : Ironies

Address: 2222 5th Street
Berkeley,CA 94710

EPA ID #: C A L 0 0 0 2 8 2 4 7 0

Manifest Tracking Info.

004769562FLE

Sales Order No: DJ3451018

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category
1.	1	CH448442	NON-WASTEWATER	2 (This is subject to LDR.)

EPA Waste Code	EPA Waste SubCategory
D001	High TOC Ignitable Liquids
F003F005	NONE

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
ACETONE	Y	Y	N
THYL ETHYL KETONE	Y	Y	N
XYLENES (MIXED ISOMERS)	Y	Y	N

Certification	Applies to Manifest Line Items
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.	1.
This waste is not restricted as specified in 40 CFR 268 Subpart D.	2.

Waste analysis data, where available, is attached.

Signature : [signature] Print Name MICHAEL MONDORA

Title : OPS MGR. Date : 4/14/11

DRAFT

Waste Tracking Detail Report

Manifest Dates 01/01/2011 TO 04/01/2012

CLHB Receiving Facility: Kimball, NE Facility

CLHB Generator ID: IR0630 Ironies Berkeley CA 94710

Manifest Number:	004769562FLE	Mnfst. Doc. No:		Gen. Sign. Date:	4/14/2011
Work Order:	DJ3451018	Generator EPA Id:	CAL000282470	Date Recvd:	4/28/2011

Line: 1 **Profile No:** CH448442 **Manifested Cntnrs:** 1 DM **Total Qty:** 55 G **Inbound Mgt Method Code** H141

Tracking No: 23869132 **Code:** FB2 **Wgt:** 235 **Wgt UOM:** LBS

Site	Manifest No	Activity	Activity Date	Final Mgt Method Code
El Dorado, AR Facility	004480467FLE	SHIP	5/6/2011	
El Dorado, AR Facility		Incineration	5/19/2011	H040

Line: 2 **Profile No:** CH448717 **Manifested Cntnrs:** 1 DM **Total Qty:** 50 P **Inbound Mgt Method Code** H141

Tracking No: 23869133 **Code:** FB5 **Wgt:** 65 **Wgt UOM:** LBS

Site	Manifest No	Activity	Activity Date	Final Mgt Method Code
El Dorado, AR Facility	004479846FLE	SHIP	7/26/2011	
El Dorado, AR Facility		Incineration	8/2/2011	H040

CLHB Receiving Facility: Kimball, NE Facility

Manifest Number:	004868728FLE	Mnfst. Doc. No:		Gen. Sign. Date:	11/10/2011
Work Order:	DJ3915586	Generator EPA Id:	CAL000282470	Date Recvd:	11/16/2011

Line: 1 **Profile No:** CH448717 **Manifested Cntnrs:** 1 DM **Total Qty:** 50 P **Inbound Mgt Method Code** H141

Tracking No: 25616829 **Code:** FB5 **Wgt:** 92 **Wgt UOM:** LBS

Site	Manifest No	Activity	Activity Date	Final Mgt Method Code
Deer Park, TX Facility	004740490FLE	SHIP	1/13/2012	
Deer Park, TX Facility		Incineration	2/3/2012	H040

DRAFT

UNIVERSAL WASTE GENERATOR REPORTING FORM

Facility Name: IRONIES INC

Facility Address: 2222 5th St, Berkeley, CA 94710

Reporting Period: calendar year 2011 (January 1 through December 31, 2011)

Report all quantities of the following Universal Wastes (UWs):	**Annual UW Generation** (in pounds)
1. Electronic devices (e.g. cell phones, televisions, VCRs, computer CPUs, portable DVD players)	20 lbs
2. Batteries (all batteries except auto, including AAA, AA, A, C, D, 9-volt, silver button cell, alkaline, nickel-cadmium, rechargeable)	2 lbs
3. Mercury-containing equipment (e.g. dental amalgam, mercury switches, mercury-added novelties, counterweights, thermostats)	
4. Electric lamps (fluorescent tubes and bulbs, high-intensity discharge lamps, sodium vapor lamps)	50 LF
Fluorescent tubes and bulbs [report in linear feet]	
5. CRTs [cathode ray tubes] (glass picture tubes removed from televisions, monitors)	
6. CRT glass (cathode ray tube, broken or processed for recycling)	
7. Non-empty aerosol cans	
8. Other	
Annual Throughput - Total Pounds:	22 lbs
Annual Throughput - Total Linear Feet:	50 LF

DRAFT

Universal wastes represent a serious potential health hazard due to significant amounts of arsenic, beryllium, cadmium, copper, lead, mercury, nickel, zinc and other materials.

For detailed requirements on Universal Waste handling and management requirements please refer to the California Department of Toxics Substances Control (DTSC) website at:

http://www.dtsc.ca.gov/HazardousWaste/UniversalWaste/upload/UW_Factsheet1.pdf

Universal Wastes may not be disposed of in the trash!

CITY OF BERKELEY, TOXICS MANAGEMENT DIVISION

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
01 010		

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.: IRONIES, INC

BUSINESS SITE ADDRESS 103.: 2222 FIFTH STREET

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
MANUFCTURING.	PAINT BOOTH FILTER & OILPAINT WASTE

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.

☐ 1. HAZARDOUS MATERIALS; ☐ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.

☑ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☐ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☑ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:

1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:

1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☑ 1. VERBAL WARNINGS; ☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM; ☐ 3. TELEPHONE;
☐ 4. PAGERS; ☑ 5. ALARM SYSTEM; ☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☑ 1. VERBAL WARNINGS; ☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM; ☐ 3. TELEPHONE;
☐ 4. PAGERS; ☐ 5. ALARM SYSTEM; ☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:	AMBULANCE, FIRE, POLICE AND CHP	9-1-1 ✓
	CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
	NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
	POISON CONTROL CENTER	(800) 222-1222 ✓
	LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA) Clean Harbors C3.	(408) 451-5000 C5.
	OTHER (Specify): C4.	( )
NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates C6.		(510) 204-4444 C7.
AGENCY NOTIFICATION PHONE NUMBERS:	CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
	REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 C8.
	U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
	CALIFORNIA DEPT OF FISH AND GAME (DFG)	(916) 358-2900
	U.S. COAST GUARD	(202) 267-2180
	CAL/OSHA	(916) 263-2800
	STATE FIRE MARSHAL	(916) 445-8200
	OTHER (Specify): C9.	( ) C10.
	OTHER (Specify): C11.	( ) C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☐ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☐ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☐ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☐ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☐ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☑ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☑ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☑ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☑ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☑ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☐ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☐ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☐ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☑ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☐ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☑ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☑ 3. VERBAL (i.e., SHOUTING);
- ☐ 4. OTHER (Specify):

E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

FRONT PARKING LOT

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☑ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☐ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☑ CHEMICAL PROTECTIVE GLOVES	G4. B3	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☑ SAFETY GLASSES / GOGGLES / SHIELDS	G8. B3, C6	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☐ CARTRIDGE RESPIRATORS	G12.	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☑ FIRST AID KITS / STATIONS	G16. EACH DEPARTMENT	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☑ PORTABLE EYEWASH KITS	G20. B3. C6	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☑ PORTABLE FIRE EXTINGUISHERS	G26. SEE MAP	G27.
	14. ☐ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28.	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☑ ALL-IN-ONE SPILL KIT	G34. A3	G35.
	18. ☐ ABSORBENT MATERIAL	G36.	G37.
	19. ☐ CONTAINER FOR USED ABSORBENT	G38.	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☐ BROOM	G42.	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☐ SHOP VAC	G46.	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☐ TELEPHONES (Includes cellular)	G60.	G61.
	31. ☐ INTERCOM / PA SYSTEM	G62.	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☐ OTHER	G68.	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply) H1.	LOCATIONS (e.g., shop, outdoor shed, forensic lab)
☐ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA	H2.
☐ 2. PROCESS LINES / PIPING	H3.
☐ 3. LABORATORY	H4.
☐ 4. WASTE TREATMENT AREA	H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply) H6.	LOCATIONS
☑ 1. SHELVES, CABINETS AND RACKS	H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)	H8.
☑ 3. PORTABLE GAS CYLINDERS	H9. Inside warehouse
☐ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES	H10.
☑ 5. SPRINKLER SYSTEMS	H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)	H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☐ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☑ 3. SAFETY / TAILGATE MEETINGS;

☐ 4. STUDY GUIDES / MANUALS (Specify): _____ I2.

☐ 5. OTHER (Specify): _____ I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED K1.
	4/13-2012
NAME OF SIGNER (print) K2.	TITLE OF SIGNER K3.
KIAT TONG	MANAGER.

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TRAINING RECORD - INITIAL TRAINING

DATE: 4/11 - 2012

PLACE: 2222 5th Street, Berkeley

TRAINER: Kiat Tjong

TRAINEE NAME: Gabriel [illegible] SIGNATURE: [signature]

TRAINEE TITLE: Driver Warehouse

PURPOSE FOR TRAINING:

✓ New employee

___ New/modified equipment, operation. Describe:

TOPICS COVERED:

___ Methods of safe handling of hazardous materials
___ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

___ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- ✓ Off-site transportation requirements
- X Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- X Key parameters for automatic waste feed cut off systems (if applicable)
- X Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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REFRESHER

TRAINING RECORD - ~~INITIAL~~ TRAINING

DATE: 4/12/12

PLACE: 2222 5th St Berkeley

TRAINER: RODOLFO

TRAINEE NAME: _____ SIGNATURE: _____

TRAINEE TITLE: _____

PURPOSE FOR TRAINING:

___ New employee

___ New/modified equipment, operation. Describe:

TOPICS COVERED:

___ Methods of safe handling of hazardous materials
___ Emergency response including:

- ✓ Review of the Emergency Response Plan
- ✓ Procedures for coordination with local emergency response organizations
- ✓ Use of emergency response equipment
- ✓ Procedures for using, inspecting, repairing, and replacing facility emergency and/or monitoring equipment
- ✓ Communication and alarm systems procedures
- ✓ Response to a release or threatened release of hazardous materials
- ✓ Response to fires or explosions

___ Hazardous waste management including:

- ✓ Packaging and labeling
- ✓ On-site management and storage requirements (i.e. accumulation time)
- ✓ Proper use of safety equipment
- ✓ Proper use of hazardous waste management supplies
- N/A Off-site transportation requirements
- N/A Procedures for interaction with waste haulers and disposal sites
- ✓ Conducting periodic inspections
- N/A Key parameters for automatic waste feed cut off systems (if applicable)
- N/A Response to ground water contamination incidents (if applicable)
- ✓ Shutdown of operations (if applicable)

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Employee Training Record
Registro de Entranamiento de Empleado

Records

Location of Meeting / Lugar de la Junta	Date / Fecha
2222 5th St, Berkeley	4/12/12
Trainer / Entrenador	**Department / Departamento**
Rodolfo	all.

Training Topic(s) / Tema(s) de Entrenamiento

Employee Name (Print) / Nombre del Empleado (Imprimir)	Signature / Firma
1. Yuri Mercado	
2. Gustavo Gutierrez	
3. Ricardo Rodriguez	RR
4. Javier Suarez	
5. Diego Gutierrez	Diego Gutierrez
6. Jose Manuel Reyes	Jose Manuel Reyes
7. Eliseo Rojas	
8. Jose Sanchez	Jose
9. Heriberto Reyes	
10. Gilberto Calixto A.	
11. Isabel alvarado	
12. Ernesto Gutierrez	
13. Roberto Osorio	
14. Juan R. Trujillo	
15. Luis M.F.	
16. Pablo Alvarado	
17 Roberto Lopez	
18. Daniel López	Daniel López
19.	
20.	

Additional attendees should be listed on the reverse. / *Asistentes adicionales se deben de anotar en el dorso.*

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Employee Training Record
Registro de Entranamiento de Empleado

5th St., Conference Rm	3/2/11 + 3/3/11
Trainer(s) / Instructor(s)	Department / Area
Tracy Emayan	OPS

Training Topic(s) / Tema(s) de Entrenamiento

Accident Investigation Procedure

Employee Name	Signature
1. Kevin Linden (Ca+A)	Kevin Linden (3/2)
2. JOSE MANUEL RAYON	Jose Manuel Rayon
3. LUIS MANUEL F.	Luis Manuel F.
4. Daniel López	Daniel López
5. David Rodriguez	David Rodriguez
6. Juan R. Trujillo	Juan R. Trujillo
7. Ernesto Gutierrez	Ernesto Gutierrez
8. MICHAEL MENDOZA	
9. Robert Cyr (M+S)	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17	
18.	
19.	
20.	

Additional attendees should be listed on the reverse. / *Asistentes adicionales se deben de anotar en el dorso.*

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Employee Training Record

Registro de Entranamiento de Empleado

4th St. Conference Rm, Berkeley	~~2/8/11~~ 3/1/11
Tracy Emayan	management team

Accident Investigation Procedure

1. Mark Gambino	
2. VANESSA CHONET	
3. Ben Holsclaw (via conference call)	
4. Sean McIntyre	
5. Jenny Ambrosio	
6.	
7.	
8.	
9.	
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19.	
20.	

Additional attendees should be listed on the reverse. */ Asistentes adicionales se deben de anotar en el dorso.*

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Hazard Assessment & Correction Report

	HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
	METAL SHOP			
	General Workplace:			
*	Common walkways are clear of all materials		2-14-12	E-G
	Materials or equipment stored away, so no projectiles will not interfere with the walkways		2-14-12	E-G
	Work areas clean and orderly and spilled materials cleaned up		2-14-12	E-G
	Items stored on high shelves are stored properly		2-14-12	E-G
	Electrical boxes accessible with a minimum of 30" clearance		2-14-12	E-G
	First aid kit accessible and stocked		2-14-12	E-G
	Eye wash up to date		2-14-12	E-G
	Crate area: Cleaned-up, dust vacuumed and materials stored away	Shipping		
	Tools, Machines & Equipment:		2-14-12	E-G
	Personal Protective Equipment is in use (see attachment)		2-14-12	E-G
	Electrical cords on equipment and machines free of cuts or other damage		2-14-12	E-G
	Employees aware of the hazards caused by faulty or improperly used equipment		2-14-12	E-G
	Gas tanks strapped against the wall		2-14-12	E-G
	~~Air gun is stored and off the floor~~	POSTCvej		
	Fire Safety:			
	All exits and fire extinguishers free from obstructions or blockage		2-14-12	E-G
	All extinguishers are in their designated places, maintained and tagged (initial tag)		2-14-12	E-G
*	Emergency exits are clear from obstruction or blockage.		2-14-12	E-G
	Chemicals:			
	Material Safety Data Sheet readily available for each substance		2-14-12	E-G
	Each container for hazardous substance labeled with product identity and a hazard warning		2-14-12	E-G
	~~Oil based spray cans emptied in drum (in Paint Room)~~	X		
	~~Flammable items stored in the Paint Room~~	X		

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Ernesto Gutierrez

Hazard Assessment & Correction Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
PAINT ROOM			
General Workplace:			
Common walkways are clear of all materials	✓	2/13/12	2/14/12
Materials or equipment stored away, so no projectiles will not interfere with the walkways	✓	2/13/12	2/14/12
Work areas clean and orderly and spilled materials cleaned up	✓		
Items stored on high shelves are stored properly	✓	2/13/12	2/14/12
Electrical boxes accessible with a minimum of 30" clearance	✓	2/13/12	2/15/12
First aid kit accessible and stocked	✓	2/13/12	2/15/12
Eye wash up to date	✓	2/13/12	2/15/12
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)	✓	2/13/12	2/14/12
Electrical cords on equipment and machines free of cuts or other damage	✓	2/13/12	
Employees aware of the hazards caused by faulty or improperly used equipment		2/13/12	2/14/12
Fire Safety:			
All exits and fire extinguishers free from obstructions or blockage	✓	2/13/12	2/14/12
All extinguishers are in their designated places, maintained and tagged (initial tag)	✓	2/13/12	2/14/12
Chemicals:			
Material Safety Data Sheet readily available for each substance	✓		
Each container for hazardous substance labeled with product identity and a hazard warning	✓	2/13/12	2/14/12
Oil based paint stored in inflammable cabinet, water based in a different cabinet.	necesito otra ✓ contenedor Madera	2/13/12	

Jose Manuel Layon

2/15/2012.

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Hazard Assessment & Correction Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
STONE ROOM			
General Workplace:			
Common walkways are clear of all materials	✓	2/09/12	2/09/12
Materials or equipment stored away, so no projectiles will not interfere with the walkways	✓	2/09/12	2/09/12
Work areas clean and orderly and spilled materials cleaned up	Needs clean area	2/09/12	2/21/12
Items stored on high shelves are stored properly	✓	2/09/12	
Electrical boxes accessible with a minimum of 30" clearance	Needs to clear Elect. Boxes	2/09/12	2/21/12
First aid kit accessible and stocked	✓	2/09/12	2/09/12
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)	✓	2/12/12	2/12/12
Electrical cords on equipment and machines free of cuts or other	✓	2/14/12	2/14/12
Employees aware of the hazards caused by faulty or improperly used equipment	✓	2/14/12	2/14/12
Temperature control is set between 80-100 F	✓	2/14/12	2/14/12
Molding room: Cleaned-up, dust vacuumed and materials stored away	Needs to be more clean	2/14/12	2/21/12
Chemicals:			
Material Safety Data Sheet readily available for each substance		2/14/12	2/14/12
Each container for hazardous substance labeled with product identity and a hazard warning	✓	2/14/12	2/14/12
Ladders:			
All ladders maintained in good condition, steps and side rails tight, all hardware securely attached and moveable parts operating freely	✓	2/14/12	2/14/12
Ladder rungs and steps free of grease and oil	✓	2/14/12	2/14/12
All ladders are secure stored away from doors opening toward the ladders	✓	2/14/12	2/14/12

Juan R Trujillo 2/21/14

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Hazard Assessment & Correction Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date 2-9-12	Completion Date
UPHOLSTERY			
General Workplace:			
Common walkways are clear of all materials		2-9-12	2-14-12
Materials or equipment stored away, so no projectiles will not		2-9-12	2-14-12
Work areas clean and orderly and spilled materials cleaned up		2-9-12	2-14-12
Items stored on high shelves are stored properly		2-9-12	2-14-12
Electrical boxes accessible with a minimum of 30" clearance		2-9-12	2-14-12
First aid kit accessible and stocked			
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)		2-9-12	2-14-12
Electrical cords on equipment and machines free of cuts or other damage	outlet Top need change.	2-9-12	
Compressor hoses: no leaks, set at 80-120, stored off the floor		2-9-12	2-14-12
Portable heaters unplugged at the end of day		2-9-12	2-14-12
Employees aware of the hazards caused by faulty or improperly used equipment		2-9-12	2-14-12
Fire Safety:			
The roller gate is clear from obstruction or blockage including the water pipe.		2-9-12	2-14-12
All exits and fire extinguishers free from obstructions or blockage		2-9-12	2-14-12
All extinguishers are in their designated places, maintained and tagged (initial tag)		2-9-12	2-14-12
Emergency exits are clear from obstruction or blockage.		2-9-12	2-14-12
Ladders:			
All ladders maintained in good condition, steps and side rails tight, all	need tight ✓	2-9-12	2-
Ladder rungs and steps free of grease and oil		2-9-12	2-14-12
All ladders are secure stored away from doors opening toward the	✓	2	

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Hazard Assessment & Correction Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
WAREHOUSE:			
General Workplace:			
Common walkways are clear of all materials	WE NEED MORE ORGANIZATION	2/17/12	2/21/12
Materials or equipment stored away, so no projectiles will not interfere with the walkways	THIS OK.	2/17/12	2/21/12
Work areas clean and orderly and spilled materials cleaned up	TAKE TIME 10 MINUTES BEFORE TO	2/17/12	2/21/12
Items stored on high shelves are stored properly	YES 180 °/₀		
Items stored on top shelves are not blocking water sprinklers	YES	2/15/12	2/21/12
Electrical boxes accessible with a minimum of 30" clearance	WE OK.	2/21/12	2/22/12
First aid kit accessible and stocked	DOUBLE CHECK WE NEED MORE O.C.	2/21/12	2/27/12
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)	✓	2/21/12	2/22/12
Electrical cords on equipment and machines free of cuts or other damage	THE SUPERVISOR WE NEED TO CHECK EVERY DAY	2/27/12	2/27/12
Employees aware of the hazards caused by faulty or improperly used equipment	YES	2/23/12	2/23/12
Air gun is stored and off the floor	YES ALL DAY TIME	2/24/12	2/27/12
Fire Safety:			
The garage doors are clear from obstruction or blockage.	YES. ✓ Main Door	2/24/12	2/27/12
Stairway (2x) are clear from obstruction or blockage.	✓	2/22/12	12/27/12
All exits and fire extinguishers free from obstructions or blockage	YES IS CLEAR	2/24/12	12/27/12
All extinguishers are in their designated places, maintained and tagged (initial tag)	THIS ARE OK	2/14/12	2/21/12
Emergency exits are clear from obstruction or blockage.	CLEAR	2/17/	2/21/12
Ladders:			
All ladders maintained in good condition, steps and side rails tight, all hardware securely attached and moveable parts operating freely	✓	2/27/12	2/27/12
Ladder rungs and steps free of grease and oil	✓	2/27/12	2/27/12
All ladders are secure stored away from doors opening toward the		2/23/12	2/27/12

DRAFT

Hazard Assessment & Co[illegible]tion Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
WAREHOUSE:			
General Workplace:			
Common walkways are clear of all materials	SATISTACTORY		
Materials or equipment stored away, so no projectiles will not	SATISFACTORY		
Work areas clean and orderly and spilled materials cleaned up	NICE / CLEAN		
Items stored on high shelves are stored properly	YES		
Items stored on top shelves are not blocking water sprinklers	YES		
Electrical boxes accessible with a minimum of 30" clearance	YES		
First aid kit accessible and stocked	NO / WE NEED MORE SPRAY		
Crate area: Cleaned-up, dust vacuumed and materials stored away	YES		
Tools, Machines & Equipment:	YES		
Personal Protective Equipment is in use (see attachment)	YES		
Electrical cords on equipment and machines free of cuts or other	YES		
Employees aware of the hazards caused by faulty or improperly used	YES		
Air gun is stored and off the floor	YES		
Fire Safety:	YES		
The garage doors are clear from obstruction or blockage.	YES		
Stairway (2x) are clear from obstruction or blockage.	YES		
All exits and fire extinguishers free from obstructions or blockage	YES		
tagged (initial tag)			
Emergency exits are clear from obstruction or blockage.	YES		
Ladders:			
All ladders maintained in good condition, steps and side rails tight, all	YES		
Ladder rungs and steps free of grease and oil	YES		
All ladders are secure stored away from doors opening toward the ladders	[illegible]		

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Signature: [signature] Daniel López **Date:** 3/27/12

Hazard Assessment & Cor[illegible]tion Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
METAL SHOP			
General Workplace:			
Common walkways are clear of all materials	OK	3-28-12	
Materials or equipment stored away, so no projectiles will not interfere with the walkways	OK	3-28-12	
Work areas clean and orderly and spilled materials cleaned up	OK	3-28-12	
Items stored on high shelves are stored properly	OK	3-28-12	
Electrical boxes accessible with a minimum of 30" clearance	OK	3-28-12	
First aid kit accessible and stocked	OK	3-28-12	
Eye wash up to date	OK	3-28-12	
Tools, Machines & Equipment:	OK		
Personal Protective Equipment is in use (see attachment)	OK	3-28-12	
Electrical cords on equipment and machines free of cuts or other damage	OK	3-28-12	
Employees aware of the hazards caused by faulty or improperly used equipment	OK	3-28-12	
Gas tanks strapped against the wall	OK	3-28-12	
Fire Safety:			
All exits and fire extinguishers free from obstructions or blockage	OK	3-28-12	
All extinguishers are in their designated places, maintained and tagged (initial tag)	OK	3-28-12	
Emergency exits are clear from obstruction or blockage.	OK	3-28-12	
Chemicals:	OK		
Material Safety Data Sheet readily available for each substance	OK	3-28-12	
Each container for hazardous substance labeled with product identity and a hazard warning	OK	3-28-12	

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Signature: Ernesto Gutierrez **Date:** 3-28-12

Hazard Assessment & Cor[illegible]ion Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
PAINT ROOM			
General Workplace:			
Common walkways are clear of all materials		03/22/12	03/22/12
Materials or equipment stored away, so no projectiles will not interfere with the walkways			
Work areas clean and orderly and spilled materials cleaned up		03/22/12	03/22/12
Items stored on high shelves are stored properly			
Electrical boxes accessible with a minimum of 30" clearance		03/22/12	03/22/12
First aid kit accessible and stocked		03/22/12	03/22/12
Eye wash up to date		03/22/12	03/22/12
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)		03/22/12	03/22/12
Electrical cords on equipment and machines free of cuts or other damage		03/23/12	05/23/12
Employees aware of the hazards caused by faulty or improperly used equipment		03/12/12	03/22/12
Fire Safety:			
All exits and fire extinguishers free from obstructions or blockage		03/22/12	03/22/12
All extinguishers are in their designated places, maintained and tagged (initial tag)		03/22/12	03/22/12
Chemicals:			
Material Safety Data Sheet readily available for each substance			
Each container for hazardous substance labeled with product identity and a hazard warning		03/22/12	03/22/12
Oil based paint stored in inflammable cabinet, water based in a different cabinet.		03/22/12	03/22/12

Signature: Jose Manuel Lagos Paint Room.

Date: 03/22/12

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Hazard Assessment & Correction Report

HAZARD	Satisfactory or Specify Corrective Action Needed	Inspection Date	Completion Date
UPHOLSTERY			
General Workplace:			
Common walkways are clear of all materials		3-19-12	3-19-12
Materials or equipment stored away, so no projectiles will not		3-19-12	3-19-12
Work areas clean and orderly and spilled materials cleaned up		3-19-12	3-19-12
Items stored on high shelves are stored properly		3-19-12	3-19-12
Electrical boxes accessible with a minimum of 30" clearance		3-19-12	3-19-12
First aid kit accessible and stocked	I need Antiseptic spray *		
Tools, Machines & Equipment:			
Personal Protective Equipment is in use (see attachment)		3-19-12	3-19-12
Electrical cords on equipment and machines free of cuts or other damage		3-19-12	3/19/12
Compressor hoses: no leaks, set at 80-120, stored off the floor		3-19-12	3/19-12
Portable heaters unplugged at the end of day		3/19/12	3/19-12
Employees aware of the hazards caused by faulty or improperly used equipment		3/19/12	3/19/12
Fire Safety:			
The roller gate is clear from obstruction or blockage including the water pipe.		3/19/12	3/19/12
All exits and fire extinguishers free from obstructions or blockage		3/19/12	3/19/12
All extinguishers are in their designated places, maintained and tagged (initial tag)		3/19/12	3/19-12
Emergency exits are clear from obstruction or blockage.			
Ladders:			
All ladders maintained in good condition, steps and side rails tight, all		3/19/12	3/19/12
Ladder rungs and steps free of grease and oil		3/19-12	3/19/12
All ladders are secure stored away from doors opening toward the		3/19/12	3/19/12

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* ordered on 3/19/12 SR.

UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)	FA0000039 8	1
EPA ID # (Hazardous Waste Only)	CAL000282470	2
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	IRONIES, INC.	3
BUSINESS SITE ADDRESS	2222 FIFTH ST	103
BUSINESS SITE CITY	BERKELEY	104
	CA	
ZIP CODE	94710	105

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…		If Yes, please complete these pages of the UPCF….
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	☐ YES	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste?	☐ YES	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	☐ YES	ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	☐ YES	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	☐ YES	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES	See CUPA for required forms.

F. LOCAL REQUIREMENTS 15

(You may also be required to provide additional information by your CUPA or local agency.)

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UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID# 1: FA0000398	BEGINNING DATE 100: 01/30/2013	ENDING DATE 101: 12/31/2013	
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: IRONIES, INC.		BUSINESS PHONE 102: 5106442100	
BUSINESS SITE ADDRESS 103: 2222 FIFTH ST		BUSINESS FAX 102a: 5106442170	
BUSINESS SITE CITY 104: BERKELEY	CA	ZIP CODE 105: 94710	COUNTY 108:
DUN & BRADSTREET 106: 806806469		PRIMARY SIC 107:	PRIMARY NAICS 107a:
BUSINESS MAILING ADDRESS 108a: 2222 FIFTH STREET			
BUSINESS MAILING CITY 108b: BERKELEY		STATE 108c: CA	ZIP CODE 108d: 94710
BUSINESS OPERATOR NAME 109: BRAD HUNTZINGER/ KATE MCINTYRE		BUSINESS OPERATOR PHONE 110: 5106442100	

II. BUSINESS OWNER

OWNER NAME 111: BRAD HUNTZINGER/KATE MCINTYRE		OWNER PHONE 112: 5106442100
OWNER MAILING ADDRESS 113: 2222 Fifth		
OWNER MAILING CITY 114: BERKELEY	STATE 115: CA	ZIP CODE 116: 94710

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: LARRY LUNA		CONTACT PHONE 118: 5106441803
CONTACT MAILING ADDRESS 119: 2222 FIFTH STREET		CONTACT EMAIL 119a: kiatt@ironies.com
CONTACT MAILING CITY 120: BERKELEY	STATE 121: CA	ZIP CODE 122: 94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: LARRY LUNA	NAME 128: KIAT TJONG
TITLE 124: OPERATIONS MANAGER	TITLE 129: OPERATIONS
BUSINESS PHONE 125: 5106442100	BUSINESS PHONE 130: 5106442100
24-HOUR PHONE 126: 5106126625	24-HOUR PHONE 131: 5104188534
CELL / PAGER # 127:	CELL / PAGER # 132:
EMAIL	EMAIL

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135: LARRY LUNA
NAME OF SIGNER (print) 136: LARRY LUNA		TITLE OF SIGNER 137: OPERATIONS MANAGER

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Aerosol Spray Cans

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Aerosol Spray Cans

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
140.0	140.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 13.0 226	Xylene 227	☐ Yes 228	1330-20-7 229
2 1.0 230	Ethyl Benzene 231	☐ Yes 232	100-24-14 233
3 39.0 234	Acetone 235	☐ Yes 236	67-64-1 237
4 16.0 238	Propane 239	☐ Yes 240	74-98-6 241
5 2.0 242	Isobutane 243	☐ Yes 244	75-28-5 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Aervor

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Aervor Spray Can

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	40.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Xylene 13 227	☐ Yes 228	1330-20-7 229
2	230	Ethye Benzene 1 231	☐ Yes 232	100-24-14 233
3	234	Acetone 39 235	☐ Yes 236	67-641 237
4	238	Propane 16 239	☐ Yes 240	74-986 241
5	242	Isobutane 2 243	☐ Yes 244	75-285 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
D6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Argon/C02

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Argon/C02

EHS* ☐ Yes 208

CAS# 209
75714-55-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 250.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	75.0 226	Argon 227	☐ Yes 228	229
2	25.0 230	C02 231	☐ Yes 232	7440-37-1 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B3

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
BT Satin Pastel Base

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Breakthrough

EHS* ☐ Yes 208

CAS# 209
13463-67-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	30.0 (226)	titanium dioxide (227)	☐ Yes (228)	13463-67-7 (229)
2	7.0 (230)	N-Butyl Alcohol (231)	☐ Yes (232)	7727-43-7 (233)
3	1.0 (234)	Proprietary resin (235)	☐ Yes (236)	Not available (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Burnt Sienna

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Burnt Sienna

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Iron Oxide (Fe203) 227	☐ Yes 228	229
2	230	Silicone Dioxide 231	☐ Yes 232	1309-37-1 233
3	234	Aluminum Oxide 235	☐ Yes 236	237
4	238	Fe203, S10Z, AL203 239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Cadmiuim Medium Light Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Cadmiuim Medium Light Red

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Edmium Sulfide 227	☐ Yes 228	229
2	230	Cadmium Sulfide 231	☐ Yes 232	233
3	234	Barium Sulfide 235	☐ Yes 236	237
4	238	Zinc Sulfide 239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Cadmium Medium Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Cadmium Medium Red

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Cadmium Sulfide 227	☐ Yes 228	229
2	230	Cadmium Sulfide 231	☐ Yes 232	233
3	234	Barium Sulfate 235	☐ Yes 236	237
4	238	Zinc Sulfate 239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Carbon Black

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Carbon Black

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Carbon Black 227	☐ Yes 228	1335-86-4 229
2	20.0 230	Water 231	☐ Yes 232	233
3	234	Sulfat 235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Chromium Oxide Green

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Chromic Oxide C203

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) 221
☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Cobalt Yellow

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Cobalt Yellow

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Cobalt Oxide 227	☐ Yes 228	229
2	230	Potassium 231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 001

GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Fiberglass Spray Booth Filter

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Fiberglass Spray Booth Filter

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Solid (3.1)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 215: 75.0

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	75.0		352

UNITS* (Check one item only) 221: ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Fiberglass Spray Booth Filter 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Hammerite

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Hammerite

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 11.0 226	Xylene 227	☐ Yes 228	1330-20-7 229
2 4.0 230	C8 Aromatis 4 231	☐ Yes 232	14742-95-6 233
3 11.0 234	Propane 235	☐ Yes 236	74-98-6 237
4 11.0 238	Isobutane 239	☐ Yes 240	75-28-5 241
5 39.0 242	Acetone 243	☐ Yes 244	67-64-1 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Hydrostone

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Hydrostone

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2500.0	5000.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 226	Plaster of Paris 227	☐ Yes 228	229
2	5.0 230	Portland Cement 231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A3-A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Iron Oxide

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide

EHS* ☐ Yes 208

CAS# 209
1309-37-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Irritant (Irr), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 100.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
50.0	100.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes 228	229
2 230	231	☐ Yes 232	233
3 234	235	☐ Yes 236	237
4 238	239	☐ Yes 240	241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: B2
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205: Lacquer Thinner
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Lacquer Thinner
EHS* ☐ Yes 208

CAS# 209:
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE
RADIOACTIVE ☐ Yes 212
CURIES 213:

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS
LARGEST CONTAINER 215: 5.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
8.0	15.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	12.0 (226)	Methyl Ethyl (227)	☐ Yes (228)	78-93-3 (229)
2	5.0 (230)	Butyl Acetate (231)	☐ Yes (232)	123-86-4 (233)
3	5.0 (234)	Ethyl Alcohol (235)	☐ Yes (236)	64-17-5 (237)
4	(238)	Glycol Ethyl (239)	☐ Yes (240)	111-76-2 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Medium Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide Fe203

EHS* ☐ Yes 208

CAS# 209
1309-37-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
D1

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Metal Prep 79

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Metal Prep 79

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4.0	8.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 10.0 226	Phosphoric Acid 227	☐ Yes 228	7664-38-2 229
2 10.0 230	2 Butoxyethanol 231	☐ Yes 232	111-76-2 233
3 5.0 234	Diethylene Glycol 235	☐ Yes 236	112-34-5 237
4 238	Monobutyl Ether 239	☐ Yes 240	241
5 1.0 242	Surfactant 243	☐ Yes 244	Proprietary 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Mohawk Wood Stain M520

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Mohawk Wood Stain M520

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.75	6.25		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 226	Acetone 227	☐ Yes 228	67-64-1 229
2	1.0 230	Water 231	☐ Yes 232	7732-18-5 233
3	1.0 234	Propylene Glycol 235	☐ Yes 236	57-55-6 237
4	1.0 238	Ethanol 239	☐ Yes 240	64-17-5 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 001

GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oil Based Paint Waste

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oil Based Paint Waste

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 215: 55.0

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55.0	55.0	0.5	

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM ☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO ☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER ☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON ☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Oil Based Paint Waste 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Orange Iron Oxide

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide Fe203

EHS* ☐ Yes 208

CAS# 209
1309-37-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oxygen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oxygen

EHS* ☐ Yes 208

CAS# 209
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Oxidizer, gas (4.4)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 250.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☒ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 001

GRID# (optional) 204: A3-A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
PMC-744 Rubber Mold

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
PMC-744 Rubber Mold

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214: ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS

LARGEST CONTAINER 215: 40.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
40.0	80.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	2.4 Toluenedisocyanate 227	☐ Yes 228	584-84-9 229
2	230	2.6 Toluenedisocyanate 231	☐ Yes 232	91-08-7 233
3	234	Bis(2-ethylhexyl) 235	☐ Yes 236	117-81-7 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
G6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propylene

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propylene

EHS* ☒ Yes 208

CAS# 209
115-07-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 30.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
14.96	224.41		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Raw Umber

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Red, Iron Oxide, Raw Umber

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Iron Oxide 227	☐ Yes 228	1309-37-1 229
2 30.0 230	Solvent Naptha (petroleum) 231	☐ Yes 232	64742-88-7 233
3 5.0 234	Manganese Trioxide 235	☐ Yes 236	1317-34-6 237
4 5.0 238	Umber 239	☐ Yes 240	12713-03-0 241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: C5
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205: Triprime Black
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Triprime Black
EHS* ☐ Yes 208

CAS# 209:
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210:
Flammable Liquid, Class I-A (3.3 I-A), Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE
RADIOACTIVE 212: ☐ Yes
CURIES 213:

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS
LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	15.0 (226)	Xylene (227)	☐ Yes (228)	1330-20-7 (229)
2	10.0 (230)	Microcrystalline (231)	☐ Yes (232)	1317-95-9 (233)
3	5.0 (234)	Methyl Propyl Ketone (235)	☐ Yes (236)	107-87-9 (237)
4	5.0 (238)	Methyl Isobutyl Acetone (239)	☐ Yes (240)	108-10-1 (241)
5	5.0 (242)	Methyl N-Propyl Ketone (243)	☐ Yes (244)	707-87-9 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Ultramarine Blue

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Ultramarine Blue

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) 221
☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Sodium Aluminum Sulpho Silicate 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Venetian Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide Fe203

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes 228	229
2 230	231	☐ Yes 232	233
3 234	235	☐ Yes 236	237
4 238	239	☐ Yes 240	241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
White Cement

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
White Cement

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 100.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	3c90s02 227	☐ Yes 228	12168-85-3 229
2	230	3ca0s02 231	☐ Yes 232	10034-77-2 233
3	234	3ca0al203fe203 235	☐ Yes 236	12042-78-3 237
4	238	4caoal203fe203 239	☐ Yes 240	12068-35-8 241
5	242	caso42h20 243	☐ Yes 244	13397-24-5 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
B2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Xylol Thinner (Xylene)

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Xylol Thinner (Xylene)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Xylenes 227	☐ Yes 228	1330-20-7 229
2	230	Ethylbenzene 231	☐ Yes 232	100-41-4 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
C5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Yellow Iron Oxide

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide

EHS* ☐ Yes 208

CAS# 209
51274-00-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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Facility Site Plan/ Storage Map	Business Name: Ironies Inc.	Site Address: 2222 5th Street	Legend

LEGEND

- FE — Fire Extinguisher
- \+ — First Aid Kit
- E — Electrical Shutoff
- K — Knockboy
- W — Water Shutoff
- H — Fire Hydrant
- G — Gas Shutoff
- X — Risen
- FH — Fire Hazard Material
- FH — Fire Hazard Waste
- Storm Drain
- P — Propylene Gas
- A — Argon/ CO2
- O — Oxygen
- FL — Flammable Chemical Storage

DRAFT

CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
FA0000398		02/19/2013

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.
IRONIES, INC.

BUSINESS SITE ADDRESS 103.
2222 FIFTH ST

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
Manufacturing/ Warehousing	Paint Booth Filter & Oil Paint Waste

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.
☒ 1. HAZARDOUS MATERIALS; ☒ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.
☒ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☐ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☒ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:
1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:
1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☒ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☐ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:

AMBULANCE, FIRE, POLICE AND CHP	9-1-1
CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
POISON CONTROL CENTER	(800) 222-1222
LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA)	(510) 981-7460 City of Berkeley Toxic Mgt. Div C3.
OTHER (Specify): Clean Harbors C4.	408-451-5000 C5.

NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates Summit Medical Center C6. — 510-204-4444 C7.

AGENCY NOTIFICATION PHONE NUMBERS:

CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 SF Bay Regio C8.
U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
CALIFORNIA DEPT OF FISH AND WILDLIFE (CDFW)	(916) 358-2900
U.S. COAST GUARD	(202) 267-2180
CAL/OSHA	(916) 263-2800
STATE FIRE MARSHAL	(916) 445-8200
OTHER (Specify): C9.	C10.
OTHER (Specify): C11.	C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☐ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☐ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☐ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☐ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☐ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☒ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☒ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☒ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☒ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☒ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☐ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☒ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☐ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☒ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☐ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☒ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☒ 3. VERBAL (i.e., SHOUTING);
- ☐ 4. OTHER (Specify): E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

5th Street parking Lot

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☒ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☒ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☒ CHEMICAL PROTECTIVE GLOVES	G4. Paint room B3	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☒ SAFETY GLASSES / GOGGLES / SHIELDS	G8. Paint room B3, Metal Shop C6	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☐ CARTRIDGE RESPIRATORS	G12.	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☒ FIRST AID KITS / STATIONS	G16. All Departments	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☐ PORTABLE EYEWASH KITS	G20.	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☒ PORTABLE FIRE EXTINGUISHERS	G26. See Evacuation Map	G27.
	14. ☒ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28. All departments	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☒ ALL-IN-ONE SPILL KIT	G34. Paint room, A3	G35.
	18. ☐ ABSORBENT MATERIAL	G36.	G37.
	19. ☐ CONTAINER FOR USED ABSORBENT	G38.	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☐ BROOM	G42.	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☐ SHOP VAC	G46.	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☒ TELEPHONES (Includes cellular)	G60. Operations Manager/ Emergency Coord	G61.
	31. ☐ INTERCOM / PA SYSTEM	G62.	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☒ OTHER	G68. Fire Sprinkler Audible Alarms	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply) H1.	LOCATIONS (e.g., shop, outdoor shed, forensic lab)
☒ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA	Paint Room, Fire Safety cabinets H2.
☐ 2. PROCESS LINES / PIPING	H3.
☐ 3. LABORATORY	H4.
☐ 4. WASTE TREATMENT AREA	H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply) H6.	LOCATIONS
☒ 1. SHELVES, CABINETS AND RACKS	Throughout all facility H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)	H8.
☒ 3. PORTABLE GAS CYLINDERS	H9.
☐ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES	H10.
☒ 5. SPRINKLER SYSTEMS	Throughout all facility H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)	H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☐ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☒ 3. SAFETY / TAILGATE MEETINGS;

☐ 4. STUDY GUIDES / MANUALS (Specify): Monthly Safety Meetings (PPE, Evacuation Procedures, Forklift training. Fall protection, Fire E I2.

☐ 5. OTHER (Specify): I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED K1.
Larry Luna	02/19/2013
NAME OF SIGNER (print) K2.	TITLE OF SIGNER K3.
	Operations Manager

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UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)	FA0000039 8 [1]	EPA ID # (Hazardous Waste Only) CAL000282470 [2]
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	IRONIES, INC. [3]	
BUSINESS SITE ADDRESS	2222 FIFTH ST [103]	
BUSINESS SITE CITY	BERKELEY [104]	CA ZIP CODE 94710 [105]

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	☐ YES	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste?	☒ YES	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	☐ YES	ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	☐ YES	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	☐ YES	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES	See CUPA for required forms.

F. LOCAL REQUIREMENTS [15]

(You may also be required to provide additional information by your CUPA or local agency.)

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UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID# FA0000398 [1]	BEGINNING DATE [100] 02/04/2014	ENDING DATE [101] 02/04/2015	
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) [3] IRONIES, INC.		BUSINESS PHONE [102] 5106442100	
BUSINESS SITE ADDRESS [103] 2222 FIFTH ST		BUSINESS FAX [102a] 5106442170	
BUSINESS SITE CITY [104] BERKELEY	CA	ZIP CODE [105] 94710	COUNTY [108]
DUN & BRADSTREET [106] 806806469		PRIMARY SIC [107] 2511	PRIMARY NAICS [107a] 337215
BUSINESS MAILING ADDRESS [108a] 2222 FIFTH STREET			
BUSINESS MAILING CITY [108b] BERKELEY		STATE [108c] CA	ZIP CODE [108d] 94710
BUSINESS OPERATOR NAME [109] BRAD HUNTZINGER/ KATE MCINTYRE		BUSINESS OPERATOR PHONE [110] 5106442100	

II. BUSINESS OWNER

OWNER NAME [111] BRAD HUNTZINGER/KATE MCINTYRE		OWNER PHONE [112] 5106442100	
OWNER MAILING ADDRESS [113] 2222 Fifth			
OWNER MAILING CITY [114] BERKELEY		STATE [115] CA	ZIP CODE [116] 94710

III. ENVIRONMENTAL CONTACT

CONTACT NAME [117] Kiat Tjong		CONTACT PHONE [118] 5106442100	
CONTACT MAILING ADDRESS [119] 2222 FIFTH STREET		CONTACT EMAIL [119a] kiatt@ironies.com	
CONTACT MAILING CITY [120] BERKELEY		STATE [121] CA	ZIP CODE [122] 94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME [123] Kiat Tjong	NAME [128] Tracy Emayan
TITLE [124] Operations	TITLE [129] Human Resources Administrator
BUSINESS PHONE [125] 5106442100	BUSINESS PHONE [130] 5106442100
24-HOUR PHONE [126] 5107356060	24-HOUR PHONE [131] 5102927285
CELL / PAGER # [127]	CELL / PAGER # [132]
EMAIL	EMAIL

ADDITIONAL LOCALLY COLLECTED INFORMATION: [133]

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE [134]	NAME OF DOCUMENT PREPARER [135]
		Joe Moulton, CHMM, Du-All Safety, 5106518289
NAME OF SIGNER (print) [136] Kiat Tjong	TITLE OF SIGNER [137] Operations	

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Chromium (III) Oxide Green

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Chromic Oxide Green (Pigment)

EHS* ☐ Yes 208

CAS# 209
1308-38-9

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: B5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Hydrostone

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Hydrostone

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 215: 50.0

FED HAZARD CATEGORIES (Check all that apply) 216
☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2500.0	5000.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 (226)	Plaster of Paris (227)	☐ Yes (228)	26499-65-0 (229)
2	5.0 (230)	Portland Cement (231)	☐ Yes (232)	65997-15-1 (233)
3	1.5 (234)	Silica, crystaline (235)	☐ Yes (236)	14808-60-7 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Iron Oxide Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide Red, Orange (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) 221
☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☒ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	95.0 226	Iron Oxide Red 227	☐ Yes 228	1309-37-1 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Mineral Spirits

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Mineral Spirits

EHS* ☐ Yes 208

CAS# 209
64475-85-0

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0		

UNITS* (Check one item only) 221
☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oxygen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oxygen

EHS* ☐ Yes 208

CAS# 209
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Oxidizer, gas (4.4)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 215: 250.0

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C6; E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propylene

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propylene

EHS* ☐ Yes 208

CAS# 209
115-07-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Liquefied Gas (3.2l), Toxic (Tox), Unstable (Reactive), Class 1 (6.1-1)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 357.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
357.0	714.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Yellow Iron Oxide

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Yellow Iron Oxide (Pigment)

EHS* ☐ Yes 208

CAS# 209
51274-00-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Cadmium Red (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 (226)	Cadmium Sulfide (227)	☐ Yes (228)	1306-23-6 (229)
2	10.0 (230)	Zinc Sulfide (231)	☐ Yes (232)	131-98-3 (233)
3	10.0 (234)	Barium Sulfide (235)	☐ Yes (236)	21109-95-5 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Non-RCRA Hazardous Waste Solid (Spent Fiberglass Spray Booth Filter)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 75.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	75.0	150.0	352

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Paint Related Material 227	☐ Yes 228	Unknown 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
RCRA Hazardous Waste Flammable Liquid (paint related material)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 55.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55.0	55.0	165.0	343

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Oil Based Paint Waste 227	☐ Yes 228	Unknown 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Kutwell 40 (cutting fluid)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 8.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
13.0	13.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER 5-gallon plastic bucket; c

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	5.0 (226)	Fatty Acids, Tall-oil compounds with triethanolamine (227)	☐ Yes (228)	68132-46-7 (229)
2	5.0 (230)	Fatty acids, tall-oil, compounds with ethanolamine (231)	☐ Yes (232)	68132-47-8 (233)
3	5.0 (234)	Potassium Carboxylic acid soaps (235)	☐ Yes (236)	66072-08-0 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Radnor Solvet Based Anti-Spatter (Aerosol)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Aersol Can
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	84.0 (226)	Methylene Chloride (227)	☐ Yes (228)	75-09-2 (229)
2	17.0 (230)	Carbon Dioxide (231)	☐ Yes (232)	124-38-9 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
D4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous pigment disolved in water

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
140.0	140.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☐ a. AMBIENT ☐ b. ABOVE AMBIENT ☒ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	0.01 (226)	Pigments (See specific pigment for components) (227)	☐ Yes (228)	NA (229)
2	99.9 (230)	Water (231)	☐ Yes (232)	7789-20-0 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Zinc Oxide (White Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☒ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Plastic Bucket
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Zinc Oxide (227)	☐ Yes (228)	1314-13-2 (229)
2	1.0 (230)	Lead (231)	☐ Yes (232)	1317-36-8 (233)
3	1.0 (234)	Cadmium Oxide (235)	☐ Yes (236)	1306-1-0 (237)
4	1.0 (238)	Zinc Carbonate (239)	☐ Yes (240)	3684-35-9 (241)
5	1.0 (242)	Zinc Propionate (243)	☐ Yes (244)	557-28-8 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Smoothon Universal Mold Release

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.11 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.4	3.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	85.0 (226)	Alkanes, C7-C10 Iso (227)	☐ Yes (228)	90622-56-2 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Flammable Liquid Aerosols

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.13 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.6	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	30.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	30.0 (230)	Propane (231)	☐ Yes (232)	68476-86-8 (233)
3	15.0 (234)	Toulene (235)	☐ Yes (236)	108-88-3 (237)
4	15.0 (238)	Aliphatic Hydrocarbon (239)	☐ Yes (240)	64742-89-8 (241)
5	15.0 (242)	Xylene (243)	☐ Yes (244)	1330-20-7 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Flammable Liquids

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	7.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 (226)	Isopropyl alcohol (227)	☐ Yes (228)	67-63-0 (229)
2	60.0 (230)	Solvent Naphtha (231)	☐ Yes (232)	64742-89-8 (233)
3	40.0 (234)	Xylenes, mixed (235)	☐ Yes (236)	1330-20-7 (237)
4	10.0 (238)	Ethyl benzene (239)	☐ Yes (240)	100-41-4 (241)
5	(242)	(243)	☐ Yes (244)	(245)

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ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
White Vinegar 20% Solution

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 226	Acetic Acid 227	☐ Yes 228	64-19-7 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

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ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Germicidal Bleach

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	9.0 (226)	Sodium Hypochlorite (227)	☐ Yes (228)	7681-52-9 (229)
2	1.0 (230)	Sodium Hydroxide (231)	☐ Yes (232)	7647-01-0 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Combusible Liquids

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Mineral Spirits 227	☐ Yes 228	64475-85-0 229
2	100.0 230	Oil of Turpentine 231	☐ Yes 232	8006-64-2 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Water Based Paint

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 10.0 226	Dipropylene glycol n-butyl ether 227	☐ Yes 228	29911-28-2 229
2 10.0 230	Ethylene glycol monopropyl ether 231	☐ Yes 232	2807-30-9 233
3 5.0 234	Diatomaceous Earth 235	☐ Yes 236	68855-54-9 237
4 5.0 238	Ethylene glycol 239	☐ Yes 240	107-21-1 241
5 15.0 242	Titanium dioxide 243	☐ Yes 244	13463-67-7 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Irrritant Liquids (i.e. Cleaners and detergents)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	80.0 226	Water 227	☐ Yes 228	7732-18-5 229
2	5.0 230	2-butoxyethanol 231	☐ Yes 232	111-76-2 233
3	5.0 234	Ethoxylated Alcohol 235	☐ Yes 236	68439-46-3 237
4	5.0 238	D-Limonene 239	☐ Yes 240	5989-27-5 241
5	5.0 242	Emulsifiers 243	☐ Yes 244	Proprietart 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Homax Gloss Wet Look Cure Seal, Patchcrete

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4.0	8.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 (226)	Acrylic Polymer (227)	☐ Yes (228)	Proprietary (229)
2	1.0 (230)	Polyoxyethylene (231)	☐ Yes (232)	9036-19-5 (233)
3	55.0 (234)	Water (235)	☐ Yes (236)	7732-18-5 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Epoxy Resins

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr), Sensitizer (Sens)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Reaction product of epichlorohydrin & bisphenol A 227	☐ Yes 228	25085-99-8 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Epoxy Hardeners

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr), Sensitizer (Sens), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS

LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 (226)	Pentaerythritol-PO-mecraptoglycerol (227)	☐ Yes (228)	72244-98-5 (229)
2	10.0 (230)	N-(2-Aminoethyl)piperazine (231)	☐ Yes (232)	140-31-8 (233)
3	10.0 (234)	Aliphatic amines (235)	☐ Yes (236)	Proprietary (237)
4	10.0 (238)	Phenol, 2,4,6-tris[(dimethylamino)methyl] (239)	☐ Yes (240)	90-72-2 (241)
5	5.0 (242)	Silica, amorphous, fumed, crystaline-free (243)	☐ Yes (244)	112945-52-5 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Upholstery Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
E4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
A&L Cosmoline Remover

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.0	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 226	Solvent naphtha, petroleum, light aliph 227	☐ Yes 228	64742-89-8 229
2	40.0 230	Xylenes, Mixed 231	☐ Yes 232	1330-20-7 233
3	10.0 234	Ethyl benzene 235	☐ Yes 236	100-41-4 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Upholstery Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
General Purpose Adhesive (Aerosol)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS

LARGEST CONTAINER 215: 0.11

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.2	4.4		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	99.0 (230)	Hexane (231)	☐ Yes (232)	110-54-3 (233)
3	99.0 (234)	Isobutane (235)	☐ Yes (236)	75-28-5 (237)
4	99.0 (238)	Propane (239)	☐ Yes (240)	74-98-6 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Jasco Premium Paint Remover

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.5	3.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Dichloromethane (Methylene chloride) 227	☐ Yes 228	75-09-2 229
2	13.0 230	Methanol (methyl alcohol; carbinol; wood alcohol) 231	☐ Yes 232	67-56-1 233
3	5.0 234	Stoddard solvent (mineral spirits; aliphatic petroleum dis 235	☐ Yes 236	8052-41-3 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Smooth Cast Part A

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	9.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	15.0 (226)	Butyl benzyl phthalate (227)	☐ Yes (228)	85-68-7 (229)
2	80.0 (230)	4,4' Methylene bis (phenylisocynate) (MDI) (231)	☐ Yes (232)	101-68-8 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Adhesives (i.e. Contact Cement)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.0	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Toluene 227	☐ Yes 228	108-88-3 229
2 13.0 230	meth ethyl keytone (MEK) 231	☐ Yes 232	78-93-3 233
3 10.0 234	light aliphatic solvent naphtha 235	☐ Yes 236	64742-89-8 237
4 10.0 238	n-heptane 239	☐ Yes 240	142-82-5 241
5 1.5 242	magnesium oxide fume 243	☐ Yes 244	1309-48-4 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: Stone Room
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 003
GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205:
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Smooth Cast Part B
EHS* ☐ Yes 208

CAS# 209:
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210: Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211
RADIOACTIVE ☐ Yes 212
CURIES 213:

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214
LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	9.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.7 (226)	Polyol/Plasticizer Blend (227)	☐ Yes (228)	Proprietary (229)
2	0.5 (230)	Phenylmercuric Neodecanoate (231)	☐ Yes (232)	26545-49-3 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Near Utility Sink and Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: D1; B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Non-RCRA Hazardous Waste Corrosive Liquid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 215: 60.0

FED HAZARD CATEGORIES (Check all that apply) 216
☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
70.0	200.0	200.0	135

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 35.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Secondary Containment

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	89.0 (226)	Water (227)	☐ Yes (228)	7732-18-5 (229)
2	5.0 (230)	Phosphoric Acid (231)	☐ Yes (232)	7664-38-2 (233)
3	1.0 (234)	Diethylene glycol monobutyl ether (235)	☐ Yes (236)	112-34-5 (237)
4	5.0 (238)	Ethylene glycol n-butyl ether (239)	☐ Yes (240)	112-48-1 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
White Cement

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	96.0 226	Portland Cment 227	☐ Yes 228	65997-15-1 229
2	6.5 230	Gypsum 231	☐ Yes 232	7778-18-9 233
3	0.1 234	Slica, Quartz 235	☐ Yes 236	14808-60-7 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Spay Paint (Aerosol Cans)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.11 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.5	7.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	13.0 (226)	Xylene (227)	☐ Yes (228)	1330-20-7 (229)
2	1.0 (230)	Ethyl Benzene (231)	☐ Yes (232)	100-24-14 (233)
3	39.0 (234)	Acetone (235)	☐ Yes (236)	67-64-1 (237)
4	16.0 (238)	Propane (239)	☐ Yes (240)	74-98-6 (241)
5	2.0 (242)	Isobutane (243)	☐ Yes (244)	75-28-5 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Wood Stains (i.e. Mohawk)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 226	Acetone 227	☐ Yes 228	67-64-1 229
2	1.0 230	Water 231	☐ Yes 232	7732-18-5 233
3	1.0 234	Propylene Glycol 235	☐ Yes 236	57-55-6 237
4	1.0 238	Ethanol 239	☐ Yes 240	64-17-5 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Chroma-Chem Raw Umber (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Iron Oxide 227	☐ Yes 228	1309-37-1 229
2 30.0 230	Solvent Naptha (petroleum) 231	☐ Yes 232	64742-88-7 233
3 5.0 234	Manganese Trioxide 235	☐ Yes 236	1317-34-6 237
4 5.0 238	Umber 239	☐ Yes 240	12713-03-0 241
5 5.0 242	Calcium Carbonate 243	☐ Yes 244	1317-65-3 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 001

GRID# (optional) 204: A3-A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
PMC-744 Rubber Mold

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 40.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
40.0	80.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	2.4 Toluenedisocyanate 227	☐ Yes 228	584-84-9 229
2	230	2.6 Toluenedisocyanate 231	☐ Yes 232	91-08-7 233
3	234	Bis(2-ethylhexyl) 235	☐ Yes 236	117-81-7 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Ultramarine Blue (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Sodium Aluminium Sulfosilicate (227)	☐ Yes (228)	57455-37-5 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
D6, E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Argon, mixed with Carbon Dioxide compressed

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 381.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
762.0	1524.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	75.0 (226)	Argon (227)	☐ Yes (228)	7440-37-1 (229)
2	25.0 (230)	C02 (231)	☐ Yes (232)	124-38-9 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B3

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Water Base Paint (e.g. Breakthrough)

EHS* ☐ Yes 208

CAS# 209
13463-67-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
33.0	67.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Plastic Bucket
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 30.0 226	titanium dioxide 227	☐ Yes 228	13463-67-7 229
2 7.0 230	N-Butyl Alcohol 231	☐ Yes 232	7727-43-7 233
3 1.0 234	Proprietary resin 235	☐ Yes 236	Not available 237
4 30.0 238	Ethylene glycol monopropl ether 239	☐ Yes 240	2807-30-9 241
5 10.0 242	Dipropylene glycol n-butyl ether 243	☐ Yes 244	29911-28-2 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A3-A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Bayferrox Oxides (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 100.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
50.0	100.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 226	C.I. Pigment Black 227	☐ Yes 228	3171-69-9 229
2	99.0 230	Iron (III) Oxide 231	☐ Yes 232	1309-37-1 233
3	99.0 234	Iron (III) Hydrate 235	☐ Yes 236	20344-49-4 237
4	99.0 238	Iron Oxide (Magnetite 239	☐ Yes 240	1317-61-9 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Carbon Black (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 25.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
25.0	50.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 80.0 226	Carbon Black 227	☐ Yes 228	1335-86-4 229
2 230	231	☐ Yes 232	233
3 234	235	☐ Yes 236	237
4 238	239	☐ Yes 240	241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Oil Base Paint and Laquers (e.g. Hammerite, Triprime)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
7.0	53.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 15.0 226	Xylene 227	☐ Yes 228	1330-20-7 229
2 4.0 230	C8 Aromatis 4 231	☐ Yes 232	14742-95-6 233
3 11.0 234	Propane 235	☐ Yes 236	74-98-6 237
4 11.0 238	Isobutane 239	☐ Yes 240	75-28-5 241
5 39.0 242	Acetone 243	☐ Yes 244	67-64-1 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Burnt Sienna (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Iron Oxide 227	☐ Yes 228	1309-37-1 229
2 10.0 230	Barium Sulfate, Barytes 231	☐ Yes 232	7727-43-7 233
3 4.0 234	Crysalline Silca, Quartz 235	☐ Yes 236	14808-60-7 237
4 2.0 238	Kaolin 239	☐ Yes 240	1332-58-7 241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: Paint Room
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Xylol Thinner (Xylene)
EHS* ☐ Yes 208

CAS# 209
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211
RADIOACTIVE ☐ Yes 212
CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214
LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 (226)	Xylenes (227)	☐ Yes (228)	1330-20-7 (229)
2	10.0 (230)	Ethylbenzene (231)	☐ Yes (232)	100-41-4 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lacquer Thinner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
8.0	15.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	12.0 226	Methyl Ethyl 227	☐ Yes 228	78-93-3 229
2	5.0 230	Butyl Acetate 231	☐ Yes 232	123-86-4 233
3	5.0 234	Ethyl Alcohol 235	☐ Yes 236	64-17-5 237
4	5.0 238	Glycol Ethyl 239	☐ Yes 240	111-76-2 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: Stone Room
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205:
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Cobalt Yellow (Pigment)
EHS* ☐ Yes 208

CAS# 209:
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210: Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE
RADIOACTIVE ☐ Yes 212
CURIES 213:

PHYSICAL STATE (Check one item only) 214: ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS
LARGEST CONTAINER 215: 10.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Cobalt Oxide (227)	☐ Yes (228)	1308-06-1 (229)
2	5.0 (230)	Potassium (231)	☐ Yes (232)	7440-09-7 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

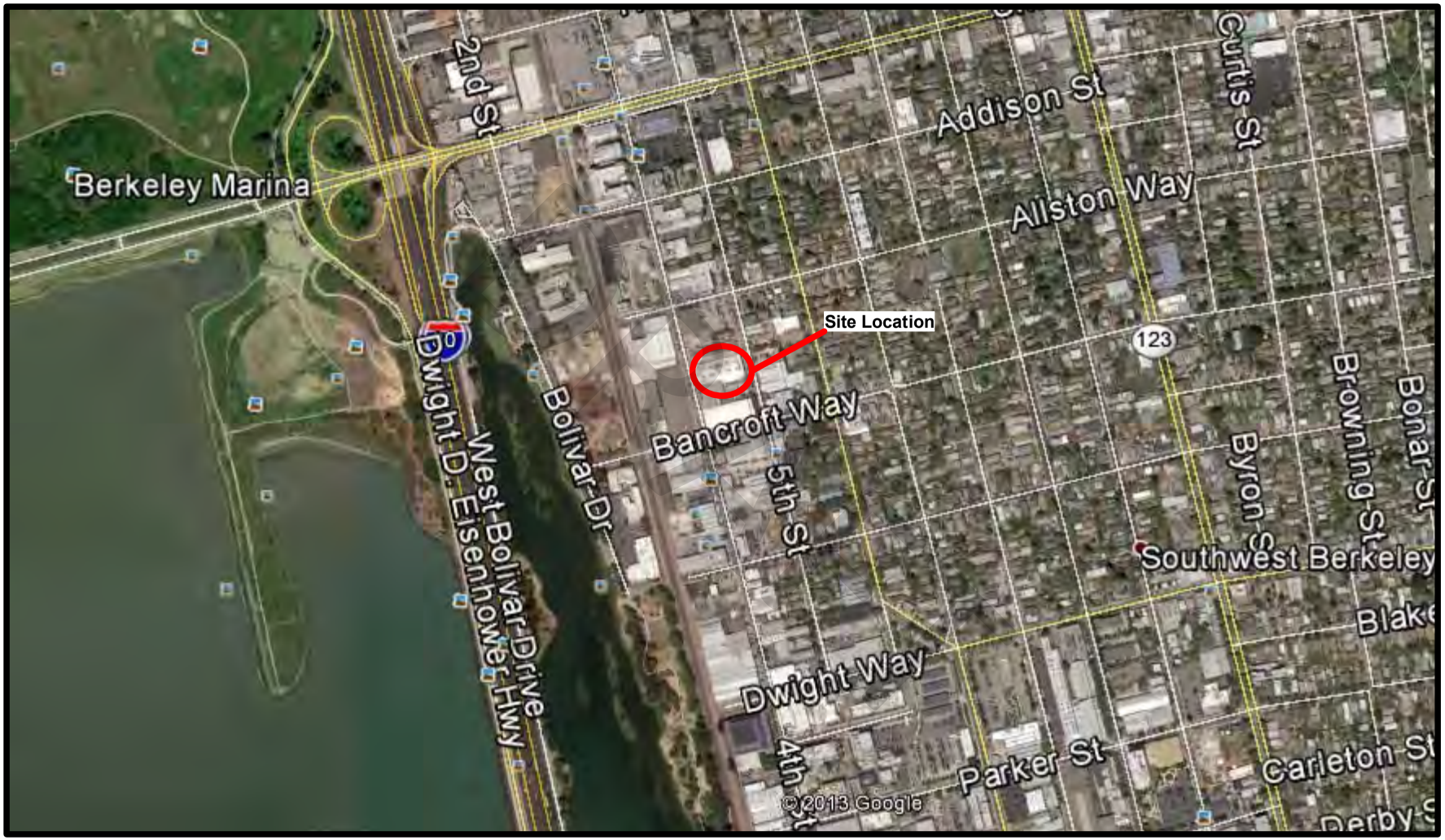
If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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Ironies Location Map



North

SCALE

0 950 1900 Feet

Facility Location Map

Ironies
2222 5th Street
Berkeley, California 94710
Drawing Date: February 3, 2014

Figure 1

Prepared by:
DU-ALL SAFETY
du-all.com

Ironies Site Plan



Legend

- Auto SPKR Connection
- Drive Way
- Electrical shut off
- Emergency Shut Off (Fuel)
- Fire Extinguisher
- Fire Hydrant
- Gas Shut Off
- Outdoor Hazardous Material Transfer Area
- Knox Box
- Air Compressor
- Sanitary Drain
- Spill Kit
- Storm Drain
- Transformer
- Water Shut Off

SCALE

0 110 220 feet

Site Plan

Ironies
2222 5th Street
Berkely, California
Drawn: February 3, 2014

Figure 2

Prepared by:
DU-ALL SAFETY
du-all.com

Facility Storage Map Confidential	Business Name: Ironies Inc.	Site Address: 2222 5th Street	Legend

LEGEND

FE Fire Extinguisher

\+ First Aid Kit

E Electrical Shutoff

K Knockboy

W Water Shutoff

H Fire Hydrant

G Gas Shutoff

X Risen

FH Fire Hazard Material

FH Fire Hazard Waste

Storm Drain

P Propylene Gas

A Argon/ CO2

O Oxygen

FL Flammable Chemical Storage

Sump Pump

S Sanitary Drain

DRAFT

CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
FA0000398		02/19/2013

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.
IRONIES, INC.

BUSINESS SITE ADDRESS 103.
2222 FIFTH ST

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
Manufacturing/ Warehousing	Paint Booth Filter & Oil Paint Waste

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.
☒ 1. HAZARDOUS MATERIALS; ☒ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.
☒ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☐ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☒ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:
1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:
1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☒ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☐ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:

AMBULANCE, FIRE, POLICE AND CHP	9-1-1
CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
POISON CONTROL CENTER	(800) 222-1222
LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA)	(510) 981-7460 City of Berkeley Toxic Mgt. Div C3.
OTHER (Specify): Clean Harbors C4.	408-451-5000 C5.

NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates Summit Medical Center C6. — 510-204-4444 C7.

AGENCY NOTIFICATION PHONE NUMBERS:

CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 SF Bay Regio C8.
U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
CALIFORNIA DEPT OF FISH AND WILDLIFE (CDFW)	(916) 358-2900
U.S. COAST GUARD	(202) 267-2180
CAL/OSHA	(916) 263-2800
STATE FIRE MARSHAL	(916) 445-8200
OTHER (Specify): C9.	C10.
OTHER (Specify): C11.	C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☐ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☐ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☐ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☐ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☐ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☒ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☒ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☒ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☒ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☒ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☐ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☒ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☐ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☒ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☐ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☒ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☒ 3. VERBAL (i.e., SHOUTING);
- ☐ 4. OTHER (Specify): Announcement using megaphone

E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

5th Street parking Lot

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☒ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☒ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☒ CHEMICAL PROTECTIVE GLOVES	G4. Paint Room "B3"	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☒ SAFETY GLASSES / GOGGLES / SHIELDS	G8. Paint Room "B3", Metal Shop "C6"	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☐ CARTRIDGE RESPIRATORS	G12.	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☒ FIRST AID KITS / STATIONS	G16. All Departments - identified on evacuatic	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☐ PORTABLE EYEWASH KITS	G20.	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☒ PORTABLE FIRE EXTINGUISHERS	G26. Throughout Facility - identified on evacu	G27.
	14. ☒ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28. Throughout Facility - All departments - i	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☒ ALL-IN-ONE SPILL KIT	G34. Paint room, A3	G35.
	18. ☐ ABSORBENT MATERIAL	G36.	G37.
	19. ☐ CONTAINER FOR USED ABSORBENT	G38.	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☒ BROOM	G42. Metal Shop, "F6"	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☒ SHOP VAC	G46. Metal Shop, ,"F6" Stone Room, "B5"	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☒ TELEPHONES (Includes cellular)	G60. Operations Manager/ Emergency Coord	G61.
	31. ☐ INTERCOM / PA SYSTEM	G62.	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☒ OTHER	G68. Fire Sprinkler Audible Alarms	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply)		LOCATIONS (e.g., shop, outdoor shed, forensic lab)	
☒ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA	H1.	Paint Room, Fire Safety cabinets	H2.
☐ 2. PROCESS LINES / PIPING			H3.
☐ 3. LABORATORY			H4.
☐ 4. WASTE TREATMENT AREA			H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply)		LOCATIONS	
☒ 1. SHELVES, CABINETS AND RACKS	H6.	Throughout all facility	H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)			H8.
☒ 3. PORTABLE GAS CYLINDERS		Metal Shop, Paint Room, Stone Room	H9.
☐ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES			H10.
☒ 5. SPRINKLER SYSTEMS		Throughout all facility	H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)			H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☐ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☒ 3. SAFETY / TAILGATE MEETINGS;

☒ 4. STUDY GUIDES / MANUALS (Specify): Monthly Safety Meetings (PPE, Evacuation Procedures, Forklift training. Fall protection, Fire E I2.

☐ 5. OTHER (Specify): I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED K1.
Kiat Tjong	02/04/2014
NAME OF SIGNER (print) K2.	TITLE OF SIGNER K3.
	Operations Manager

DRAFT

From: IRONIES, INC.(2222 FIFTH ST /FA0000398)
Print the form contents
Submission History
Status: ACCEPTED Accept Decline Delete

Submitted: Thu Feb 6 2014, 7:09 PM
View a submission summary

Data Transformation Services

Migrate Data

Review

Make sure to save your Review form by clicking on the Save Changes button before accepting or declining a submission.

Save Changes Cancel Changes

Cover Page Comments	Dear Ms. Carrie Estadt, On behalf of Ironies, Inc,, and pursuant to the requirements of Article 1. Chapter 6.95, Division 20 of the California Health and Safety Code, I hereby submit the Hazardous Materials Business Plan (HMBP) for the facility located at 2222 Fifth Street, Berkeley, Californian This HMBP is to replace the existing HMBP(s) your agency has on file for the facility. Should you have any questions on our submission, please contact me at (510) 681-9728 or Kiat Tjong, Operation Manager at 510-644-2100. Regards, Joe Moulton, Manager, Environmental Services; Du-All Safety, LLC; 45950 Hotchkiss St., Fremont, CA 94539
Facility ID	FA0000398
Facility Name	IRONIES, INC.
Site Address	2222 FIFTH ST
City	BERKELEY
Program ID	PR0000288
Program Element	4200
Agency's Review Comments	Melanie - Accept this as FY15 HMBP submittal. However, the billing should be changed for FY14 as this is from ~~2014~~ 2013. inspection. Ironies, Inc. Carrie
Reviewer's Name	Carrie Estadt
Reviewer Email	cestadt@cityofberkeley.info
Review Date	02/18/2014
Status	01

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

updated following inspection RTC
November 2013

FEE SUMMARY SHEET
For Permit Period FY14 (Base Reporting Period: 2013)

Business Name: Ironies, Inc. [CID: 87052]

Address: 2222 Fifth Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	**CY2013**	**CY2013**	**CY2013**	**Last Reported**	**FY2014 Permit**
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	29	15	3	30	47
Total no. of ***waste*** chemicals:	2	1			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	656	6,555	3238	C2	C3 ✓
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	365	150		<55	<5 ✓
Underground Storage Tanks: No. of USTs: _____					
Universal Waste:	CESQUWG	HANDLER	DESTINATION	Date entered into HTE (and initials)	
Other Billing Categories:	Tiered	etiologic	radiologic		
inert gas fee / nano	CalARP	EPCRA	APSA		

Completed by: Carie Ettadt Date: 2/19/14

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)	FA0000039 8 [1]	EPA ID # (Hazardous Waste Only) CAL000282470 [2]
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	IRONIES, INC. [3]	
BUSINESS SITE ADDRESS	2222 FIFTH ST [103]	
BUSINESS SITE CITY	BERKELEY [104]	CA ZIP CODE 94710 [105]

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	☐ YES	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste?	☒ YES	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	☐ YES	ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	☐ YES	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	☐ YES	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES	See CUPA for required forms.

F. LOCAL REQUIREMENTS [15]

(You may also be required to provide additional information by your CUPA or local agency.)

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID#	BEGINNING DATE 100	ENDING DATE 101
FA0000398 1		

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3	BUSINESS PHONE 102
IRONIES, INC.	5106442100
BUSINESS SITE ADDRESS 103	BUSINESS FAX 102a
2222 FIFTH ST	5106442170

BUSINESS SITE CITY 104		ZIP CODE 105	COUNTY 108
BERKELEY	CA	94710	

DUN & BRADSTREET 106	PRIMARY SIC 107	PRIMARY NAICS 107a
806806469	2511	337215

BUSINESS MAILING ADDRESS 108a		
2222 FIFTH STREET		
BUSINESS MAILING CITY 108b	STATE 108c	ZIP CODE 108d
BERKELEY	CA	94710
BUSINESS OPERATOR NAME 109	BUSINESS OPERATOR PHONE 110	
BRAD HUNTZINGER/ KATE MCINTYRE	5106442100	

II. BUSINESS OWNER

OWNER NAME 111	OWNER PHONE 112
BRAD HUNTZINGER/KATE MCINTYRE	5106442100
OWNER MAILING ADDRESS 113	
2222 Fifth	
OWNER MAILING CITY 114	STATE 115 / ZIP CODE 116
BERKELEY	CA 94710

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117	CONTACT PHONE 118
Kiat Tjong	5106442100
CONTACT MAILING ADDRESS 119	CONTACT EMAIL 119a
2222 FIFTH STREET	kiatt@ironies.com
CONTACT MAILING CITY 120	STATE 121 / ZIP CODE 122
BERKELEY	CA 94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Kiat Tjong	NAME 128: Tracy Emayan
TITLE 124: Operations	TITLE 129: Human Resources Administrator
BUSINESS PHONE 125: 5106442100	BUSINESS PHONE 130: 5106442100
24-HOUR PHONE 126: 5107356060	24-HOUR PHONE 131: 5102927285
CELL / PAGER # 127	CELL / PAGER # 132
EMAIL	EMAIL

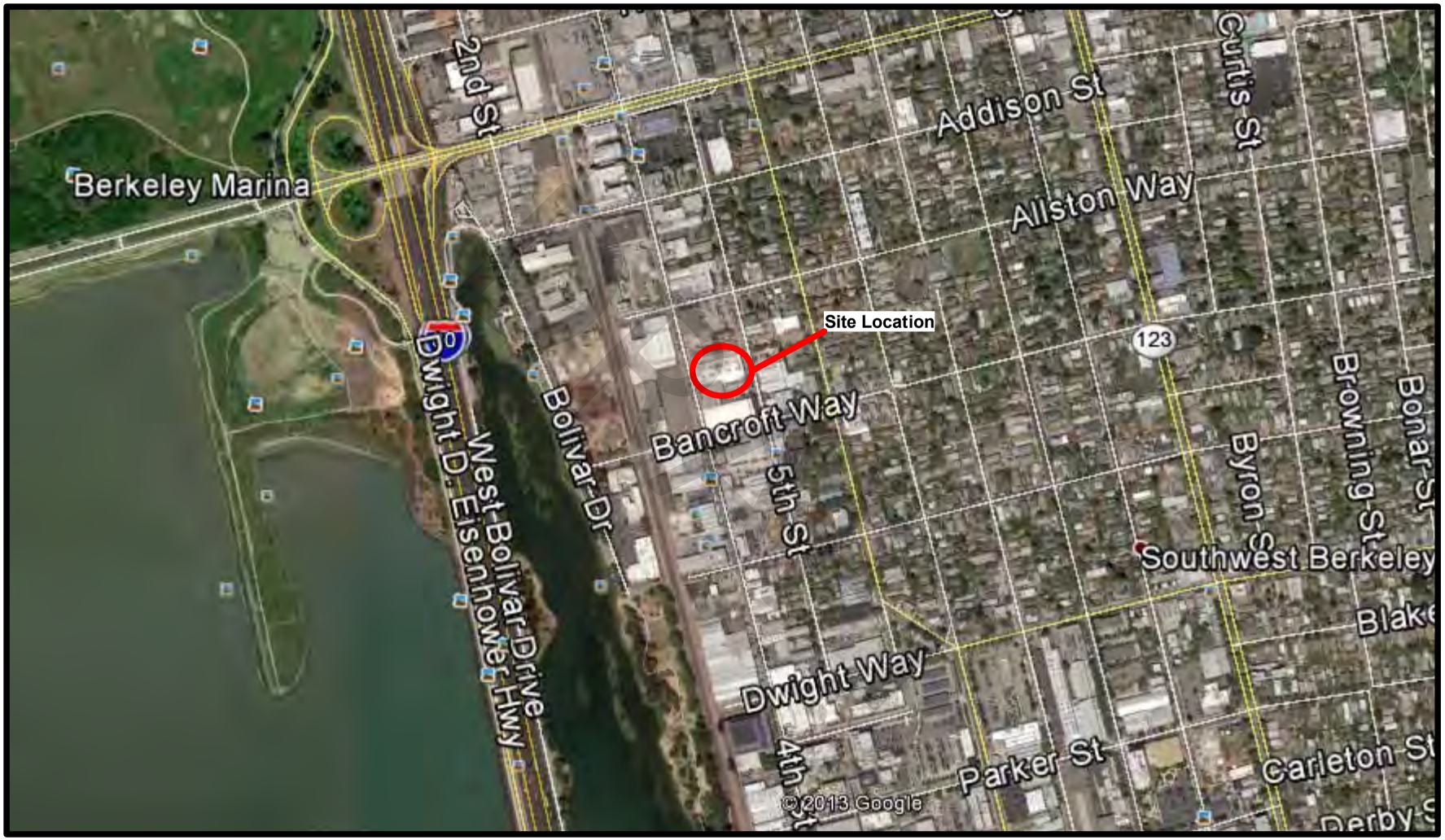
ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
		Kiat Tjong 510 7356060
NAME OF SIGNER (print) 136	TITLE OF SIGNER 137	
Mike Valentine 510 5998649	Operations Manager	

DRAFT

Ironies Location Map



North

SCALE

0 950 1900 Feet

Facility Location Map

Ironies
2222 5th Street
Berkeley, California 94710
Drawing Date: February 3, 2014

Figure 1

Prepared by:
DU-ALL SAFETY
du-all.com

Ironies Site Plan



Legend

- Auto SPKR Connection
- Drive Way
- Electrical shut off
- Emergency Shut Off (Fuel)
- Fire Extinguisher
- Fire Hydrant
- Gas Shut Off
- Outdoor Hazardous Material Transfer Area
- Knox Box
- Air Compressor
- Sanitary Drain
- Spill Kit
- Storm Drain
- Transformer
- Water Shut Off

SCALE

0 110 220 feet

Site Plan

Ironies
2222 5th Street
Berkely, California
Drawn: February 3, 2014

Figure 2

Prepared by:
DU-ALL SAFETY
du-all.com

Facility Storage Map Confidential	Business Name: Ironies Inc.	Site Address: 2222 5th Street	Legend

LEGEND

FE Fire Extinguisher

+ First Aid Kit

E Electrical Shutoff

K Knockboy

W Water Shutoff

H Fire Hydrant

G Gas Shutoff

X Riser

FH Fire Hazard Material

FH Fire Hazard Waste

Storm Drain

P Propylene Gas

A Argon/ CO_2

O Oxygen

FL Flammable Chemical Storage

Sump Pump

S Sanitary Drain

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Upholstery Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
E4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
A&L Cosmoline Remover

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.0	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 226	Solvent naphtha, petroleum, light aliph 227	☐ Yes 228	64742-89-8 229
2	40.0 230	Xylenes, Mixed 231	☐ Yes 232	1330-20-7 233
3	10.0 234	Ethyl benzene 235	☐ Yes 236	100-41-4 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
D6, E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Argon, mixed with Carbon Dioxide compressed

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 381.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
762.0	1524.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	75.0 (226)	Argon (227)	☐ Yes (228)	7440-37-1 (229)
2	25.0 (230)	C02 (231)	☐ Yes (232)	124-38-9 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Burnt Sienna (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Iron Oxide 227	☐ Yes 228	1309-37-1 229
2 10.0 230	Barium Sulfate, Barytes 231	☐ Yes 232	7727-43-7 233
3 4.0 234	Crysalline Silca, Quartz 235	☐ Yes 236	14808-60-7 237
4 2.0 238	Kaolin 239	☐ Yes 240	1332-58-7 241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Cadmium Red (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 (226)	Cadmium Sulfide (227)	☐ Yes (228)	1306-23-6 (229)
2	10.0 (230)	Zinc Sulfide (231)	☐ Yes (232)	131-98-3 (233)
3	10.0 (234)	Barium Sulfide (235)	☐ Yes (236)	21109-95-5 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
zinc chloride

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
C-Flux

EHS* ☐ Yes 208

CAS# 209
7646-85-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER plastic jar
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 (226)	zinc chloride (227)	☐ Yes (228)	7646-85-7 (229)
2	1.0 (230)	ammonium chloride (231)	☐ Yes (232)	12125-02-9 (233)
3	10.0 (234)	zinc oxide (235)	☐ Yes (236)	1314-13-2 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Chroma-Chem Raw Umber (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 25.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☒ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☒ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Iron Oxide 227	☐ Yes 228	1309-37-1 229
2 30.0 230	Solvent Naptha (petroleum) 231	☐ Yes 232	64742-88-7 233
3 5.0 234	Manganese Trioxide 235	☐ Yes 236	1317-34-6 237
4 5.0 238	Umber 239	☐ Yes 240	12713-03-0 241
5 5.0 242	Calcium Carbonate 243	☐ Yes 244	1317-65-3 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Chromium (III) Oxide Green

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Chromic Oxide Green (Pigment)

EHS* ☐ Yes 208

CAS# 209
1308-38-9

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 25.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: Stone Room
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205:
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Cobalt Yellow (Pigment)
EHS* ☐ Yes 208

CAS# 209:
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210: Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE
RADIOACTIVE ☐ Yes 212
CURIES 213:

PHYSICAL STATE (Check one item only) 214: ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS
LARGEST CONTAINER 215: 10.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Cobalt Oxide (227)	☐ Yes (228)	1308-06-1 (229)
2	5.0 (230)	Potassium (231)	☐ Yes (232)	7440-09-7 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Upholstery Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
General Purpose Adhesive (Aerosol)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS

LARGEST CONTAINER 215: 0.11

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.2	4.4		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	99.0 (230)	Hexane (231)	☐ Yes (232)	110-54-3 (233)
3	99.0 (234)	Isobutane (235)	☐ Yes (236)	75-28-5 (237)
4	99.0 (238)	Propane (239)	☐ Yes (240)	74-98-6 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Germicidal Bleach

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	9.0 (226)	Sodium Hypochlorite (227)	☐ Yes (228)	7681-52-9 (229)
2	1.0 (230)	Sodium Hydroxide (231)	☐ Yes (232)	7647-01-0 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Harris 1620 Anti Spatter (Aerosol)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Aerosol can
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	84.0 226	Methhylene Chloride 227	☐ Yes 228	75-09-2 229
2	17.0 230	Carbon Dioxide 231	☐ Yes 232	124-38-9 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Homax Gloss Wet Look Cure Seal, Patchcrete

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4.0	8.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 (226)	Acrylic Polymer (227)	☐ Yes (228)	Proprietary (229)
2	1.0 (230)	Polyoxyethylene (231)	☐ Yes (232)	9036-19-5 (233)
3	55.0 (234)	Water (235)	☐ Yes (236)	7732-18-5 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
B5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Hydrostone

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Hydrostone

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1250.0	2500.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 90.0 226	Plaster of Paris 227	☐ Yes 228	26499-65-0 229
2 5.0 230	Portland Cement 231	☐ Yes 232	65997-15-1 233
3 1.5 234	Silica, crystaline 235	☐ Yes 236	14808-60-7 237
4 238	239	☐ Yes 240	241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Iron Oxide Red

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Iron Oxide Red, Orange (Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 25.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	95.0 226	Iron Oxide Red 227	☐ Yes 228	1309-37-1 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Jasco Premium Paint Remover

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.5	3.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Dichloromethane (Methylene chloride) 227	☐ Yes 228	75-09-2 229
2	13.0 230	Methanol (methyl alcohol; carbinol; wood alcohol) 231	☐ Yes 232	67-56-1 233
3	5.0 234	Stoddard solvent (mineral spirits; aliphatic petroleum dis 235	☐ Yes 236	8052-41-3 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Kutwell 40 (cutting fluid)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 8.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
13.0	13.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER 5-gallon plastic bucket; c

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	5.0 (226)	Fatty Acids, Tall-oil compounds with triethanolamine (227)	☐ Yes (228)	68132-46-7 (229)
2	5.0 (230)	Fatty acids, tall-oil, compounds with ethanolamine (231)	☐ Yes (232)	68132-47-8 (233)
3	5.0 (234)	Potassium Carboxylic acid soaps (235)	☐ Yes (236)	66072-08-0 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lacquer Thinner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
8.0	15.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	12.0 226	Methyl Ethyl 227	☐ Yes 228	78-93-3 229
2	5.0 230	Butyl Acetate 231	☐ Yes 232	123-86-4 233
3	5.0 234	Ethyl Alcohol 235	☐ Yes 236	64-17-5 237
4	5.0 238	Glycol Ethyl 239	☐ Yes 240	111-76-2 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Mineral Spirits

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Mineral Spirits

EHS* ☐ Yes 208

CAS# 209
64475-85-0

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0		

UNITS* (Check one item only) 221
☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222
365.0

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE 224
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225
☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Adhesives (i.e. Contact Cement)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.0	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Toluene 227	☐ Yes 228	108-88-3 229
2 13.0 230	meth ethyl keytone (MEK) 231	☐ Yes 232	78-93-3 233
3 10.0 234	light aliphatic solvent naphtha 235	☐ Yes 236	64742-89-8 237
4 10.0 238	n-heptane 239	☐ Yes 240	142-82-5 241
5 1.5 242	magnesium oxide fume 243	☐ Yes 244	1309-48-4 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Combusible Liquids

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Mineral Spirits 227	☐ Yes 228	64475-85-0 229
2	100.0 230	Oil of Turpentine 231	☐ Yes 232	8006-64-2 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Epoxy Hardeners

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr), Sensitizer (Sens), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS

LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 (226)	Pentaerythritol-PO-mecraptoglycerol (227)	☐ Yes (228)	72244-98-5 (229)
2	10.0 (230)	N-(2-Aminoethyl)piperazine (231)	☐ Yes (232)	140-31-8 (233)
3	10.0 (234)	Aliphatic amines (235)	☐ Yes (236)	Proprietary (237)
4	10.0 (238)	Phenol, 2,4,6-tris[(dimethylamino)methyl] (239)	☐ Yes (240)	90-72-2 (241)
5	5.0 (242)	Silica, amorphous, fumed, crystaline-free (243)	☐ Yes (244)	112945-52-5 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Epoxy Resins

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr), Sensitizer (Sens)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Reaction product of epichlorohydrin & bisphenol A 227	☐ Yes 228	25085-99-8 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Flammable Liquid Aerosols

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.13 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.6	4.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	30.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	30.0 (230)	Propane (231)	☐ Yes (232)	68476-86-8 (233)
3	15.0 (234)	Toulene (235)	☐ Yes (236)	108-88-3 (237)
4	15.0 (238)	Aliphatic Hydrocarbon (239)	☐ Yes (240)	64742-89-8 (241)
5	15.0 (242)	Xylene (243)	☐ Yes (244)	1330-20-7 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Flammable Liquids

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	7.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 (226)	Isopropyl alcohol (227)	☐ Yes (228)	67-63-0 (229)
2	60.0 (230)	Solvent Naphtha (231)	☐ Yes (232)	64742-89-8 (233)
3	40.0 (234)	Xylenes, mixed (235)	☐ Yes (236)	1330-20-7 (237)
4	10.0 (238)	Ethyl benzene (239)	☐ Yes (240)	100-41-4 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Irrritant Liquids (i.e. Cleaners and detergents)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	80.0 226	Water 227	☐ Yes 228	7732-18-5 229
2	5.0 230	2-butoxyethanol 231	☐ Yes 232	111-76-2 233
3	5.0 234	Ethoxylated Alcohol 235	☐ Yes 236	68439-46-3 237
4	5.0 238	D-Limonene 239	☐ Yes 240	5989-27-5 241
5	5.0 242	Emulsifiers 243	☐ Yes 244	Proprietart 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
A2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Oil Base Paint and Laquers (e.g. Hammerite, Triprime)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
7.0	53.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 15.0 226	Xylene 227	☐ Yes 228	1330-20-7 229
2 4.0 230	C8 Aromatis 4 231	☐ Yes 232	14742-95-6 233
3 11.0 234	Propane 235	☐ Yes 236	74-98-6 237
4 11.0 238	Isobutane 239	☐ Yes 240	75-28-5 241
5 39.0 242	Acetone 243	☐ Yes 244	67-64-1 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Spay Paint (Aerosol Cans)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.11 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.5	7.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	13.0 (226)	Xylene (227)	☐ Yes (228)	1330-20-7 (229)
2	1.0 (230)	Ethyl Benzene (231)	☐ Yes (232)	100-24-14 (233)
3	39.0 (234)	Acetone (235)	☐ Yes (236)	67-64-1 (237)
4	16.0 (238)	Propane (239)	☐ Yes (240)	74-98-6 (241)
5	2.0 (242)	Isobutane (243)	☐ Yes (244)	75-28-5 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Water Based Paint

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 10.0 226	Dipropylene glycol n-butyl ether 227	☐ Yes 228	29911-28-2 229
2 10.0 230	Ethylene glycol monopropyl ether 231	☐ Yes 232	2807-30-9 233
3 5.0 234	Diatomaceous Earth 235	☐ Yes 236	68855-54-9 237
4 5.0 238	Ethylene glycol 239	☐ Yes 240	107-21-1 241
5 15.0 242	Titanium dioxide 243	☐ Yes 244	13463-67-7 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B3

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Water Base Paint (e.g. Breakthrough)

EHS* ☐ Yes 208

CAS# 209
13463-67-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Carcinogen (CARC), Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
33.0	67.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Plastic Bucket
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 30.0 226	titanium dioxide 227	☐ Yes 228	13463-67-7 229
2 7.0 230	N-Butyl Alcohol 231	☐ Yes 232	7727-43-7 233
3 1.0 234	Proprietary resin 235	☐ Yes 236	Not available 237
4 30.0 238	Ethylene glycol monopropl ether 239	☐ Yes 240	2807-30-9 241
5 10.0 242	Dipropylene glycol n-butyl ether 243	☐ Yes 244	29911-28-2 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Miscellaneous Wood Stains (i.e. Mohawk)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	10.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☒ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 226	Acetone 227	☐ Yes 228	67-64-1 229
2	1.0 230	Water 231	☐ Yes 232	7732-18-5 233
3	1.0 234	Propylene Glycol 235	☐ Yes 236	57-55-6 237
4	1.0 238	Ethanol 239	☐ Yes 240	64-17-5 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Near Utility Sink and Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: D1; B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Non-RCRA Hazardous Waste Corrosive Liquid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Other Health Hazard (OHH)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 215: 60.0

FED HAZARD CATEGORIES (Check all that apply) 216
☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
70.0	200.0	200.0	135

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 35.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Secondary Containment

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	89.0 (226)	Water (227)	☐ Yes (228)	7732-18-5 (229)
2	5.0 (230)	Phosphoric Acid (231)	☐ Yes (232)	7664-38-2 (233)
3	1.0 (234)	Diethylene glycol monobutyl ether (235)	☐ Yes (236)	112-34-5 (237)
4	5.0 (238)	Ethylene glycol n-butyl ether (239)	☐ Yes (240)	112-48-1 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Non-RCRA Hazardous Waste Solid (Spent Fiberglass Spray Booth Filter)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 75.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	75.0	150.0	352

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Paint Related Material 227	☐ Yes 228	Unknown 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oxygen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oxygen

EHS* ☐ Yes 208

CAS# 209
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Oxidizer, gas (4.4)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 215: 250.0

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
500.0	1000.0		

UNITS* (Check one item only) 221: ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.

DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
d6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Permanent threadlocker

EHS* ☐ Yes 208

CAS# 209
25852-47-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Unstable (Reactive), Class 1 (6.1-1)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.01 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.03	0.05		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	70.0 (226)	methacrylate monomer (227)	☐ Yes (228)	25852-47-5 (229)
2	25.0 (230)	bisphenol (231)	☐ Yes (232)	39382-25-7 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 001

GRID# (optional) 204: A3-A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
PMC-744 Rubber Mold

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 40.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
40.0	80.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	2.4 Toluenedisocyanate 227	☐ Yes 228	584-84-9 229
2	230	2.6 Toluenedisocyanate 231	☐ Yes 232	91-08-7 233
3	234	Bis(2-ethylhexyl) 235	☐ Yes 236	117-81-7 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Metal Shop

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C6; E6

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propylene

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propylene

EHS* ☐ Yes 208

CAS# 209
115-07-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Liquefied Gas (3.2l), Toxic (Tox), Unstable (Reactive), Class 1 (6.1-1)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 60.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
100.0	120.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Paint Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
001

GRID# (optional) 204
B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
RCRA Hazardous Waste Flammable Liquid (paint related material)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 55.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55.0	55.0	165.0	343

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☒ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Oil Based Paint Waste 227	☐ Yes 228	Unknown 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Smooth Cast 325 A&B

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
5.0	9.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	15.0 226	Butyl benzyl phthalate part a 227	☐ Yes 228	85-68-7 229
2	80.0 230	Methylene(phenylisocyanate) 231	☐ Yes 232	101-68-8 233
3	99.5 234	Polyol /Plasticizer Blend part b 235	☐ Yes 236	non-haz 237
4	-0.5 238	Phenylmercuric neodecanoate part b 239	☐ Yes 240	26545-49-3 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room - Flammable Liquid Storage Cabinet

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
C5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Smoothon Universal Mold Release

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B), Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.11 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
2.4	3.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	85.0 (226)	Alkanes, C7-C10 Iso (227)	☐ Yes (228)	90622-56-2 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Ultramarine Blue (Pigment)

EHS* ☐ Yes 208

CAS# 209
57455-37-5

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 226	Sodium Aluminium Sulfosilicate 227	☐ Yes 228	57455-37-5 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A4

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
White Cement

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
100.0	500.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 96.0 226	Portland Cment 227	☐ Yes 228	65997-15-1 229
2 6.5 230	Gypsum 231	☐ Yes 232	7778-18-9 233
3 0.1 234	Slica, Quartz 235	☐ Yes 236	14808-60-7 237
4 238	239	☐ Yes 240	241
5 242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201: Paint Room
CHEMICAL LOCATION CONFIDENTIAL EPCRA 202: ☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8
MAP# (optional) 203: 001
GRID# (optional) 204: B2

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207: Xylol Thinner (Xylene)
EHS* ☐ Yes 208

CAS# 209
*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-C (3.3 I-C), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211
RADIOACTIVE ☐ Yes 212
CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214
LARGEST CONTAINER 215: 1.0

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.0	5.0		

UNITS* (Check one item only) 221: ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds.
DAYS ON SITE: 222: 365.0

STORAGE CONTAINER 223:
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE 224: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 (226)	Xylenes (227)	☐ Yes (228)	1330-20-7 (229)
2	10.0 (230)	Ethylbenzene (231)	☐ Yes (232)	100-41-4 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1
F A 0 0 0 0 3 9 8

MAP# (optional) 203
003

GRID# (optional) 204
A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Yellow Iron Oxide

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Yellow Iron Oxide (Pigment)

EHS* ☐ Yes 208

CAS# 209
51274-00-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☒ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Plastic Bucket
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
IRONIES, INC.

CHEMICAL LOCATION 201
Stone Room

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 3 9 8

MAP# (optional) 203: 003

GRID# (optional) 204: A5

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Zinc Oxide (White Pigment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
15.0	30.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☒ j. BAG ☐ n. PLASTIC BOTTLE ☒ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN Plastic Bucket
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	99.0 (226)	Zinc Oxide (227)	☐ Yes (228)	1314-13-2 (229)
2	1.0 (230)	Lead (231)	☐ Yes (232)	1317-36-8 (233)
3	1.0 (234)	Cadmium Oxide (235)	☐ Yes (236)	1306-1-0 (237)
4	1.0 (238)	Zinc Carbonate (239)	☐ Yes (240)	3684-35-9 (241)
5	1.0 (242)	Zinc Propionate (243)	☐ Yes (244)	557-28-8 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
FA0000398		02/19/2013

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.
IRONIES, INC.

BUSINESS SITE ADDRESS 103.
2222 FIFTH ST

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
Manufacturing/ Warehousing	Paint Booth Filter & Oil Paint Waste

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.
☒ 1. HAZARDOUS MATERIALS; ☒ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.
☒ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☐ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☒ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:
1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:
1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☒ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☐ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:

AMBULANCE, FIRE, POLICE AND CHP	9-1-1
CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
POISON CONTROL CENTER	(800) 222-1222
LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA)	(510) 981-7460 City of Berkeley Toxic Mgt. Div C3.
OTHER (Specify): Clean Harbors C4.	408-451-5000 C5.

NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates Summit Medical Center C6. — 510-204-4444 C7.

AGENCY NOTIFICATION PHONE NUMBERS:

CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 SF Bay Regio C8.
U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
CALIFORNIA DEPT OF FISH AND WILDLIFE (CDFW)	(916) 358-2900
U.S. COAST GUARD	(202) 267-2180
CAL/OSHA	(916) 263-2800
STATE FIRE MARSHAL	(916) 445-8200
OTHER (Specify): C9.	C10.
OTHER (Specify): C11.	C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☐ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☐ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☐ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☐ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☐ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☒ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☒ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☒ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☒ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☒ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☐ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☒ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☒ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☒ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☐ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☐ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☒ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☒ 3. VERBAL (i.e., SHOUTING);
- ☐ 4. OTHER (Specify): Announcement using megaphone

E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

5th Street parking Lot across from building

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☒ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☒ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☒ CHEMICAL PROTECTIVE GLOVES	G4. Paint Room "B3"	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☒ SAFETY GLASSES / GOGGLES / SHIELDS	G8. Paint Room "B3", Metal Shop "C6"	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☒ CARTRIDGE RESPIRATORS	G12. Paint room, A3, Metal Shop "C6"	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☒ FIRST AID KITS / STATIONS	G16. All Departments - identified on evacuatic	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☒ PORTABLE EYEWASH KITS	G20. Metal Shop "C6", Stone Room, "B5	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☒ PORTABLE FIRE EXTINGUISHERS	G26. Throughout Facility - identified on evacu	G27.
	14. ☒ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28. Throughout Facility - All departments - i	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☒ ALL-IN-ONE SPILL KIT	G34. Paint room, A3	G35.
	18. ☐ ABSORBENT MATERIAL	G36.	G37.
	19. ☐ CONTAINER FOR USED ABSORBENT	G38.	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☒ BROOM	G42. Metal Shop, "F6"	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☒ SHOP VAC	G46. Metal Shop, ,"F6" Stone Room, "B5"	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☒ TELEPHONES (Includes cellular)	G60. Operations Manager/ Emergency Coord	G61.
	31. ☐ INTERCOM / PA SYSTEM	G62.	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☒ OTHER	G68. Fire Sprinkler Audible Alarms	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply)		LOCATIONS (e.g., shop, outdoor shed, forensic lab)	
☒ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA	H1.	Paint Room, Fire Safety cabinets	H2.
☐ 2. PROCESS LINES / PIPING			H3.
☐ 3. LABORATORY			H4.
☐ 4. WASTE TREATMENT AREA			H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply)		LOCATIONS	
☒ 1. SHELVES, CABINETS AND RACKS	H6.	Throughout all facility	H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)			H8.
☒ 3. PORTABLE GAS CYLINDERS		Metal Shop, Paint Room, Stone Room	H9.
☐ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES			H10.
☒ 5. SPRINKLER SYSTEMS		Throughout all facility	H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)			H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☐ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☒ 3. SAFETY / TAILGATE MEETINGS;

☒ 4. STUDY GUIDES / MANUALS (Specify): Monthly Safety Meetings (PPE, Evacuation Procedures, Forklift training. Fall protection, Fire E I2.

☐ 5. OTHER (Specify): I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED	K1.
Mike Valentine	02/04/2014	
NAME OF SIGNER (print) K2.	TITLE OF SIGNER	K3.
	Operations Manager	

DRAFT

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

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Entered: 9/28/13
by: CX
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 9/26/12 Time: 2:10 Page: 1 of 3

Facility Name: Tronies, Inc

Address: 2222 Fifth St. Phone: 644 2100

Owner/Operator Name: Brad Hantzinger/Kate McIntyre

Facility Representative(s): Jenny Ambrosio

Permitted CUPA Activities: ☒ HMBP ☒HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☐HMBP ☐HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☐SW
Unannounced: ☐Yes ☐ No
Purpose of Inspection: ☒Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other _____
Consent Granted for: ☒Inspection ☐Photos (include log) ☐Samples; Consent Granted By: _____

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
	Obs 1	Training Plan is implemented however there were no records observed to 2012: Provide training records to verify that the Training Plan was implemented in 2012. Corrected at time of inspection
M	HW, 2.2	CCR 66262.34(f) Facility failed to label hazardous waste drum of waste flammable oil-based paint & thinner and waste debris from paint booth. Haz. Waste Containers shall be labeled w "Hazardous waste", composition & state of waste, physical properties, name & address of generator, and accumulation start date.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☒ CUPA violations cited on page(s) 1-2 shall be corrected within 30 days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: _____ Title: Assistant Controller

Inspector's Signature: _____ Inspector's Name: Debbie Anderson

DRAFT

Date: 9/26/12 Page: 2 of 3

Facility Name: Ironies Inc

VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS (CONTINUED):

Violation Code/ Observation and PE	Citation, Description, Corrective Action Required (indicate if violation is a class I/II), or Observation
Obs 2	Manifests are stored with employee opt sicletoday. Provide past 3 years of manifests.
Obs 3	Provide fate of oily water/cutting fluid.
	Inspection to resume when Kiat Gong is back in office.
	Provided labels for hazardous waste.

DRAFT

Facility Contact Signature: _____

Page 3 of 3

Alameda Countywide
Clean Water Program
Standard Stormwater Facility Inspection Report Form

Municipality: City of Berkeley
Date: 9/26/12 Time: 12:10
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☒ Routine Inspection ☐ Response to Complaint ☐ Follow-up | Follow-up Inspection Due:

ENTERED

NAME OF FACILITY: Ironies, Inc | SITE ADDRESS: 2222 5th St.

CONTACT NAME | PHONE: 644 2100 | BUSINESS TYPE/ACTIVITY: Furniture Mfg. | SIC

☐ High Priority Facility

Is the property owner different than the facility owner? ☐ yes ☒ no If yes, complete the following:

NAME: Douglas Hearst Hearst | PHONE

MAILING ADDRESS

Is the facility covered under any other programs or permits? (Check all that apply.)

☐ None ☐ Sanitary sewer
☐ Air quality ☒ Hazmat business plan ☐ Underground storage tanks ☐ Aboveground storage tanks
☐ Fire department(hazmat storage) ☒ Hazmat waste generator ☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☐ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☒ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas					☐
B. Outdoor Material Storage Areas					☐
C. Outdoor Waste Storage/Disposal Areas		1	0		☐ Only dumpster stored outside
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					☐
E. Outdoor Parking Areas and Access Roads					☐
F. Outdoor Wash Areas					☐
G. Rooftop Equipment					☐
H. Outdoor Drainage from Indoor Areas					☐
I. Other (describe):					☐

DRAFT

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☐ Maintenance required in storm drain system ☐ yes ☐ no

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☒ 3; Third ☐ Referred to; Details:

ENFORCEMENT: ☐ None ☐ Verbal Notice ☐ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

Facility Representative: Inspector:

CITY OF BERKELEY

Planning and Development Department
Toxics Management Division

ENTERED 10/12/12 DS Multi-day Inspection

INSPECTION FORM

Facility Name: Ironics Date: 10/5/12

Address: 2222 5th St Contact: Kiat Pjong

Phone: 6443100 Page ___ of ___

Inspection continued from 9/26/12

Obs 1 Training records satisfactory

M HW 5.4, HW 5.5 CCR 66262.23(a)(4), HSC 25123.3(b)(2)
The following manifest & records do not have signed copy from destination (TSDF) facility:

5/24/12 005571314 FLE
11/10/11 004868728 FLE
4/14/11 004769562 FLE

Make legible copy of the manifest + submit a copy to DTSC – DTSC Generator Manifests, P.O. Box 4001, Sacramento, CA 95812-0400
Facility failed to contact TSDF and/or make proper notification to DTSC after not receiving the TSDF-signed copy

~~Provide~~ Obtain ~~ed~~ signed copies + mail copy to ~~FD~~ DTSC W/in 30 days

Facility Contact Signature: Kiat Tjong Title: Manager

Inspector: [signature]
Hazardous Materials Specialist

~~Reinspect Date: 2015~~ next routine 2015

Obs 2 Waste drums satisfactorily labeled.

DRAFT

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

For Dept Use Only
Entered: 11/25/13
by: CAz
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 11/15/13 Time: 10:30 AM Page: 1 of 9

Facility Name: Ironies, Inc.

Address: 2222 5th Street Phone: 510-644-2100

Owner/Operator Name: Brad Huntzinger / Kate McIntyre

Facility Representative(s): Jenny Ambrosio, Michael Schneider, Tracy Emayan

Permitted CUPA Activities: ☑HMBP ☑HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☑HMBP ☑HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☑SW
Unannounced: ☑Yes ☐ No
Purpose of Inspection: ☑Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other_____
Consent Granted for: ☑Inspection ☑Photos (include log) ☑Samples; Consent Granted By: Jenny Ambrosio

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		Onsite to conduct routine inspection of facility. Larry Luna is no longer with the company. The new contact is Michael Schneider.
		Paint Room
		Met with Jose Manuel Ryuon. Observed a red pail in cabinet with liquid. The pail is unlabeled and does not have a lid. Jose indicates this is used thinner. He states that in order to clean out the gun, he runs thinner through the gun and collects it in the pail. The used thinner is eventually transferred to the 55 gallon waste paint drum, per Jose, but usually not immediately. The used thinner was transferred to the 55 gallon drum at the time of inspection. The accumulation start date on the waste

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☑CUPA violations cited on page(s) 5-8 shall be corrected within 30 days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Date Signed 11/22/13

Facility Representative Signature: [signature] Title: Operations Manager
Inspector's Signature: [signature] Inspector's Name: Carrie Estadt

DRAFT

Facility Name: Ironies, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		paint drum is noted as 3/28/13 and the drum appears to be 1/4 full. Jose indicates he cleans the gun at least once every 1-2 weeks.
		Soiled rags are placed in two bags and put in the garbage. The rags contained in the can appear to be soiled with paint and smell of thinner. Jose indicates he launders his uniform at home.
		According to Jose, the paint booth filters are changed out every 1-2 weeks. The filters are placed in a drum labeled as hazardous waste. The label did not include an accumulation start date. A date was added at the time of inspection, as they indicate the contractor was there recently to remove the filters.
		When they have completed a job, the leftover paint is disposed of in the waste paint drum, according to Jose. TMD suggests finding a reuse option.
		Emergency Evacuation Personnel lists are posted throughout the building. The list still lists Larry Luna, who is no longer with the company.
		The fire extinguisher in this room has a tag that lists the last annual service date as Nov. 5, 2012.
		Stone Room
		Met with Rovolofo. In this area they do molding, inlays and pouring. According to Rovolofo, they rinse the pieces in a large

Facility Representative Signature: Michael Schneider

DRAFT

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		bin near the faucet. The bin holds approximately 250 gallons. Once this bin gets full, Rovolofo indicates liquid is transferred to a smaller drum and transported to the chemical wash area for disposal to sanitary.
		Observed storage of Hydrostone and white cement, both of which have a high pH, ~12-13.
		The fire esthinguisher in this room has a tag- that lists the last annual service as Nov. 5, 2012.
		Metal Shop
		Met with Ernesto. He indicates scrap metal is taken to a recycler in Richmond. Provide TMD with name of recycler.
		Observed cans of anti-spatter (contains methylene chloride). Ernesto states they use up the material in the can and then puncture the can.
		Coolant, Kutwell 40 used for the metal working is changed out about every 2 weeks. ~~The waste coolant is transfered to a bucket~~ Ernesto indicates they have not had to dispose of this material. If so, he indicates they would place in the waste paint drum
		Ernesto indicates the lacquer thinner cans, once empty, are rinsed at the chemical wash area. He then cuts off the top and uses the cans to hold scrap metal.
		There is a covered pit on the south side of the shop. The pit has a sump pump that discharges collected liquid through a pipe that is outside and into ground goes

Facility Representative Signature: Richard Schwarz

DRAFT

Facility Name: Ironies, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		Michael indicates this area gets rainwater intrusion and the sump collects it for discharge.
		Chemical Wash Area
		The employee responsible for this area is unavailable at the time of inspection.
		The chemical wash area consists of a sink on the right side and on the left a work station under which are two spill containment pallets containing liquid. Michael indicates employees clean metal parts in the work station using the acid wash Metal Prep 79, containing phosphoric acid
		pH of the solution/acid wash in the yellow bucket is about 1. The wash drains to the back of the work station to the spill containment pallets. The spill containment pallet closest to the sink has a hose connection that appears to run to the sanitary sewer, through a hole in the ground, which is near the sink's drain. Two samples were collected from the spill containment pallet closest to the sink to determine pH and metals content.

DRAFT

Facility Representative Signature: Richard Schwenk

Facility Name: Fronies, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
M	HMBP1010003	19CCR 2729.2(a)(1) Business activities page is inaccurate in that it does not state the business generates hazardous waste. Corrective action: Submit a correct business activities page.
M	HMBP1010003	19CCR 2729.2(a)(1) Business owner/operator ID page is inaccurate in that the environmental contact and primary emergency contact, Larry Luna, is no longer at the company. Corrective action: Submit a corrected Business Owner/Operator form.
M	HMBP1010004	Hazardous materials Inventory Statement is incomplete and inaccurate. Fields are missing on chemical entries, including wt. %, cas #, annual waste amount: Coolant is not listed Corrective action: Ensure all fields are completed on the inventory and add the text to the chemical location indicating area each is located.
M	HMBP1010005	19 CCR 2729.2(a)(3) HSC 25504 Site plan does not show sanitary drains nor the sump pump that discharges to storm. Corrective action: Submit an updated site map. In addition, confirm the drainage of drains onsite, including the ones in the chemical wash area.
M	HW3030017	22 CCR 66262.34(d)(2); 40 CFR 265.173 Failure to properly close hazardous waste containers when not in active use. The red pail containing used thinner did not have a lid. Corrective action: Used thinner was poured into

Facility Representative Signature: Michael Schneeds

DRAFT

Facility Name: Ironies, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
		55 gallon waste drum at time of inspection. In future, either provide a lid for the pail, or immediately transfer contents to a closed hazardous waste container. The transfer should be made using a dedicated funnel to prevent spilling.
II	HW3030007 Repeat	22 CCR 66262.34(f) Failure to properly label hazardous waste accumulation containers. The red pail containing used thinner was not labeled. The paint booth filter drum did not have an accumulation start date. Corrective action: The used thinner was transferred to a hazardous waste container with a label. An accumulation start date was added to the paint booth filter drum.
M	HW3010022	22 CCR 66262.34(d)(2); 40 CFR 262.34(d)(5)(ii) Failure to post, next to the telephone, ~~emerg~~ accur emergency information containing location of emergency equipment, contact names and numbers. Corrective action: Update and post emergency evacuation personnel list and include all required items.
M	HW3030034	22 CCR 66262.34(d)(2); 40 CFR 265.33 Failure of facility to test fire protection equipment, fire extinguishers, annually. The fire extinguishers were last tested Nov. 5, 2012. Corrective action: ~~Test~~ Have fire extinguishers tested.

Facility Representative Signature: Richard Johnson

DRAFT

Date: 11/15/13 Page: 7 of 9

Facility Name: Fronies, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
I	HW 3050002	HSC 25189.5(a) Failure to properly dispose of hazardous waste at an authorized location. The rags Jose indicates are used in the paint area with paints and thinner are thrown in the trash. Corrective action: Either begin managing the contaminated rags as hazardous waste or meet the requirements for exemption of "reusable soiled textile materials" in HSC 25144.6.
	HW	22 CCR 66261.7(c) Business rinses empty Lacquer Thinner cans in the chemical wash area, discharges the rinseate to sanitary and reuses the cans. The rinseate has not been classified in accordance with the provisions of Division 4.5 of 22 CCR and any applicable waste discharge requirements. Corrective action: Capture and classify the rinseate. Provide TMD with a plan for classification.
~~M~~	~~HW 3030028~~ CAC	~~22 CCR 66262.34(d)(2), 40 CFR 265.17(b) Failure to ensure incompatible materials wastes are not placed in the same container.~~ The

Facility Representative Signature: [signature]

DRAFT

Date: 11/15/13 Page: 8 of 9

Facility Name: Ironics, Inc.

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and Observation
II	HW3030030	22 CCR 66262.34(d)(2); 40 CFR 265.31
		Failure to maintain and operate facility to minimize the possibility of fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste to the air, soil or surface water.
		Sump pump in metal shop collects water intrusion into the building and discharges it to exterior. The water collects any metal fines or other material in the area. In addition, any spills could potentially enter this sump.
		Corrective action: Provide TMD with a plan to ensure no release of hazardous waste or materials to the environment.

DRAFT

Facility Representative Signature: _____

Alameda Countywide
Clean Water Program
Standard Stormwater Facility Inspection Report Form

Municipality: Berkeley
Date: 11/15/13 Time: 10:30 AM
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☐ Routine Inspection ☐ Response to Complaint ☐ Follow-up | Follow-up Inspection Due:

NAME OF FACILITY	SITE ADDRESS
Ironies, Inc.	2222 5th Street

CONTACT NAME	PHONE	BUSINESS TYPE/ACTIVITY	SIC
Michael Schneider	510-644-2100	Furniture Production	

Is the property owner different than the facility owner? ☐ yes ☐ no If yes, complete the following: ☐ High Priority Facility
NAME PHONE
MAILING ADDRESS

Is the facility covered under any other programs or permits? (Check all that apply.)
☐ Air quality ☑ Hazmat business plan ☐ None ☐ Sanitary sewer
☑ Fire department(hazmat storage) ☐ Hazmat waste generator ☐ Underground storage tanks ☐ Aboveground storage tanks
☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☐ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas	✓				☐
B. Outdoor Material Storage Areas		2	1		☐
C. Outdoor Waste Storage/Disposal Areas		2	1		☐
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				☐
E. Outdoor Parking Areas and Access Roads	✓				☐
F. Outdoor Wash Areas	✓				☐
G. Rooftop Equipment	✓				☐
H. Outdoor Drainage from Indoor Areas		3	3		☐ Sump pump in metal shop appears to drain to storm
I. Other (describe):	✓				☐

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☐ Maintenance required in storm drain system ☐ yes ☐ no

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☑ 3; Third ☐ Referred to; Details:

ENFORCEMENT: ☐ None ☐ Verbal Notice ☑ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

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Facility Representative: [signature] Inspector: Carrie Ettrodt

DRAFT

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 1 of 12



Picture description: Red pail of used thinner in cabinet in paint room

Picture 2 of 12



Picture description: Interior drain on south side of metal shop to collect rainwater. Sump pump discharges to street.

DRAFT

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 3 of 12



Picture description: Sink near chemical wash area

Picture 4 of 12

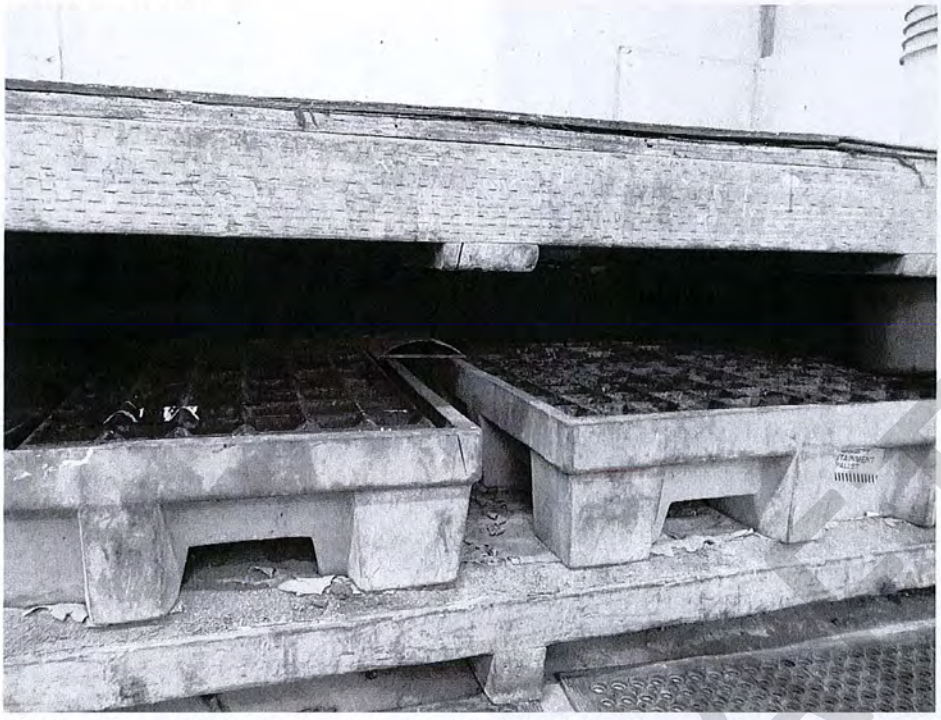


Picture description: Blurred picture of secondary containment pallets under chemical wash area

DRAFT

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 5 of 12



Picture Description: Secondary containment pallets under chemical wash area

Picture 6 of 12



Picture Description: Bucket containing acid wash solution

DRAFT

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 7 of 12



Picture Description: pH paper following dipping into acid wash solution

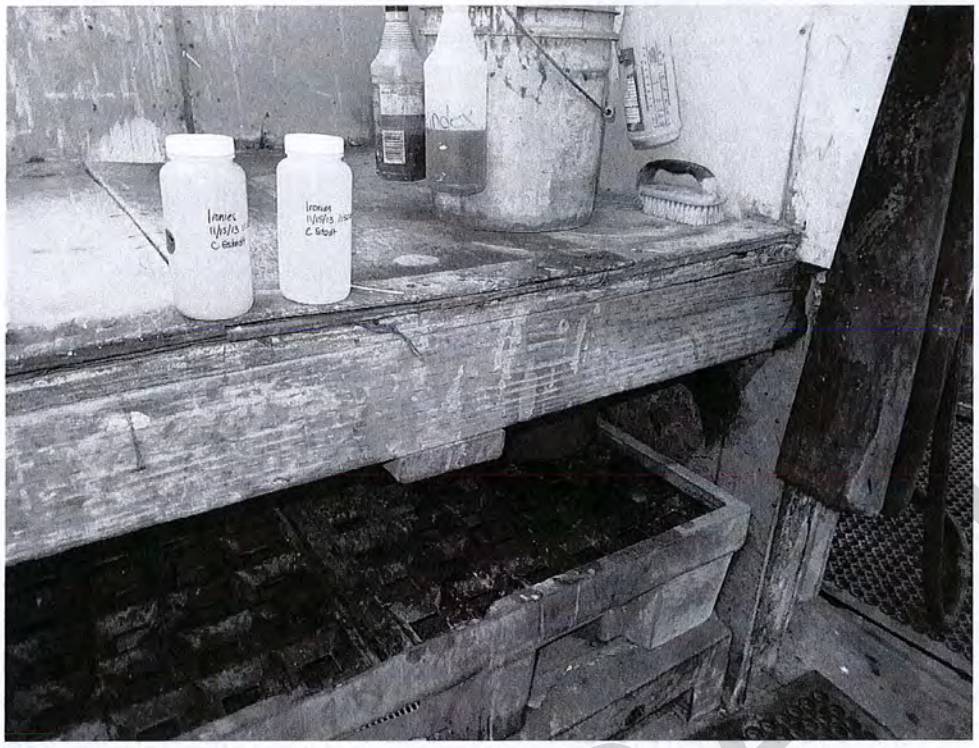
Picture 8 of 12



Picture Description: pH paper following dipping into liquid in secondary containment pallets

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 9 of 12



Picture Description: Chemical wash area, showing samples taken from secondary containment pallet

Picture 10 of 12



Picture Description: Chemical wash area, showing samples taken from secondary containment pallet

Date: 11/15/13
Time: 10:30 am
Location: 2222 Fifth Street
Reason: Inspection
Number of pictures: **Pictures taken by:** Carrie Estadt, Hazardous Materials Specialist II

Picture 11 of 12



Picture Description: Samples taken from secondary containment pallet

Picture 12 of 12



Picture Description: Hose that drains the liquid in the secondary containment pallet.

DRAFT

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

For Dept Use Only
Entered: 11/25/13
by: CAE
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: ~~11/15/13~~ 11/22/13 CAE Time: 2:30PM Page: 1 of 1

Facility Name: Ironies, Inc.

Address: 2222 5th Street Phone: 510-644-2100

Owner/Operator Name: Brad Huntzinger / Kate McIntyre

Facility Representative(s): Michael Schneider

Permitted CUPA Activities: ☑ HMBP ☑ HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☑HMBP ☑HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☐SW
Unannounced: ☐ Yes ☑ No
Purpose of Inspection: ☐Routine ☑Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other_____
Consent Granted for: ☑Inspection ☐Photos (include log) ☐Samples; Consent Granted By: Michael Schneider

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		Onsite to finalize inspection from 11/15/13.
		Preliminary test results of the sampling conducted
		11/15/13, show that the pH of the liquid in the
		secondary containment pallets is 1.7. This is
		at hazardous waste levels.
I	HW3050002	~~CAC 22 CCR~~ HSC 25189.5(a)
		Failure to properly dispose of hazardous waste
		at an authorized location.
		Corrective action: Immediately cease discharge
		and Provide TMD a plan to manage properly
		Chemical Wash area
		Clarification on process. Bay is used about 3
		times per week. Every couple months, Michael
		indicates the ~~liquid is vacuumed out.~~ solids are taken out and thrown in trash.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☑ CUPA violations cited on page(s) 1 shall be corrected within 30 days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: _____ Title: Operations Manager
Inspector's Signature: Carrie Estadt Inspector's Name: Carrie Estadt

DRAFT

12721

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

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Entered: 2/14/17
by: KE
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 2.3 2017 Time: AM Page: 1 of 3

Facility Name: Ironies, INC.

Address: 2222 Fifth Street Phone: 644-2100

Owner/Operator Name: IRonies INC

Facility Representative(s): Kathy Sung + Kiat Tjong

Permitted CUPA Activities: X HMBP X HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: X HMBP X HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP X SW
Unannounced: ☐ Yes X No
Purpose of Inspection: X Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other _____
Consent Granted for: X Inspection X Photos (include log) ☐Samples; Consent Granted By: X KT.
CHW Drum Area

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
	Observation	Routine Hazardous Materials Business Plan, Hazardous Waste and Storm Water facility Compliance inspection. The 2016 CERS Submittal was done on 1.29.2016. Please note the 2017 Submittal will be due by March 1, 2017. It was noted during inspection currently there are no painters employed so the amount of Hazardous waste generated is significantly reduced. The Hazardous waste Accumulation Area was properly labeled and the drums were Sealed. A picture was taken of the Drum Area. Hazardous Waste Disposal records were Available for Review and three years of Disposal Records was presed.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

X ☐ CUPA violations cited on page(s) 2 shall be corrected within 30 days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
X Submit Certification of Return to Compliance form within 30 days.— will Email Form

Facility Representative Signature: Kiat Tjong Title: operation.
Inspector's Signature: _____ Inspector's Name: Karl Busche

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Acronym and Abbreviation Key

General Terms

APSA	Above Ground Petroleum Storage Act
CalARP	California Accidental Release Program
CUPA	Certified Unified Program Agency
HMBP	Hazardous Materials Business Plan
HW	Hazardous Waste
PE	CUPA Program Element
SW	Storm Water Program
TP	Tiered Permit
UST	Underground Storage Tank

Hazardous Waste Generator Classifications

RCRA LQG	Resource Conservation and Recovery Act Large Quantity Generator
LQG	Large Quantity Generator
SQG	Small Quantity Generator
CESQG	Conditionally Exempt Small Quantity Generator

CUPA Violation Classifications (Class)

M	Minor Violation
II	Class II Violation
I	Class I Violation

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Alameda Countywide
Clean Water Program
Standard Stormwater Facility Inspection Report Form

ENTERED KB

343

Municipality: Berkeley
Date: 2-3-17 Time: Am
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☒ Routine Inspection ☐ Response to Complaint ☐ Follow-up | Follow-up Inspection Due:

NAME OF FACILITY: [redacted] Ironies
SITE ADDRESS: 2222 Fifth Street

CONTACT NAME: Kiat Tjong | PHONE: 644-2100 | BUSINESS TYPE/ACTIVITY | SIC

Is the property owner different than the facility owner? ☒ Yes ☐ No If yes, complete the following: ☐ High Priority Facility
NAME PHONE
MAILING ADDRESS:

Is the facility covered under any other programs or permits? (Check all that apply.)
☐ Air quality ☒ Hazmat business plan ☐ None ☐ Sanitary sewer
☐ Fire department(hazmat storage) ☒ Hazmat waste generator ☐ Underground storage tanks ☐ Aboveground storage tanks
☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☒ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ Yes ☐ No

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential Exposure PTNL	Type of Discharge: Effectiveness BMP	Type of Discharge: Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas	X				☐ none
B. Outdoor Material Storage Areas	X				☐ none
C. Outdoor Waste Storage/Disposal Areas		1	1		☐ roll off Bin- closed top.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	X				☐ none
E. Outdoor Parking Areas and Access Roads	X				☐ none
F. Outdoor Wash Areas	X				☐
G. Rooftop Equipment	X				☐
H. Outdoor Drainage from Indoor Areas	X				☐
I. Other (describe):	X				☐

COMMENTS/REMARKS/REQUIREMENTS Structural Control Present ☐ Maintenance required in storm drain system ☐ Yes ☐ No

All materials stored inside the Building - no issues noted

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☒ 3; Third ☐ Referred to:

ENFORCEMENT: ☒ None ☐ Verbal Notice ☐ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

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Facility Representative Signature: Kiat Tjong Inspector Signature:

City of Berkeley

City Manager's Office
Martin Luther King, Jr.
Civic Center Building
2180 Milvia Street
Berkeley, California 94704

(510) 644-6580

Mr. Jeff Coult
Peerless Lighting
P.O. Box 2556
Berkeley, California 94702-0556

re: Subsurface Contamination,Warehouse Building
2246 5th Street, Peerless Lighting

March 4, 1993

Dear Mr. Coult:

The City of Berkeley Toxics Program and the Regional Water Quality Control Board have reviewed the file on the subsurface contamination at Peerless Lighting. The following conclusions can be drawn from the documents in our files:

1)In the nine wells installed on site in 1985 (Brown and Caldwell) and 1987/88 (Mark Group), the following compounds have been detected in the groundwater: chloroform, 1,1-dicholoroethene, trans 1,2-dichloroethene, trichlorothene, vinyl chloride, 1,1,1-trichlorethane, 1,1-dichloroethane, 1,2-dichloroethane, and pentachlorophenol.

2)Of the compounds detected in five sampling events - four of Brown and Caldwell wells W-1 throught W-3 - and one quarter of Mark Group well M-1 through M-6 - the following compounds were detected only in wells on the western portion of the site, i.e. the downgradient wells on-site: chloroform (wells M-3, W-3, and W-4), 1,1-dichloroethane (well M-4), and pentachlorophenol (wells M-1, M-2, W-2, W-3, and W-4).

3)The persistant presence of pentachlorophenol in five downgradient wells, point to the fact that this compound is present in the groundwater due to historical on-site activities. It is also of concern that the pentachlorophenol was present at the western fence line of the site. It is possible that this contaminant has migrated off-site.

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4) While the Mark Group Report of October 11, 1988, noted that the levels of pentachlorophenol were lower than the TTLC, the TTLC is a standard to determine hazardous waste. It is not acceptable to the Water Board as a standard for water quality. The clean up goal for the Water Quality Board is background levels, if feasible. Obviously, pentachlorophenol is not a background constituent. If background water quality goals are not achievable, alternative goals may be proposed and must be approved by the Board. Alternative goals may include applicable standards, such as MCLs, and shall be based on an evaluation of the cost, effectiveness, and a risk assessment to determine the effects on human health and the environment.

Neither the Toxics Program nor the Water Board are of the opinion that this site is ready for closure at this time. Within 45 days of the date of this letter, please submit a work plan to define the extent of the pentachlorophenol in the subsurface area around Peerless. After this definition is accomplished, or concurrently with this definition, a feasibility study may be required to see if the groundwater/soils can be remediated to lower levels of pentachlorophenol. Please call us at (510)644-7719 if you have any questions.

Sincerely,

Denise B Johnston

Denise B. Johnston
Assistant to City Manager
Toxics and Emergency Management

Jennifer Krebs
Hazardous Materials Specialist

cc: John Jang, Regional Water Quality Control Board
Dick Kraber, Peerless Lighting

DRAFT

2120 Milvia Street, 3rd Floor, Berkeley, California 94704
TEL: (510) 981-7460 TDD: (510) 981-7474 FAX: (510) 981-7470

Hazardous Materials Business Plan Inspection Checklist

Facility Name: Peerless Lighting	Phone: 845-2760
Address: 2246 Fifth St.	Date of Inspection: 5/11/06

HAZARDOUS MATERIALS BUSINESS PLAN (HMBP) SUBMITTAL	Violation	Comments
✓ 1. Reporting threshold is exceeded. HMBP is required. (BMC Title 15)		
✓ 2. Information in HMBP is complete and current. (19 CCR 2729.2)		
✓ 3. A copy of current HMBP is maintained on site. (19 CCR 2729.1)		
BUSINESS INFORMATION (19 CCR 2729.1 – 2729.5)		
✓ 1. Business Owner/Operator Identification Page is accurately completed.		
✓ 2. Certification statement is signed.		
CHEMICAL INVENTORY (19 CCR 2729.1 – 2729.5 and Appendices A and B)		
1. Inventory Statement reflects actual inventory on site.	?	check argon & latex paint reporting
✓ 2. Information on Chemical Description pages is complete.		
✓ 3. EHS-listed substances are identified and reported in pounds.		
SITE MAPS (19 CCR 2729.2 and Appendices A and B)		
1. Map reasonably reflects actual layout of site.	✓	We need a map of
2. Required information is included in map (e.g. exits, ER and safety equipment).	✓	your wheel shirts
3. Chemical locations on map are accurate.	✓	buildings.
EMERGENCY RESPONSE PLAN (19 CCR 2731)		
✓ 1. Emergency Coordinators are identified and 24-hour phone numbers are listed.		
✓ 2. Agencies to be notified and emergency phone numbers are indicated.		
✓ 3. On-site emergency equipment is listed.		
✓ 4. Facility has written evacuation and re-entry procedures.		
EMPLOYEE TRAINING (19 CCR 2732)		
✓ 1. Facility has an employee training plan.		
✓ 2. Training includes safe handling of chemicals and use of ER equipment.		
✓ 3. Initial employee training is provided.		
✓ 4. Annual refresher training is provided.		
5. Training records are maintained on-site.	✓	Get Mark's training records back on-site, make sure your trainings are documented and on-site
ADDITIONAL BERKELEY MUNICIPAL CODE REQUIREMENTS		
✓ 1. Ozone Depleting Compounds are recycled from air conditioners and fire extinguishers. (BMC Ch. 11.62)		
✓ 2. Etiological agents are registered. (BMC Title 15)		
✓ 3. Radioactive materials are registered. (BMC Title 15)		

ADDITIONAL COMMENTS:

Peerless has closed down its 747 Bancroft operation as of 2/06. Toxics management did not receive a closure application for this. I will mail a closure application, please, send it back by 6/15/06. Make sure you are getting & documenting annual training. I will send you a form you can use for this.

* Add extra quantities of argon & latex paint to your inventory, remove oil filters, wash thinner, paint waste, sandwrite, paint thinner & n-methyl pyrrolidone (still 70 gal used oil thru-put).

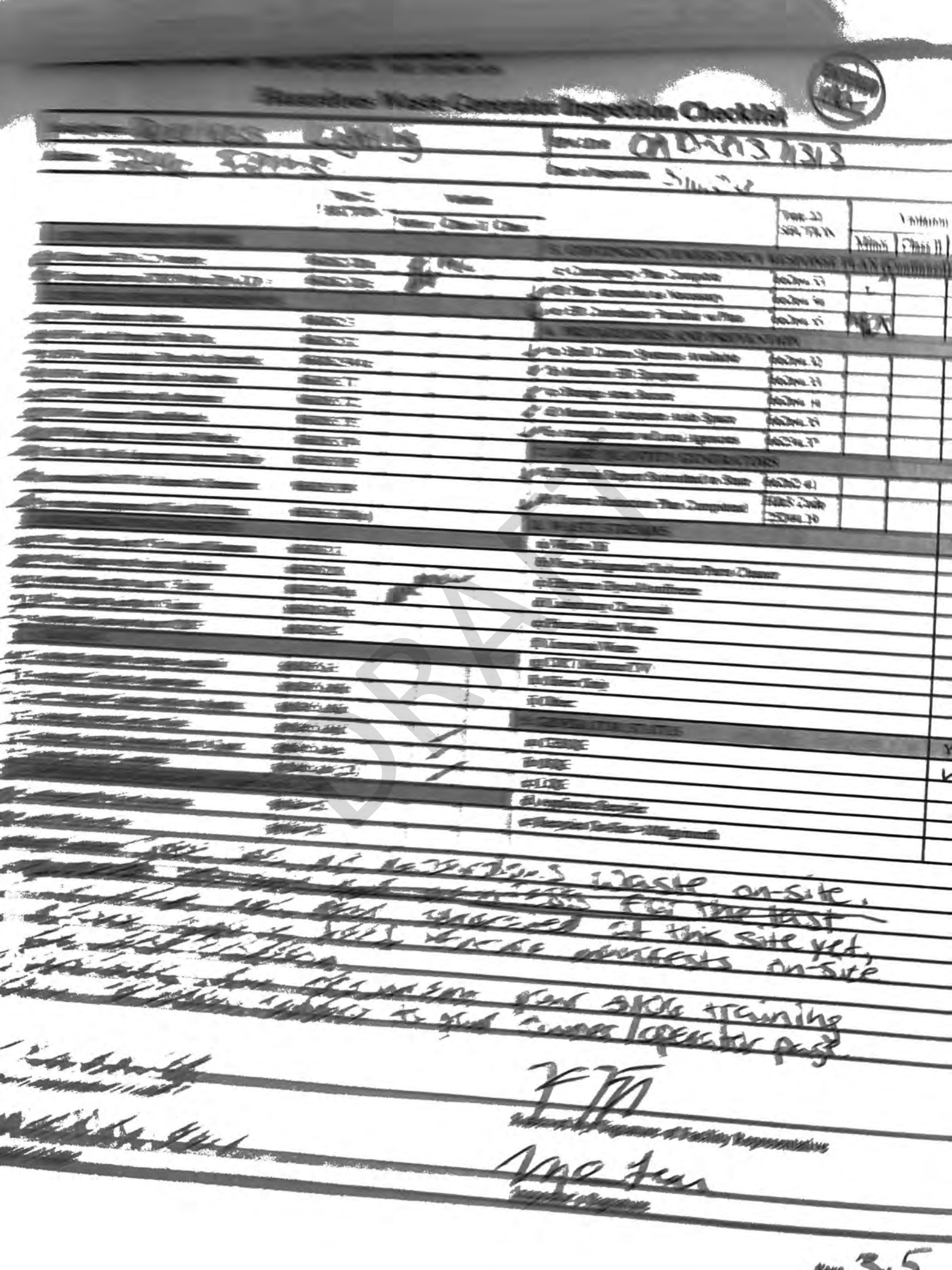
Ken Knigge
Printed Name

Received by: Signature of Facility Representative

Meridith Lear
Inspector Name

Inspector Signature

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TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 • TDD: (510) 981-7474 • FAX: (510) 981-7470

ENTERED MCL

Date: 5/11/06 Time: 10a.m.

Facility Name: Peerless

Address: 2246 Fifth St.

Contact: Ken Knigge Contact Title: Facilities Mgr. Phone: 845-2760

SUMMARY OF VIOLATIONS:

1. 747 Bancroft was closed without a closure plan.
2. Inventory needs adjustments.
3. No map for the wheel skins building has been submitted.
4. Trainings need to be annual and documented.
5. Business operator ID form needs a secondary emergency contact

NOTICE TO COMPLY:

1. Complete a closure plan for this facility.
2. Add latex paint and revise the argon amounts to reflect what's on-site. Remove oil filters, wash thinner, paint waste, bonurite, paint thinner & n-methyl pyrrolidone from the inventory. Add the annual thru-put of 70 gallons to your waste oil page.
3. Submit a map showing chemical and safety equipment locations for the wheel skins building.
4. Document your 2006 training
5. Submit a new form with a secondary EC contact identified.

* ~~Submit~~ mail Submit 1. - 5. by 6/15/06.

Note: The facility is subject to re-inspection at any time.

Facility Contact Signature: _____ Title: Facilities/MAINT MGR

Inspector: _____ Re-inspect Date: _____
Hazardous Materials Specialist

G:\ADMIN\Forms\Inspection\Summary & Notice to Comply.doc

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Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency
2118 Milvia Street, Suite 200, Berkeley, California 94704
TEL: (510) 705 8150
TDD: (510) 644 6915
FAX: (510) 540 5672

Facility Name: LITHONIA LIGHTING
Address: 2246 Fifth Street
Phone: 845-2760

Date: 1-25-00 Page: ..... of .....
Contact: DAVID KOESTER
Contact Title: SENIOR MANUFACTURING ENGINEER

SUMMARY OF VIOLATIONS:

(1) NO CHEMICAL INVENTORY PAGES (APPENDIX C) IN HMBP
(2) SITE MAP DOES NOT SHOW EVACUATION ROUTES/CHEMICAL LOCATIONS
(3) NO RECORD of WEEKLY WASTE STORAGE AREA INSPECTION
(4) WASTE DRUMS NOT KEPT SEALED WHEN NOT IN USE

NOTICE TO COMPLY: WITHIN 30 DAYS please SUBMIT TO TMD A letter STATING THAT ABOVE-VIOLATIONS HAVE been CORRECTED, AND SUBMIT REQUESTED DOCUMENTATION.

(1) SUBMIT CHEMICAL INVENTORY PAGE (APPENDIX C) FOR EACH WASTE STREAM, CHEMICAL, COMPRESSED GASES, SAFETY KLEENSORBENT
(2) SUBMIT REVISED SITE MAP WITH EVACUATION ROUTES, CHEMICAL STORAGE LOCATIONS
(3) INSTITUTE WEEKLY INSPECTION OF WASTE STORAGE AREAS (3), AND DOCUMENT.
(4) KEEP WASTE DRUMS TIGHTLY SEALED WHEN NOT IN USE.

Facility Contact Signature: David Koester

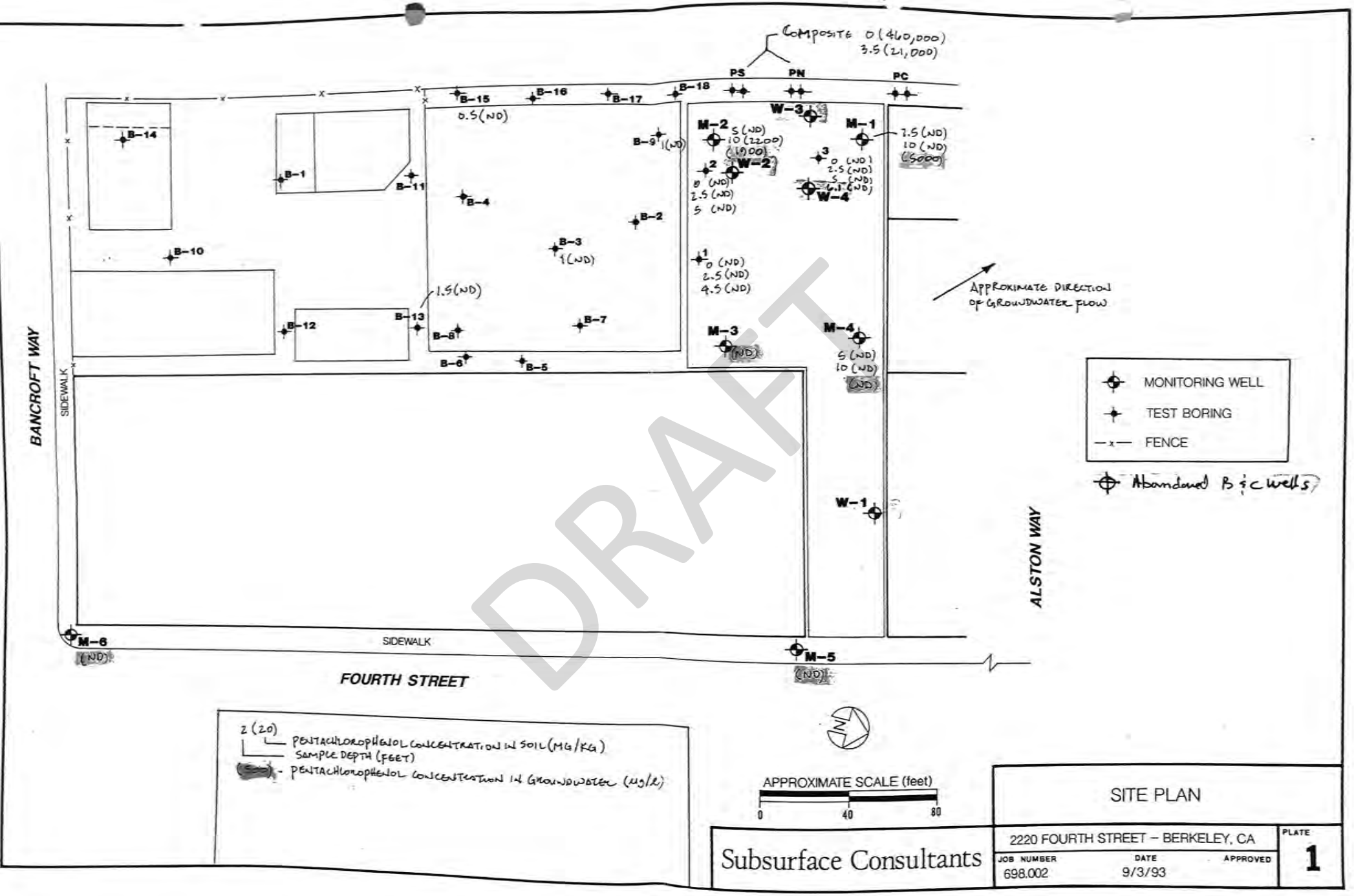
Inspector: Andrew Block
Hazardous Materials Specialist
705-8150

Reinspect Date: .....

1-26-00
ENTERED ARB

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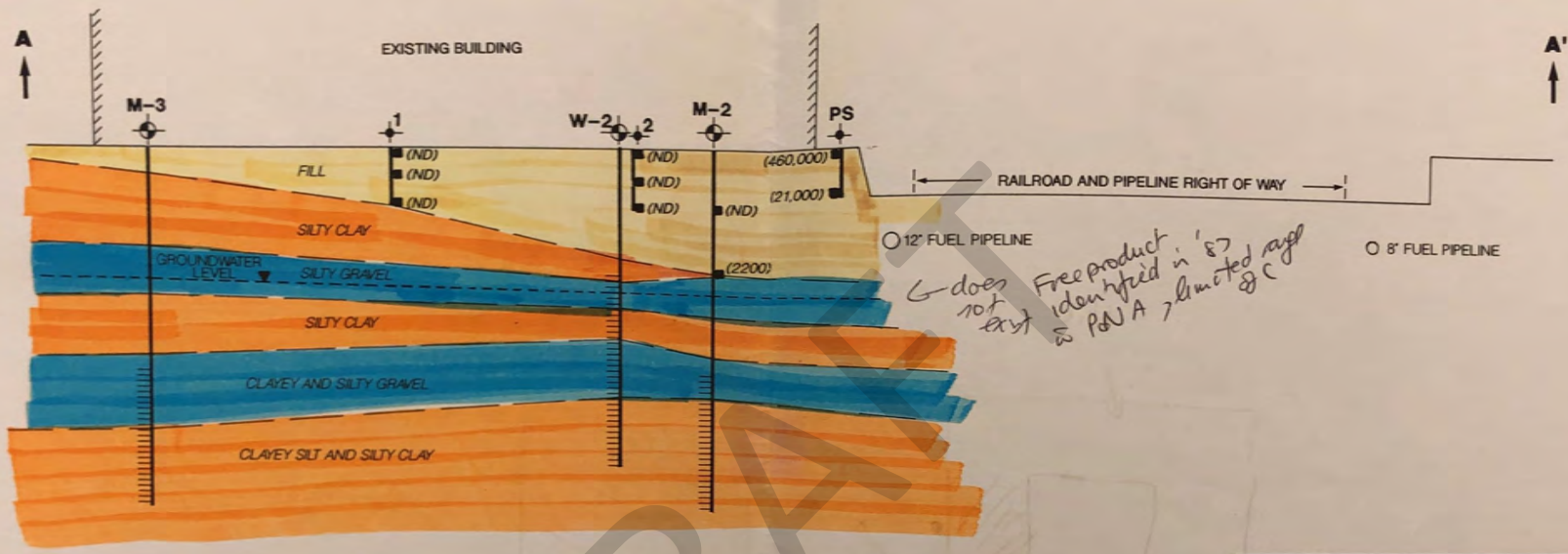
Subsurface Consultants

SITE PLAN

2220 FOURTH STREET – BERKELEY, CA

JOB NUMBER	DATE	APPROVED	PLATE
698.002	9/3/93		1

P 007 061 416
Receipt for



G does not exist. Free product identified in '87 & PNA > limited agl

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■	SOIL SAMPLE
(2200)	PENTACHLOROPHENOL CONCENTRATIONS IN SOIL (ug/kg)
≡	WELL SCREEN INTERVAL

HORIZONTAL SCALE (feet): 1" = 20'
VERTICAL SCALE (feet): 1" = 10'

CROSS SECTION A – A'

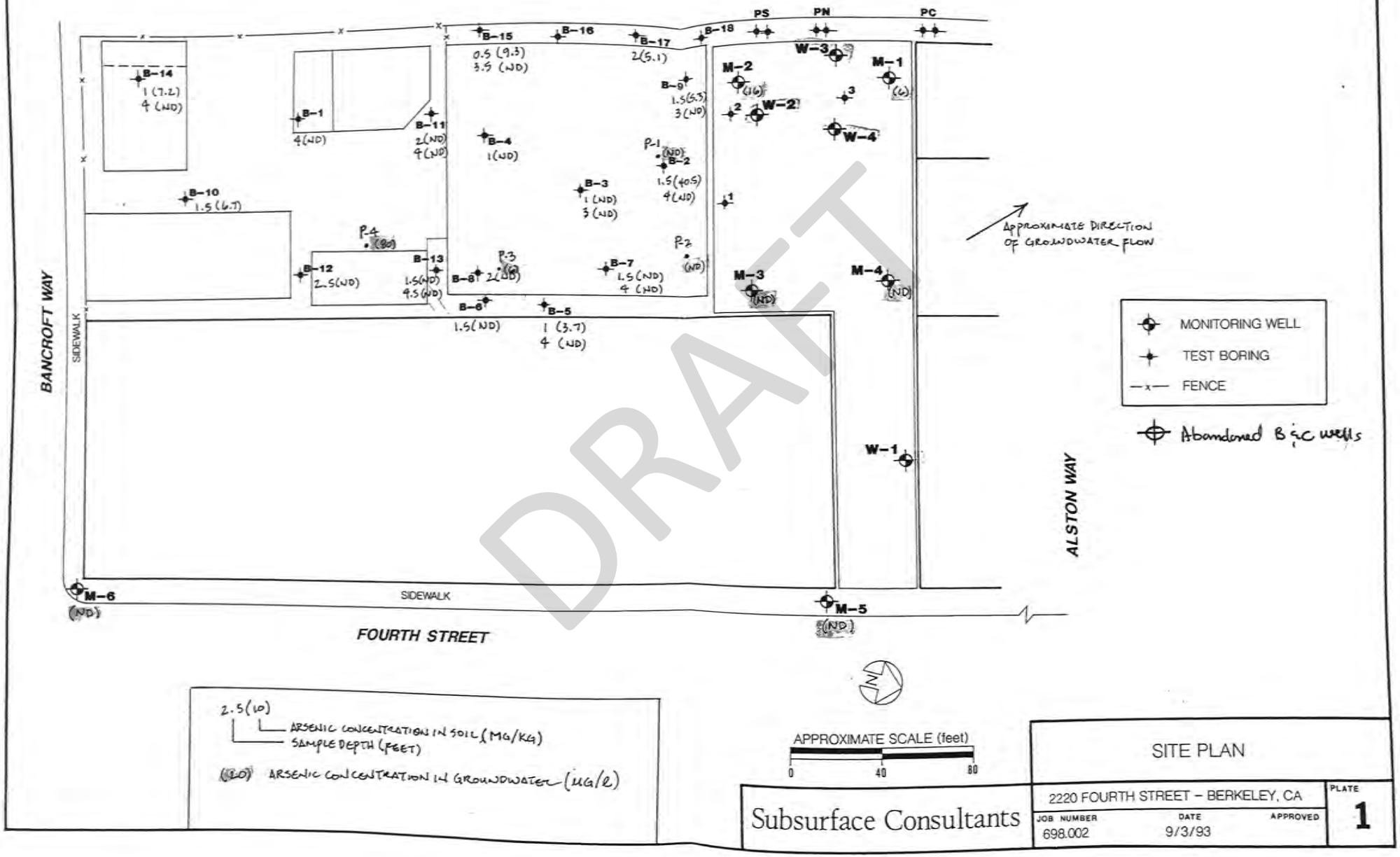
Subsurface Consultants

2220 FOURTH STREET – BERKELEY, CA

JOB NUMBER	DATE	APPROVED	PLATE
698.002	9/20/93		

P 007 061 416

Receipt for



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Subsurface Consultants

SITE PLAN

2220 FOURTH STREET – BERKELEY, CA

JOB NUMBER	DATE	APPROVED
698.002	9/3/93	

PLATE 1

P 428 897 839

ANTHONY W. HAWTHORNE
NANCY J. CASALE
TINNING & DeLAP
1211 Newell Avenue, Suite 200
P. O. Box 5246
Walnut Creek, CA 94596
(415) 935-0700

Attorneys for Plaintiff
Peerless Electric Company

UNITED STATES DISTRICT COURT

FOR THE NORTHERN DISTRICT OF CALIFORNIA

PEERLESS ELECTRIC COMPANY, et al., Plaintiff, vs. ABLE TERMITE CONTROL, et al., Defendant.	NO. C 86 4122 EFL SETTLEMENT CONFERENCE STATEMENT DATE: March 31, 1987 DEPT: Magistrate Brazil

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I. STATEMENT OF FACTS

Peerless Electric Company is a California corporation engaged in the manufacture and sale of lighting fixtures generally designed for use in office or commercial facilities. The lighting fixtures which comprise the main part of Peerless' business are composed of large sections up to 24 feet in length. Peerless' corporate offices and manufacturing plant are located at 747 Bancroft Way, Berkeley, California.

In 1981, Peerless' business was expanding steadily, with

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WALNUT CREEK,
CALIFORNIA 94596
935-0700

their production needs beginning to outgrow the existing Peerless facility. As a result of this growth and the large size of its main product, on July 2, 1981, Peerless acquired the Terminix Building located at 2220 Fourth Street for the price of $178,000. The Terminix Building was directly adjacent to the Peerless property. Peerless' plans encompassed complete redesign of the Terminix building, including construction of a second floor area to house all of Peerless' business offices, and conversion of the downstairs area for manufacturing.

Peerless purchased the Terminix Building from Able Termite Control, Inc., a wholly owned subsidiary of Terminix of Northern California. At the time of the purchase, the price of $178,000 was substantially above market value for the property. However, the fact that it was contiguous with Peerless' existing facility rendered it cost-effective to acquire the property despite the inflated price. During negotiations for the purchase and sale of the property, no disclosure was made regarding chemical contamination of the building site.

Since approximately 1952, the Terminix Building had been used to house a termite and pest control operation. From 1952 through 1961, Able Termite Control Company utilized the building for its east bay operation. In 1961, Able Termite Control Company sold its entire Berkeley enterprise, including the Terminix Building, to Terminix of Northern California, which formed Able Termite Control, Inc., to hold title to the property and conduct the termite control operation. Terminix of Northern

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California was a franchise of Terminix International. After the sale, Able Termite Control Company continued to do business out of its Pleasant Hill office, and changed its name to Able Termite Control of Pleasant Hill, Inc. In 1969, defendant O. H. Olsen acquired a 100% ownership interest in Terminix of Northern California. Shortly thereafter, Terminix of Northern California essentially discontinued business operations under the name of Able Termite Control, Inc., and consolidated in the Terminix Building the operations of Able Termite Control, Inc., and a second termite and pest control operation owned by Terminix of Northern California. Able Termite Control was not officially liquidated, however, until the Terminix Building was sold to Peerless in 1981.

In 1981, Terminix of Northern California sold the termite and pest control operation back to Terminix International. After Peerless purchased the Terminix Building in 1981, Peerless leased the property to Terminix International, which continued to operate its termite and pest control operation at the Terminix Building until the end of December 1981.

Prior to taking occupancy of the property in January, 1982, Peerless proceeded with its plans to convert the Terminix Building to house its offices and provide additional manufacturing space. Towards this end, Peerless hired an architect and a soils engineer to design the necessary plans for the project, at a cost of $9,276.

Immediately after Peerless took possession of the premises,

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it became aware that serious problems existed with the building. Two Peerless employees became ill and complained of serious headaches after working in the building, and a dead cat was also discovered on the premises. This alerted Peerless to a potential problem with chemical contamination, and Peerless therefore retained the consulting engineering firm of Brown and Caldwell to perform tests at the building site. Brown and Caldwell's investigation immediately revealed the presence of a number of highly toxic pollutants in the soil including aldrin, chlordane and heptachlor, chemicals that were commonly used as pesticides in the termite and pest control industry.

Upon confirmation of the presence of the toxic chemicals, Peerless filed suit in the Alameda County Superior Court against the defendants in this action on the grounds that each of the defendants had contributed to the pollution at the Terminix Building, and therefore was responsible for all damages attendant thereto, including the cost of clean up and the damages for loss of use of the Terminix Building.

Discovery conducted in the state court action confirms that chlordane and aldrin were used by the defendants in the pest control business conducted at the Terminix Building, and that heptachlor was commonly used in the pest control and termite industry. The evidence further established that the toxic chemicals were stored in large quantities on the dirt floor area in the Terminix Building.

After discovery of the chemical contamination at the site,

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Peerless was forced to engage in a lengthy and expensive clean up effort that is still ongoing. To date, Peerless has spent a total of $79,030.45 in costs directly related to the remedial activities, including engineering fees and removal of contaminated soil.

More importantly, the clean up effort shows no sign of concluding in the near future. After completion of the soil removal process, the Water Quality Control Board required that Peerless drill a number of wells to monitor the condition of the subsurface water. The ground water investigation revealed that additional contaminants were present in the water table directly underneath the Terminix Building.

As a result of these findings, the Water Quality Control Board has advised Peerless that it will be required to drill an additional three wells, and to monitor the wells for a minimum period of six months. If pollutants are found in the ground water at that time, the Control Board may require Peerless to remove the contaminated water on a regular basis continuing into the indefinite future. The cost to drill and monitor the additional three wells will total approximately $30,000.

In addition to the clean up work performed to date, the health authorities also may require Peerless to remove an underground storage tank installed years before its purchase of the property, at an additional cost of $12,000.

None of the chemicals identified either in the soil at the Terminix Building or in the water table have ever been used by

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P. O. BOX 5246
WALNUT CREEK,
CALIFORNIA 94596
935-0700

Peerless in its manufacturing operation.

While the cost of performing the clean up work at the site has proved an onerous burden to Peerless, the consequential damages have been and continue to be even more substantial. Due to the severe contamination of the Terminix Building, Peerless has been unable to make any use whatsoever of the property except for limited storage. So long as Peerless is forced to maintain and monitor water table wells, Peerless will continue to be unable to utilize the building for the purposes intended.

The growth and expansion of Peerless' business made it essential that Peerless locate additional space; as it was unable to expand into the Terminix Building as planned, Peerless had no alternative but to obtain the space it needed in another location. Peerless therefore leased a building at 2140-2150 Fifth Street from January 1, 1984, through January 1, 1989, at a cost of $203,749.38. The leased space was not adjacent to the Peerless plant, however, and Peerless was required to purchase a truck and hire a driver to haul the material to and from the two locations, at a total cost of $53,377.72.

Peerless' office space in the existing structure was grossly inadequate, and Peerless had therefore intended to locate all of its offices in the newly acquired Terminix Building. When the chemical pollution rendered this space unavailable, Peerless was forced to completely remodel the existing building to provide additional space and to accommodate the engineering offices, the corporate offices and the photo

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UT CREEK,
RNIA 94596

metric/photography lab, at a total cost of $101,577.41.

During the course of the clean up, Peerless continued to hope that the remedial efforts would be successful, and that it would be able to utilize the Terminix Building in the manner anticipated at the time of the purchase. However, it has now become apparent that the building will be totally unusable for the indefinite future, and Peerless has had no alternative but to obtain permanent space to house its entire operation. Peerless therefore has entered into a 20-year lease on two buildings directly across from the existing Peerless facility. Efficient manufacture of Peerless' long lights requires buildings that are directly connecting and adjacent. Peerless therefore must abandon its present structure, and move its entire operation, including offices and manufacturing, to the new location.

Peerless will be unable to complete the relocation process for an additional two years. During that time, Peerless will be forced to pay rent on the new facility at the rate of $20,000 for a 24-month period at a cost of $480,000, minus a sublease on the property for four months that will bring Peerless rent of $37,800.

Peerless also will require the services of a driver to transport material for two more years at a cost of $47,320. The existing Peerless building cannot be fully rented for the six-month period of time during its move to its new quarters; the reasonable value for the Peerless space is $15,050 per

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WALNUT CREEK,
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935-0700

month, which results in total damage to Peerless in the amount of $90,300, minus the sum of $18,000 that Peerless anticipates it will obtain from a partial sublease of the space. Finally, Peerless anticipates that the cost of moving to the new building site will total $100,000.

Peerless has incurred attorney's fees to date of $26,221.50. Peerless' damages as enumerated above total $1,125,766.46. This number does not include interest.

II. LEGAL CONTENTIONS

A. Defendants were negligent as a matter of law in their storage and handling of the toxic chemicals at the Terminix Building site.

B. Each of the defendants named in this action are liable for all damages proximately caused by the chemical pollution of the Terminix Building, including the costs of cleaning up the contamination, as well as the damage to Peerless from loss of use of the Terminix Building.

C. Peerless acknowledges that only the cost of clean up can be recovered in the Federal Court action.

III. FACTUAL CONTENTIONS

A. Each of the named defendants utilized the toxic chemicals identified in the soil at the Terminix Building that necessitated the extensive clean up effort by Peerless.

B. Peerless did not ever use any of the identified toxic chemicals in its manufacturing operation.

C. Peerless to date has been able to make only minimal

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. BOX 5246
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ORNIA 94596
35-0700

storage use of the Terminix Building.

D. Due to the continued presence of chemical pollutants in the ground water beneath the Terminix Building, Peerless will be unable to make any profitable or beneficial use of the Terminix Building in the foreseeable future.

E. As a result of the chemical pollution of the Terminix Building, Peerless has been forced to expend substantial sums to accommodate the requirements of its business operation.

IV. SETTLEMENT DISCUSSION

Plaintiff and defendants have had no meaningful settlement discussions to date.

Dated: March 24, 1987.

TINNING & DeLAP

By: _____
Nancy J. Casale
Attorneys for Plaintiff
Peerless Electric Company

CKD:33.28

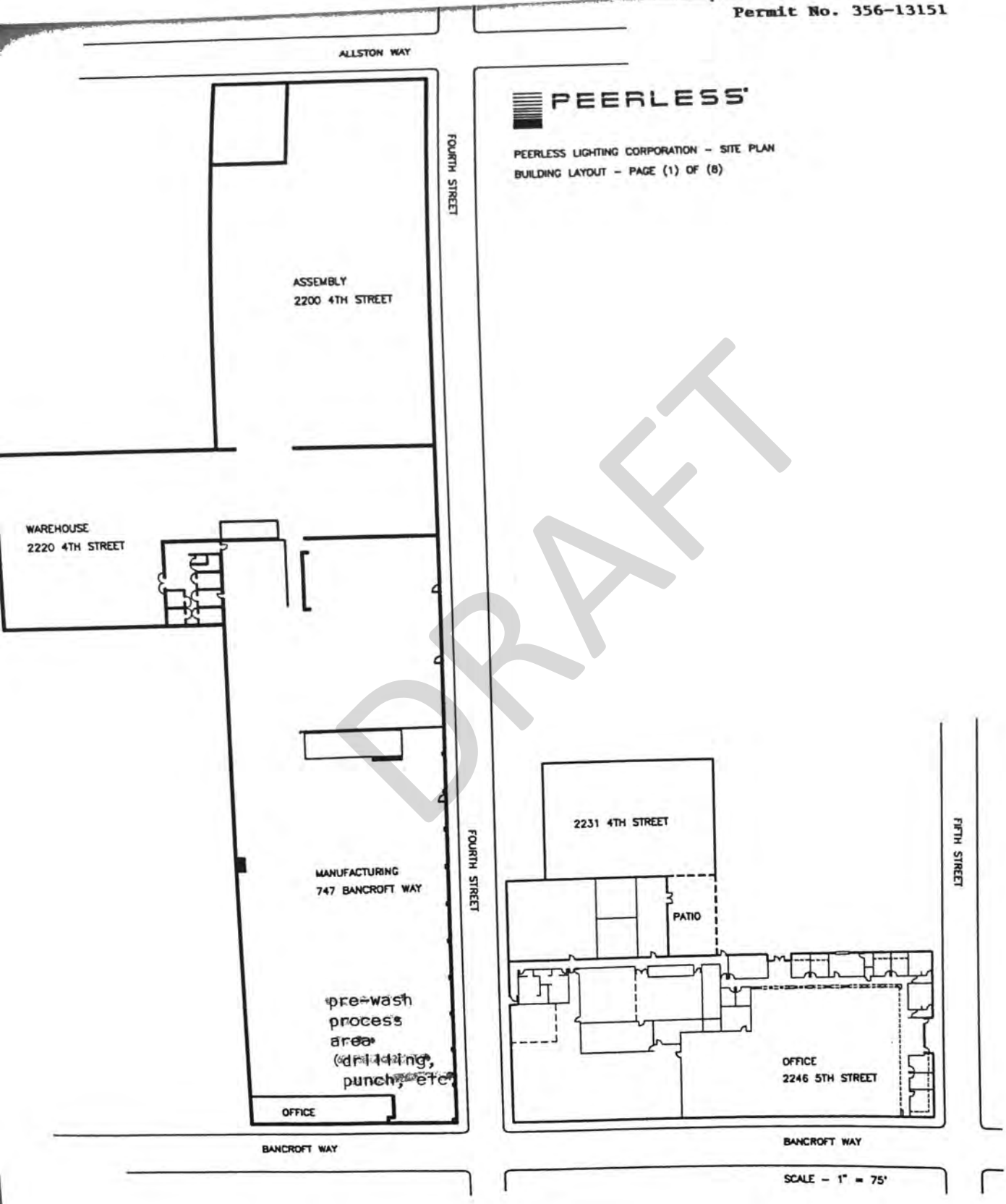
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WALNUT CREEK,
CALIFORNIA 94596
935-0700

Permit No. 356-13151

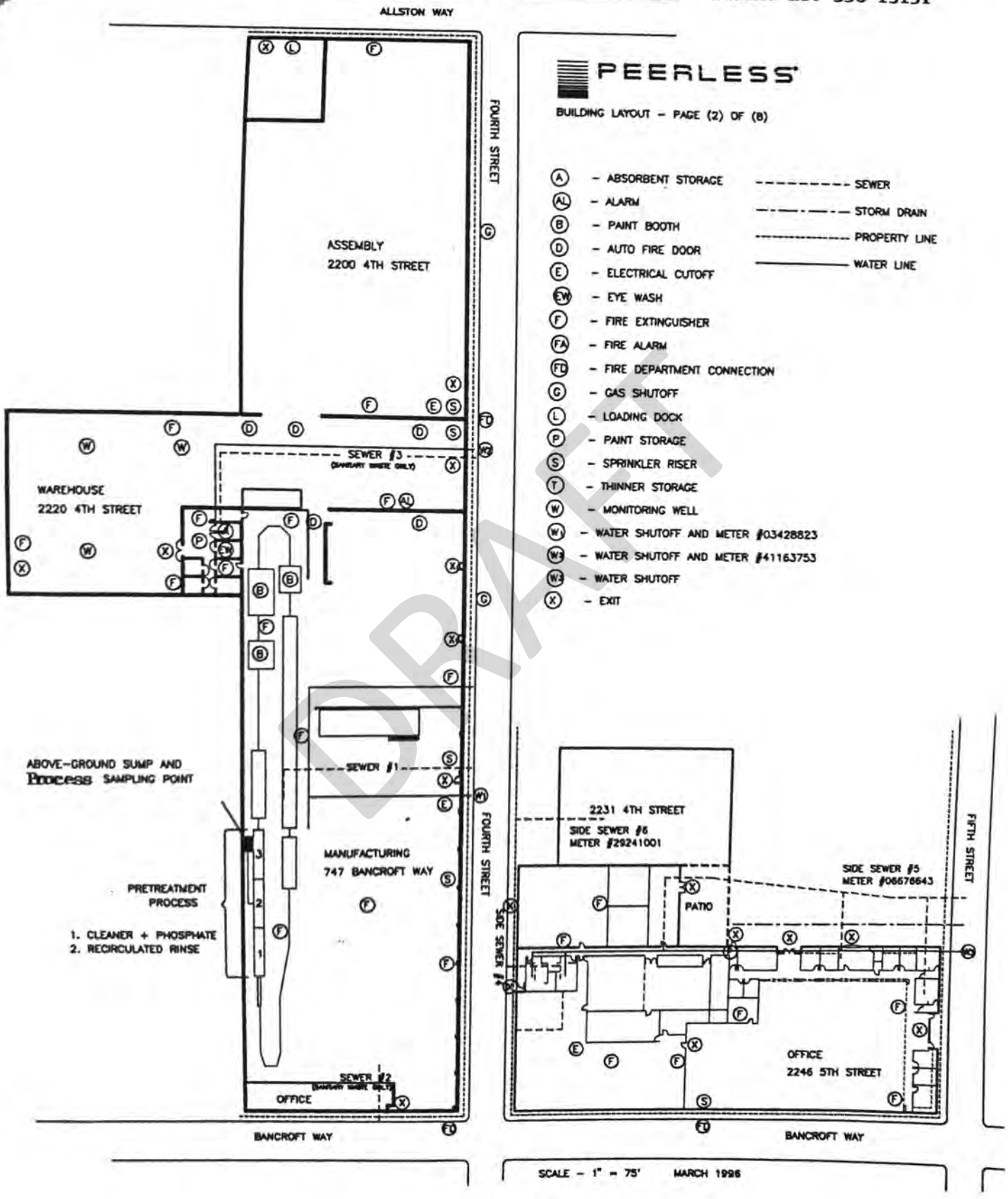
PEERLESS

PEERLESS LIGHTING CORPORATION - SITE PLAN
BUILDING LAYOUT - PAGE (1) OF (8)



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Permit No. 356-13151



PEERLESS

BUILDING LAYOUT – PAGE (2) OF (8)

- (A) – ABSORBENT STORAGE
- (AL) – ALARM
- (B) – PAINT BOOTH
- (D) – AUTO FIRE DOOR
- (E) – ELECTRICAL CUTOFF
- (EW) – EYE WASH
- (F) – FIRE EXTINGUISHER
- (FA) – FIRE ALARM
- (FD) – FIRE DEPARTMENT CONNECTION
- (G) – GAS SHUTOFF
- (L) – LOADING DOCK
- (P) – PAINT STORAGE
- (S) – SPRINKLER RISER
- (T) – THINNER STORAGE
- (W) – MONITORING WELL
- (W1) – WATER SHUTOFF AND METER #03428823
- (W3) – WATER SHUTOFF AND METER #41163753
- (W2) – WATER SHUTOFF
- (X) – EXIT

---------- SEWER

-·-·-·-·- STORM DRAIN

---------- PROPERTY LINE

———— WATER LINE

DRAFT

SCALE – 1" = 75' MARCH 1996

2220 Fourth St
Inspection notes

Bill Mitchell
Monday 14 April 97

Peerless Lighting

Storm drains (Roof downspouts ≈ 6 (3 each side))

Mixing Room – Safety Kleen (annual throughput?)

2 paint storage rooms
1 Solvent room – used paints &
– thinners recycled
– paint waste – catalyzed – Class I fuel
Ronic
1 storage room with solvents

1 small spray booth

Sanitary sewers
– bathrooms
– paint room
– bathrooms/cafeteria

1 propane forklift
5 6-gallon tanks in storage

* Trucking – Boats

Sanitary Sewer laterals
– outside Cafeteria
– outside 2 bathrooms (overflow for paint washer)
monitored for pH by to EBMUD
– Barnhoff

Bayco
~~Bake Off~~ Oven – 800°F / Afterburner 1600°F
Used solely for clearing paint off graters & hangers

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Input Form

(CCR, Title 22, Division 19, Section 2729)

Business Lighting Corporation

Mailing Address: 747 Bancroft Way Zip: 94710 Phone: (510) 845-2760

(USE ONE SHEET FOR EACH CHEMICAL. Please make copies of this page as needed.)

Trade Name Information

State Fed

23) Composition [ ]Pure [X] Mixture [ ]Waste 24) Waste Code _____ Waste Code _____

25) Common/Trade Name heavy duty lacquer thinner

26) Manufacturer Safety-Kleen Corp. Phone (800) 752-7869

27)

Constituent 1 28) CAS # 108-88-3 29) Percent (%) by wt 9.6-62.7
Constituent Name toluene, or methyl benzene

Constituent 2 CAS # 78-93-3 Percent (%) by wt 9.8-39.3
Constituent Name methyl ethyl ketone

Constituent 3 CAS # 107-87-9 Percent (%) by wt 0-29.5
Constituent Name methyl propyl ketone

Constituent 4 CAS # 108-10-1 Percent (%) by wt 0-29.5
Constituent Name methyl isobutyl ketone

Constituent 5 CAS # 123-86-4 Percent (%) by wt 0-18.4
Constituent Name N-butyl acetate

30) Generic Name/Use (optional) lacquer thinner

31) MSDS Ref #/ ID Code 82343

32) Trade Secret? [ ] Yes [X] No 33) Extremely (Acutely) Hazardous? [ ] Yes [X] No

34) Physical State [ ] Solid [ ] Gas [X] Liquid 35) Specific Gravity (if liquid) 0.83

36) DOT Hazard Class 3, paint-related mat. flammable liquid 37) UN/NA# UN1263 38) Pressure? no

39) UFC Health Hazard _____ 40) UFC Reactivity _____

41) UFC Flamm Class _____ 42) UFC Special Hazards _____ 43) Microcuries _____

DRAFT

Storage Detail

Map#	Location	Cont. Type	Press	Temp	Maximum Amount Stored	Average Amount Stored	Maximum in One Vessel	Units	# Days/yr on Site	Wastes Only Annual Thru-put
44)	45)	46)	47)	48)	49)	50)	51)	52)	53)	54)
	A containment rooms	D	=	=	110 Gal	55 Gal	55 Gal	gallons	36.5	220 gal
Totals										

CIP6590

RECEIVED
OCT 11 1989
ENVIRONMENTAL HEALTH

PEERLESS®

Peerless Lighting Corporation
747 Bancroft Way
P.O. Box 2556
Berkeley, CA 94702-0556
415 845 2760
Fax 415 845 2776

9 October 1989

City of Berkeley
Department of Health and Human Services
Division of Environmental Health
2180 Milvia
Berkeley, California 94704

Attention: Eleanor

Re: Underground Storage Tank - 2220 4th Street; State Registry #66090-001

Dear Eleanor:

Confirming our telephone conversation today, we enclose herewith your billing for cancellation since we have no UST's on our property. Back in 1986, we discovered what appeared to be the surface piping of a UST located on recently acquired property at 2220 4th Street. The tank was never used by us. We duly reported the presumed existence of the tank to your department and to the state.

In June of 1987, we contracted with Tank Excavators, (408) 438-1622, for the removal of the tank. A permit was granted by the Fire Department, and a Fire Department representative as well as Ms. Lizabeth Rose of your office were in attendance when the excavation was performed. The excavation revealed that the tank had been removed at some unknown time in the past, prior to our acquisition of the property. Only twenty feet or so of 1-1/2" feeder pipe remained in the pit. Permission to backfill and close the excavation was obtained from Mr. Britt Johnson of your department and from Mr. Greg Zettner of the Regional Water Quality Central Board, based on soil analyses conducted by Brown and Caldwell. The fact that no tank was found was noted by Ms. Rose and subsequently reported by us to your office and to the state.

It appears that your records were never updated. Would you please make the correction? If I can be of any further assistance, please don't hesitate to call.

Very truly yours,

Gary S. Owens
Corporate Secretary

Enclosure: Bill #86-91989

DRAFT

BROWN AND CALDWELL BC
CONSULTING ENGINEERS

March 2, 1987

Mr. Terry Clark
Peerless Lighting Corporation
Post Office Box 2556
Berkeley, California 94702

11-39-3205-01/1

Subject: Evaluation of the Tait, Inc., Berkeley, California, Property

Dear Mr. Clark:

This letter presents the results of our limited site investigation of the surface and subsurface conditions at The Tait, Inc., property located at 2246 Fifth Street and 2222 Fifth Street, Berkeley, California (referred to by the Alameda County Assessor as Parcel #56-1958-6-03). The scope of work was determined with you and Mr. Roger Slavin of Brown and Caldwell on January 22, 1987. The scope of work was based on our understanding of your needs, a site visit by Mr. Slavin, our understanding of the hydrogeology in the vicinity of the site, and our experience with similar site investigations. The purpose of the investigation was to evaluate the potential for site contamination resulting from existing and/or former tenants of the site, to obtain a limited number of soil samples from the unpaved areas at the site, collect ground water samples from the groundwater wells identified at the site, collect a roof-runoff sample, and to analyze these samples for the major potential contaminants that could be reasonably expected to be identified at the site. To accomplish the project objectives, Brown and Caldwell performed the following:

1. Conducted a site visit and interviewed the current tenants of the property to identify their potential for contributing to potential site contamination.

2. Collected soil samples at 15 locations by hand boring.

3. Collected groundwater samples from the two groundwater wells identified on site using appropriate sampling methods.

4. Collected a roof-runoff sample to determine if the spray paint booth vents have emitted products on the roof which affect stormwater draining from the roof.

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During our site visit all drums inside the warehouses appeared to be properly labeled and stored; there was no evidence of leakage from these drums.

A recent site investigation of the Pumptron facility was completed by Engineering-Science (ES) Consultants for Transamerica Delaval, Inc., in January 1987. A copy of the report was given to Brown and Caldwell by Peerless Lighting Corporation and is included in Attachment C. Water samples were collected from the two wells on site and the pump test pit (Figure 1). In addition, a soil sample was collected in the vicinity of Brown and Caldwell sampling location B10 (Figure 1). According to the ES report, groundwater samples analyzed for selected metals (copper and lead) and petroleum hydrocarbons showed no concentrations above the detection limit. The soil sample collected had a hydrocarbon concentration of 8,100 milligrams per kilogram (mg/kg). Hydrocarbons were below the detection limit in the water sample collected from the test pit.

Analytical Results

Samples of soils, liquids, and groundwater were obtained to determine if hazardous concentrations of state-regulated materials are present at the site. Samples were analyzed at Brown and Caldwell's Pasadena laboratory using EPA approved methods for comparisons with California Administrative Code Title 22, Section 66699, Soluble Threshold Limit Concentrations (STLC) and Total Threshold Limit Concentrations (TTLC). STLC and TTLC values are used by the state regulatory agencies to ascertain if a given material is hazardous. Concentrations exceeding STLC and/or TTLC values are considered hazardous. Metals concentrations exceeding TTLC are summarized in Table 1. Oil and grease and hydrocarbon concentrations detected in excess of 1,000 mg/kg (considered to be concentrations of concern to the State) are also shown on Table 1.

Analytical reports are included in Attachment A. Field methods and procedures are discussed in Attachment B.

Soil Sampling. Metals concentrations exceeding TTLC were detected at locations B7A-B7B (composite), B9A-B9B (composite), B10, and B11A-B11B (composite). As shown on Table 1, copper concentrations exceeding TTLC (2,500 mg/kg) were identified at locations B9A-B9B, and B10. Lead concentrations exceeding TTLC (1,000 mg/kg) were found at locations B9A-B9B, B10, and B11A-B11B. Concentrations exceeding the TTLC for mercury (20 mg/kg) were detected at locations B7A-B7B, B9A-B9B, B10, and B11A-B11B. At location B11A-B11B mercury was detected at 3,400 mg/kg, which is 170 times the TTLC value for this constituent. As we discussed during a recent telephone conversation, mercury at these concentrations is considered to be a serious health hazard if not handled properly.

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Table 1. Analytical Results Summary

Sample location	Hydrocarbons	Oil and grease	Copper	Lead	Mercury
B1-B2-B3	4,000	4,200	--	--	--
B4-B5-B6	6,000	1,300	--	--	--
B7A-B7B	20,000	7,600	--	--	>20
B8A-B8B	9,000	2,800	--	--	--
B9A-B9B	40,000	15,000	3,200	1,700	960
B10	9,000	63,000	2,800	2,500	180
B11A-B11B	5,000	6,500	--	2,200	3,400
TTLC	--	--	2,500	1,000	20

NOTES:
1. Sample locations shown on Figure 1.
2. Concentrations are in milligrams per kilogram.
3. All results are from sample interval 0 to 6 inches below grade.
4. All samples were analyzed by Brown and Caldwell Laboratory.

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Note that at location B7A-B7B the laboratory reported that they were unable to determine the precise concentration of mercury in the sample.

All samples analyzed for mercury were completed using coal furnace and atomic adsorption methods. Apparently there is a "gap" between these two analytical methods at which the exact concentration cannot be determined. However, the "gap" at which the exact concentration cannot be determined is above the TTLC level. As such, the mercury concentration is shown on Table 1 as being greater than 20 mg/kg.

Oil and grease were detected in all the surface soil samples (0- to 6-inch intervals). Oil and grease concentrations ranged from 1,300 mg/kg (location B1-B2-B3 (composite)) to 63,000 mg/kg (location B10) (Table 1). The higher concentrations of oil and grease were detected in the samples collected in the vicinity of the southern-most shed in the yard area. Oil and grease was also detected in the 48- to 54-inch and 72- to 78-inch sample intervals (440 mg/kg and 850 mg/kg, respectively) at location B10. The surface soils at this location appeared to be oily.

Analyses for priority pollutant extractable organic compounds detected hydrocarbon in all of surface soil samples. The concentrations of hydrocarbons ranged from 4,000 mg/kg (location B1-B2-B3 (composite)) to 40,000 mg/kg (location B9A-B9B (composite)). Hydrocarbons detected in concentrations greater than 1,000 mg/kg are generally considered to be of concern to the state regulatory agencies. With the exception of phenol detected at location B7A-B7B (composite) 68 mg/kg), all priority pollutant extractable constituents analyzed were at or below their respective detection limits.

Analyses for priority pollutant purgeable organic compounds show concentrations are, for the most part, at or below detection limits. Some of the lighter hydrocarbon compounds were detected in the 45- to 54-inch and 72- to 78-inch intervals at location B10. No deep soil samples could be collected for purgeable organic analyses at locations B9 and B11, as a concrete slab was encountered approximately 1.2 feet below grade at these locations during hand boring.

Groundwater Sampling. Groundwater samples were collected from the two wells identified at the site and analyzed for priority pollutant purgeable and extractable organic compounds and priority pollutant metals. Sampling methods are discussed in Attachment B.

Metals in the groundwater were below detection limits except for zinc, which was detected well below STLC. In addition, priority pollutant purgeable compounds were generally non-detectable in the

DRAFT

2235 FIFTH ST

groundwater samples. Analyses for priority-pollutant extractable organic detected hydrocarbon concentrations ranging between 40 and 60 milligrams per liter (mg/l) in both wells.

Roof Runoff Sample. A roof-runoff sample was collected by Brown and Caldwell on February 12, 1987, during a rainstorm. The sample was analyzed for priority-pollutant metals and priority-pollutant, purgeable-organic compounds to characterize the stormwater runoff draining from the roof. These constituents were selected to determine if the paint booth vents were emitting hazardous materials onto the roof, thus possibly contaminating the stormwater runoff.

Priority-pollutant, purgeable-organic compounds were below their respective detection limits roof runoff sample. With the exception of zinc (5 mg/l), all priority-pollutant metals were below their respective detection limits.

Conclusions

Based on the available information generated from our limited site investigation, we have concluded the following:

- Oil and grease and hydrocarbons were detected at significant concentrations in the soil samples collected from the locations shown on Figure 1.
- Trace concentrations of hydrocarbons were detected in the 48- to 54-inch and 72- to 78-inch sample intervals at location B10; an area which is visibly contaminated at the surface.
- Metal concentrations exceeding TTLC were detected in soil samples collected at four locations. Mercury concentrations 170 times the TTLC value was detected, which is a potential health hazard if not handled properly.
- Groundwater samples collected from the two wells on site were analyzed for metals and priority pollutant purgeable and extractable organic compounds and showed no concentrations above detection limits except for zinc and relatively low concentrations of hydrocarbons.
- A roof-runoff sample analyzed for priority pollutant purgeable organic compounds and metals show no concentrations above detection except for zinc.

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Recommendations

As you requested, we have incorporated our recommendations based on the information collected during our limited site investigation. Our recommendations are as follows:

- Define the vertical extent of soils contaminated by hydrocarbons and priority-pollutant metals found in excess of TTLC values during the site investigation.
- Excavate and dispose soils with hydrocarbon concentrations exceeding 1,000 mg/kg and soils contaminated with heavy metals. This work should be completed by a California certified hazardous waste hauler.
- Pave over exposed dirt areas once clean-up is completed and certified by state regulatory agencies.
- Properly abandon the two wells on site if the wells are not planned to be used in the future. This work should be completed by a licensed California drilling contractor.

It has been a pleasure working with you during this site investigation. If you have any questions regarding this letter, please call me.

Very truly yours,

BROWN AND CALDWELL

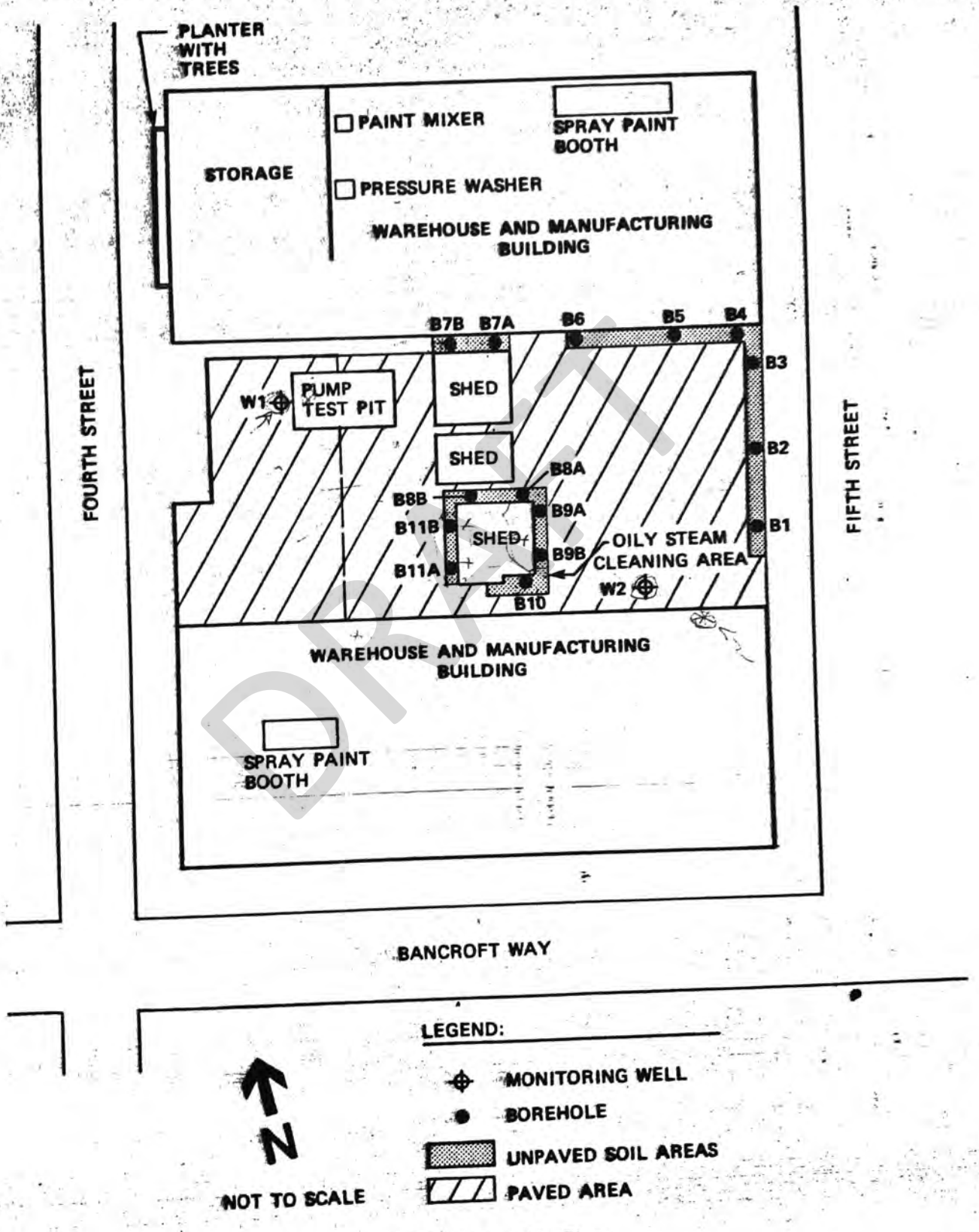
Roger A. E. Slavin

Roger A. E. Slavin
Project Manager

RAES:cl

Enclosures (3)

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Figure 1 Site Plan

Establishment Name: Berkeley Jet Drive 94710

Establishment Address: 2222 5th St. 94710

Establishment Phone Number: 549-1808

Contact Person & Position: Dave Lengord - Plant Manager

	Yes	No
Verbal Consent to Enter Premises	X	—

Date and Time of Visit 8/12/91 11:30 am

1) Does your business generate any of the following by-products?

By-Product Categories	Yes	No
Solvents - Thinner	X	—
Sludges	—	X
Waste Oil/Mixed Oil - oil/paint & Machine oil	X	—
Pesticides	—	X
Polychorinated Biphenyls (PCBs)	—	X
Monomer Waste/polymeric Resin Waste	—	X
Biological Wastes	—	X
Organic Liquids/Solid	—	X
Contaminated Aqueous Solutions	—	X
Acid Solutions	—	X
Alkaline Solutions (caustic)	—	X
Asbestos Wastes	—	X
Metal Sludges and Dusts - scrap metal	—	X
Other Hazardous Wastes	—	X

2) Does this facility use, store, transport, or handle any fuels, solvents, paints, thinners, epoxies, acids or caustics in quantities equal to or greater than 1 gallon or 8 lbs?

Yes	No
—	—

Paints, Thinners >20 gal
↓
20-30 gal

4) Does this facility have any compressed gases in quantities equal to or greater than 200 cu. Ft..?

Propane - 5 small tanks

Yes	No
X	—

5) Do you know of any underground fuel tanks on the premises?

Yes	No
—	—

6) Do you have a current business license?

Yes	No
—	—

Left package with:
Mail

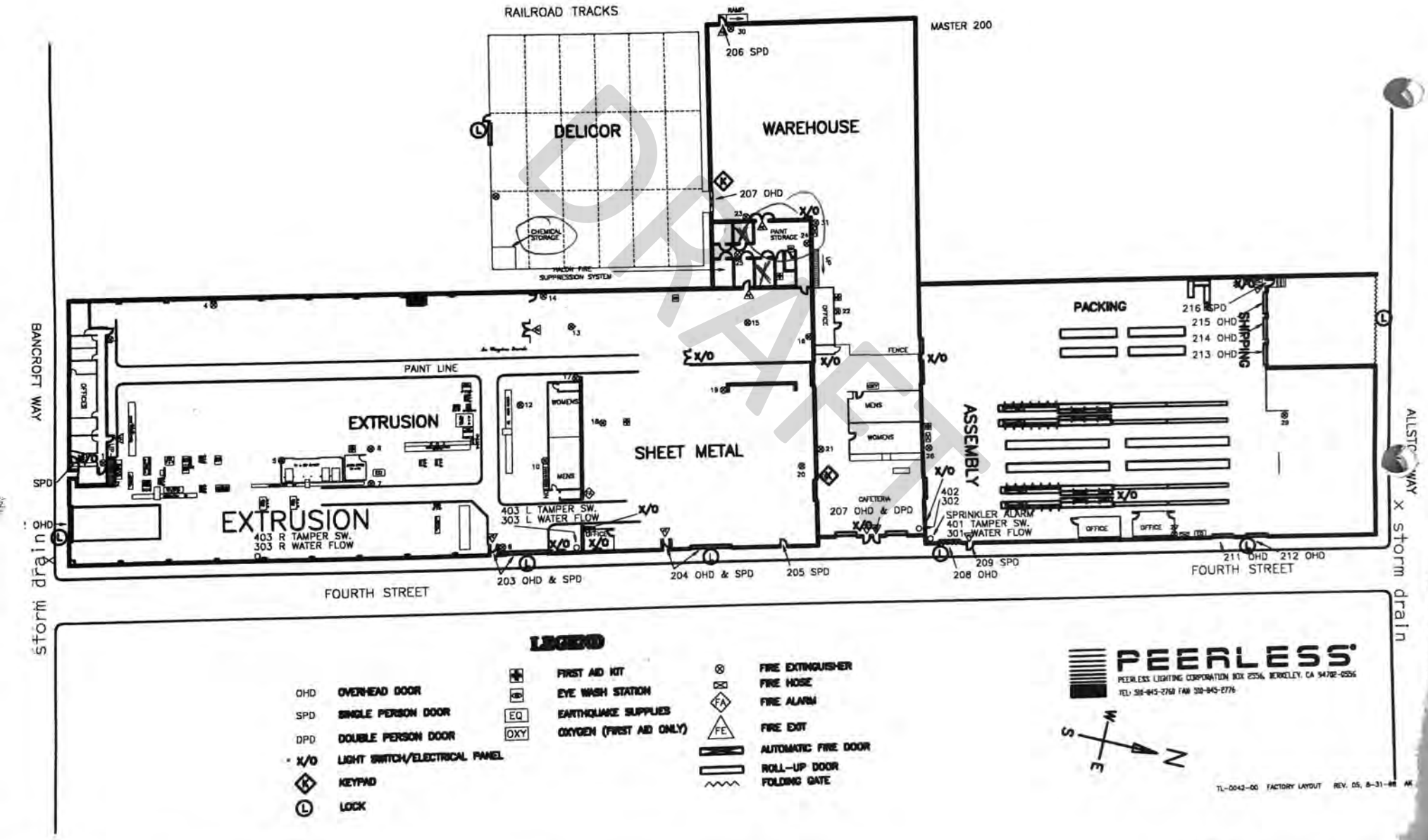
Initials: Date:

Send Haz. Waste Gen. package as well.

Not avail.
Ask Gary Zehner

ENTERED
SEP 03 1991
By

DRAFT



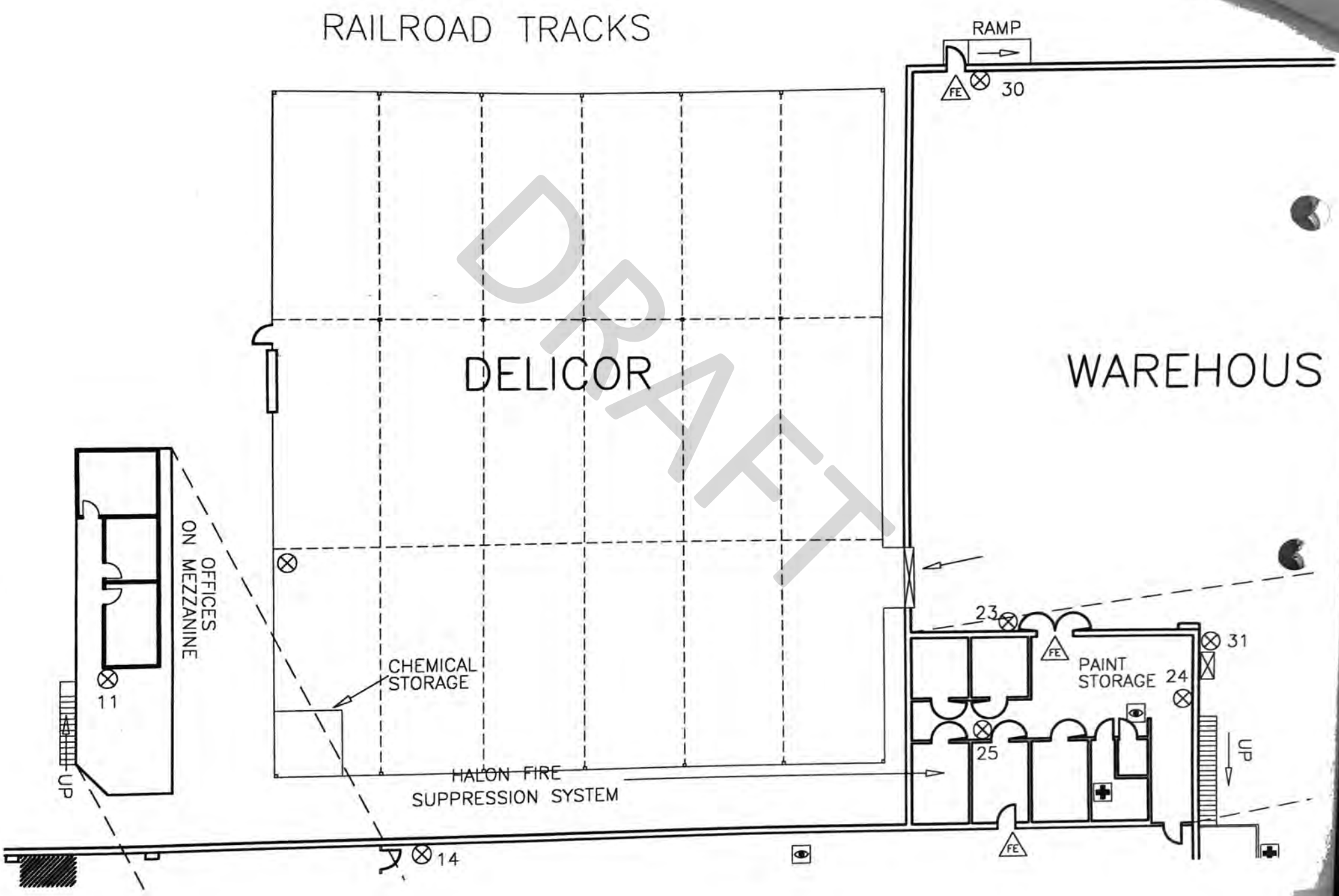
LEGEND

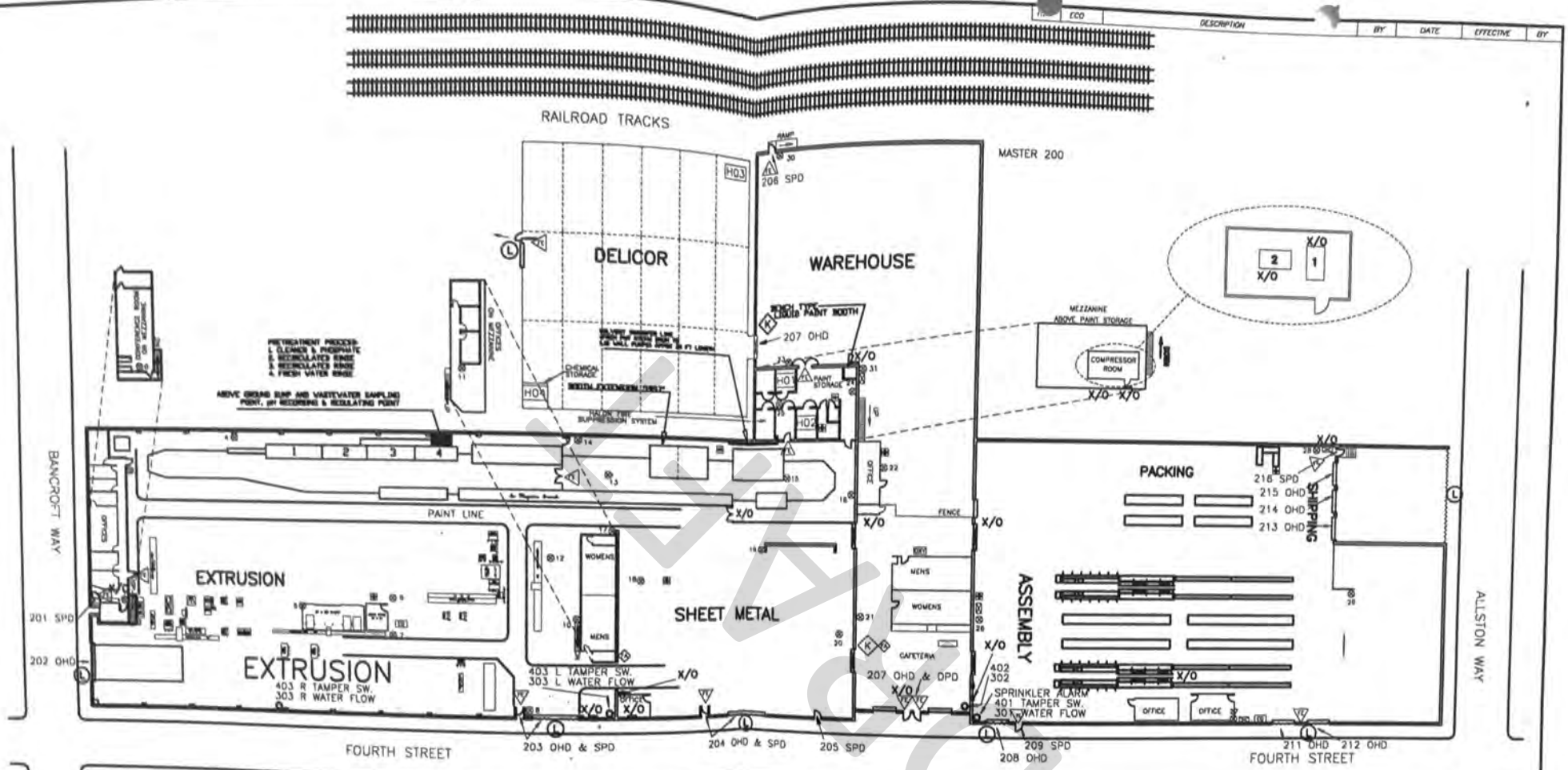
- OHD — OVERHEAD DOOR
- SPD — SINGLE PERSON DOOR
- DPD — DOUBLE PERSON DOOR
- X/O — LIGHT SWITCH/ELECTRICAL PANEL
- KEYPAD
- LOCK
- FIRST AID KIT
- EYE WASH STATION
- EQ — EARTHQUAKE SUPPLIES
- OXY — OXYGEN (FIRST AID ONLY)
- FIRE EXTINGUISHER
- FIRE HOSE
- FA — FIRE ALARM
- FE — FIRE EXIT
- AUTOMATIC FIRE DOOR
- ROLL-UP DOOR
- FOLDING GATE

PEERLESS
PEERLESS LIGHTING CORPORATION BOX 2556, BERKELEY, CA 94702-0556
TEL: 510-845-2768 FAX 510-845-2776

TL-0042-00 FACTORY LAYOUT REV. 05, 8-31-98 AK

DRAFT


RAILROAD TRACKS
RAMP
FE
30
DELICOR
WAREHOUS
OFFICES ON MEZZANINE
11
UP
CHEMICAL STORAGE
23
FE
PAINT STORAGE
24
31
25
UP
HALON FIRE SUPPRESSION SYSTEM
14
FE
DRAFT



LEGEND

OHD	OVERHEAD DOOR
SPD	SINGLE PERSON DOOR
DPD	DOUBLE PERSON DOOR
X/O	LIGHT SWITCH/ELECTRICAL PANEL
K	KEYPAD
L	LOCK
FAK	FIRST AID KIT
EW	EYE WASH STATION
EQ	EARTHQUAKE SUPPLIES
OXY	OXYGEN (FIRST AID ONLY)
Hxx	WASTE STORAGE
FE	FIRE EXTINGUISHER
FH	FIRE HOSE
FA	FIRE ALARM
FE	FIRE EXIT
	AUTOMATIC FIRE DOOR
	ROLL-UP DOOR
	FOLDING GATE

N W S E

REV	ECO	DESCRIPTION	BY	DATE	EFFECTIVE	BY

TL-0042-00 FACTORY LAYOUT REV. 08, 11-16-98 MH

NEXT ASSY

USED ON

SYSTEM: AutoCAD Rel.13_c4a

PART FILE: TL0042B1

BLANK SIZE

UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES

.XX | .XXX | ANGLES

MATERIAL

FINISH

PEERLESS

PEERLESS LIGHTING CORPORATION [illegible], BERKELEY, CA [illegible]

TEL [illegible] FAX [illegible]

SIZE B | SCALE

SHEET 1 OF 1

PART DESCRIPTION: FACTORY

DRWN | 11/17/98

CHKR

APVD

PART No. TL-0042-00

Department of Planning and Development
Toxics Management Division

CLOSURE APPLICATION FOR HAZARDOUS MATERIALS STORAGE FACILITIES

For Dept Use Only – Log In/Date Stamp
9-17-15 GAF
(BY INSPECTION)

Assigned to: G.F.

Please complete and submit this form no less than 45 days prior to the start of closure activities of any aboveground hazardous materials storage area or facility. Based on the information submitted below, and the complexity of the closure, a written Closure Plan may be required (see guidelines).

1. Facility Information: *(Note: Print or type all information.)*

Facility Name: PEERLESS LIGHTING Facility Phone: (510) 845-2764

Site Address: 2246 5th St Berkeley, CA Zip: 94518

EPA ID Number: _____

Contact Name: CHRIS COOPER Contact Phone: ( ) SAME AS ABOVE

Forwarding Address: SAME AS ABOVE

City: _____ State: _____ Zip: _____ Phone No.: ( ) _____

Property Owner Name: _____

Property Owner Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone No.: ( ) _____

2. Closure Information:

☒ Full Facility Closure ☐ Partial Facility Closure/Remodel | Proposed Date of Closure: ___/___/___.

Briefly describe the proposed closure activity. Indicate the previous use(s) of the area(s) intended to be closed and the types of chemicals used or stored in the area(s) (i.e. by submitting a copy of the Inventory Statements from your Hazardous Materials Business Plan, etc.). Include equipment, tanks, piping, exhaust and treatment systems, all subsurface hazardous material containment such as sumps, baths, etc., and the proposed final disposition of any hazardous materials and/or wastes. Attach additional pages if necessary.

OUR FACILITY IS MAINLY R&D. WE HAVE REDUCED OUR INVENTORY TO A SMALL AMOUNT OF AEROSOLS & OTHER MISCELLANEOUS LIQUIDS. OUR AGGREGATE AMOUNTS OF HAZARDOUS MATERIALS ARE LESS THAN 55 GALLONS, 200 CUBIC FEET. WE DO NOT GENERATE HAZARDOUS WASTE.

I hereby certify, under penalty of perjury, that the information contained in this Closure Application is, to the best of my knowledge, true and correct.

Applicant/Agent's Name *(Print)*: CHRISTINE COOPER Title: SAFETY COORDINATOR

Signature of Applicant/Agent: Christine L. Cooper Date: 8/17/15

DRAFT

Agency Use Only

Application: ☐ approved ☐ disapproved	Closure Plan: ☐ required ☐ not required	Inspection: ☐ required ☐ not required	Current Balance (MR) _____
Closure Fee: $ _____	Receipt No.: _____	Date: ____/____/____.	
Comments: _____			
Staff: _____		Date: ___/___/___.	

DRAFT

10-1-15

CLOSED

THIS BUSINESS WAS INSPECTED AND HAS BEEN CLOSED IN THE ENVISION DATABASE.

THEY WERE ALREADY BILLED FOR THIS YEAR, SO JUST NEED TO BE SURE THEY ARE PAID AND REMOVED FROM FUTURE BILLING.

GBOFT

MR430I07 CITY OF BERKELEY 5/17/16
Miscellaneous Receivables Inquiry 10:40:31

Customer ID . . . : 176 Name: PEERLESS LITHONIA LIGHTING
Last statement . : 4/21/16 Addr: 2246 FIFTH STREET
Last invoice . . : 0/00/00 ATTN: GARY OWENS
Current balance . : .00 BERKELEY, CA 94702
Pending . . . . . : .00 Status: A ACTIVE
Type: Hazardous/Toxic Materials

Type options, press Enter. Combined Detail
5=Display

Opt	Trans Date	Code	Description	Amount	Balance	Chg Typ	Bnk Cd	G L
_	4/21/16	stmrn	Statements Processed	.00	.00			N
_	3/22/16	stmrn	Statements Processed	.00	.00			N
_	2/18/16	stmrn	Statements Processed	.00	.00			N
_	1/21/16	stmrn	Statements Processed	.00	.00			N
_	11/17/15	stmrn	Statements Processed	.00	.00			N
_	10/28/15		PAYMENT	1033.00-	.00		04	
_	10/23/15	HWGP	Charge adjustment	21.00-	1033.00	J	04	
_	10/23/15	HMPC	Charge adjustment	78.80-	1054.00	J	04	

More...

F3=Exit F11=View reason F12=Cancel * = Pending

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

Issued to

Name of Facility: PEERLESS LIGHTING		*Customer Identification Number:* CID# 176
Street Address: 2246 FIFTH STREET	*Mailing Address:* Gary Owens 2246 Fifth Street	
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* Berkeley, CA 94710	

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan: **B2**	Hazardous Waste Generator Program: **--**
Above Ground Petroleum Storage, SPCC Plan:	Tiered Permit Program for Onsite Treatment of Hazardous Waste:
Universal Waste:	California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP):
Underground Storage Tank Program No. of USTs:	Radiological Agents: Etiological Agents:

DRAFT

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date: January 01, 2011	**Expiration Date:** March 1, 2013		*Machine Validation / Official Receipt*
Issue Date: April 19, 2012		**Approved By: Nabil Al-Hadithy**	

G:\TOXICS\CUPA\PERMIT\00PERMTS\

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION
City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

1. This permit is subject to all applicable local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

2. This permit is not transferable. Any permit or registration issued to a particular person or for a designated place, operation, purpose or object shall not be valid for use by or for any other person, place, operation, purpose or object.

3. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

4. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

5. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

6. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

7. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

8. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

Planning & Development Department
Toxics Management Division

October 15, 2012

Acuity Brands Lighting or Gary Owens
(Regarding: PEERLESS LIGHTING, Customer #176)
2246 Fifth Street
Berkeley, CA 94710

Subject: Outstanding Account Balance for PEERLESS LIGHTING located at 2246 FIFTH STREET

Dear Berkeley Business Operator:

This notice is a courtesy reminder regarding your unpaid balance in the amount of **$893** for 2012 Hazardous Materials and/or Hazardous Waste. On or about October 22, 2012, new invoices will be mailed, and will include late penalties. In order to avoid these penalties, please submit your payment immediately, including your customer number **(CID# 176) on your payment check and stub,** to the following address:

City of Berkeley
Finance-Treasure Division
2180 Milvia Street, 3rd Floor
Berkeley, CA 94704

Please contact our Finance Department at 510 981-7200 should you need request a payment plan. If you have already brought your account current, you may disregard this notice.

Sincerely,

Nabil Al-Hadithy
Hazardous Materials Manger
Toxics Management Division
nalhadithy@cityofberkeley.info
Direct: (510) 981-7461

DRAFT

CITY OF BERKELEY

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

ENTERED 8/5/13

FEE SUMMARY SHEET
For Permit Period FY14 (Base Reporting Period: 2013)

Business Name: Peerless Lighting [CID: 176]

Address: 2246 5th Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2013	CY2013	CY2013	Last Reported	FY2014 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	18	9	~~455~~ 7	1	<25
Total no. of ***waste*** chemicals:	2	0			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	<55	–	1435 *	B2	B-2
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	<55			<55	<55
Underground Storage Tanks: No. of USTs: 0					
Universal Waste:	CESQUWG	HANDLER	DESTINATION	Date entered into HTE (and initials)	
Other Billing Categories:	Tiered	etiologic	radiologic		
inert gas fee / nano	CalARP	EPCRA	APSA		

Completed by: K Busche Date: 8-1-13

DRAFT



Click on the forms button in the bar at the top of the page to view individual forms

From: PEERLESS LIGHTING(2246 FIFTH ST /FA0000561) Submitted: Mon Mar 3 2014, 6:11 PM

Print the form contents View a submission summary

Submission History

Status: ACCEPTED Accept Decline Delete

Data Transformation Services

Migrate Data

Review

Make sure to save your Review form by clicking on the Save Changes button before accepting or declining a submission.

Save Changes Cancel Changes

Cover Page Comments	Starting/Ending dates on Owner/Operator sheet revised as requested.
Facility ID	FA0000561
Facility Name	PEERLESS LIGHTING
Site Address	2246 FIFTH ST
City	BERKELEY
Program ID	PR0000405
Program Element	4200
Agency's Review Comments	thank you.
Reviewer's Name	Karl Busche
Reviewer Email	kbusche@cityofberkeley.info
Review Date	03/03/2014
Status	01

Form Deficiencies

- ☐ Owner Operator Form: Invalid/Missing Business Name/Address
- ☐ Owner Operator Form: Invalid/Missing Business Owner Name/Address
- ☐ Owner Operator Form: Invalid/Missing Environmental Contact
- ☐ Owner Operator Form: Invalid/Missing Emergency Contacts
- ☐ Chemical Description Form: Invalid/Missing Location - Map# and/or Grid#
- ☐ Chemical Description Form: Invalid/Missing Fire Code Hazard Classes
- ☐ Chemical Description Form: Invalid/Missing Physical state
- ☐ Chemical Description Form: Invalid/Missing Average daily amount and or Maximum daily amount
- ☐ Chemical Description Form: Invalid/Missing Units
- ☐ Emergency Plan Form: The plan does not adequately address Release Prevention, Immediate Notification and Evacuation, and Emergency Response Protocols and Cleanup Procedures
- ☐ None

Other Form Deficiencies

Map Deficiencies

- ☐ Map is illegible (or does not scan well)
- ☐ Map lacks orientation (North arrow)
- ☐ Map lacks facility name and address
- ☐ Streets on map are not labeled
- ☐ Map is significantly off scale
- ☐ Structures are not outlined

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION

Name of Facility: PEERLESS LIGHTING		*Customer Identification Number:* CID# 176
Street Address: 2246 FIFTH STREET	*Mailing Address:* Gary Owens 2246 Fifth Street	
Permit Type: ☒ Full ☐ Provisional ☐ Temporary	*City/State/ZIP:* Berkeley, CA 94710	

For the following elements of the Unified Hazardous Materials and Hazardous Waste Program

Hazardous Materials Release Response Plan:
HMPB2

Hazardous Waste Generator Program:
<55

Above Ground Petroleum Storage, SPCC Plan **(If blank then none reported)**:

Tiered Permit Program for Onsite Treatment of Hazardous Waste **(If blank, none reported)**:

Universal Waste **(If blank, no UW reported)**:
CESQUWG

California Accidental Release Prevention Program and/or Federal Risk Management Plan (CalARP): **N/A**

Underground Storage Tank Program
No. of USTs: **None**

Radiological Agents: None
Etiological Agents: None
Other: None

DRAFT

Certification

I certify that I have read and I hereby accept the terms and conditions printed on the other side of this Unified Program Consolidated Permit and Registration. I agree to comply with all permit conditions and all local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

Signature of Applicant	*Printed Name and Title*	*Date Signed*

Note: Your Consolidated Permit and Registration is granted subject to compliance with the permit conditions described on the reverse side of this page.

FOR OFFICE USE ONLY

Effective Date: March 1, 2014	**Expiration Date:** June 30, 2015		*Machine Validation / Official Receipt*
Issue Date: May 13, 2014		**Approved By: Nabil Al-Hadithy**	

2118 Milvia Street, Suite 300, Berkeley, CA 94704
Phone: (510) 981-7460 Fax (510) 981-7470 www.cityofberkeley.info/toxics

UNIFIED PROGRAM CONSOLIDATED PERMIT AND REGISTRATION
City of Berkeley Toxics Management Division

CONDITIONS:

In order to maintain this Consolidated Permit and Registration, the permittee/registrant must comply with the following:

1457. This permit is subject to all applicable local, state and federal ordinances, laws, statutes, codes, rules and regulations relating to the storage, handling, generation and disposal of hazardous materials and/or hazardous waste.

1458. This permit is not transferable. Any permit or registration issued to a particular person or for a designated place, operation, purpose or object shall not be valid for use by or for any other person, place, operation, purpose or object.

1459. The permittee/registrant shall retain this permit at its facility, immediately available upon request by an inspector or the hazardous materials manager.

1460. The permittee/registrant shall notify the Toxics Management Division within 30 days of any changes in the operation of the facility that may affect the permit, or changes of the owner or operator.

1461. The permittee/registrant shall pay an annual fee as designated each year, and all applicable state surcharge fees.

1462. The permittee/registrant shall authorize representatives of the Toxics Management Division to enter the facility for inspection purposes to ascertain compliance and cause correction of any violation of the Unified Program Permit/Registration Conditions and of any applicable ordinances, codes, laws, statutes, rules, or regulations.

1463. The permittee/registrant shall take all necessary steps to ensure the discovery, containment and clean up of any confirmed or unconfirmed unauthorized release of any hazardous material/hazardous waste and shall notify the Toxics Management Division of such unauthorized release if the release or threatened release presents or may present a significant threat to human life, property or the environment.

1464. For hazardous materials sites, at least 45 days prior to the closure of a regulated unit or the facility, the permittee/registrant will submit a closure application to the Toxics Management Division addressing the appropriate removal of all hazardous materials and hazardous wastes from the facility.

Failure to comply with any of the foregoing conditions may result in revocation of this permit and/or a penalty assessment.

DRAFT

Click on the forms button in the bar at the top of the page to view individual forms

From: PEERLESS LIGHTING(2246 FIFTH ST /FA0000561)
Print the form contents
Submission History
Status: ACCEPTED

√No Changes

Submitted: Tue Feb 24 2015, 12:44 PM
View a submission summary

Accept Decline Delete

Data Transformation Services

Migrate Data

Review

Make sure to save your Review form by clicking on the Save Changes button before accepting or declining a submission.

Save Changes Cancel Changes

Cover Page Comments	Starting/Ending dates on Owner/Operator sheet revised as requested.
Facility ID	FA0000561
Facility Name	PEERLESS LIGHTING
Site Address	2246 FIFTH ST
City	BERKELEY
Program ID	PR0000405
Program Element	4200
Agency's Review Comments	thank you, Karl Busche
Reviewer's Name	BUSCHE, KARL
Reviewer Email	
Review Date	04/02/2015
Status	01
Form Deficiencies	☐ Owner Operator Form: Invalid/Missing Business Name/Address ☐ Owner Operator Form: Invalid/Missing Business Owner Name/Address ☐ Owner Operator Form: Invalid/Missing Environmental Contact ☐ Owner Operator Form: Invalid/Missing Emergency Contacts ☐ Chemical Description Form: Invalid/Missing Location - Map# and/or Grid# ☐ Chemical Description Form: Invalid/Missing Fire Code Hazard Classes ☐ Chemical Description Form: Invalid/Missing Physical state ☐ Chemical Description Form: Invalid/Missing Average daily amount and or Maximum daily amount ☐ Chemical Description Form: Invalid/Missing Units ☐ Emergency Plan Form: The plan does not adequately address Release Prevention, Immediate Notification and Evacuation, and Emergency Response Protocols and Cleanup Procedures ☐ None
Other Form Deficiencies	

DRAFT

CITY OF BERKELEY
Department of ...ning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

For Dept Use Only
Entered: 7/19/15
by: GT
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 8-17-15 Time: 1000 Page: 1 of 2

Facility Name: Peerless Lighting

Address: 2246 Fifth St. Phone: 845-2760

Owner/Operator Name: Acuity Brands Lighting

Facility Representative(s): Chris Cooper

Permitted CUPA Activities: ☒ HMBP ☐HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☒HMBP ☐HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☒SW
Unannounced: ☐ Yes ☒ No
Purpose of Inspection: ☒Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other_____
Consent Granted for: ☒Inspection ☒Photos (include log) ☐Samples; Consent Granted By: C. Cooper

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		MET W TODAY TO INSPECT FOR COMPLIANCE WITH THE HMBP AND STORMWATER PROGRAMS.
	HM OBS 1	OBSERVED LOCATIONS, AMTS, E.R. EQUIPMENT TO BE CONSISTENT WITH 2015 HMBP REPORTING. TRAINING RECORDS MAINTAINED AND CURRENT.
	HW OBS 1	FACILITY DOES NOT GENERATE HW. UNIVERSAL WASTE MANAGEMENT, LABELING, AND ACCUMULATION TIMES ARE IN COMPLIANCE.
	HM OBS 2	FACILITY IS MAINLY R&D, NOT MANUFACTURING. OBSERVED VOLUMES OF HM'S APPEAR TO BE BELOW REPORTING THRESHOLDS REQUIRED BY THE STATE OR CITY OF BERKELEY (<55g + <200 CF) POSSIBLE CANDIDATE TO BE EXEMPT FROM CUPA.
	STORM OBS 1	VERY LOW POTENTIAL FOR NON-SW DISCHARGE.
		NO CUPA OR STORMWATER VIOLATIONS OBSERVED.
	NOTE:	RECEIVED CLOSURE APPLICATION FOR HM STORAGE FACILITIES.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply). STATEMENTS CONFIRMED BY INSPECTION TODAY. GF.

☐ CUPA violations cited on page(s) NONE shall be corrected within ____ days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: Cynthia Cooper Title: Safety Coordinator
Inspector's Signature: _____ Inspector's Name: Geoff Fiedler

DRAFT

Alameda Countywide
Clean Water Program
Standard Stormwater Facility Inspection Report Form

ENTERED 1-19-15

Municipality: BERKELEY
Date: 8-17-15 Time: 1000
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☒ Routine Inspection ☐ Response to Complaint ☐ Follow-up | Follow-up Inspection Due: N. A.

NAME OF FACILITY: PEGRLESS LIGHTING
SITE ADDRESS: 2246 FIFTH ST.

CONTACT NAME: CHRIS COOPER
PHONE: 845-2760
BUSINESS TYPE/ACTIVITY: COMMERCIAL LIGHTING MFR.
SIC: 3646
☐ High Priority Facility

Is the property owner different than the facility owner? ☒ yes ☐ no If yes, complete the following:
NAME PHONE
MAILING ADDRESS

Is the facility covered under any other programs or permits? (Check all that apply.)
☐ None ☐ Sanitary sewer
☐ Air quality ☒ Hazmat business plan ☐ Underground storage tanks ☐ Aboveground storage tanks
☐ Fire department(hazmat storage) ☐ Hazmat waste generator ☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☒ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas	✓				☐
B. Outdoor Material Storage Areas	✓				☐
C. Outdoor Waste Storage/Disposal Areas		1	0		☐ DUMPSTER/RECYCLABLES CLOSED/LOCKED.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				☐
E. Outdoor Parking Areas and Access Roads		1	0		☐ WELL MAINTAINED. NO STAINING, LIGT SPILLS OR TRASH.
F. Outdoor Wash Areas	✓				☐
G. Rooftop Equipment		1	0		☐ NOTED ~~ARE~~ DISCHARGE OF WATER AT DOWNSPOUTS ON BANCROFT WAY.
H. Outdoor Drainage from Indoor Areas		1	0		☐ NO SIGNIFICANT POTENTIAL. MANLY AGGREGATE/LOW VOLUME LIQUIDS.
I. Other (describe):	✓				☐

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☒ Maintenance required in storm drain system ☐ yes ☒ no

VERY LOW POTENTIAL FOR NON-STORMWATER DISCHARGE. LOW VOLUME LIQUIDS, APPROX LESS THAN 10 GALS, STORED IN CABINETS, INDOORS.

NOTE: WATER OBSERVED IN STREET AND DOWNSPOUTS ON BANCROFT WAY. RECOMMEND IDENTIFYING SOURCE. DISCHARGE OF UNTREATED CONDENSATE TO THE STORMDRAIN SYSTEM IS ILLEGAL.

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☒ 3; Third | ☐ Referred to; Details:

ENFORCEMENT: ☒ None ☐ Verbal Notice ☐ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

F:\A14x\A149.03\Database Revision\InspForm final 9-22-05.doc

Facility Representative: Christine L Cooper Inspector: G. FIGUEROA

2/2

DRAFT

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

Fee under
2246 - FIFTH STREET

FEE SUMMARY SHEET
For Permit Period FY12 (Base Reporting Period: 2010)

Business Name: Peerless Lighting [CID: 176]

Address: 2231 Fourth Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2010	CY2010	CY2010	Last Reported	FY2012 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	10	2	6		18
Total no. of ***waste*** chemicals:	—	—			
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	117	28	2149		B2
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	—	—			—
Underground Storage Tanks: No. of USTs: 0					
Universal Waste:	CESQUWG	HANDLER	DESTINATION	Date entered into HTE (and initials)	
		✓			
Other Billing Categories:	Tiered	etiologic	radiologic		
	NA	NA	NA		
inert gas fee / nano	CalARP	EPCRA	APSA		
NA / NA	NA	NA	NA		

Completed by: [signature] Date: 8/1/14

DRAFT

2118 Milvia Street, Suite 300, Berkeley, California 94704 TEL: (510) 981-7460 TDD: (510) 981-6903 FAX: (510) 981-7470

Lear, Meridith

From: Lear, Meridith
Sent: Friday, July 29, 2011 4:30 PM
To: 'gary.owens@peerless-lighting.com'
Subject: HMBP Forms

Hi Gary, I am reviewing your HMBP. Everything looks good, but 3 of the forms are on old versions (very subtle differences, like asking for a fax number, asking if you have regulated substances under CalARP). Can you please complete the attached forms and either email or fax them to my attention by 8/5/11?

Thanks,

Meridith Lear, Hazardous Materials Specialist II
City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300, Berkeley, CA 94704
Direct Line: (510) 981-7464
Main Line (510) 981-7460
Fax: (510) 981-7470
Website: www.CityofBerkeley.info

Many City of Berkeley offices, including Toxics, will be closed on Fridays August 12th and 26th as a cost savings measure.


B3 OWNOP.docx


B1 MBPCertification.doc


B2 BUSACT.DOC

DRAFT

City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 FAX (510) 981-7470

Hazardous Materials Business Plan (HMBP) Certification Statement

For Dept Use Only - Date/Time Stamp

RECEIVED
JUL 29 2011
TOXICS MGMT. DIVISION

I. IDENTIFICATION

BUSINESS NAME (Same as Facility Name or DBA-Doing Business As)
Peerless Lighting

BUSINESS SITE ADDRESS
2246 – 5th Street; 2231 – 4th Street

CITY		CA	ZIP CODE
Berkeley			94710

II. CERTIFICATION STATEMENT

Check the appropriate boxes below and sign the certification statement.

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is, to the best of my knowledge, true and correct. I understand that I will be required to show proof of compliance during any facility inspection conducted by City, County, State, or Federal authorities. I understand that whenever there are changes in address, ownership, business name, or operations (closure, addition of undisclosed hazardous materials or hazardous wastes, and/or contingency planning provisions), a notification of such must be made to Toxics Management Division within 30 days of the change.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE
	8/1/2011
NAME OF SIGNER (print)	TITLE OF SIGNER
Gary Owens	Director, Information Systems
EMAIL OF SIGNER OR ENVIRONMENTAL CONTACT	
G.Owens@peerless-lighting.com	

Agency Use Only

☐ HMBP accepted as submitted
☑ HMBP requires revisions – Letter sent

HMBP ACCEPTED: 8 / 1 / 11 BY: [signature]

DRAFT

8/4/11: Date Tech Review Completed
_____: Date Scanned
_____: Date Copied for BFD
_____: Date Data Entry Completed
_____: Date Filed

(Initial each line)

CW#

City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 FAX (510) 981-7470

Hazardous Materials Business Plan (HMBP) Certification Statement

For Dept Use Only – Log In/Date Stamp
RECEIVED
FEB 22 2011
TOXICS MGMT. DIVISION

I. IDENTIFICATION

FACILITY ID # 1 7 6 C A L 3 1 2 9 2 2 [1]

BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) [3]
Peerless Lighting

BUSINESS SITE ADDRESS [103]
2246 5th Street; 2231 4th Street

CITY [104]: Berkeley | CA | ZIP CODE [105]: 94710

II. CERTIFICATION STATEMENT

Check the appropriate boxes below and sign the certification statement.

☐ INITIAL SUBMITTAL: This new HMBP is being submitted for the following:
- ☐ New facility
- ☐ Change of ownership
- ☐ Change of business address

☐ ANNUAL CERTIFICATION: I have personally reviewed the HMBP currently on file with your agency, dated _____, and hereby certify, *under penalty of perjury,* that:
- The information contained in the most recent HMBP submission is complete, accurate and up to date.
- A copy of the facility's most current Business Owner/Operator Identification page is being submitted with this certification form.
- The facility has not begun handling any hazardous materials/hazardous wastes that are not currently listed on the most recently submitted Hazardous Materials Inventory forms.
- There have been no significant changes (100% increase or decrease) in the quantities of any previously reported hazardous materials/hazardous wastes as reported on the most recently submitted Hazardous Materials Inventory forms.
- The facility's annual waste amounts reported on the most recently submitted Hazardous Materials Inventory forms are accurate and expected to be the same in the next year.
- This certification is <u>not</u> being made to meet annual inventory submission requirements of EPCRA. (EPCRA requires complete annual submission of the inventory, United States Code Title 42, Section 11022).

☑ CERTIFICATION OF CHANGES/REVISIONS: This is to certify that the HMBP has been reviewed and revisions, amendments and/or additions are necessary and are being submitted with this document. The following areas of the HBMP are affected:

- ☑ Entire HMBP revision
- ☐ Business Activities page
- ☐ Business Owner/Operator Identification page
- ☐ Hazardous Materials Inventory
- ☐ Facility Site Plan/Storage Map(s)
- ☐ Emergency Response Plan/Contingency Plan
- ☐ Other (Specify): _____

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is, to the best of my knowledge, true and correct. I understand that I will be required to show proof of compliance during any facility inspection conducted by City, County, State, or Federal authorities. I understand that whenever there are changes in address, ownership, business name, or operations (closure, addition of undisclosed hazardous materials or hazardous wastes, and/or contingency planning provisions), a notification of such must be made to Toxics Management Division within 30 days of the change.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE
	2/10/2011
NAME OF SIGNER (print)	TITLE OF SIGNER
Gary S. Owens	Director, Information Systems

Agency Use Only

☐ HMBP accepted as submitted
☑ HMBP requires revisions – Letter sent

HMBP ACCEPTED: ___/___/___ BY: _____

DRAFT

City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM – FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # 1	EPA ID # (Hazardous Waste Only) CAL000312922	2
BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) Peerless Lighting		3
BUSINESS SITE ADDRESS 2246 – 5th Street; 2231 – 4th Street		103
BUSINESS SITE CITY Berkeley 104	CA ZIP CODE 94710	105

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES ☐ NO 4	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release Prevention Program (CalARP)?	☐ YES ☒ NO 4a	Coordinate with your local agency responsible for CalARP
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES ☒ NO 5	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES ☒ NO 8	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE 1. Generate hazardous waste?	☒ YES ☐ NO 9	EPA ID NUMBER – provide at the top of this page
2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES ☒ NO 10	RECYCLABLE MATERIALS REPORT (one per recycler)
3. Treat hazardous waste on site?	☐ YES ☒ NO 11	ONSITE HAZARDOUS WASTE TREATMENT – FACILITY ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES ☒ NO 12	CERTIFICATION OF FINANCIAL ASSURANCE
5. Consolidate hazardous waste generated at a remote site?	☐ YES ☒ NO 13	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐ YES ☒ NO 14	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (20 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES ☒ NO 14a	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES ☒ NO 14b	See CUPA for required forms.
F. LOCAL REQUIREMENTS 1. Use or store hazardous materials or hazardous wastes in combined (aggregate) quantities equal to or greater than 55 gallons for liquids, 500 pounds for solids or 200 cubic feet for compressed gases?	☒ YES ☐ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
2. Use or store any quantity of etiological agents, radioactive materials, perchlorate, or manufactured nanoscale materials?	☐ YES ☒ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
3. Below E.1. thresholds above, but generate any quantity of hazardous waste?	☐ YES ☒ NO 15	HAZARDOUS WASTE GENERATOR REPORTING PACKET
4. Generate any quantity of Universal Waste (mercury containing devices, non-empty aerosols, electronic devices, fluorescent tubes, batteries, dental amalgam wastes, etc.)?	☒ YES ☐ NO 15	SEE THE UNIVERSAL WASTE REPORTING REQUIREMENTS PAGE FOR INSTRUCTIONS

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5.	Treat any quantity of photochemical waste on-site (x-ray and photo imaging processors)?	☐ YES ☒ NO 15	

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM - FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID# 1		BEGINNING DATE 100: 1/1/2010	ENDING DATE 101: 12/31/2010
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: Peerless Lighting		BUSINESS PHONE 102: 510 845-2760	
BUSINESS SITE ADDRESS 103: 2246 – 5th Street; 2231 – 4th Street (adjoining buildings)		BUSINESS FAX 102a: 510 845-2776	
BUSINESS SITE CITY 104: Berkeley	CA	ZIP CODE 105: 94710	COUNTY 108: Alameda
DUN & BRADSTREET 106		PRIMARY SIC 107: 3646	PRIMARY NAICS 107a: 335122
BUSINESS MAILING ADDRESS 108a: 2246 – 5th Street			
BUSINESS MAILING CITY 108b: Berkeley		STATE 108c: CA	ZIP CODE 108d: 95710
BUSINESS OPERATOR NAME 109: Peerless Lighting		BUSINESS OPERATOR PHONE 110: 510 845-2760	

II. BUSINESS OWNER

OWNER NAME 111: Acuity Brands Lighting	OWNER PHONE 112: 770 922-9000	
OWNER MAILING ADDRESS 113: 1400 Lester Road		
OWNER MAILING CITY 114: Conyers	STATE 115: GA	ZIP CODE 116: 30012

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: Gary Owens	CONTACT PHONE 118: 510 845-2760	
CONTACT MAILING ADDRESS 119: 2246 – 5th Street	CONTACT EMAIL 119a: G.Owens@peerless-lighting.com	
CONTACT MAILING CITY 120: Berkeley	STATE 121: CA	ZIP CODE 122: 94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Gary Owens	NAME 128: Jimmy Suttles
TITLE 124: Director, Information Systems	TITLE 129: Facilities Manager
BUSINESS PHONE 125: 510 845-2760	BUSINESS PHONE 130: 770 860-2511
24-HOUR PHONE 126: 510 914-2982 cell / 510 482-5029 home	24-HOUR PHONE 131: 678 409-7299
PAGER # 127	PAGER # 132

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134: 8/1/2011	NAME OF DOCUMENT PREPARER 135: Gary Owens
NAME OF SIGNER (print) 136: Gary Owens	TITLE OF SIGNER 137: Director, Information Systems	

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H1	Propane	☑ Same as first column	74-98-6	☐ Yes ☑ No	FG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	20 = 682 cu ft	20	10	☑ 365	CYL	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H2	Latex Wall Paints	☐ Same as first column Titanium Dioxide ~30% Acrylic Polymers	13463-67-7 Various	☐ Yes ☑ No	IRR	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	100	80	5	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H3	Aerosol Paints (Consumer spray cans < 1 L capacity)	☐ Same as first column Acetone 0 - 20% Propane 0-15% Toluene 0-20% Xylene 0-25% Mineral Spirits 0-15%	67-64-1 74-98-6 108-88-3 1330-20-7 64741-65-7	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	80 = 10 gal	50	1	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H4	Argon	☑ Same as first column	7440-32-1	☐ Yes ☑ No	NFG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	672	672	336	☑ 365	CYL	☐ lbs ☐ gal ☑ cu. ft. ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

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Non-Waste Hazardous Materials Inventory Spreadsheet

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201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H4	Nitrogen	☑ Same as first column	7440-32-1	☐ Yes ☑ No	NFG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	230	230	230	☐ lbs ☐ gal ☑ cu. ft. ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H4	Oxygen	☑ Same as first column	7782-44-7	☐ Yes ☑ No	OX	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	401	401	251	☐ lbs ☐ gal ☑ cu. ft. ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H4	Acetylene	☑ Same as first column	74-86-2	☐ Yes ☑ No	FG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	132	132	132	☐ lbs ☐ gal ☑ cu. ft. ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H3	Denatured Alcohol	☐ Same as first column Ethyl Alcohol 45 - 50% Methanol 45 - 50% Methyl isobutyl ketone 1 - 4%	64-17-5 67-56-1 108-10-1	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1	1	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container C			

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2246 5th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H5	Stratasys P400SC Water Soluble Concentrate	☐ Same as first column Sodium Hydroxide 24 - 25%	1310-73-2	☐ Yes ☑ No	COR	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	24	12	2	☑ 365	PB	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☐ Delayed	Pressure ☑ Ambient ☐> Amb. ☐< Amb. Temp ☑ Ambient ☐> Amb. ☐< Amb. ☐ Cryogenic
H5	Spilfyter Kolorsafe Dry Base Neutralizer	☐ Same as first column Citric Acid, anhydrous Thymol Blue	77-92-9 76-61-9	☐ Yes ☑ No	IRR	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	4	4	2	☑ 365	PB	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐> Amb. ☐< Amb. Temp ☑ Ambient ☐> Amb. ☐< Amb. ☐ Cryogenic
H6	Propane (14 oz consumer cyl) Duplicate chem, diff. location MEL	☑ Same as first column	74-98-6	☐ Yes ☑ No	FG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	4x8.1=32.4 cu ft.	3	.875	☑ 365	CYL	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☐ Ambient ☑> Amb. ☐< Amb. Temp ☑ Ambient ☐> Amb. ☐< Amb. ☐ Cryogenic
H6	Denatured Alcohol Duplicate chem, diff. location MEL	☐ Same as first column Ethyl Alcohol 45 - 50% Methanol 45 - 50% Methyl isobutyl ketone 1 - 4%	64-17-5 67-56-1 108-10-1	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1	1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐> Amb. ☐< Amb. Temp ☑ Ambient ☐> Amb. ☐< Amb. ☐ Cryogenic

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*MEL 7/29/14

Non-Waste Hazardous Materials Inventory Spreadsheet

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201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H6	Dykem blue layout fluid	☐ Same as first column Ethanol 30 - 50% Butyl Acetate 20 - 30% Butanol 10 - 20% n-Propyl Acetate 1 - 5% Isopropanol 1 - 5%	64-17-5 123-86-4 71-36-3 109-60-4 67-63-0	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.5	0.2 222 Days on site: ☑ 365	0.1 223 Storage Container: C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Mobil DTE 24 Light Hydraulic Oil	☐ Same as first column PET. HYDROCARBONS AND ADDITIVES		☐ Yes ☑ No	CL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1 222 Days on site: ☑ 365	1 223 Storage Container: PB	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	RE-180 Thinner	☐ Same as first column Petroleum naphtha 30 - 60% Diacetone alcohol 10 - 30% Isophorone 10 - 30% 1,2,4-Trimethylbenzene (contaminant) 1,3,5-Trimethylbenzene (contaminant)	64742-95-6 123-42-2 78-59-1 95-63-6 108-67-8	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1 222 Days on site: ☑ 365	1 223 Storage Container: C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Opaque Screen Ink	☐ Same as first column Titanium dioxide 30 - 60% Stoddard solvent 10 - 30% Talc 5 - 10% Naphtha (petroleum), heavy aromatic 5 - 10% Petroleum naphtha, light aromatic 1 - 5%	13463-67-7 8052-41-3 14807-96-6 64742-94-5 64742-95-6	☐ Yes ☑ No	CL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.25	0.25 222 Days on site: ☑ 365	0.25 223 Storage Container: C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☑ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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Non-Waste Hazardous Materials Inventory Spreadsheet

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H6	Degreaser	☐ Same as first column Tetrachloroethylene 50 - 60% Trichloroethylene 40 - 50% 1,2-Butylene Oxide < 0.5% Carbon dioxide < 5%	127-18-4 79-01-6 106-88-7 124-38-9	☐ Yes ☑ No	TX	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	5 ~ 5gal	2	1	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Cutting Fluid	☐ Same as first column Trichloroethylene 80 - 90%	79-01-6	☐ Yes ☑ No	TX	☐ solid ☑ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	2	1	1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Contact Cleaner	☐ Same as first column Propan-2-ol 60 - 100% Naphtha, desulfurized < 20% Naphtha, hydrotreated 5 - 10% Carbon Dioxide 1 - 5%	67-63-0 92045-53-9 64742-49-0 124-38-9	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.7 ~ 0.01 gal	0.7	0.7	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive				☐ 365		☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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Invoice: Date : 29Apr11 Shipping : 6.51
Cust: GEN. ADM./ACCOU Weight : 1 LBS Special : 0.85
Phone # : COD : 0.00 Track: 6698 1038 8719
Dept: GEN. ADM./ACCOU DV : 0.00 Total : 7.36
Svcs: EXPRESS SAVER
TRCK: 6698 1038 8719

Hazardous Waste Inventory Spreadsheet

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3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☑

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
	Waste Gasoline UN1203 (Current Inventory = 0 No future storage or waste anticipated)	☑ Same as first column		☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	0	0	0	0	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365 0	223 Storage Container: SD	220 State Waste Code: 331			
	Non-RCRA Hazardous Waste Liquid (Hydraulic Oil)	☐ Same as first column Hydraulic Oil - 100%		☐ Yes ☑ No	CL	☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	0	0	0	0	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365 0	223 Storage Container: SD	220 State Waste Code: 221			
H3	Waste Muriatic Acid	☐ Same as first column Hydrochloric Acid 9 - 36%	7647-01-0	☐ Yes ☑ No	COR	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	0	0	0	0	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365	223 Storage Container: PB	220 State Waste Code: 141			
	Waste Epoxy Resin UN 1263	☐ Same as first column Xylene 30 - 40% Bisphenol A Epoxy Resin 30 - 40% Oxo-Hexyl Acetate 1 - 5% Silane 1 - 5%	1330-20-7 25036-25-3 88230-35-7 68611-44-9	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	0	0	0	0	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure: ☑ Ambient ☐ > Amb. ☐ < Amb. Temp: ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365	223 Storage Container: C	220 State Waste Code: 331			

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210 Hazard Classes: CAR – Carcinogens; CL – Combustible Liquid ; COR – Corrosive; CRY – Cryogenic; EX – Explosive; FG – Flammable Gas; FL – Flammable Liquid; FS – Flammable Solid; HT – Highly Toxic; IRR – Irritant; MISC – Miscellaneous Hazardous Materials; NFG – Nonflammable Gas; OP – Organic Peroxide; OX – Oxydizer; PYRO – Pyrophoric; SENS – Sensitizer; TX – Toxic; UR – Unstable/Reactive; WR – Water Reactive

223 Storage Container Codes: AGT – Above Ground Tank; B – Bag; BX – Box; C – Can; CB – Carboy; CYL – Cylinder; FD – Fiber Drum; GB – Glass Bottle; PB – Plastic Bottle; PD – Plastic/Nonmetallic Drum; SD – Steel Drum; S – Silo; RC – Rail Car; TB – Tote Bin; TW – Tank Wagon; UST – Underground Tank; O – Other

UNIVERSAL WASTE GENERATOR REPORTING FORM

(Please see *Universal Waste Reporting Requirements* sheet for explanation and abbreviations.)

Facility Name and Address: Peerless Lighting

2246 5th Street; 2231 4th Street, Berkeley CA

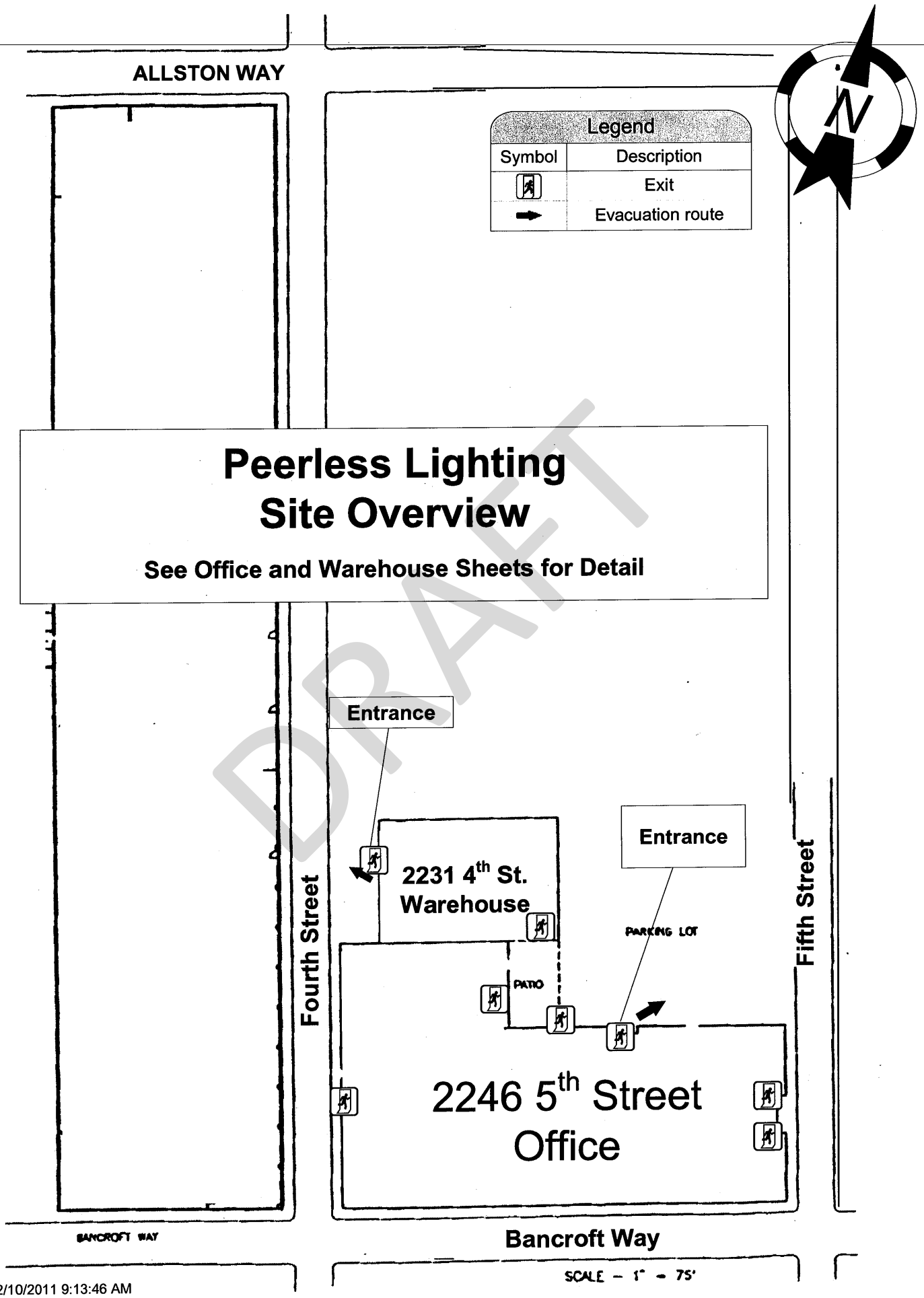
EPA ID# (required for LQHUWs, and UW Dismantlers and Processors): CAL312922

Reporting Period: Calendar Year 2010 ; January 1 through December 31

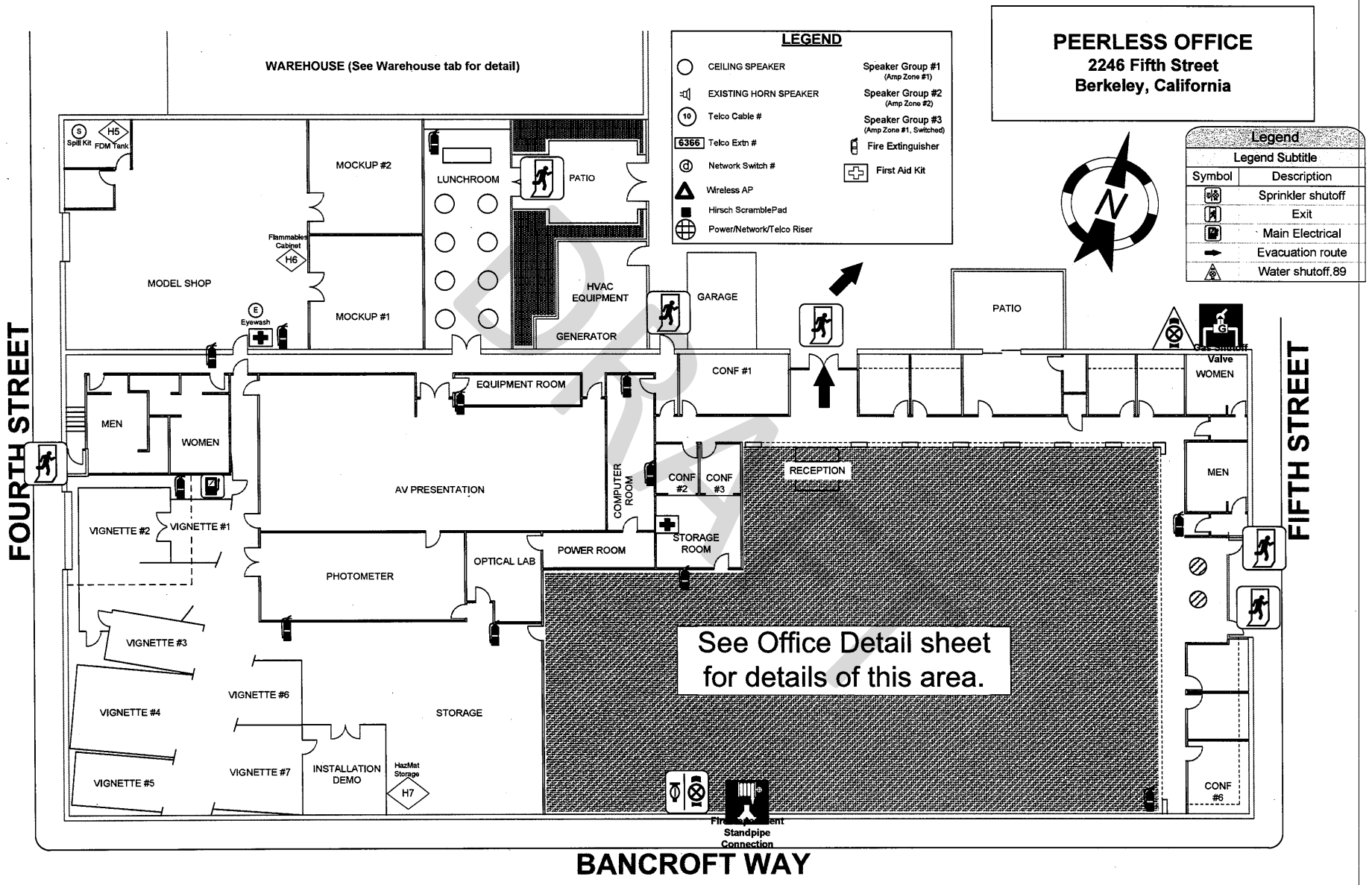
All quantities of the following Universal Wastes must be reported:	**Pounds per Year**
1. Batteries	67
2. Fluorescent bulbs*	378
3. Other mercury containing bulbs	0
4. Cathode ray tubes (CRTs, televisions and computer monitors that are not flat screened)	4870
5. Plasma and LCD televisions	0
6. Consumer electronic devices (including cell phones, telephones, pagers and computer equipment)	2912
7. Dental amalgam wastes	0
8. Nonempty aerosol cans	0
9. Mercury thermometers	0
10. Mercury switches (including vehicle switches)	0
11. Mercury thermostats	0
12. Mercury pressure or vacuum gauges	0
13. Mercury-added novelties (i.e. lighted shoes)	0
14. Mercury counterweights and dampers	0
15. Mercury-added dilators and weighted tubing	0
16. Mercury-added rubber flooring	0
17. Mercury gas-flow regulators	0
Annual Throughput-Total Pounds:	8,227

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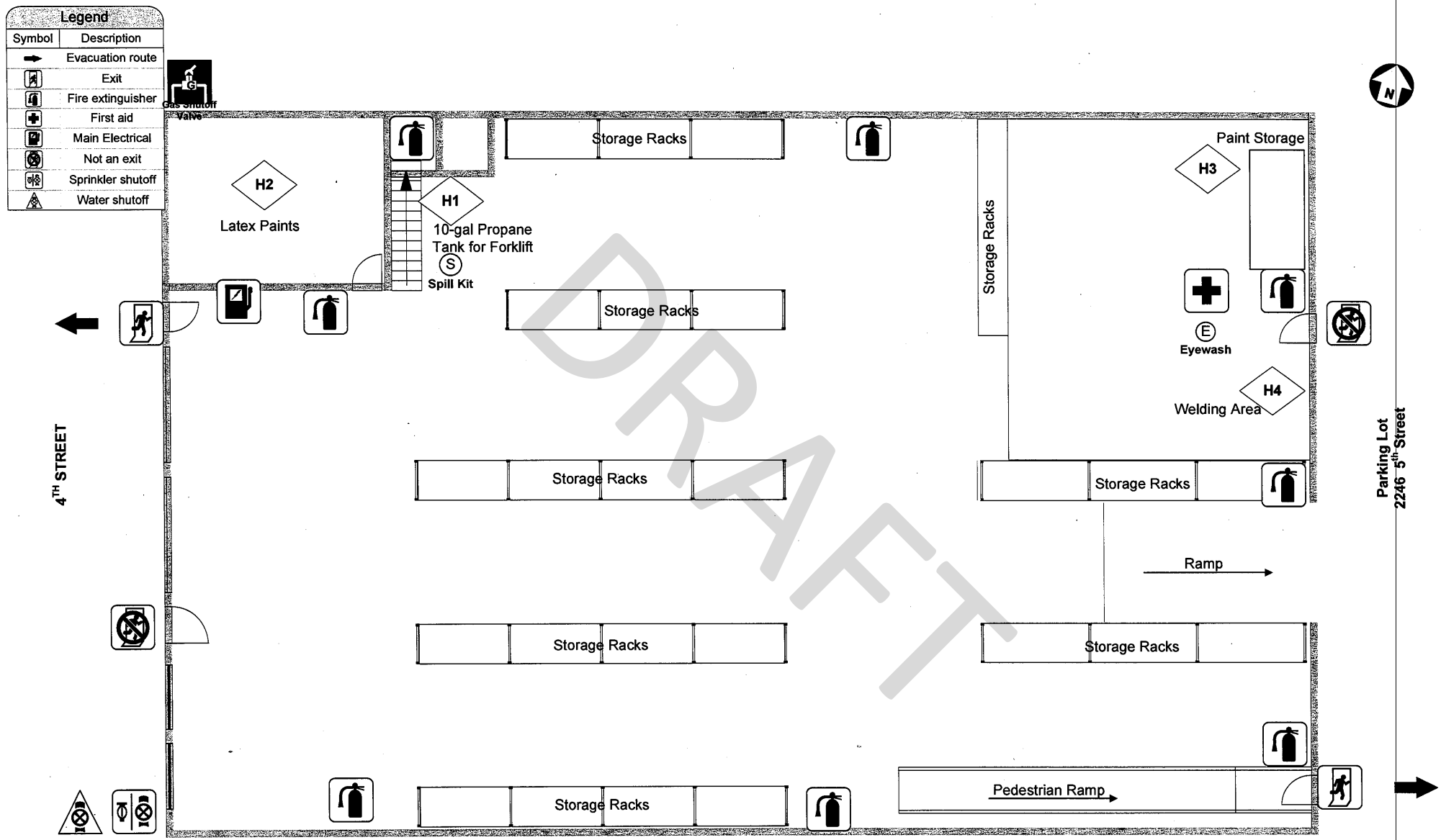
* Fluorescent bulb generation may be reported in feet, but please indicate the units used.



Printed: 2/10/2011 9:13:46 AM



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Warehouse – 2231 4th St

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Acuity Brands

EMERGENCY RESPONSE CONTINGENCY PLAN

EMERGENCY RESPONSE CONTINGENCY PLAN
Contents

The Facility Manager is responsible for ensuring that the facility has implemented an Emergency Response Contingency Plan (ERCP). This Plan was developed to meet the regulatory requirements that apply to Small Quantity Generators (SQG) and Conditionally Exempt Small Quantity Generators (CESQG). The Facility Manager will designate an Emergency Response Coordinator (ERC) who will be specifically responsible for implementing the requirements of the ERCP as required under 40 CFR 264.34(d)(5)(i). The Facility EC, Area EC and/or the Facility Manager may serve as the ERC. **The Facility Manager must authorize the appropriate person to act as the ERC.**

The ERC shall be summoned either directly, or by telephone, in the event of a release, fire or explosion, associated with chemicals or waste management. ERC contact numbers shall be included on the Emergency Phone Numbers list in Section C, Table I, of the ERCP. This table, with the appropriate Facility Diagrams, must be posted near each Satellite Accumulation Area (SAA) and Hazardous Waste Accumulation Area (HWAA).

The Facility Manager and ERC must ensure that the facility is maintained and operated to minimize the possibility of a fire, explosion, or any unplanned sudden, or non-sudden, release of hazardous wastes or constituents to air, soil or surface water which could threaten human health or the environment as required under 40 CFR 265.31. In addition, they must make sure that, where applicable, proper aisle space is maintained to allow the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment to any area of the facility in an emergency, in accordance with 40 CFR 265.35.

Additional facility specific ERCP requirements are attached as an addendum to this document and must be followed, if applicable.

A. PURPOSE

The purpose of this ERCP is to provide instructions for coordinating emergency response measures at the facility as required under the 40 CFR 264.34(d)(5) and 265.37. The responses to address are:

- Notification and response procedures in the event of a fire,
- Containment and cleanup of contaminated materials or soil in the event of a spill of chemicals or hazardous waste, and
- Notification and reporting requirements in the event of a fire, explosion or other release which could threaten human health outside the facility or when a spill has reached surface water.

B. ARRANGEMENTS WITH LOCAL AUTHORITIES (40 CFR 265.37)

1) The ERC must have attempted to make arrangements with local authorities to familiarize police, fire departments, and emergency response teams with the layout of the facilities, hazardous wastes handled, and the associated hazards, types of injuries or illnesses which could result, and evacuation routes, by sending all of the following documents to the attention of the contact person:

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a) Cover letter template for communicating to emergency response agency located on the Checklists and Forms section of the Environmental Compliance Website at http://abintranet.
b) The ERCP
c) Facility Diagrams with the required items noted
d) Waste Characterization Table.

2) The cover letter and the attachments must be sent to the following agencies:
a) Local Fire Department
b) Local Police Department
c) Local Emergency Planning Committee (LEPC)
d) The local emergency response contractor that provides services to the facility
e) Local Hospital.

3) The facility must retain a copy of the letters, return receipts, or other historical records that will demonstrate actions in forwarding the ERCP.

I. EMERGENCY RESPONSE AND CONTINGENCY PLAN

C. EMERGENCY TELEPHONE NUMBERS (40 CFR 262.34(d)(5)(ii)(A) & (C))

Table I

	Contact Name	Contact Phone
Fire		
Local Fire Department		911
Local Police Department		911
Injuries		
Local Emergency Services	US Healthworks	Daytime: 510-845-5170 After Hours: see below
Local Hospital 1	Alta Bates Hospital, Herrick Campus	Daytime: (510) 204-4509 After Hours: (510) 204-4509
Local Hospital 2		Daytime: After Hours:
Spills/Release		
Spill Contractor		
Facility Local Contacts		
Facility Manager	Jim Young 1363 Hansen Ave Alameda, CA 94501	Daytime: 510-845-2760 Cell: (831) 234-0765
Emergency Response Coordinator (ERC) – *Office and Home address should be filled in*	Gary Owens 2837 Burton Dr Oakland, CA 94611	Daytime: 510-845-2760 Cell: 510-914-2982 Home: 510-482-5029
Secondary/Back-Up Emergency Response Coordinator – *Office and Home address should be filled in*	Jimmy Suttles 1400 Lester Rd. Conyers, GA 30012	Daytime: 678-409-7299 After Hours: 678-409-7299
Facility EC	Gary Owens	Daytime: 510-845-2760

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(Facility Environmental Coordinator) *Office and Home address should be filled in*	2837 Burton Dr Oakland, CA 94611	Cell: 510-914-2982 Home: 510-482-5029
EC (Alternate Environmental Coordinator usually an Area EC)		Daytime: After Hours:
EC (Alternate Environmental Coordinator usually an Area EC)		Daytime: After Hours:
Company Contacts (ABL, ASP, Corporate)		
ECO Environmental Compliance Officer	Josh Dowis	Office: 770-860-3520 Cell: 706-614-8189
VP, Compliance	Barry Goldman	Office: 770-860-3545 Cell: 404-353-0501
FEC/ERC Contacts		
Bay Area Air Quality Management District		(800) 334-6367 or (415) 771-6000
NRC (National Response Center)		800-424-8802
State Office of Spill Prevention and Response		(916) 445-9338
State Office of Emergency Services		(800) 852-7550
EBMUD Waste Water Treatment Facility (if sewer)		(510) 287-1651
City of Berkeley Toxics Management Division		(510) 981-7460 or 911

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D. EMERGENCY RESPONSE COORDINATOR (ERC) (40 CFR 262.34(d)(5)(i))

An ERC must be either on the facility premises, or on call, (available to respond to an emergency by reaching the facility within a short period of time) at all times, exuding the authority and responsibility for coordinating all emergency response measures specified in this ERCP.

The services of an emergency response company must be contracted for events that exceed ASP/ABL's response capacity. The ERC will make notifications when necessary. These names and numbers can be found on the Emergency Telephone Numbers page in Section C, Table I.

E. HAZARDOUS WASTES AND CHEMICALS HANDLED AT THE FACILITY

The facility must maintain a list of all wastes generated at the facility on the Waste Characterization Table. In addition, the facility must maintain a Chemical Inventory. These documents must be current and available in the event of an emergency.

F. FACILITY LAYOUT (40 CFR 262.34(d)(5)(ii)(A) & (C) and 265.37(1))

The facility must maintain Facility Diagrams & Maps that illustrate the location of the following items:

1) Fire extinguishers
2) Spill response equipment
3) Satellite Accumulation Areas (SAAs)
4) Hazardous Waste Accumulation Areas (HWAA)
5) Chemical storage areas
6) Working areas
7) Entrances to roads, if any

8) Fire alarms, if any
9) Evacuation routes.

The facility diagram/maps with these items indicated must be attached to this ERCP.

G. Emergency Response Equipment

The facility must maintain the equipment specified below, unless none of the hazards posed by of the wastes handled at the facility requires them. This equipment must be tested and maintained to assure proper operation in time of an emergency as required under 40 CFR 265.33.

1) Spill Response Kit

a) Location
   (i) Absorbent material for spills of known hazards (such as fuels, oils, and hydraulic fluids) will be located in work areas at the facility including the SAA and HWAA.
   (ii) The Facility Diagram indicates the location of all spill response kits.

b) Contents
   (i) The spill response kit(s) contains adequate equipment to respond to spills that are likely to occur. Facilities must inspect spill response kits on a regular basis and replace missing items when needed, or immediately after use. At a minimum, the spill response kit(s) contains the following items:
   (a) **Absorbent Materials**
      1. Absorbent material (floor dry, oil sorb, *etc.*) capable of absorbing organic liquids, oils, fuels, *etc.*
      2. Absorbent booms/socks and pads capable of absorbing organic liquids.
      3. Neutralizing agents (*i.e.* caustic sodas, vinegar, or a mild acid for alkaline) in areas where batteries or electrolytes are stored.
   (b) **Clean-up Equipment**
      1. Non-sparking shovels(s)
      2. Non-sparking dust pan(s)
      3. Non-sparking broom(s)
      4. Empty container(s) for collecting spill residue

   NOTE: Do not use metal clean-up equipment for spills of acids or with flammable materials due to incompatibilities and/or a sparking hazard. Equipment used for spill response must be decontaminated or disposed of properly.

   (c) **Personal Protective Equipment -** Level-D protection
      1. Protective gloves
      2. Splash protection for clothing
      3. Splash goggles

   NOTE: Employees must be trained in the proper use of all PPE before use.

2) Fire Extinguishers (40 CFR 265.32(c))

a) Portable fire extinguisher (water, Ansul dry powder, ABC type, and/or CO2) locations can be found on the Facility Diagram(s). Some forklifts and lift trucks have portable fire extinguishers.
   (i) All fire extinguishers are on a preventive maintenance schedule. Each fire extinguisher is checked at least on a monthly basis. Reference your Company's Safety Manual for more information.

b) All SAAs and HWAAs are equipped with a means of fire prevention. (40 CFR 265.32(d)).

c) All buildings are supported by fire stations, at or near the buildings for use, by responding fire fighters.

3) Alarms and Internal Communication Systems (40 CFR 265.32(a) & (b) and 40 CFR265.34)

a) If the facility is equipped with emergency alarms, their locations are noted on the Facility Diagram.

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b) All SAAs and HWAAs must have a telephone or hand held, two-way radio immediately available at the scene of operations.

H. EMERGENCY RESPONSE PROCEDURES

Anyone who becomes aware of a potential environmental emergency must notify the ERC immediately.

1) Evacuation procedures

a) Situations:

(i) Fires require an evacuation of the immediate area and/or the entire facility. If the facility fire alarm has been activated, the entire facility must be evacuated until the emergency has been assessed and the building is determined safe for occupancy.

(ii) Spills of unknown materials warrant an evacuation of the immediate area. Depending on the hazards associated with the material, it may be necessary to evacuate an even larger area.

2) Notifications

Upon notification, supervisors are responsible for the safe and orderly evacuation of all personnel in their respective work areas.

a) **General Requirements**

(i) Evacuation of employees will be performed per the evacuation routes illustrated on the Facility Diagrams & Maps attached to this ERCP.

(ii) Employees are required to familiarize themselves with the posted evacuation routes in each of their work areas.

(iii) The area supervisor is responsible for ensuring that his/her work area(s) is completely evacuated, and safely powering down any equipment that may create a source of ignition, if it is safe to do so.

(iv) The ERC, in conjunction with emergency responders and the area supervisor, will determine when it is safe to re-enter the evacuated work area.

b) **Alerting Employees**

All hazardous material emergencies (spill, fire, *etc.*) must be reported immediately to the Supervisor, and the ERC by means of an internal communication or alarm system.

(i) The ERC will contact the Facility ECO if necessary

(ii) The Facility EC and/or Facility Manager will notify all area supervisors and other affected personnel using one or more of the following means of communication:

(a) Public Address System
(b) Telephone
(c) Two-way Radio
(d) Voice.

c) **Alerting the Local Authorities**

The ERC is responsible for contacting all emergency services and emergency response agencies in accordance with the agreements described in Section B of the ERCP,- Arrangements with Local Authorities.

d) **Notifying Federal and State Agencies (40 CFR 262.34(d)(5)(iv)(C))**

In the event of a fire, explosion or other release which could threaten human health outside the facility, or when the generator has knowledge that a spill has reached surface water, the generator must immediately notify the National Response Center at 800-424-8802. **The Emergency Coordinator must coordinate with the facility's Environmental Compliance Officer or the VP, Compliance prior to this notification.** The report must include the following information:

(i) The name, address, and the U.S. EPA Identification Number of the generator;

(ii) Date, time, and type of incident;

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(iii) Quantity and type of hazardous waste involved in the incident;
(iv) Extent of the injuries, if any; and
(v) Estimated quantity and disposition of recovered materials, if any.

3) **Emergency Spill Procedures (40 CFR 262.34(d)(5)(iv)(B))**
The Company's spill response procedures are documented in the Environmental Policies and Procedures Manual, Section 1.15 – Spill Response Program. These procedures are available on the Company's Environmental Compliance website at http://abintranet. At a minimum, the ERC, with the assistance of the Facility EC, must:
a) Contain the flow of hazardous waste to the extent possible.
b) Clean up the hazardous waste and any contaminated materials or soil, as soon as is practicable (if the ERC is trained, able, and feels comfortable doing so) – or – supervise the outside contractors clean up process.

4) **Fires and Explosions Response Procedures (40 CFR 262.34(d)(5)(iv)(A))**
a) In the event of a fire:
(i) Employees should activate the alarm or internal communication system and notify the ERC immediately.
(ii) The ERC must call the Fire Department.
(iii) Consistent with the training requirements in your Company's Safety Manual, the ERC must attempt to extinguish the fire with available extinguishers. Only employees trained to perform this duty may attempt to extinguish a fire.

5) **Special Instructions for Fires Involving Hazardous Materials**
Only trained personnel are qualified to respond to fires involving hazardous materials, regardless of size. Acuity Brands employees are **not** trained to respond to such fires. The ERC will inform the local authorities and the emergency response team that the fire involves hazardous materials. Give them as much information as possible including the chemical name, approximate quantity involved, a Material Safety Data Sheet (MSDS), or other applicable information. All employees and non-emergency personnel should stay clear of the fire and upwind of the vapors, smoke, or fumes.

6) **Emergency Response Follow-up**
Within 48 hours following the incident, the ERC is responsible for completing the following steps:

a) **Disposal of Clean-up Debris/Residue**
Manage the disposal of all spill debris/residues and disposable response equipment.

b) **Reuse/Replacement of Emergency Equipment**
Decontamination of emergency equipment will consist of wiping down shovels with absorbent mats (or equivalent materials). Absorbent materials contaminated with hazardous waste will be managed as hazardous waste. Personal Protective Equipment, such as gloves and goggles will not be decontaminated, and should be managed as hazardous waste.

c) **Record Keeping Release Reporting**
The Facility EC is responsible for recording the incident in the Spill Table.
The Facility EC is responsible for contacting the facility's ECO to ensure that follow-up reporting required by federal, state, or local agencies is completed. A copy of all reports to regulatory agencies concerning emergency response will be maintained with the facility's Spill Table. Documents should be maintained per the Company's Environmental Policies and Procedures Manual, Section 1.4, Document Retention Policy.

I. ERCP REVIEW AND REVISION

Each facility will review the implementation of the ERCP with the ECO to determine the adequacy of the emergency response procedures. Your ECO will provide assistance as needed. The

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facility's ERCP should be reviewed annually by the ERC to ensure it adequately addresses the potential emergency responses at the facility.

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PEERLESS®

Procedure

Subject: Emergency Response Plan

Date Created: 6/29/09	Review Date: 2/8/2011	Author: Gary Owens

Purpose/Scope: This plan is intended to cover all elements required by the state of California for emergency response.

Procedure:

I. Facility Information

Peerless Lighting Office
2246 5th Street
Berkeley, CA 94710
(510) 845-2760

Peerless Warehouse
2231 Fourth Street
Berkeley, CA 94710
(510) 845-2760

II. Emergency Coordinators

	Primary Coordinator	Secondary Coordinator
Name	Gary Owens	Jimmy Suttles
Title	Director, Information Systems	Manager, Facilities
Work Phone	(510) 845-2760	(678) 409-7299
After Hours Phone	(510) 914-2982 cell / (510) 482-5029	(678) 409-7299

In the event of a medical emergency, call 911.

III. Emergency Telephone Numbers and Arrangements

The emergency coordinator shall immediately notify the following whenever a release, fire, or explosion threatens human health or the environment:

Agency	Phone
Fire/Police Department	911
State Office of Emergency Services (OES)	(800) 852-7550
City of Berkeley Toxics Management Division	(510) 981-7460 or 911
Medical – US Healthworks	(510) 845-5170
EBMUD Waste Water Treatment Facility (if sewer)	(510) 287-1651
Bay Area Air Quality Management District	(800) 334-6367 or (415) 771-6000

We have no formalized written agreements with any emergency response agency or contractor.

IV. Earthquake Response

In the event of an earthquake, the following areas & mechanical equipment should be inspected immediately to determine if hazards are present:

A. Hazardous waste accumulation area
B. Universal Waste accumulation areas
C. Gas Mains
D. Welding gas storage area (H4)
E. Wheelskins shelving

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V. Emergency Equipment

Category	Equipment	Location
Fire Control	Fire extinguishers Fire Alarm	Located throughout facility (see facility map) Alarms in Office & Warehouse
First Aid	First Aid Kits	Office – mail room Warehouse – Shop area
Earthquake Response	Cabinets Hard hats Leather gloves Safety glasses Flashlights Emergency blanket First Aid kit Eyewash Water	Office – Mail room
Spill Control Equipment	Spill Drum containing: Absorbent pads Granular absorbent Absorbent socks Nitrile gloves Tyvek suits Spark-free scoop	Warehouse – Hazardous materials area (H1)
Communication	PA System; telephone	Office/Warehouse

VI. Evacuation

In the event that evacuation is necessary, either the alarm will be sounded or an announcement will be make on the PA system.

A. Office (2246 – 5th Street)

- Exit through the nearest safe exit. Do not take extra time to gather personal effects.
- Employees will gather across 5th Street with their respective department. The managers are responsible for making sure that everyone is accounted for.
- Designated "sweepers" will ensure that everyone is out of their assigned area before leaving the building.
- Managers and "sweepers" shall report the following instances to the safety coordinator:
  - Injuries
  - Missing persons
  - Retrievable items/valuables inside the building
  - Specific dangerous situations and areas in the building
- **DO NOT RE-ENTER THE BUILDING FOR ANY REASON** until instructed to do so.
- When an "all-clear" is communicated to the managers, then it is okay to re-enter the building.

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B. Warehouse (2231 – 4th Street)

- Exit through the nearest safe exit. Do not take extra time to gather personal effects.
- All employees will gather across 4th Street with their respective department. The supervisors are responsible for making sure that everyone in their department is accounted for.
- Designated "sweepers" will ensure that everyone is out of their assigned areas before leaving the building.
- Managers and "sweepers" shall report the following instances to the safety coordinator:
  - Injuries
  - Missing persons
  - Retrievable items/valuables inside the building
  - Specific dangerous situations and areas in the building
- **DO NOT RE-ENTER THE BUILDING FOR ANY REASON** until instructed to do so.
- When an "all-clear" is communicated to the supervisors, then it is okay to re-enter the building

VII. Emergency Procedures

1. Whenever there is an imminent or actual emergency situation such as a explosion, fire, or release, the plant manager, maintenance manager, or safety coordinator shall:

a. Identify the character, exact source, amount, and aerial extent of any release hazardous materials.
b. Assess possible hazards to human health or the environment that may result from the explosion, fire or release. This assessment must consider both direct and indirect effects (e.g. the effects of any toxic, irritating, or asphyxiating gases that are generated, the effects of any hazardous surface water run-off from water or chemical agents used to control fire, etc.).
c. Activate internal alarms or use PA to notify facility personnel.
d. Notify appropriate local authorities, (call 911).
e. Notify the State Office of Emergency Services
f. Monitor for leaks, pressure build-up, gas generation, or ruptures in valves, pipes, or other equipment shut down in response to the incident.
g. Take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous materials at the facility.

2. Before facility operations are resumed in areas of the facility affected by the incident, the plant manager, maintenance manager, or safety coordinator shall:

a. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from a explosion, fire or release at the facility.
b. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.
c. Ensure that all emergency equipment is cleaned, fit for its intended use, and available for use.
d. Notify the Cal/EPA's Department of Toxic Substances Control and the City of Berkeley Toxics Management Division that the facility is in compliance with requirements 2a and 2b, above.

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Employee Training Plan

1. Scope

This plan is designed to provide employees with training on hazardous materials and hazardous waste that will satisfy the requirements of the California Health and Safety Code Chapter 6.95 and Chapter 6.5.

Facility Name:	Peerless Lighting
Address:	2246 5th Street (office), 2231 4th Street (warehouse), Berkeley
Main Activity:	Administrative / R&D office
Building or Areas where hazardous materials/wastes are found:	2231 4th St (in RQ quantities) and 2246 5th St (small non-RQ quantities)

2. Responsibilities

The following persons are responsible for ensuring that this Training Plan is implemented:

Name/Title	Training Responsibility
Chris Hans, Project Manager	Employee Training

3. Employees/New Employees

New employees are trained during orientation, before starting on a job? ☑ YES ☐ NO

New employees who handle hazardous waste are trained in hazardous waste management within six months of hire date? ☑ YES ☐ NO

4. New Assignments or Changes in Operations

In the event of new assignments or of changes in operation, affected employees are trained before the new assignment or the change in operation takes place. ☑ YES ☐ NO

5. Refresher Training

Refresher training will be provided annually (how often). The method used will be: *(check all that apply)*

- ☐ Outside classes
- ☐ In-house classes provided by contractor
- ☑ Safety meetings
- ☑ In-house classes conducted by in-house trainers

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6. Training Topics

The following table indicates the training topics covered for this facility, as indicated with a ☑. Other documentation on these training topics is maintained and are available to the inspector upon request.

All employees are trained to do the following procedures, as appropriate:	
☑	1. Initiate, activate, or recognize internal alarms and other emergency announcements.
☑	2. Notify internal or on-site emergency responders listed in the emergency response/contingency plan.
☑	3. Notify agencies listed in the emergency/contingency plan.
☑	4. Locate and review contents of written emergency response/contingency plan.
☑	5. Initiate, conduct, or follow evacuation procedures as described in the emergency response/contingency plan.
Hazardous materials/waste handlers are additionally trained in the following subjects:	
☑	1. Safe methods for handling and storage of hazardous materials and hazardous waste.
☑	2. Locations and proper use of personal protective equipment.
☑	3. Locations and proper use of fire and spill control equipment.
☑	4. Specific hazards of each chemical or waste to which they may be exposed, including the pathways of exposure (i.e. skin absorption, inhalation, ingestion).
☑	5. Follow emergency procedures for chemical/waste spills, earthquake, fire, and/or medical emergencies as described in the emergency response/contingency plan.
☑	6. Hazardous waste handlers/managers are also trained in all aspects of hazardous waste management specific to their job duties (e.g. accumulation time, storage period, labels, inspection of containers and storage areas, uniform hazardous waste manifests, etc.)

7. Emergency Response Team

This facility has a formally organized Emergency Response Team. ☑ YES ☐ NO

Emergency Response Team members are additionally trained for the following activities:	
☑	1. Personnel rescue procedures.
☑	2. Shutdown of operations.
☑	3. Liaison with emergency response agencies.
☑	4. Use, maintenance, and replacement of emergency response equipment.
☑	5. Emergency response drills are conducted, at least *(specify frequency)* [1] times a year.
☑	6. Refresher training is provided, at least annually.

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8. Recordkeeping

Employee training and other records are to be maintained at the facility. These include the following:

☑	1. Record of training for each employee (date and duration of training, subject matter covered, instructor, etc.).
☑	2. Training records of current and former employees. (For current employees, records are to be retained until closure of the facility. For former employees, training records are to be retained for at least 3 years after termination of employment.
☑	3. Description of introductory and continuing training programs for each employee classification.
☑	4. Current emergency response, contingency, and/or spill response plan (for underground or aboveground tanks).
☑	5. Description and documentation of emergency response drills.
☑	6. Record of reportable/recordable accidental releases of hazardous material/waste.
☑	7. Record of inspections of hazardous material/waste storage areas.
☑	8. Record of daily inspection of hazardous waste tanks.
☐	9. Inspection procedures for identified earthquake-sensitive areas and systems in the facility.

Note: *The above list does not necessarily include every type of record required to be maintained by your facility.*

Training records are maintained in the following location: Chris Hans x6324; Peerless computer system.

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Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
	Waste Gasoline UN1203 (Current Inventory = 0 No future storage or waste anticipated)	☑ Same as first column ------- ------- ------- -------	--- --- --- ---	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	210	210	30	210	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365 47	223 Storage Container: SD	220 State Waste Code: 331			
	Non-RCRA Hazardous Waste Liquid (Hydraulic Oil)	☐ Same as first column Hydraulic Oil - 100% ------- ------- -------	--- --- --- ---	☐ Yes ☑ No	CL	☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive	1200	1200	400	1200	☑ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365 47	223 Storage Container: SD	220 State Waste Code: 221			
H3	Waste Muriatic Acid	☐ Same as first column Hydrochloric Acid 9 - 36% ------- ------- ------- -------	7647-01-0 --- --- --- ---	☐ Yes ☑ No	COR	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	2	2	1	2	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☑ 365	223 Storage Container: PB	220 State Waste Code: 141			
H3	Waste Epoxy Resin UN 1263	☐ Same as first column Xylene 30 - 40% ------- Bisphenol A Epoxy Resin 30 - 40% ------- Oxo-Hexyl Acetate 1 - 5% ------- Silane 1 - 5% -------	1330-20-7 --- 25036-25-3 --- 88230-35-7 --- 68611-44-9 ---	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☒ waste ☐ radioactive	10	10	5	10	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☑ 365	223 Storage Container: C	220 State Waste Code: 331			

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

DRAFT

Fee under 2246 - Fifth Street

Planning and Development Department
Toxics Management Division
A Certified Unified Program Agency

FEE SUMMARY SHEET
For Permit Period FY13 (Base Reporting Period: 2012)

Business Name: Peerless Lighting [CID: 176]

Address: 2246 5th Street

Total Aggregate Quantities Stored or Handled at This Facility

The row heading "Hazardous Materials" requires a sum of all amounts reported on the Chemical Description pages, including data reported for hazardous wastes.

Quantities Summarized:

Chemicals:	CY2012	CY2012	CY2012	Last Reported	FY2013 Permit
	Liquids	***Solids***	***Gases***		
Total number of ***all*** chemicals:	~~12~~ 14	~~3~~ 2	7		22
Total no. of ***waste*** chemicals:	1				
	Gallons ***All liquids***	***Pounds*** ***All solids***	***Cu. Ft.*** ***All gases***		
Hazardous Materials: (***ALL*** Chemicals) - Sum of *all* Box 218s – Max. Daily Amt.	~~219~~ 230	~~89~~ 28	~~2047~~ 1,986	B2	B-2
Hazardous Wastes: (***ONLY*** Wastes) – Sum of *all* Box 219s – Annual Waste Amt.	~~1~~ 2	0		–	<55
Underground Storage Tanks: No. of USTs: 0					
Universal Waste:	CESQUWG	HANDLER	DESTINATION	Date entered into HTE (and initials)	
	X				
Other Billing Categories:	Tiered	etiologic	radiologic		
inert gas fee / nano	CalARP	EPCRA	APSA		

Completed by: Karl Busche Date: 4-3-12

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CD#176

RECEIVED
For Dept Use Only – Log In Date Stamp
FEB 23 2012
TOXICS MGMT. DIVISION

City of Berkeley, Toxics Management Division
2118 Milvia Street, Suite 300
Berkeley, CA 94704
(510) 981-7460 FAX (510) 981-7470

Hazardous Materials Business Plan (HMBP) Certification Statement

I. IDENTIFICATION

FACILITY ID #	1	7	6	3	1	2	9	2	2	1

BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) 3
Peerless Lighting

BUSINESS SITE ADDRESS 103
2246 5th Street; 2231 4th Street

CITY 104		ZIP CODE 105
Berkeley	CA	94710

II. CERTIFICATION STATEMENT

Check the appropriate boxes below and sign the certification statement.

☐ INITIAL SUBMITTAL: This new HMBP is being submitted for the following:
- ☐ New facility
- ☐ Change of ownership
- ☐ Change of business address

☒ CERTIFICATION OF CHANGES/REVISIONS: This is to certify that the HMBP has been reviewed and revisions, amendments and/or additions are necessary and are being submitted with this document. The following areas of the HBMP are affected:
- ■ Entire HMBP revision
- ☐ Business Activities page
- ☐ Business Owner/Operator Identification page
- ☐ Hazardous Materials Inventory
- ☐ Facility Site Plan/Storage Map(s)
- ☐ Emergency Response Plan/Contingency Plan
- ☐ Other (Specify): _____

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is, to the best of my knowledge, true and correct. I understand that I will be required to show proof of compliance during any facility inspection conducted by City, County, State, or Federal authorities. I understand that whenever there are changes in address, ownership, business name, or operations (closure, addition of undisclosed hazardous materials or hazardous wastes, and/or contingency planning provisions), a notification of such must be made to Toxics Management Division within 30 days of the change.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE
[signature]	2/21/12
NAME OF SIGNER (print)	TITLE OF SIGNER
Gary S. Owens	Director, Information Systems

Agency Use Only	☒ HMBP accepted as submitted ☐ HMBP requires revisions – Letter sent

HMBP ACCEPTED: 4 / 5 / 12 BY: [signature]

4/5/12: Date Tech Review Completed
_____: Date Scanned
_____: Date Copied for BFD
_____: Date Data Entry Completed
_____: Date Filed
(Initial each line)

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM – FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # 1 7 6 C A L 3 1 2 9 2 2	1	EPA ID # (Hazardous Waste Only) CAL000312922 2
BUSINESS NAME (Same as Facility Name or DBA-Doing Business As) Peerless Lighting		3
BUSINESS SITE ADDRESS 2246 5th Street; 2231 4th Street		103
BUSINESS SITE CITY Berkeley	104	CA ZIP CODE 94710 105

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	■ YES ☐ NO 4	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release Prevention Program (CalARP)?	☐ YES ■ NO 4a	Coordinate with your local agency responsible for CalARP
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES ■ NO 5	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES ■ NO 8	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE		
1. Generate hazardous waste?	■ YES ☐ NO 9	EPA ID NUMBER – provide at the top of this page
2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES ■ NO 10	RECYCLABLE MATERIALS REPORT (one per recycler)
3. Treat hazardous waste on site?	☐ YES ■ NO 11	ONSITE HAZARDOUS WASTE TREATMENT – FACILITY ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES ■ NO 12	CERTIFICATION OF FINANCIAL ASSURANCE
5. Consolidate hazardous waste generated at a remote site?	☐ YES ■ NO 13	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐ YES ■ NO 14	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
7. Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (20 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES ■ NO 14a	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
8. Household Hazardous Waste (HHW) Collection site?	☐ YES ■ NO 14b	See CUPA for required forms.
F. LOCAL REQUIREMENTS		
1. Use or store hazardous materials or hazardous wastes in combined (aggregate) quantities equal to or greater than 55 gallons for liquids, 500 pounds for solids or 200 cubic feet for compressed gases?	■ YES ☐ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
2. Use or store any quantity of etiological agents, radioactive materials or perchlorate materials?	☐ YES ■ NO 15	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (OES 2731) OR SPREADSHEET
3. Generate any quantity of Universal Waste (mercury containing devices, non-empty aerosols, electronic devices, fluorescent tubes, batteries, dental amalgam wastes, etc.)?	■ YES ☐ NO 15	SEE THE UNIVERSAL WASTE REPORTING REQUIREMENTS PAGE FOR INSTRUCTIONS
4. Treat any quantity of photochemical waste on-site (x-ray and photo imaging processors)?	☐ YES ■ NO 15	

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City of Berkeley, Toxics Management Division

UNIFIED PROGRAM CONSOLIDATED FORM - FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID#	BEGINNING DATE 100	ENDING DATE 101
176 CAL 312922 1		

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3	BUSINESS PHONE 102
Peerless Lighting	510 845-2760
BUSINESS SITE ADDRESS 103	BUSINESS FAX 102a
2246 5th Street; 2231 4th Street	510 845-2776

BUSINESS SITE CITY 104		ZIP CODE 105	COUNTY 108
Berkeley	CA	94710	Alameda

DUN & BRADSTREET 106	PRIMARY SIC 107	PRIMARY NAICS 107a
085458508	3646	335122

BUSINESS MAILING ADDRESS 108a		
2246 5th Street		
BUSINESS MAILING CITY 108b	STATE 108c	ZIP CODE 108d
Berkeley	CA	94710

BUSINESS OPERATOR NAME 109	BUSINESS OPERATOR PHONE 110
Jim Young	Same

II. BUSINESS OWNER

OWNER NAME 111	OWNER PHONE 112
Acuity Brands Lighting	770 922-9000
OWNER MAILING ADDRESS 113	
1400 Lester Road	

OWNER MAILING CITY 114	STATE 115	ZIP CODE 116
Conyers	GA	30012

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117	CONTACT PHONE 118
Gary Owens	510 845-2760
CONTACT MAILING ADDRESS 119	CONTACT EMAIL 119a
2246 5th Street	g.owens@peerless-lighting.com

CONTACT MAILING CITY 120	STATE 121	ZIP CODE 122
Berkeley	CA	94710

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Gary Owens	NAME 128: Nick Trincia
TITLE 124: Director, Information Systems	TITLE 129: Model Shop Manager
BUSINESS PHONE 125: 510 845-2760	BUSINESS PHONE 130: 510 845-2760
24-HOUR PHONE 126: 510 914-2982 / 510 482-5029	24-HOUR PHONE 131: 443 257-9343
PAGER # 127	PAGER # 132

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
	2/21/12	Gary S. Owens
NAME OF SIGNER (print) 136	TITLE OF SIGNER 137	
Gary S. Owens	Director, Information Systems	

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H1	Lead-Acid Batteries (Inside equipment)	☐ Same as first column Sulfuric Acid (30 - 40%) Lead	7664-93-9 7439-92-1	☐ Yes ☑ No	COR	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	61	61	51	☑ 365	O	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☑ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H2	Latex Wall Paints	☐ Same as first column Titanium Dioxide ~30% Acrylic Polymers	13463-67-7 Various	☐ Yes ☑ No	IRR	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	100	80	5	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H3	Aerosol Paints (Consumer spray cans < 1 L capacity)	☐ Same as first column Acetone 0 - 20% Propane 0-15% Toluene 0-20% Xylene 0-25% Mineral Spirits 0-15%	67-64-1 74-98-6 108-88-3 1330-20-7 64741-65-7	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	80 = 10 gal	50	1	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H4	Argon	☑ Same as first column	7440-32-1	☐ Yes ☑ No	NFG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	672	672	336	☑ 365	CYL	☐ lbs ☐ gal ☑ cu. ft ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

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210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H4	Nitrogen	☑ Same as first column	7440-32-1	☐ Yes ☑ No	NFG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	230	230	230	☐ lbs ☐ gal ☑ cu. ft ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H4	Oxygen	☑ Same as first column	7782-44-7	☐ Yes ☑ No	OX	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	401	401	251	☐ lbs ☐ gal ☑ cu. ft ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H4	Acetylene	☑ Same as first column	74-86-2	☐ Yes ☑ No	FG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	132	132	132	☐ lbs ☐ gal ☑ cu. ft ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container CYL			
H3	Denatured Alcohol	☐ Same as first column Ethyl Alcohol 45 - 50% Methanol 45 - 50% Methyl isobutyl ketone 1 - 4%	64-17-5 67-56-1 108-10-1	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1	1	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site ☑ 365	223 Storage Container C			

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ■ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ■ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2231 4th Street, Berkeley CA 94710 | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H1	Propane	■ Same as first column --- --- --- ---	74-98-6 --- --- --- ---	☐ Yes ■ No	FG	☐ solid ☐ liquid ■ gas --- ■ pure ☐ mixture --- ☐ radioactive	34 =275 Acf 222 Days on site: ■ 365	34 222 Days on site: ■ 365	17 223 Storage Container: CYL	■ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	■ Fire ■ Pressure ☐ Reactive Health: ■ Acute ■ Delayed	Pressure ☐ Ambient ■ > Amb. ☐ < Amb. Temp ■ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column --- --- --- ---	--- --- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas --- ☐ pure ☐ mixture --- ☐ radioactive	222 Days on site: ☐ 365	222 Days on site: ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column --- --- --- ---	--- --- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas --- ☐ pure ☐ mixture --- ☐ radioactive	222 Days on site: ☐ 365	222 Days on site: ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column --- --- --- ---	--- --- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas --- ☐ pure ☐ mixture --- ☐ radioactive	222 Days on site: ☐ 365	222 Days on site: ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum; **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2246 5th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H5	Stratasys P400SC Water Soluble Concentrate	☐ Same as first column Sodium Hydroxide 24 - 25%	1310-73-2	☐ Yes ☑ No	COR	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	24	12	2	☑ 365	PB	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H5	Spilfyter Kolorsafe Dry Base Neutralizer	☐ Same as first column Citric Acid, anhydrous Thymol Blue	77-92-9 76-61-9	☐ Yes ☑ No	IRR	☑ solid ☐ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	4	4	2	☑ 365	PB	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Propane (14 oz consumer cylinders)	☑ Same as first column	74-98-6	☐ Yes ☑ No	FG	☐ solid ☐ liquid ☑ gas ☑ pure ☐ mixture ☐ radioactive	4 = 32.4 cf	3	.875	☑ 365	CYL	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Denatured Alcohol	☐ Same as first column Ethyl Alcohol 45 - 50% Methanol 45 - 50% Methyl isobutyl ketone 1 - 4%	64-17-5 67-56-1 108-10-1	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1	1	1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Non-Waste Hazardous Materials Inventory Spreadsheet

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3 Business Name: Peerless Lighting | Business Address: 2246 5th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily / Average Daily / Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H6	Dykem blue layout fluid	☐ Same as first column Ethanol 30 - 50% Butyl Acetate 20 - 30% Butanol 10 - 20% n-Propyl Acetate 1 - 5% Isopropanol 1 - 5%	64-17-5 123-86-4 71-36-3 109-60-4 67-63-0	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.5 / 0.2 / 0.1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Mobil DTE 24 Light Hydraulic Oil	☐ Same as first column PET. HYDROCARBONS AND ADDITIVES	Mixture	☐ Yes ☑ No	IRR	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	2 / 1 / 1	☑ 365	PB	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	RE-180 Thinner	☐ Same as first column Petroleum naphtha 30 - 60% Diacetone alcohol 10 - 30% Isophorone 10 - 30% 1,2,4-Trimethylbenzene (contaminant) 1,3,5-Trimethylbenzene (contaminant)	64742-95-6 123-42-2 78-59-1 95-63-6 108-67-8	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	1 / 1 / 1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Opaque Screen Ink	☐ Same as first column Titanium dioxide 30 - 60% Stoddard solvent 10 - 30% Talc 5 - 10% Naphtha (petroleum), heavy aromatic 5 - 10% Petroleum naphtha, light aromatic 1 - 5%	13463-67-7 8052-41-3 14807-96-6 64742-94-5 64742-95-6	☐ Yes ☑ No	CL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.25 / 0.25 / 0.25	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☑ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☑ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2246 5th Street, Berkeley CA | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	222 Days on site	223 Storage Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H6	Degreaser	☐ Same as first column Tetrachloroethylene 50 - 60% Trichloroethylene 40 - 50% 1,2-Butylene Oxide < 0.5% Carbon dioxide < 5%	127-18-4 79-01-6 106-88-7 124-38-9	☐ Yes ☑ No	TX	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	5 ~0.625 gal	2	1	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☑ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Cutting Fluid	☐ Same as first column Trichloroethylene 80 - 90%	79-01-6	☐ Yes ☑ No	TX	☐ solid ☑ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	2	1	1	☑ 365	C	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6	Contact Cleaner	☐ Same as first column Propan-2-ol 60 - 100% Naphtha, desulfurized < 20% Naphtha, hydrotreated 5 - 10% Carbon Dioxide 1 - 5%	67-63-0 92045-53-9 64742-49-0 124-38-9	☐ Yes ☑ No	FL	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	0.7 ~0.09gal	0.7	0.7	☑ 365	C	☑ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☑ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☑ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
H6 H8	Lead-Acid Batteries (inside equipment)	☐ Same as first column Sulfuric Acid 30-40% Lead	7664-93-9 7439-92-1	☐ Yes ☑ No	COR	☐ solid ☑ liquid ☐ gas ☐ pure ☑ mixture ☐ radioactive	50	50	7	☑ 365	O	☐ lbs ☑ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☑ Reactive Health: ☑ Acute ☑ Delayed	Pressure ☑ Ambient ☐ > Amb. ☐ < Amb. Temp ☑ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ■ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ■ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2246 5th Street, Berkeley CA 94710 | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
H9	Propane	■ Same as first column	74-98-6	☐ Yes ■ No	FG	☐ solid ☐ liquid ■ gas ☐ pure ☐ mixture ☐ radioactive	30 = 243 cf	25	30	■ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	■ Fire ■ Pressure ☐ Reactive Health: ■ Acute ■ Delayed	Pressure ☐ Ambient ■ > Amb. ☐ < Amb. Temp ■ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive		222 Days on site ☐ 365	223 Storage Container	☐ lbs ☐ gal ☐ cu. ft ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic

DRAFT

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Hazardous Waste Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ■ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ■ No | If EPCRA, please sign here:

3 Business Name: Peerless Lighting | Business Address: 2246 Fifth Street, Berkeley CA | 200 Add ■ Revise ☐ Delete ☐

201, 203, 204 Storage Location	205, 207 Waste Stream Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	219 Annual Waste Amount	221 Units	216 SARA Class	224, 225 Pressure & Temp
H9	Waste Motor Oil from generator (Recycled)	☐ Same as first column Highly refined mineral oil (C15 - C50) --- --- --- ---	Mixture --- --- --- ---	☐ Yes ■ No	IRR	☐ solid ■ liquid ☐ gas ☒ waste ☐ radioactive	1	0	1	2	☐ lbs ■ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ■ Ambient ☐ > Amb. ☐ < Amb. Temp ■ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365 1	223 Storage Container: PB	220 State Waste Code: 221			
		☐ Same as first column --- --- --- ---	--- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive					☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365	223 Storage Container	220 State Waste Code			
		☐ Same as first column --- --- --- ---	--- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive					☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365	223 Storage Container	220 State Waste Code			
		☐ Same as first column --- --- --- ---	--- --- --- ---	☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☒ waste ☐ radioactive					☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryogenic
								222 Days on site: ☐ 365	223 Storage Container	220 State Waste Code			

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UNIVERSAL WASTE GENERATOR REPORTING FORM

Facility Name: Peerless Lighting

Facility Address: 2246 5th Street, Berkeley CA 94710

Reporting Period: calendar year 2011 (January 1 through December 31, 2011)

Report all quantities of the following Universal Wastes (UWs):	**Annual UW Generation** (in pounds)
1. Electronic devices (e.g. cell phones, televisions, VCRs, computer CPUs, portable DVD players)	917
2. Batteries (all batteries except auto, including AAA, AA, A, C, D, 9-volt, silver button cell, alkaline, nickel-cadmium, rechargeable)	43
3. Mercury-containing equipment (e.g. dental amalgam, mercury switches, mercury-added novelties, counterweights, thermostats)	0
4. Electric lamps (fluorescent tubes and bulbs, high-intensity discharge lamps, sodium vapor lamps)	339
Fluorescent tubes and bulbs [report in linear feet]	-
5. CRTs [cathode ray tubes] (glass picture tubes removed from televisions, monitors)	0
6. CRT glass (cathode ray tube, broken or processed for recycling)	0
7. Non-empty aerosol cans	0
8. Other	0
Annual Throughput - Total Pounds:	1,299
Annual Throughput - Total Linear Feet:	-

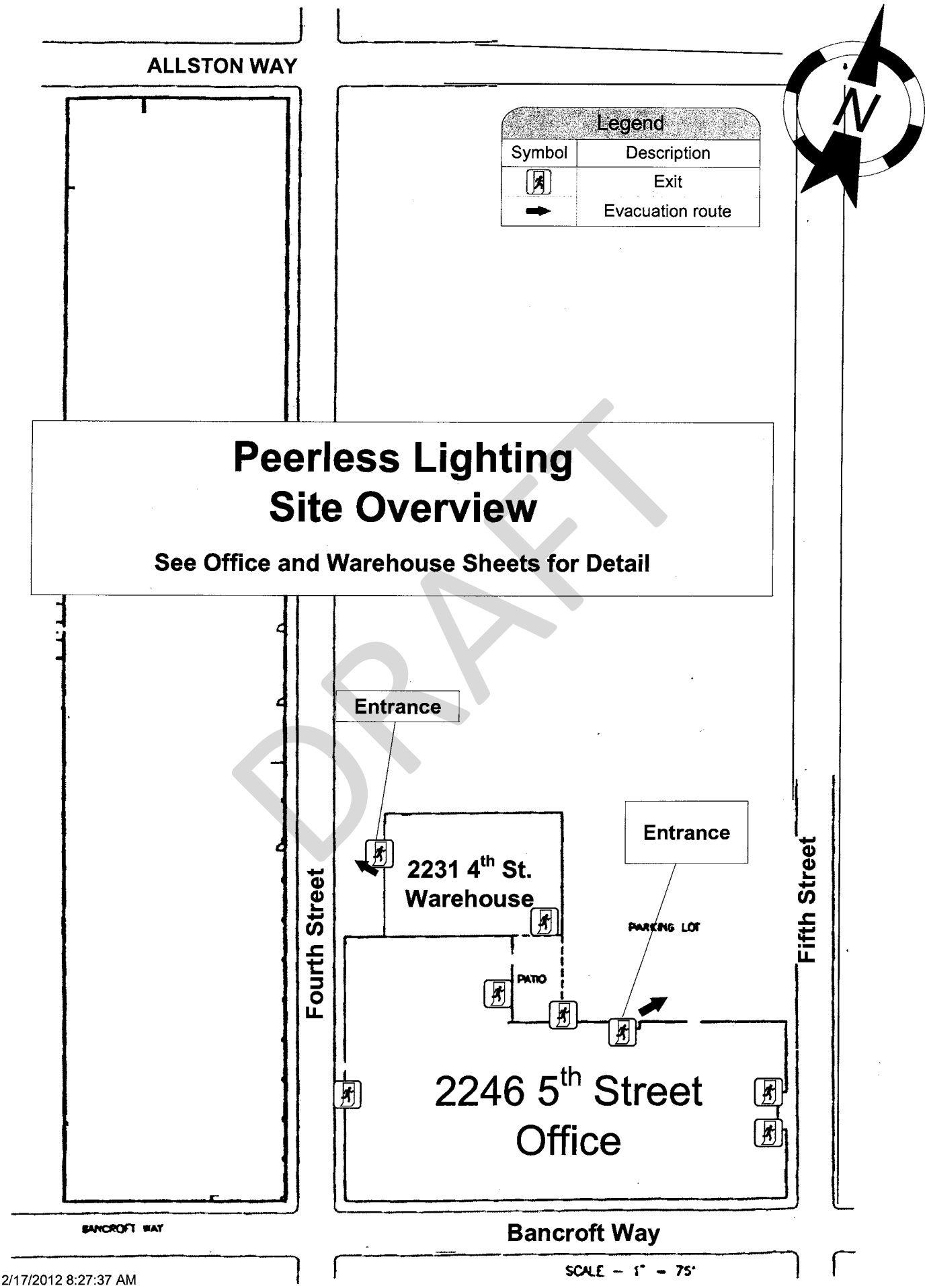
DRAFT

Universal wastes represent a serious potential health hazard due to significant amounts of arsenic, beryllium, cadmium, copper, lead, mercury, nickel, zinc and other materials.

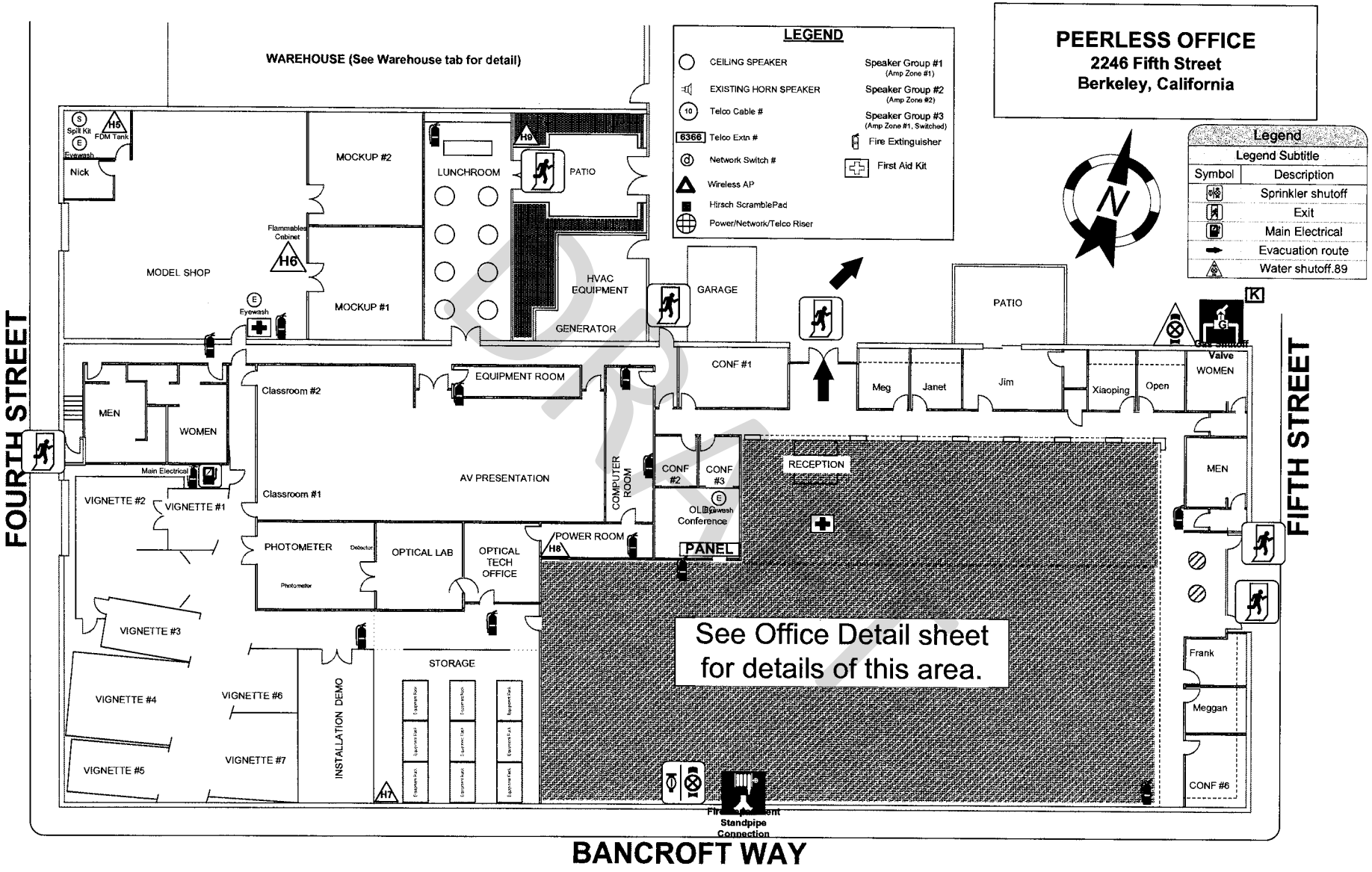
For detailed requirements on Universal Waste handling and management requirements please refer to the California Department of Toxics Substances Control (DTSC) website at:

http://www.dtsc.ca.gov/HazardousWaste/UniversalWaste/upload/UW_Factsheet1.pdf

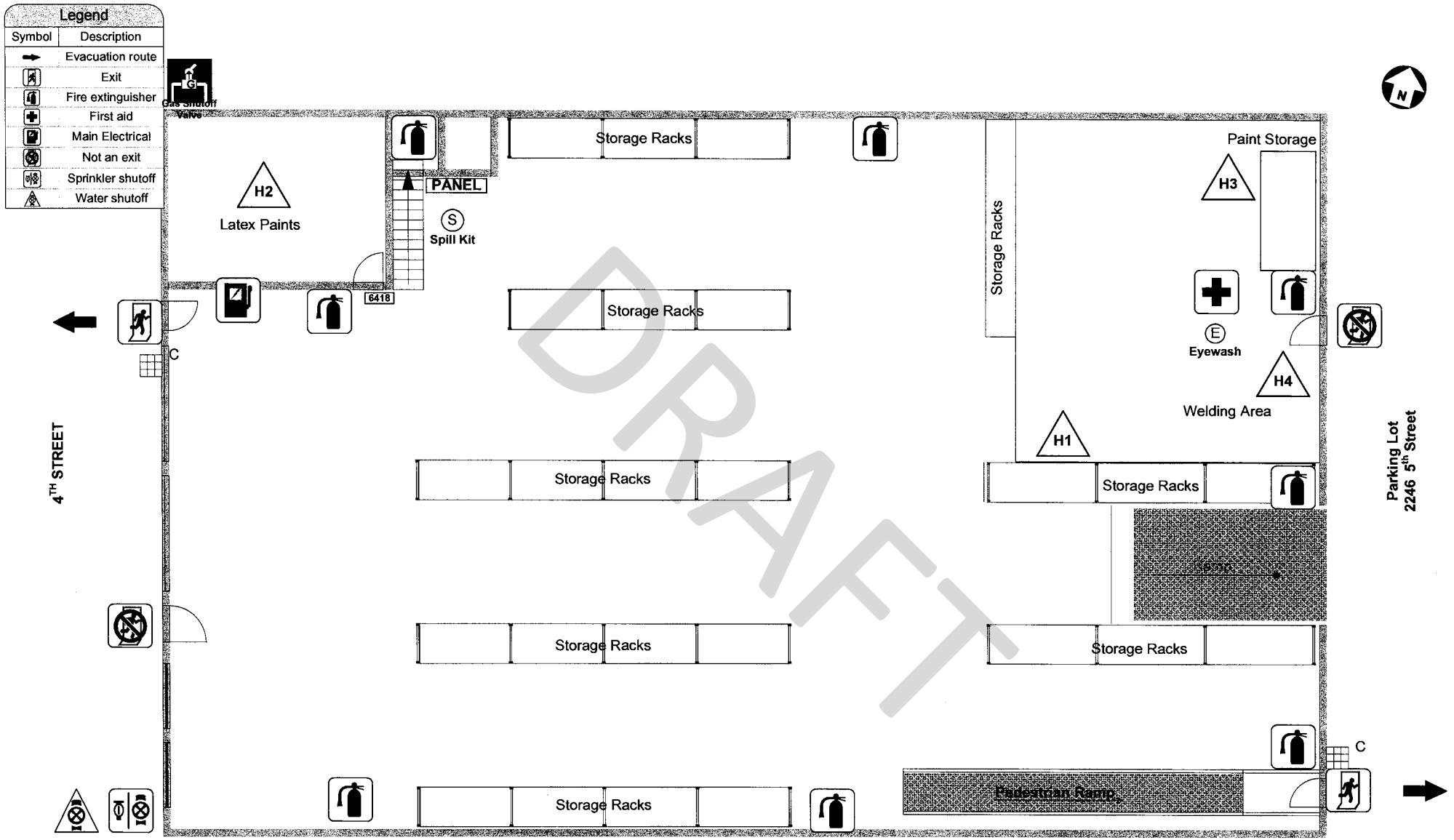
Universal Wastes may not be disposed of in the trash!



Printed: 2/17/2012 8:27:37 AM



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Warehouse – 2231 4th St

Printed: 2/17/2012 8:30:38 AM

Acuity Brands

EMERGENCY RESPONSE CONTINGENCY PLAN

EMERGENCY RESPONSE CONTINGENCY PLAN Contents

The Facility Manager is responsible for ensuring that the facility has implemented an Emergency Response Contingency Plan (ERCP). This Plan was developed to meet the regulatory requirements that apply to Small Quantity Generators (SQG) and Conditionally Exempt Small Quantity Generators (CESQG). The Facility Manager will designate an Emergency Response Coordinator (ERC) who will be specifically responsible for implementing the requirements of the ERCP as required under 40 CFR 264.34(d)(5)(i). The Facility EC, Area EC and/or the Facility Manager may serve as the ERC. **The Facility Manager must authorize the appropriate person to act as the ERC.**

The ERC shall be summoned either directly, or by telephone, in the event of a release, fire or explosion, associated with chemicals or waste management. ERC contact numbers shall be included on the Emergency Phone Numbers list in Section C, Table I, of the ERCP. This table, with the appropriate Facility Diagrams, must be posted near each Satellite Accumulation Area (SAA) and Hazardous Waste Accumulation Area (HWAA).

The Facility Manager and ERC must ensure that the facility is maintained and operated to minimize the possibility of a fire, explosion, or any unplanned sudden, or non-sudden, release of hazardous wastes or constituents to air, soil or surface water which could threaten human health or the environment as required under 40 CFR 265.31. In addition, they must make sure that, where applicable, proper aisle space is maintained to allow the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment to any area of the facility in an emergency, in accordance with 40 CFR 265.35.

Additional facility specific ERCP requirements are attached as an addendum to this document and must be followed, if applicable.

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A. PURPOSE

The purpose of this ERCP is to provide instructions for coordinating emergency response measures at the facility as required under the 40 CFR 264.34(d)(5) and 265.37. The responses to address are:

- Notification and response procedures in the event of a fire,
- Containment and cleanup of contaminated materials or soil in the event of a spill of chemicals or hazardous waste, and
- Notification and reporting requirements in the event of a fire, explosion or other release which could threaten human health outside the facility or when a spill has reached surface water.

B. ARRANGEMENTS WITH LOCAL AUTHORITIES (40 CFR 265.37)

1) The ERC must have attempted to make arrangements with local authorities to familiarize police, fire departments, and emergency response teams with the layout of the facilities, hazardous wastes handled, and the associated hazards, types of injuries or illnesses which could result, and evacuation routes, by sending all of the following documents to the attention of the contact person:

a) Cover letter template for communicating to emergency response agency located on the Checklists and Forms section of the Environmental Compliance Website at http://abintranet.
b) The ERCP
c) Facility Diagrams with the required items noted
d) Waste Characterization Table.

2) The cover letter and the attachments must be sent to the following agencies:
a) Local Fire Department
b) Local Police Department
c) Local Emergency Planning Committee (LEPC)
d) The local emergency response contractor that provides services to the facility
e) Local Hospital.

3) The facility must retain a copy of the letters, return receipts, or other historical records that will demonstrate actions in forwarding the ERCP.

I. EMERGENCY RESPONSE AND CONTINGENCY PLAN

C. EMERGENCY TELEPHONE NUMBERS (40 CFR 262.34(d)(5)(ii)(A) & (C))

Table I

	Contact Name	Contact Phone
Fire		
Local Fire Department		911
Local Police Department		911
Injuries		
Local Emergency Services	US Healthworks	Daytime: 510-845-5170 After Hours: see below
Local Hospital	Alta Bates Hospital, Herrick Campus	Daytime: (510) 204-4509 After Hours: (510) 204-4509
Facility Local Contacts		
Facility Manager	Jim Young 1363 Hansen Ave Alameda, CA 94501	Daytime: 510-845-2760 Cell: (831) 234-0765
Emergency Response Coordinator (ERC) – *Office and Home address should be filled in*	Gary Owens 2837 Burton Dr Oakland, CA 94611	Daytime: 510-845-2760 Cell: 510-914-2982 Home: 510-482-5029
Secondary/Back-Up Emergency Response Coordinator – *Office and Home address should be filled in*	Nick Trincia 4108 17th St #3 San Francisco, CA 94114	Daytime: 510 845-2760 After Hours: 443 257-9343
Facility EC (Facility Environmental Coordinator) *Office and Home address should be filled in*	Gary Owens 2837 Burton Dr Oakland, CA 94611	Daytime: 510-845-2760 Cell: 510-914-2982 Home: 510-482-5029
EC (Alternate Environmental Coordinator usually an	Nick Trincia 4108 17th St. #3	Daytime: 510-845-2760 After Hours: 443-257-9343

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Area EC)	San Francisco, CA 94114	
EC (Alternate Environmental Coordinator usually an Area EC)		Daytime: After Hours:
Company Contacts (ABL, ASP, Corporate)		
ECO **Environmental Compliance Officer**	Josh Dowis	Office: 770-860-3520 Cell: 706-614-8189
VP, Compliance	Barry Goldman	Office: 770-860-3545 Cell: 404-353-0501
FEC/ERC Contacts		
Bay Area Air Quality Management District		(800) 334-6367 or (415) 771-6000
NRC (National Response Center)		(800) 424-8802
Poison Control Center		(800) 222-1222
California Emergency Management Agency (CAL/EMA)		(800) 852-7750
EBMUD Waste Water Treatment Facility (if sewer)		(510) 287-1651
State Fire Marshal		(916) 445-8200
California Dept of Toxic Substances Control		(916) 255-3545
City of Berkeley Toxics Management Division		(510) 981-7460 or 911

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D. EMERGENCY RESPONSE COORDINATOR (ERC) (40 CFR 262.34(d)(5)(i))

An ERC must be either on the facility premises, or on call, (available to respond to an emergency by reaching the facility within a short period of time) at all times, exuding the authority and responsibility for coordinating all emergency response measures specified in this ERCP.

The services of an emergency response company must be contracted for events that exceed ASP/ABL's response capacity. The ERC will make notifications when necessary. These names and numbers can be found on the Emergency Telephone Numbers page in Section C, Table I.

E. HAZARDOUS WASTES AND CHEMICALS HANDLED AT THE FACILITY

The facility must maintain a list of all wastes generated at the facility on the Waste Characterization Table. In addition, the facility must maintain a Chemical Inventory. These documents must be current and available in the event of an emergency.

F. FACILITY LAYOUT (40 CFR 262.34(d)(5)(ii)(A) & (C) and 265.37(1))

The facility must maintain Facility Diagrams & Maps that illustrate the location of the following items:

1) Fire extinguishers
2) Spill response equipment
3) Satellite Accumulation Areas (SAAs)
4) Hazardous Waste Accumulation Areas (HWAA)
5) Chemical storage areas
6) Working areas
7) Entrances to roads, if any

8) Fire alarms, if any
9) Evacuation routes.

The facility diagram/maps with these items indicated must be attached to this ERCP.

G. Emergency Response Equipment

The facility must maintain the equipment specified below, unless none of the hazards posed by of the wastes handled at the facility requires them. This equipment must be tested and maintained to assure proper operation in time of an emergency as required under 40 CFR 265.33.

1) Spill Response Kit

a) Location
   (i) Absorbent material for spills of known hazards (such as fuels, oils, and hydraulic fluids) will be located in work areas at the facility including the SAA and HWAA.
   (ii) The Facility Diagram indicates the location of all spill response kits.

b) Contents
   (i) The spill response kit(s) contains adequate equipment to respond to spills that are likely to occur. Facilities must inspect spill response kits on a regular basis and replace missing items when needed, or immediately after use. At a minimum, the spill response kit(s) contains the following items:
   (a) **Absorbent Materials**
      1. Absorbent material (floor dry, oil sorb, *etc.*) capable of absorbing organic liquids, oils, fuels, *etc.*
      2. Absorbent booms/socks and pads capable of absorbing organic liquids.
      3. Neutralizing agents (*i.e.* caustic sodas, vinegar, or a mild acid for alkaline) in areas where batteries or electrolytes are stored.
   (b) **Clean-up Equipment**
      1. Non-sparking shovels(s)
      2. Non-sparking dust pan(s)
      3. Non-sparking broom(s)
      4. Empty container(s) for collecting spill residue

   NOTE: Do not use metal clean-up equipment for spills of acids or with flammable materials due to incompatibilities and/or a sparking hazard. Equipment used for spill response must be decontaminated or disposed of properly.

   (c) **Personal Protective Equipment** - Level-D protection
      1. Protective gloves
      2. Splash protection for clothing
      3. Splash goggles

   NOTE: Employees must be trained in the proper use of all PPE before use.

2) Fire Extinguishers (40 CFR 265.32(c))

a) Portable fire extinguisher (water, Ansul dry powder, ABC type, and/or CO2) locations can be found on the Facility Diagram(s). Some forklifts and lift trucks have portable fire extinguishers.
   (i) All fire extinguishers are on a preventive maintenance schedule. Each fire extinguisher is checked at least on a monthly basis. Reference your Company's Safety Manual for more information.

b) All SAAs and HWAAs are equipped with a means of fire prevention. (40 CFR 265.32(d)).

c) All buildings are supported by fire stations, at or near the buildings for use, by responding fire fighters.

3) Alarms and Internal Communication Systems (40 CFR 265.32(a) & (b) and 40 CFR265.34)

a) If the facility is equipped with emergency alarms, their locations are noted on the Facility Diagram.

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b) All SAAs and HWAAs must have a telephone or hand held, two-way radio immediately available at the scene of operations.

H. EMERGENCY RESPONSE PROCEDURES

Anyone who becomes aware of a potential environmental emergency must notify the ERC immediately.

1) Evacuation procedures

a) Situations:

(i) Fires require an evacuation of the immediate area and/or the entire facility. If the facility fire alarm has been activated, the entire facility must be evacuated until the emergency has been assessed and the building is determined safe for occupancy.

(ii) Spills of unknown materials warrant an evacuation of the immediate area. Depending on the hazards associated with the material, it may be necessary to evacuate an even larger area.

2) Notifications

Upon notification, supervisors are responsible for the safe and orderly evacuation of all personnel in their respective work areas.

a) **General Requirements**

(i) Evacuation of employees will be performed per the evacuation routes illustrated on the Facility Diagrams & Maps attached to this ERCP.

(ii) Employees are required to familiarize themselves with the posted evacuation routes in each of their work areas.

(iii) The area supervisor is responsible for ensuring that his/her work area(s) is completely evacuated, and safely powering down any equipment that may create a source of ignition, if it is safe to do so.

(iv) The ERC, in conjunction with emergency responders and the area supervisor, will determine when it is safe to re-enter the evacuated work area.

b) **Alerting Employees**

All hazardous material emergencies (spill, fire, *etc.*) must be reported immediately to the Supervisor, and the ERC by means of an internal communication or alarm system.

(i) The ERC will contact the Facility ECO if necessary

(ii) The Facility EC and/or Facility Manager will notify all area supervisors and other affected personnel using one or more of the following means of communication:

(a) Public Address System
(b) Telephone
(c) Two-way Radio
(d) Voice.

c) **Alerting the Local Authorities**

The ERC is responsible for contacting all emergency services and emergency response agencies in accordance with the agreements described in Section B of the ERCP,- Arrangements with Local Authorities.

d) **Notifying Federal and State Agencies (40 CFR 262.34(d)(5)(iv)(C))**

In the event of a fire, explosion or other release which could threaten human health outside the facility, or when the generator has knowledge that a spill has reached surface water, the generator must immediately notify the National Response Center at 800-424-8802. **The Emergency Coordinator must coordinate with the facility's Environmental Compliance Officer or the VP, Compliance prior to this notification.** The report must include the following information:

(i) The name, address, and the U.S. EPA Identification Number of the generator;
(ii) Date, time, and type of incident;

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(iii) Quantity and type of hazardous waste involved in the incident;
(iv) Extent of the injuries, if any; and
(v) Estimated quantity and disposition of recovered materials, if any.

3) **Emergency Spill Procedures (40 CFR 262.34(d)(5)(iv)(B))**
The Company's spill response procedures are documented in the Environmental Policies and Procedures Manual, Section 1.15 – Spill Response Program. These procedures are available on the Company's Environmental Compliance website at http://abintranet. At a minimum, the ERC, with the assistance of the Facility EC, must:
a) Contain the flow of hazardous waste to the extent possible.
b) Clean up the hazardous waste and any contaminated materials or soil, as soon as is practicable (if the ERC is trained, able, and feels comfortable doing so) – or – supervise the outside contractors clean up process.

4) **Fires and Explosions Response Procedures (40 CFR 262.34(d)(5)(iv)(A))**
a) In the event of a fire:
(i) Employees should activate the alarm or internal communication system and notify the ERC immediately.
(ii) The ERC must call the Fire Department.
(iii) Consistent with the training requirements in your Company's Safety Manual, the ERC must attempt to extinguish the fire with available extinguishers. Only employees trained to perform this duty may attempt to extinguish a fire.

5) **Special Instructions for Fires Involving Hazardous Materials**
Only trained personnel are qualified to respond to fires involving hazardous materials, regardless of size. Acuity Brands employees are **not** trained to respond to such fires. The ERC will inform the local authorities and the emergency response team that the fire involves hazardous materials. Give them as much information as possible including the chemical name, approximate quantity involved, a Material Safety Data Sheet (MSDS), or other applicable information. All employees and non-emergency personnel should stay clear of the fire and upwind of the vapors, smoke, or fumes.

6) **Emergency Response Follow-up**
Within 48 hours following the incident, the ERC is responsible for completing the following steps:

a) **Disposal of Clean-up Debris/Residue**
Manage the disposal of all spill debris/residues and disposable response equipment.

b) **Reuse/Replacement of Emergency Equipment**
Decontamination of emergency equipment will consist of wiping down shovels with absorbent mats (or equivalent materials). Absorbent materials contaminated with hazardous waste will be managed as hazardous waste. Personal Protective Equipment, such as gloves and goggles will not be decontaminated, and should be managed as hazardous waste.

c) **Record Keeping Release Reporting**
The Facility EC is responsible for recording the incident in the Spill Table.
The Facility EC is responsible for contacting the facility's ECO to ensure that follow-up reporting required by federal, state, or local agencies is completed. A copy of all reports to regulatory agencies concerning emergency response will be maintained with the facility's Spill Table. Documents should be maintained per the Company's Environmental Policies and Procedures Manual, Section 1.4, Document Retention Policy.

I. ERCP REVIEW AND REVISION

Each facility will review the implementation of the ERCP with the ECO to determine the adequacy of the emergency response procedures. Your ECO will provide assistance as needed. The

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facility's ERCP should be reviewed annually by the ERC to ensure it adequately addresses the potential emergency responses at the facility.

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Employee Training Plan

1. Scope

This plan is designed to provide employees with training on hazardous materials and hazardous waste that will satisfy the requirements of the California Health and Safety Code Chapter 6.95 and Chapter 6.5.

Facility Name:	Peerless Lighting
Address:	2246 5th Street (office), 2231 4th Street (warehouse), Berkeley
Main Activity:	Administrative / R&D office
Building or Areas where hazardous materials/wastes are found:	2246 5th Street , 2231 4th Street (adjoining buildings)

2. Responsibilities

The following persons are responsible for ensuring that this Training Plan is implemented:

Name/Title	Training Responsibility
Chris Hans, Project Manager	Employee Training

3. Employees/New Employees

New employees are trained during orientation, before starting on a job? ☑ YES ☐ NO

New employees who handle hazardous waste are trained in hazardous waste management within six months of hire date? ☑ YES ☐ NO

4. New Assignments or Changes in Operations

In the event of new assignments or of changes in operation, affected employees are trained before the new assignment or the change in operation takes place. ☑ YES ☐ NO

5. Refresher Training

Refresher training will be provided annually (how often). The method used will be: *(check all that apply)*

- ☐ Outside classes
- ☐ In-house classes provided by contractor
- ☑ Safety meetings
- ☑ In-house classes conducted by in-house trainers

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6. Training Topics

The following table indicates the training topics covered for this facility, as indicated with a ☑. Other documentation on these training topics is maintained and are available to the inspector upon request.

All employees are trained to do the following procedures, as appropriate:	
☑	1. Initiate, activate, or recognize internal alarms and other emergency announcements.
☑	2. Notify internal or on-site emergency responders listed in the emergency response/contingency plan.
☑	3. Notify agencies listed in the emergency/contingency plan.
☑	4. Locate and review contents of written emergency response/contingency plan.
☑	5. Initiate, conduct, or follow evacuation procedures as described in the emergency response/contingency plan.
Hazardous materials/waste handlers are additionally trained in the following subjects:	
☑	1. Safe methods for handling and storage of hazardous materials and hazardous waste.
☑	2. Locations and proper use of personal protective equipment.
☑	3. Locations and proper use of fire and spill control equipment.
☑	4. Specific hazards of each chemical or waste to which they may be exposed, including the pathways of exposure (i.e. skin absorption, inhalation, ingestion).
☑	5. Follow emergency procedures for chemical/waste spills, earthquake, fire, and/or medical emergencies as described in the emergency response/contingency plan.
☑	6. Hazardous waste handlers/managers are also trained in all aspects of hazardous waste management specific to their job duties (e.g. accumulation time, storage period, labels, inspection of containers and storage areas, uniform hazardous waste manifests, etc.)

7. Emergency Response Team

This facility has a formally organized Emergency Response Team. ☑ YES ☐ NO

Emergency Response Team members are additionally trained for the following activities:	
☑	1. Personnel rescue procedures.
☑	2. Shutdown of operations.
☑	3. Liaison with emergency response agencies.
☑	4. Use, maintenance, and replacement of emergency response equipment.
☑	5. Emergency response drills are conducted, at least *(specify frequency)* [1] times a year.
☑	6. Refresher training is provided, at least annually.

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8. Recordkeeping

Employee training and other records are to be maintained at the facility. These include the following:

☑	1. Record of training for each employee (date and duration of training, subject matter covered, instructor, etc.).
☑	2. Training records of current and former employees. (For current employees, records are to be retained until closure of the facility. For former employees, training records are to be retained for at least 3 years after termination of employment.
☑	3. Description of introductory and continuing training programs for each employee classification.
☑	4. Current emergency response, contingency, and/or spill response plan (for underground or aboveground tanks).
☑	5. Description and documentation of emergency response drills.
☑	6. Record of reportable/recordable accidental releases of hazardous material/waste.
☑	7. Record of inspections of hazardous material/waste storage areas.
☑	8. Record of daily inspection of hazardous waste tanks.
☐	9. Inspection procedures for identified earthquake-sensitive areas and systems in the facility.

Note: The above list does not necessarily include every type of record required to be maintained by your facility.

Training records are maintained in the following location: Chris Hans x6324; Peerless computer system.

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UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)	FA0000056 1	EPA ID # (Hazardous Waste Only) 2	CAL000312922
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	PEERLESS LIGHTING 3		
BUSINESS SITE ADDRESS	2246 FIFTH ST 103		
BUSINESS SITE CITY	BERKELEY 104	CA	ZIP CODE 94710 105

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	☐ YES	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste?	☒ YES	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	☐ YES	ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	☐ YES	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	☐ YES	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES	See CUPA for required forms.

F. LOCAL REQUIREMENTS 15

(You may also be required to provide additional information by your CUPA or local agency.)

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID# 1: FA0000561		BEGINNING DATE 100: 03/01/2014	ENDING DATE 101: 03/15/2015
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: PEERLESS LIGHTING			BUSINESS PHONE 102: 5108452760
BUSINESS SITE ADDRESS 103: 2246 FIFTH ST			BUSINESS FAX 102a: 5108452776
BUSINESS SITE CITY 104: BERKELEY	CA	ZIP CODE 105: 94710	COUNTY 108:
DUN & BRADSTREET 106: 085458508		PRIMARY SIC 107: 3646	PRIMARY NAICS 107a: 335122
BUSINESS MAILING ADDRESS 108a: 2246 FIFTH STREET			
BUSINESS MAILING CITY 108b: BERKELEY		STATE 108c: CA	ZIP CODE 108d: 94710
BUSINESS OPERATOR NAME 109: Peerless Lighting			BUSINESS OPERATOR PHONE 110: 5108452760

II. BUSINESS OWNER

OWNER NAME 111: ACUITY BRANDS LIGHTING		OWNER PHONE 112: 7709229000
OWNER MAILING ADDRESS 113: 1400 Lester Road		
OWNER MAILING CITY 114: CONYERS	STATE 115: GA	ZIP CODE 116: 30012

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: GARY OWENS		CONTACT PHONE 118: 5108452760
CONTACT MAILING ADDRESS 119: 2246 FIFTH STREET		CONTACT EMAIL 119a: g.owens@peerlesslighting.com
CONTACT MAILING CITY 120: BERKELEY	STATE 121: CA	ZIP CODE 122: 94710-

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: GARY OWENS	NAME 128: NICK TRINCIA
TITLE 124: OPERATIONS DIRECTOR	TITLE 129: MODEL SHOP MANAGER
BUSINESS PHONE 125: 5108452760	BUSINESS PHONE 130: 5108452760
24-HOUR PHONE 126: 51091429825104825029	24-HOUR PHONE 131: 4432579343
CELL / PAGER # 127:	CELL / PAGER # 132:
EMAIL:	EMAIL:

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
		Gary Owens
NAME OF SIGNER (print) 136: Gary Owens	TITLE OF SIGNER 137: Operations Director	

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Acetylene

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Acetylene

EHS* ☐ Yes 208

CAS# 209
74-86-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 132.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
132.0	132.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Argon

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Argon

EHS* ☐ Yes 208

CAS# 209
7440-32-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 336.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
672.0	672.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H7

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Isopropyl Alcohol

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Isopropyl Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.25	0.375	0.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	98.0 226	2-Propanol 227	☐ Yes 228	67-63-0 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Nitrogen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Nitrogen

EHS* ☐ Yes 208

CAS# 209
7440-32-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 230.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
230.0	230.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oxygen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oxygen

EHS* ☐ Yes 208

CAS# 209
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Oxidizer, gas (4.4)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 251.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
401.0	401.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H9

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	20.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane (14 oz consumer cylinders)

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 0.875 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.5	3.5	0.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Opaque Screen Ink

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.25	0.25		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Titanium dioxide 227	☐ Yes 228	13463-67-7 229
2 20.0 230	Stoddard solvent 231	☐ Yes 232	8052-41-3 233
3 10.0 234	Talc 235	☐ Yes 236	14807-96-6 237
4 5.0 238	Naphtha (petroleum), heavy aromatic 239	☐ Yes 240	64742-94-5 241
5 5.0 242	Petroleum naphtha, light aromatic 243	☐ Yes 244	64742-95-6 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # F A 0 0 0 0 5 6 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
CRC Heavy Duty Degreaser

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.2	0.6		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 226	Tetrachlororethylene 227	☐ Yes 228	127-18-4 229
2	45.0 230	Trichloroethylene 231	☐ Yes 232	79-01-6 233
3	0.5 234	1,2-Butylene Oxide 235	☐ Yes 236	106-88-7 237
4	4.5 238	Carbon dioxide 239	☐ Yes 240	124-38-9 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Tapmatic #1 Cutting Fluid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 (226)	Trichloroethylene (227)	☐ Yes (228)	79-01-6 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
CRC Contact Cleaner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.09 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.09	0.09		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Propan-2-ol 227	☐ Yes 228	67-63-0 229
2	20.0 230	Naphtha, desulfurized 231	☐ Yes 232	92045-53-9 233
3	10.0 234	Naphtha, hydrotreated 235	☐ Yes 236	64742-49-0 237
4	5.0 238	Carbon Dioxide 239	☐ Yes 240	124-38-9 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H3

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Aerosol Paints (consumer spray cans < 1 L capacity)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
50.0	80.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	15.0 (230)	Propane (231)	☐ Yes (232)	74-98-6 (233)
3	20.0 (234)	Toluene (235)	☐ Yes (236)	108-88-3 (237)
4	25.0 (238)	Xylene (239)	☐ Yes (240)	1330-20-7 (241)
5	15.0 (242)	Mineral Spirits (243)	☐ Yes (244)	64741-65-7 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Spilfyter Kolorsafe Dry Base Neutralizer

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 2.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4.0	4.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Citric Acid, anhydrous 227	☐ Yes 228	77-92-9 229
2	230	Thymol Blue 231	☐ Yes 232	76-61-9 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
RE-180 Thinner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid , Class III-A (1.1 III-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	2-Butoxyethanol 227	☐ Yes 228	111-76-2 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6, H8, H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lead-Acid Batteries (inside equipment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 7.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55.0	55.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Lead-Acid battery
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Sulfuric Acid 227	☐ Yes 228	7664-93 229
2	230	Lead 231	☐ Yes 232	7439-92-1 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Waste: Motor Oil from generator (Recycled)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0	1.0	2.0	221

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 1.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Highly refined mineral oil (C15-C50) 227	☐ Yes 228	mixture 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
UWaste: Spent Sealed Gell Cell batteries for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	120.0	120.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 60.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Sealed gell cell batteries
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	65.0 (226)	Inorganic Lead/Lead Compounds (227)	☐ Yes (228)	7439-92-1 (229)
2	0.5 (230)	Tin (231)	☐ Yes (232)	7440-31-5 (233)
3	14.0 (234)	Dilute sulfuric acid (235)	☐ Yes (236)	7664-93-9 (237)
4	0.1 (238)	Calcium (239)	☐ Yes (240)	7440-70-2 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
UWaste: Spent sealed lithium battery packs for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 4.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	50.0	50.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 60.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Sealed batteries in mfgr's 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 24.0 226	Iron disulfide 227	☐ Yes 228	1309-36-0 229
2 5.0 230	Lithium or Lithium alloy 231	☐ Yes 232	7439-93-2 233
3 0.5 234	Lithium Iodide 235	☐ Yes 236	10377-51-2 237
4 5.0 238	1,3 Dioxolane 239	☐ Yes 240	646-06-0 241
5 4.0 242	Graphite 243	☐ Yes 244	7782-42-5 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Spent batteries for recycling (non-lithium or auto)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 3.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	54.0	100.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Manganese Dioxide 227	☐ Yes 228	1313-13-9 229
2	25.0 230	Zinc 231	☐ Yes 232	7440-66-6 233
3	10.0 234	Potassium Hydroxide (35%) 235	☐ Yes 236	1310-58-3 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
Warehouse

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Electronic devices (excludes CRT monitors)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
35.0	300.0	300.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER computers, printers, etc. 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Various 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
Warehouse

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: CRT Monitors

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
30.0	150.0	150.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Computer CRT monitors

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Various 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H1, H6, H8, H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Waste: Spent lead-acid batteries from equipment for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 52.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0	52.0	25.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 1.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Spent lead-acid batteries
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 (226)	Lead (227)	☐ Yes (228)	7439-92-1 (229)
2	30.0 (230)	Sulfuric Acid (231)	☐ Yes (232)	7664-93-9 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Spent fluorescent lamps for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 20.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	100.0	100.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	0.01 (226)	Mercury (227)	☐ Yes (228)	7439-97-6 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H7

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Tergitol cleaning solution

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.0264 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0264	0.0264	0.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	α-(4-Nonylphenyl)-ω-hydroxy-poly(oxy-1,2-et 227	☐ Yes 228	127087-87-0 229
2	5.0 230	Polyethylene glycol 231	☐ Yes 232	25322-68-3 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H1

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lead-Acid Batteries (inside equipment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 51.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
61.0	61.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER lead-acid battery
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Sulfuric Acid 227	☐ Yes 228	7664-93-9 229
2	230	Lead 231	☐ Yes 232	7439-92-1 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Latex Wall Paints

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
80.0	100.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	30.0 226	Titanium Dioxide 227	☐ Yes 228	13463-67-7 229
2	230	Acrylic Polymers 231	☐ Yes 232	various 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H3

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Denatured Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 226	Ethyl Alcohol 227	☐ Yes 228	64-17-5 229
2	50.0 230	Methanol 231	☐ Yes 232	67-56-1 233
3	4.0 234	Methyl isobuytl ketone 235	☐ Yes 236	108-10-1 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Stratasys P400SC Water Soluable Concentrate

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 2.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
12.0	24.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	25.0 226	Sodium Hydroxide 227	☐ Yes 228	1310-73-2 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Denatured Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 (226)	Ethyl Alcohol (227)	☐ Yes (228)	64-17-5 (229)
2	50.0 (230)	Methanol (231)	☐ Yes (232)	67-56-1 (233)
3	4.0 (234)	Methyl isobuytl ketone (235)	☐ Yes (236)	108-10-1 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Dykem blue layout fluid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.2	0.5		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 (226)	Ethanol (227)	☐ Yes (228)	64-17-5 (229)
2	30.0 (230)	Butyl Acetate (231)	☐ Yes (232)	123-86-4 (233)
3	20.0 (234)	Butanol (235)	☐ Yes (236)	71-36-3 (237)
4	5.0 (238)	n-Propyl Acetate (239)	☐ Yes (240)	109-60-4 (241)
5	5.0 (242)	Isopropanol (243)	☐ Yes (244)	67-63-0 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Mobil DTE 24 Light Hydraulic Oil

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

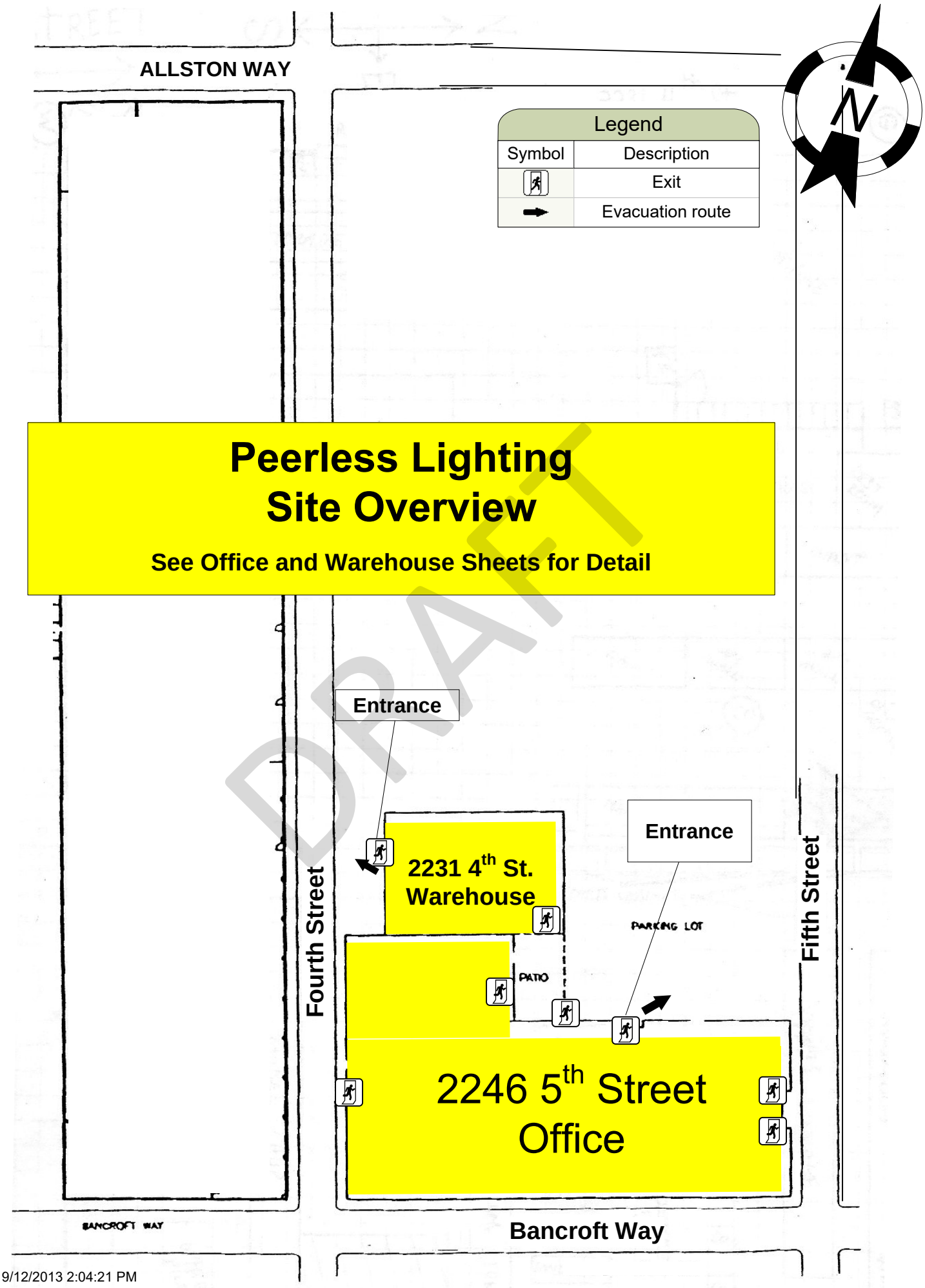
	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Pet. Hydrocarbons and additives 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

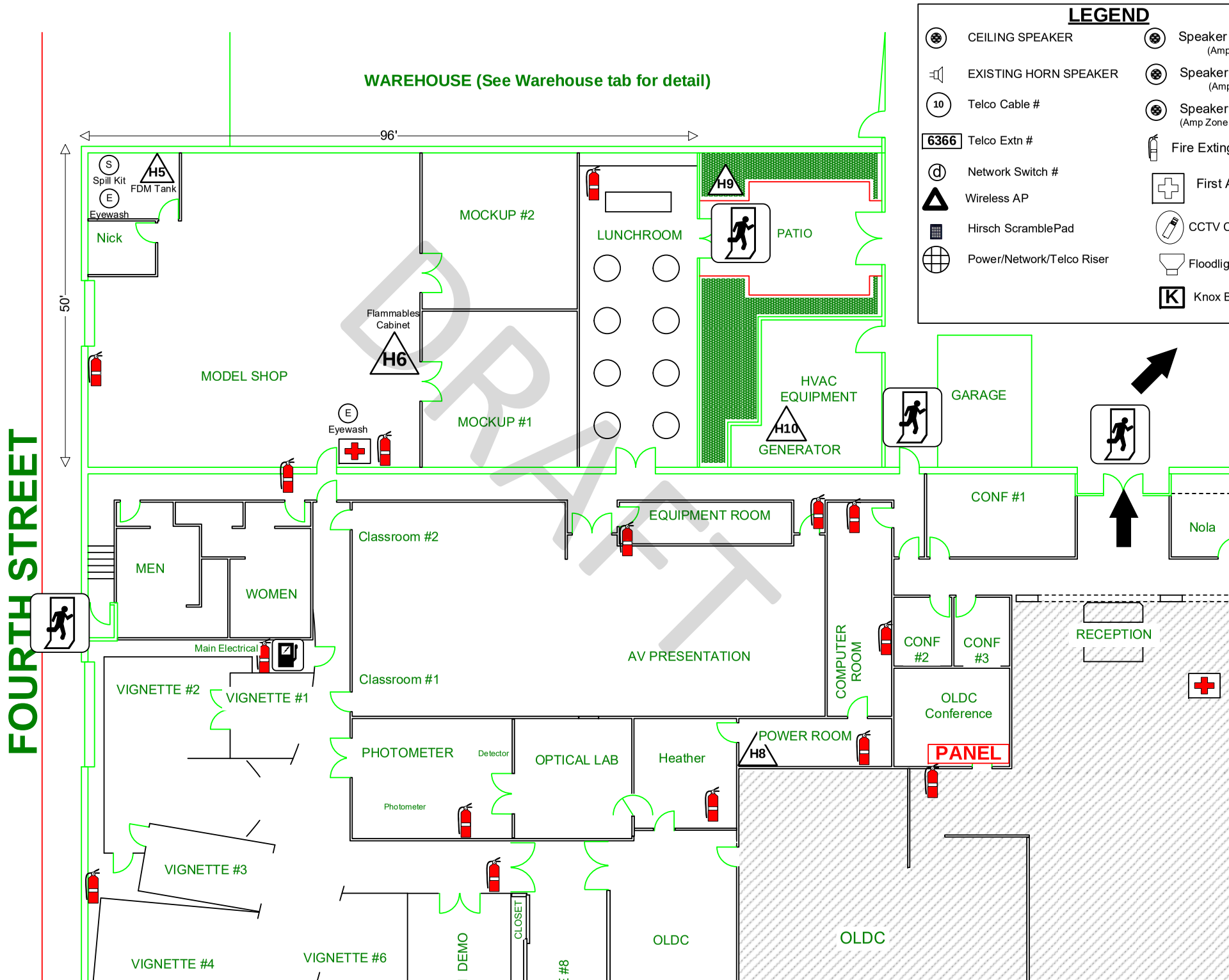
ADDITIONAL LOCALLY COLLECTED INFORMATION 246

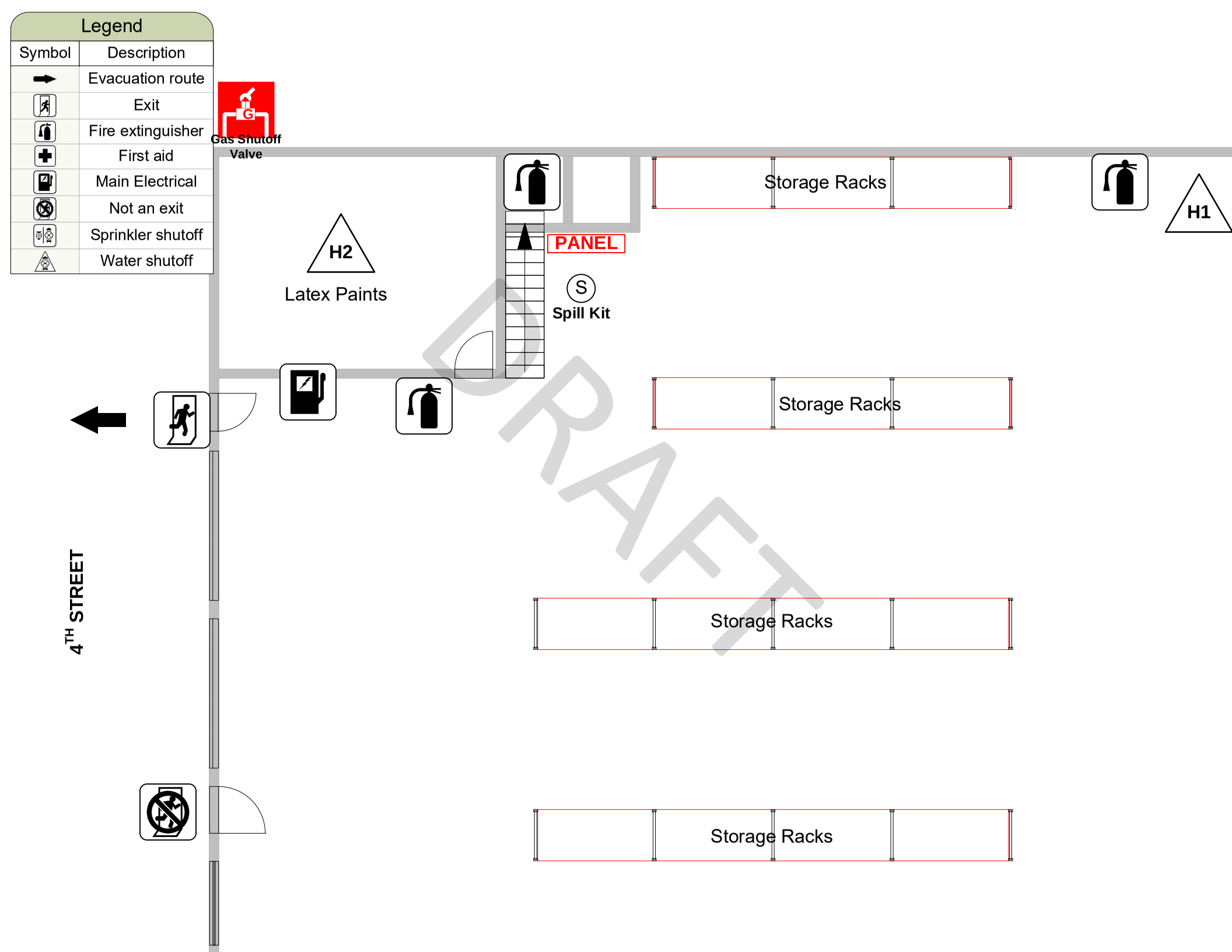
If EPCRA, Please Sign Here

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WAREHOUSE (See Warehouse tab for detail)
96'
50'
FOURTH STREET
LEGEND
CEILING SPEAKER
EXISTING HORN SPEAKER
Telco Cable #
Telco Extn #
Network Switch #
Wireless AP
Hirsch ScramblePad
Power/Network/Telco Riser
Fire Extin
First A
CCTV C
Floodlig
Knox B
Spill Kit
FDM Tank
Eyewash
Nick
MOCKUP #2
LUNCHROOM
PATIO
Flammables Cabinet
MODEL SHOP
MOCKUP #1
HVAC EQUIPMENT
GENERATOR
GARAGE
CONF #1
Nola
EQUIPMENT ROOM
Classroom #2
MEN
WOMEN
Main Electrical
VIGNETTE #2
VIGNETTE #1
Classroom #1
AV PRESENTATION
COMPUTER ROOM
CONF #2
CONF #3
RECEPTION
OLDC Conference
PANEL
POWER ROOM
PHOTOMETER
Detector
Photometer
OPTICAL LAB
Heather
VIGNETTE #3
VIGNETTE #4
VIGNETTE #6
CLOSET
OLDC
OLDC
DRAFT


Legend
Symbol
Description
Evacuation route
Exit
Fire extinguisher
First aid
Main Electrical
Not an exit
Sprinkler shutoff
Water shutoff
Gas Shutoff Valve
H2
Latex Paints
PANEL
S
Spill Kit
H1
Storage Racks
Storage Racks
Storage Racks
Storage Racks
4TH STREET
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CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
FA0000561		02/06/2014

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.
PEERLESS LIGHTING

BUSINESS SITE ADDRESS 103.
2246 FIFTH ST

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
Commercial Lighting Firm - Administrative / R&D facility	Model shop / prototyping

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.
☒ 1. HAZARDOUS MATERIALS; ☒ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.
☒ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☒ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☒ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:
1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:
1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☒ 1. VERBAL WARNINGS;	☒ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☐ 3. TELEPHONE;
☐ 4. PAGERS;	☐ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☒ 3. TELEPHONE;
☐ 4. PAGERS;	☐ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:

AMBULANCE, FIRE, POLICE AND CHP	9-1-1
CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
POISON CONTROL CENTER	(800) 222-1222
LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA) C3.	(510) 981-7460 City of Berkeley Toxic Mgt. Div
OTHER (Specify): Emergency Response Coordinator C4.	Gary Owens 510-482-5029/5 C5.

NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates Hospital C6. — 510 204-4509 C7.

AGENCY NOTIFICATION PHONE NUMBERS:

CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 SF Bay Regio C8.
U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
CALIFORNIA DEPT OF FISH AND WILDLIFE (CDFW)	(916) 358-2900
U.S. COAST GUARD	(202) 267-2180
CAL/OSHA	(916) 263-2800
STATE FIRE MARSHAL	(916) 445-8200
OTHER (Specify): C9.	C10.
OTHER (Specify): C11.	C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☒ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☒ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☒ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☒ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☒ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☒ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☒ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☒ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☒ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☒ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☒ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☒ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☒ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☒ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☒ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☒ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☒ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☐ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☒ 3. VERBAL (i.e., SHOUTING);
- ☒ 4. OTHER (Specify): Public address system

E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

Public sidewalk on east side of 5th Street across from parking lot

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☒ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☒ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☒ CHEMICAL PROTECTIVE GLOVES	G4. model shop; warehouse	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☒ SAFETY GLASSES / GOGGLES / SHIELDS	G8. model shop; warehouse	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☐ CARTRIDGE RESPIRATORS	G12.	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☒ FIRST AID KITS / STATIONS	G16. Model shop; warehouse; office. See ma	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☒ PORTABLE EYEWASH KITS	G20. Model Shop; warehouse	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☒ PORTABLE FIRE EXTINGUISHERS	G26. Throughout facility. See map.	G27.
	14. ☒ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28. Throughout facility. All buildings are fully	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☒ ALL-IN-ONE SPILL KIT	G34. warehouse	G35.
	18. ☒ ABSORBENT MATERIAL	G36. warehouse	G37.
	19. ☒ CONTAINER FOR USED ABSORBENT	G38. warehouse	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☒ BROOM	G42. Janitor closet	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☒ SHOP VAC	G46. Model shop	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☒ TELEPHONES (Includes cellular)	G60. throughout facility	G61.
	31. ☒ INTERCOM / PA SYSTEM	G62. Offices/model shop	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☐ OTHER	G68.	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply)	H1.	LOCATIONS (e.g., shop, outdoor shed, forensic lab)	
☒ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA		model shop; warehouse	H2.
☐ 2. PROCESS LINES / PIPING			H3.
☐ 3. LABORATORY			H4.
☐ 4. WASTE TREATMENT AREA			H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply)	H6.	LOCATIONS	
☒ 1. SHELVES, CABINETS AND RACKS		model shop; warehouse	H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)			H8.
☒ 3. PORTABLE GAS CYLINDERS		warehouse	H9.
☒ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES		office; warehouse	H10.
☒ 5. SPRINKLER SYSTEMS		office; warehouse	H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)			H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☒ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☐ 3. SAFETY / TAILGATE MEETINGS;

☒ 4. STUDY GUIDES / MANUALS (Specify): Environmental Awareness Universal Waste Hazardous Waste Management Personal Protecti I2.

☐ 5. OTHER (Specify): I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED K1.
Gary Owens	02/06/2014
NAME OF SIGNER (print) K2.	TITLE OF SIGNER K3.
	Director, Operations

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID # (Agency Use Only)	FA0000056 1	EPA ID # (Hazardous Waste Only) 2	CAL000312922
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	PEERLESS LIGHTING 3		
BUSINESS SITE ADDRESS	2246 FIFTH ST 103		
BUSINESS SITE CITY	BERKELEY 104	CA	ZIP CODE 94710 105

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.

Does your facility…	If Yes, please complete these pages of the UPCF….	
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	☒ YES	HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	☐ YES	Coordinate with your local agency responsible for CalARP.
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?	☐ YES	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	☐ YES	NO FORM REQUIRED TO CUPAs
E. HAZARDOUS WASTE Generate hazardous waste?	☒ YES	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	RECYCLABLE MATERIALS REPORT (one per recycler)
Treat hazardous waste on-site?	☐ YES	ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	CERTIFICATION OF FINANCIAL ASSURANCE
Consolidate hazardous waste generated at a remote site?	☐ YES	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?	☐ YES	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.	☐ YES	Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.
Household Hazardous Waste (HHW) Collection site?	☐ YES	See CUPA for required forms.

F. LOCAL REQUIREMENTS 15

(You may also be required to provide additional information by your CUPA or local agency.)

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UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

I. IDENTIFICATION

FACILITY ID#	1	BEGINNING DATE	100	ENDING DATE	101
FA0000561					

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3	BUSINESS PHONE 102
PEERLESS LIGHTING	5108452760
BUSINESS SITE ADDRESS 103	BUSINESS FAX 102a
2246 FIFTH ST	5108452776

BUSINESS SITE CITY 104		ZIP CODE 105	COUNTY 108
BERKELEY	CA	94710	

DUN & BRADSTREET 106	PRIMARY SIC 107	PRIMARY NAICS 107a
085458508	3646	335122

BUSINESS MAILING ADDRESS 108a		
2246 FIFTH STREET		
BUSINESS MAILING CITY 108b	STATE 108c	ZIP CODE 108d
BERKELEY	CA	94710
BUSINESS OPERATOR NAME 109	BUSINESS OPERATOR PHONE 110	
Peerless Lighting	5108452760	

II. BUSINESS OWNER

OWNER NAME 111	OWNER PHONE 112
ACUITY BRANDS LIGHTING	7709229000
OWNER MAILING ADDRESS 113	
1400 Lester Road	
OWNER MAILING CITY 114	STATE 115 / ZIP CODE 116
CONYERS	GA 30012

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117	CONTACT PHONE 118
GARY OWENS	5108452760
CONTACT MAILING ADDRESS 119	CONTACT EMAIL 119a
2246 FIFTH STREET	g.owens@peerlesslighting.com
CONTACT MAILING CITY 120	STATE 121 / ZIP CODE 122
BERKELEY	CA 94710-

IV. EMERGENCY CONTACTS

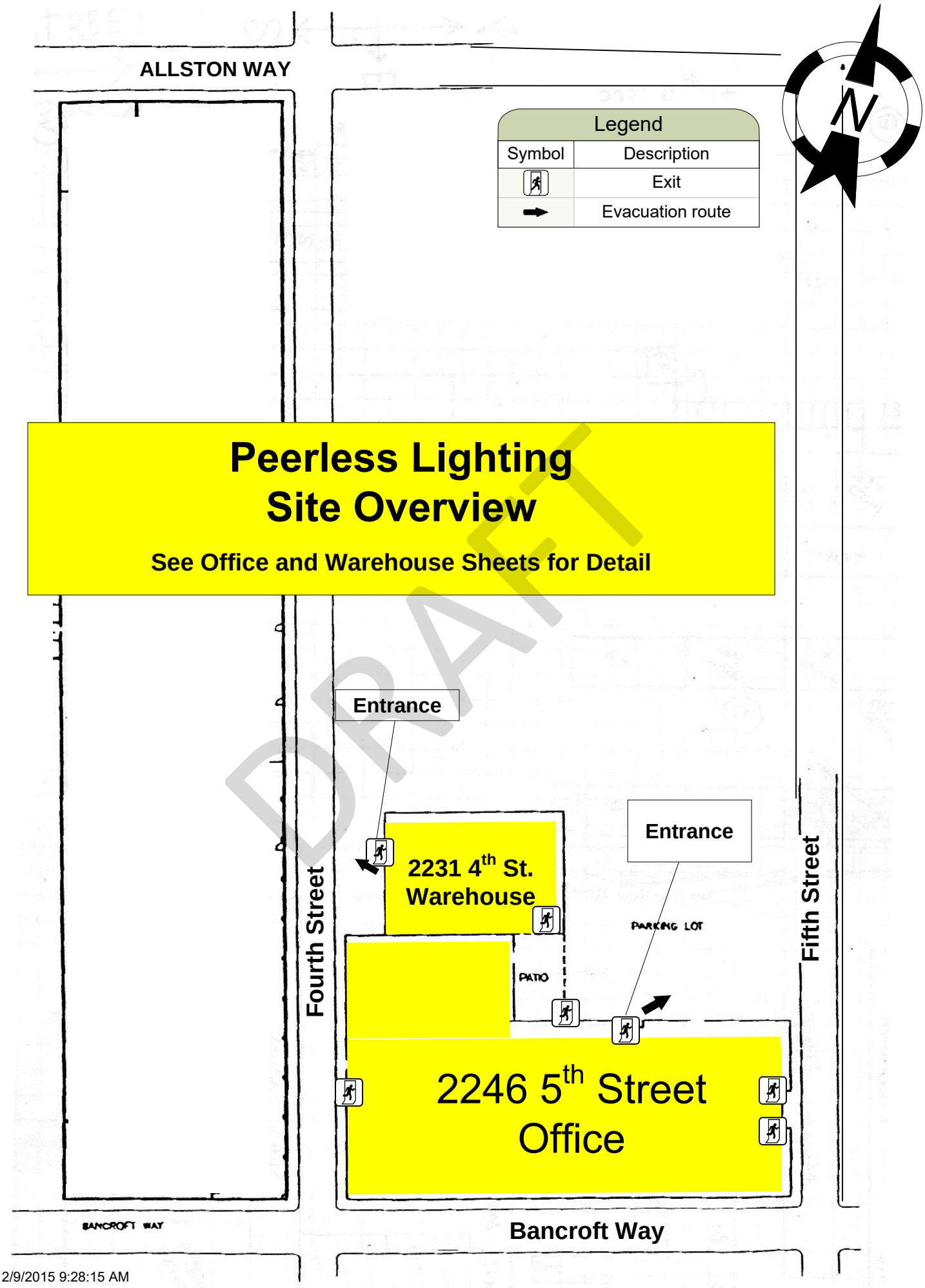
-PRIMARY-	-SECONDARY-
NAME 123: GARY OWENS	NAME 128: Chris Cooper
TITLE 124: OPERATIONS DIRECTOR	TITLE 129: Safety Director
BUSINESS PHONE 125: 5108452760	BUSINESS PHONE 130: 5108452760
24-HOUR PHONE 126: 51091429825104825029	24-HOUR PHONE 131: 5107594357
CELL / PAGER # 127	CELL / PAGER # 132
EMAIL	EMAIL

ADDITIONAL LOCALLY COLLECTED INFORMATION: 133

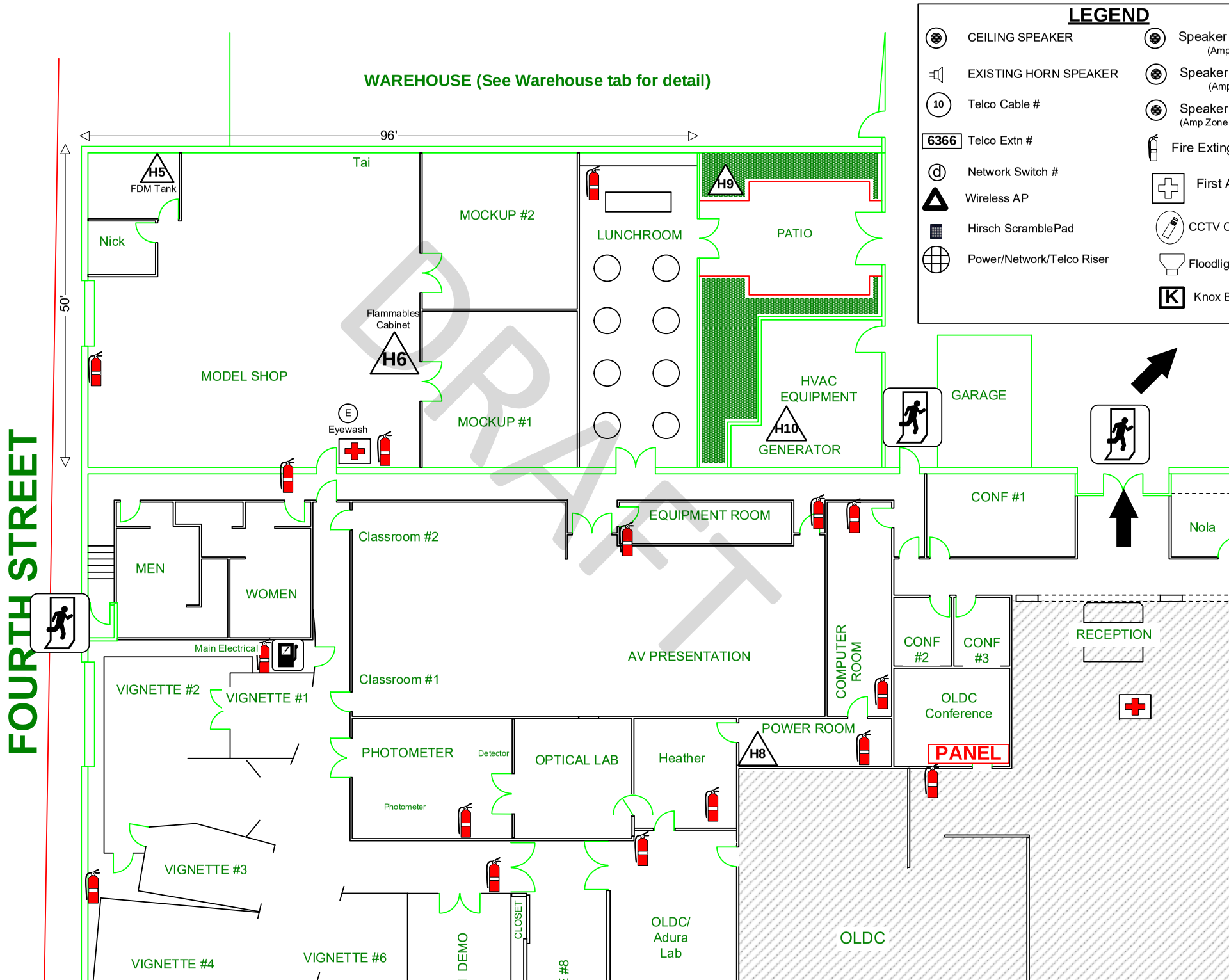
Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

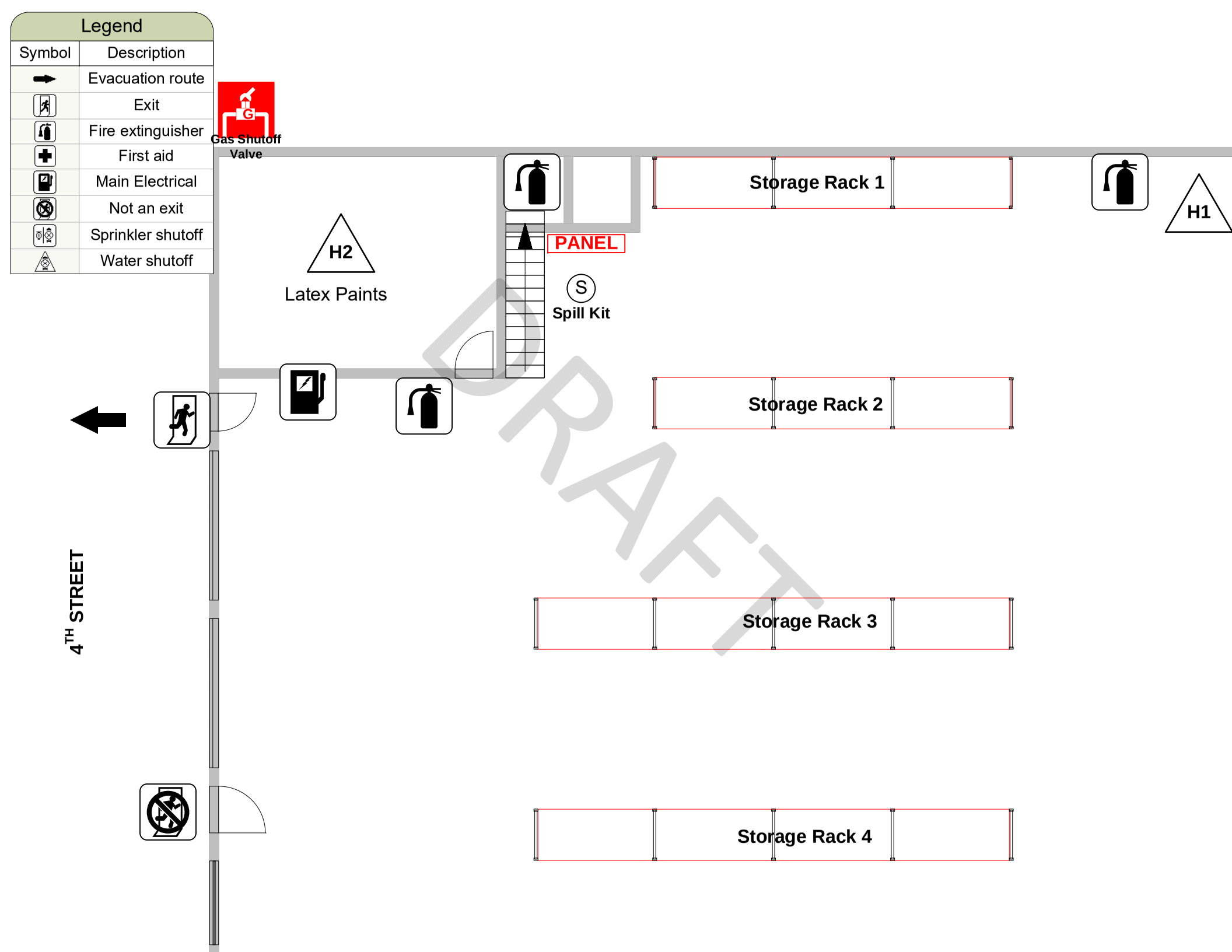
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134	NAME OF DOCUMENT PREPARER 135
		Gary Owens
NAME OF SIGNER (print) 136	TITLE OF SIGNER 137	
Gary Owens	Operations Director	

DRAFT



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LEGEND
CEILING SPEAKER
EXISTING HORN SPEAKER
Telco Cable #
6366 Telco Extn #
Network Switch #
Wireless AP
Hirsch ScramblePad
Power/Network/Telco Riser
Speaker
Speaker
Speaker
Fire Exting
First A
CCTV C
Floodlig
Knox B
WAREHOUSE (See Warehouse tab for detail)
96'
50'
FOURTH STREET
H5
FDM Tank
Nick
Tai
MOCKUP #2
LUNCHROOM
H9
PATIO
Flammables Cabinet
H6
MODEL SHOP
MOCKUP #1
E
Eyewash
HVAC EQUIPMENT
H10
GENERATOR
GARAGE
CONF #1
Nola
EQUIPMENT ROOM
MEN
WOMEN
Classroom #2
Main Electrical
VIGNETTE #2
VIGNETTE #1
Classroom #1
AV PRESENTATION
COMPUTER ROOM
CONF #2
CONF #3
RECEPTION
OLDC Conference
PANEL
POWER ROOM
H8
PHOTOMETER
Detector
Photometer
OPTICAL LAB
Heather
VIGNETTE #3
VIGNETTE #4
VIGNETTE #6
CLOSET
DEMO
OLDC/ Adura Lab
OLDC
DRAFT


Legend
Symbol
Description
Evacuation route
Exit
Fire extinguisher
First aid
Main Electrical
Not an exit
Sprinkler shutoff
Water shutoff
Gas Shutoff Valve
H2
Latex Paints
PANEL
S
Spill Kit
H1
Storage Rack 1
Storage Rack 2
Storage Rack 3
Storage Rack 4
4TH STREET
DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Acetone

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Acetone

EHS* ☐ Yes 208

CAS# 209
67-64-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.125 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.125	0.25	0.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Acetylene

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Acetylene

EHS* ☐ Yes 208

CAS# 209
74-86-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 132.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
132.0	132.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H3

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Aerosol Paints (consumer spray cans < 1 L capacity)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
50.0	80.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	20.0 (226)	Acetone (227)	☐ Yes (228)	67-64-1 (229)
2	15.0 (230)	Propane (231)	☐ Yes (232)	74-98-6 (233)
3	20.0 (234)	Toluene (235)	☐ Yes (236)	108-88-3 (237)
4	25.0 (238)	Xylene (239)	☐ Yes (240)	1330-20-7 (241)
5	15.0 (242)	Mineral Spirits (243)	☐ Yes (244)	64741-65-7 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Argon

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Argon

EHS* ☐ Yes 208

CAS# 209
7440-32-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 336.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
672.0	672.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Butane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Butane

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquefied Gas (3.2l)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 0.5 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.5	1.0	0.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	22.0 (226)	Butane (227)	☐ Yes (228)	106-97-8 (229)
2	78.0 (230)	IsoButane (231)	☐ Yes (232)	75-28-5 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
CRC Contact Cleaner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.09 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.09	0.09		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Propan-2-ol 227	☐ Yes 228	67-63-0 229
2	20.0 230	Naphtha, desulfurized 231	☐ Yes 232	92045-53-9 233
3	10.0 234	Naphtha, hydrotreated 235	☐ Yes 236	64742-49-0 237
4	5.0 238	Carbon Dioxide 239	☐ Yes 240	124-38-9 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # F A 0 0 0 0 5 6 1 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
CRC Heavy Duty Degreaser

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.2	0.6		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 226	Tetrachlororethylene 227	☐ Yes 228	127-18-4 229
2	45.0 230	Trichloroethylene 231	☐ Yes 232	79-01-6 233
3	0.5 234	1,2-Butylene Oxide 235	☐ Yes 236	106-88-7 237
4	4.5 238	Carbon dioxide 239	☐ Yes 240	124-38-9 241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Denatured Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 (226)	Ethyl Alcohol (227)	☐ Yes (228)	64-17-5 (229)
2	50.0 (230)	Methanol (231)	☐ Yes (232)	67-56-1 (233)
3	4.0 (234)	Methyl isobuytl ketone (235)	☐ Yes (236)	108-10-1 (237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H3

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Denatured Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	50.0 226	Ethyl Alcohol 227	☐ Yes 228	64-17-5 229
2	50.0 230	Methanol 231	☐ Yes 232	67-56-1 233
3	4.0 234	Methyl isobuytl ketone 235	☐ Yes 236	108-10-1 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Dykem blue layout fluid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-B (3.3 I-B)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.1 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.2	0.5		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 (226)	Ethanol (227)	☐ Yes (228)	64-17-5 (229)
2	30.0 (230)	Butyl Acetate (231)	☐ Yes (232)	123-86-4 (233)
3	20.0 (234)	Butanol (235)	☐ Yes (236)	71-36-3 (237)
4	5.0 (238)	n-Propyl Acetate (239)	☐ Yes (240)	109-60-4 (241)
5	5.0 (242)	Isopropanol (243)	☐ Yes (244)	67-63-0 (245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H7

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Isopropyl Alcohol

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Isopropyl Alcohol

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.25	0.375	0.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☒ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	98.0 226	2-Propanol 227	☐ Yes 228	67-63-0 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H2

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Latex Wall Paints

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 5.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
80.0	100.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	30.0 226	Titanium Dioxide 227	☐ Yes 228	13463-67-7 229
2	230	Acrylic Polymers 231	☐ Yes 232	various 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H1

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lead-Acid Batteries (inside equipment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 51.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
61.0	61.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER lead-acid battery
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Sulfuric Acid 227	☐ Yes 228	7664-93-9 229
2	230	Lead 231	☐ Yes 232	7439-92-1 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6, H8, H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Lead-Acid Batteries (inside equipment)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 7.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55.0	55.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Lead-Acid battery
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Sulfuric Acid 227	☐ Yes 228	7664-93 229
2	230	Lead 231	☐ Yes 232	7439-92-1 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Mobil DTE 24 Light Hydraulic Oil

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Pet. Hydrocarbons and additives 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Nitrogen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Nitrogen

EHS* ☐ Yes 208

CAS# 209
7440-32-1

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 230.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
230.0	230.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Opaque Screen Ink

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class II (1.1 II)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.25 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.25	0.25		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 60.0 226	Titanium dioxide 227	☐ Yes 228	13463-67-7 229
2 20.0 230	Stoddard solvent 231	☐ Yes 232	8052-41-3 233
3 10.0 234	Talc 235	☐ Yes 236	14807-96-6 237
4 5.0 238	Naphtha (petroleum), heavy aromatic 239	☐ Yes 240	64742-94-5 241
5 5.0 242	Petroleum naphtha, light aromatic 243	☐ Yes 244	64742-95-6 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Oxygen

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Oxygen

EHS* ☐ Yes 208

CAS# 209
7782-44-7

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Oxidizer, gas (4.4)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 251.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☒ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
401.0	401.0		

UNITS* (Check one item only) ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H4

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	10.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H9

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) 216
☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	20.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
Propane

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Propane (14 oz consumer cylinders)

EHS* ☐ Yes 208

CAS# 209
74-98-6

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Compressed Gas (CGas), Flammable Gas (3.2)

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS 214

LARGEST CONTAINER 0.875 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
3.5	3.5	0.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☒ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
RE-180 Thinner

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid , Class III-A (1.1 III-A)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	1.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	2-Butoxyethanol 227	☐ Yes 228	111-76-2 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Spilfyter Kolorsafe Dry Base Neutralizer

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 2.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
4.0	4.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Citric Acid, anhydrous 227	☐ Yes 228	77-92-9 229
2	230	Thymol Blue 231	☐ Yes 232	76-61-9 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Stratasys P400SC Water Soluable Concentrate

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 2.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☒ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
12.0	24.0		

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	25.0 226	Sodium Hydroxide 227	☐ Yes 228	1310-73-2 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H6

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Tapmatic #1 Cutting Fluid

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
1.0	2.0		

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☒ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	90.0 (226)	Trichloroethylene (227)	☐ Yes (228)	79-01-6 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H7

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Tergitol cleaning solution

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 0.0264 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0264	0.0264	0.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	α-(4-Nonylphenyl)-ω-hydroxy-poly(oxy-1,2-et 227	☐ Yes 228	127087-87-0 229
2	5.0 230	Polyethylene glycol 231	☐ Yes 232	25322-68-3 233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
Warehouse

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: CRT Monitors

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
30.0	150.0	150.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Computer CRT monitors

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Various 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
Warehouse

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Electronic devices (excludes CRT monitors)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 50.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
35.0	300.0	300.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER computers, printers, etc. 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	226	Various 227	☐ Yes 228	229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Spent batteries for recycling (non-lithium or auto)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 3.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	54.0	100.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☒ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☐ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	40.0 226	Manganese Dioxide 227	☐ Yes 228	1313-13-9 229
2	25.0 230	Zinc 231	☐ Yes 232	7440-66-6 233
3	10.0 234	Potassium Hydroxide (35%) 235	☐ Yes 236	1310-58-3 237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
U-Waste: Spent fluorescent lamps for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 20.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	100.0	100.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 365.0 222

STORAGE CONTAINER 223
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☒ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	0.01 (226)	Mercury (227)	☐ Yes (228)	7439-97-6 (229)
2	(230)	(231)	☐ Yes (232)	(233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
UWaste: Spent Sealed Gell Cell batteries for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR), Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 10.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
20.0	120.0	120.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 60.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Sealed gell cell batteries
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	65.0 (226)	Inorganic Lead/Lead Compounds (227)	☐ Yes (228)	7439-92-1 (229)
2	0.5 (230)	Tin (231)	☐ Yes (232)	7440-31-5 (233)
3	14.0 (234)	Dilute sulfuric acid (235)	☐ Yes (236)	7664-93-9 (237)
4	0.1 (238)	Calcium (239)	☐ Yes (240)	7440-70-2 (241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

DRAFT

UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H5

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1 F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
UWaste: Spent sealed lithium battery packs for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Toxic (Tox)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☒ a. SOLID ☐ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 4.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
10.0	50.0	50.0	

UNITS* (Check one item only) ☐ a. GALLONS ☐ b. CUBIC FEET ☒ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 60.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER Sealed batteries in mfgr's 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 24.0 226	Iron disulfide 227	☐ Yes 228	1309-36-0 229
2 5.0 230	Lithium or Lithium alloy 231	☐ Yes 232	7439-93-2 233
3 0.5 234	Lithium Iodide 235	☐ Yes 236	10377-51-2 237
4 5.0 238	1,3 Dioxolane 239	☐ Yes 240	646-06-0 241
5 4.0 242	Graphite 243	☐ Yes 244	7782-42-5 245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Waste: Motor Oil from generator (Recycled)

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Combustible Liquid, Class III-B, Irritant (Irr)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 1.0 215

FED HAZARD CATEGORIES (Check all that apply) ☒ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0	1.0	2.0	221

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 1.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☒ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☐ r. OTHER
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	100.0 226	Highly refined mineral oil (C15-C50) 227	☐ Yes 228	mixture 229
2	230	231	☐ Yes 232	233
3	234	235	☐ Yes 236	237
4	238	239	☐ Yes 240	241
5	242	243	☐ Yes 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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UNIFIED PROGRAM CONSOLIDATED FORM
HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

(one page per material per building or area)

☐ ADD ☐ DELETE ☐ REVISE 200 | Page ___ of ___

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
PEERLESS LIGHTING

CHEMICAL LOCATION 201
H1, H6, H8, H10

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202
☐ YES

FACILITY ID # 1: F A 0 0 0 0 5 6 1

MAP# (optional) 203

GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205

TRADE SECRET ☐ Yes 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
Waste: Spent lead-acid batteries from equipment for recycling

EHS* ☐ Yes 208

CAS# 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Corrosive (CORR)

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☐ b. MIXTURE ☒ c. WASTE 211

RADIOACTIVE ☐ Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 52.0 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☒ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
0.0	52.0	25.0	

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds.

DAYS ON SITE: 1.0 222

STORAGE CONTAINER
☐ a. ABOVE GROUND TANK ☐ b. UNDERGROUND TANK ☐ c. TANK INSIDE BUILDING ☐ d. STEEL DRUM
☐ e. PLASTIC/NONMETALLIC DRUM ☐ f. CAN ☐ g. CARBOY ☐ h. SILO
☐ i. FIBER DRUM ☐ j. BAG ☐ k. BOX ☐ l. CYLINDER
☐ m. GLASS BOTTLE ☐ n. PLASTIC BOTTLE ☐ o. TOTE BIN ☐ p. TANK WAGON
☐ q. RAIL CAR ☒ r. OTHER
Spent lead-acid batteries
223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

	%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	60.0 (226)	Lead (227)	☐ Yes (228)	7439-92-1 (229)
2	30.0 (230)	Sulfuric Acid (231)	☐ Yes (232)	7664-93-9 (233)
3	(234)	(235)	☐ Yes (236)	(237)
4	(238)	(239)	☐ Yes (240)	(241)
5	(242)	(243)	☐ Yes (244)	(245)

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

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CALIFORNIA ENVIRONMENTAL REPORTING SYSTEM (CERS)

CONSOLIDATED EMERGENCY RESPONSE / CONTINGENCY PLAN

Prior to completing this Plan, please refer to the INSTRUCTIONS FOR COMPLETING A CONSOLIDATED CONTINGENCY PLAN

A. FACILITY IDENTIFICATION AND OPERATIONS OVERVIEW

FACILITY ID # 1.	CERS ID A1.	DATE OF PLAN PREPARATION/REVISION A2.
FA0000561		02/06/2014

BUSINESS NAME *(Same as Facility Name or DBA - Doing Business As)* 3.
PEERLESS LIGHTING

BUSINESS SITE ADDRESS 103.
2246 FIFTH ST

BUSINESS SITE CITY 104.		ZIP CODE 105.
BERKELEY	CA	94710

TYPE OF BUSINESS (e.g., Painting Contractor) A3.	INCIDENTAL OPERATIONS (e.g., Fleet Maintenance) A4.
Commercial Lighting Firm - Administrative / R&D facility	Model shop / prototyping

THIS PLAN COVERS CHEMICAL SPILLS, FIRES, AND EARTHQUAKES INVOLVING: (Check all that apply) A5.
☒ 1. HAZARDOUS MATERIALS; ☒ 2. HAZARDOUS WASTES

B. INTERNAL RESPONSE

INTERNAL FACILITY EMERGENCY RESPONSE WILL OCCUR VIA: (Check all that apply) B1.
☒ 1. CALLING PUBLIC EMERGENCY RESPONDERS (i.e., 9-1-1)
☒ 2. CALLING HAZARDOUS WASTE CONTRACTOR
☐ 3. ACTIVATING IN-HOUSE EMERGENCY RESPONSE TEAM

C. EMERGENCY COMMUNICATIONS, PHONE NUMBERS AND NOTIFICATIONS

Whenever there is an imminent or actual emergency situation such as an explosion, fire, or release, the Emergency Coordinator (or his/her designee when the Emergency Coordinator is on call) shall:
1. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
2. Notify appropriate local authorities (i.e., call 9-1-1).
3. Notify the California Emergency Management Agency at (800) 852-7550.

Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall notify the California Department of Toxic Substances Control (DTSC), the local Unified Program Agency (UPA), and the local fire department's hazardous materials program that the facility is in compliance with requirements to:
1. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from an explosion, fire, or release at the facility; and
2. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.

INTERNAL FACILITY EMERGENCY COMMUNICATIONS OR ALARM NOTIFICATION WILL OCCUR VIA: (Check all that apply) C1.

☒ 1. VERBAL WARNINGS;	☒ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☐ 3. TELEPHONE;
☐ 4. PAGERS;	☒ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

NOTIFICATIONS TO NEIGHBORING FACILITIES THAT MAY BE AFFECTED BY AN OFF-SITE RELEASE WILL OCCUR BY: (Check all that apply) C2.

☒ 1. VERBAL WARNINGS;	☐ 2. PUBLIC ADDRESS OR INTERCOM SYSTEM;	☒ 3. TELEPHONE;
☐ 4. PAGERS;	☐ 5. ALARM SYSTEM;	☐ 6. PORTABLE RADIO

EMERGENCY RESPONSE PHONE NUMBERS:

AMBULANCE, FIRE, POLICE AND CHP	9-1-1
CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL/EMA)	(800) 852-7550
NATIONAL RESPONSE CENTER (NRC)	(800) 424-8802
POISON CONTROL CENTER	(800) 222-1222
LOCAL UNIFIED PROGRAM AGENCY (UPA/CUPA) C3.	(510) 981-7460 City of Berkeley Toxic Mgt. Div
OTHER (Specify): C4. Emergency Response Coordinator	Gary Owens 510-482-5029/5 C5.

NEAREST MEDICAL FACILITY / HOSPITAL NAME: Alta Bates Hospital C6. — 510 204-4509 C7.

AGENCY NOTIFICATION PHONE NUMBERS:

CALIFORNIA DEPT. OF TOXIC SUBSTANCES CONTROL (DTSC)	(916) 255-3545
REGIONAL WATER QUALITY CONTROL BOARD	(510) 622-2300 SF Bay Regio C8.
U.S. ENVIRONMENTAL PROTECTION AGENCY (US EPA)	(800) 300-2193
CALIFORNIA DEPT OF FISH AND WILDLIFE (CDFW)	(916) 358-2900
U.S. COAST GUARD	(202) 267-2180
CAL/OSHA	(916) 263-2800
STATE FIRE MARSHAL	(916) 445-8200
OTHER (Specify): C9.	C10.
OTHER (Specify): C11.	C12.

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D. EMERGENCY CONTAINMENT AND CLEANUP PROCEDURES

SPILL PREVENTION, CONTAINMENT, AND CLEANUP PROCEDURES: (Check all boxes that apply to indicate your procedures for containing spills, releases, fires or explosions; and. preventing and mitigating associated harm to persons, property, and the environment.)

D1.

- ☒ 1. MONITOR FOR LEAKS, RUPTURES, PRESSURE BUILD-UP, ETC.;
- ☐ 2. PROVIDE STRUCTURAL PHYSICAL BARRIERS (e.g., Portable spill containment walls);
- ☒ 3. PROVIDE ABSORBENT PHYSICAL BARRIERS (e.g., Pads, pigs, pillows);
- ☒ 4. COVER OR BLOCK FLOOR AND/ OR STORM DRAINS;
- ☐ 5. BUILT-IN BERM IN WORK / STORAGE AREA;
- ☒ 6. AUTOMATIC FIRE SUPPRESSION SYSTEM;
- ☒ 7. ELIMINATE SOURCES OF IGNITION FOR FLAMMABLE HAZARDS (e.g. Flammable liquids, Propane);
- ☒ 8. STOP PROCESSES AND/OR OPERATIONS;
- ☐ 9. AUTOMATIC / ELECTRONIC EQUIPMENT SHUT-OFF SYSTEM;
- ☒ 10. SHUT-OFF WATER, GAS, ELECTRICAL UTILITIES AS APPROPRIATE;
- ☒ 11. CALL 9-1-1 FOR PUBLIC EMERGENCY RESPONDER ASSISTANCE / MEDICAL AID;
- ☒ 12. NOTIFY AND EVACUATE PERSONS IN ALL THREATENED AREAS;
- ☒ 13. ACCOUNT FOR EVACUATED PERSONS IMMEDIATELY AFTER EVACUATION CALL;
- ☒ 14. PROVIDE PROTECTIVE EQUIPMENT FOR ON-SITE RESPONSE TEAM;
- ☒ 15. REMOVE OR ISOLATE CONTAINERS / AREA AS APPROPRIATE;
- ☒ 16. HIRE LICENSED HAZARDOUS WASTE CONTRACTOR;
- ☒ 17. USE ABSORBENT MATERIAL FOR SPILLS WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☒ 18. SUCTION USING SHOP VACUUM WITH SUBSEQUENT PROPER LABELING, STORAGE, AND HAZARDOUS WASTE DISPOSAL AS APPROPRIATE;
- ☒ 19. WASH / DECONTAMINATE EQUIPMENT W/ CONTAINMENT and DISPOSAL OF EFFLUENT / RINSATE AS HAZARDOUS WASTE;
- ☒ 20. PROVIDE SAFE TEMPORARY STORAGE OF EMERGENCY-GENERATED WASTES;
- ☐ 21. OTHER (Specify):

D2.

E. FACILITY EVACUATION

THE FOLLOWING ALARM SIGNAL(S) WILL BE USED TO BEGIN EVACUATION OF THE FACILITY (CHECK ALL THAT APPLY): E1.

- ☒ 1. BELLS;
- ☐ 2. HORNS/SIRENS;
- ☒ 3. VERBAL (i.e., SHOUTING);
- ☒ 4. OTHER (Specify): Public address system

E2.

THE FOLLOWING LOCATION(S) IS/ARE EVACUEE EMERGENCY ASSEMBLY AREA(S) (i.e., Front parking lot, specific street corner, etc.) E3.

Public sidewalk on east side of 5th Street across from parking lot

Note: The Emergency Coordinator must account for all on site employees and/or site visitors after evacuation.

☒ EVACUATION ROUTE MAP(S) POSTED AS REQUIRED E4.

Note: The map(s) must show primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas, and must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

F. ARRANGEMENTS FOR EMERGENCY SERVICES

Explanation of Requirement: Advance arrangements with local fire and police departments, hospitals, and/or emergency services contractors should be made as appropriate for your facility. You may determine that such arrangements are not necessary.

ADVANCE ARRANGEMENTS FOR LOCAL EMERGENCY SERVICES (Check one of the following) F1.

- ☒ 1. HAVE BEEN DETERMINED NOT NECESSARY; *or*
- ☐ 2. THE FOLLOWING ARRANGEMENTS HAVE BEEN MADE (Specify):

F2.

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G. EMERGENCY EQUIPMENT

Check all boxes that apply to list emergency response equipment available at the facility and identify the location(s) where the equipment is kept and the equipment's capability, if applicable. [e.g., ☒ CHEMICAL PROTECTIVE GLOVES | Spill response kit | One time use, Oil & solvent resistant only.]

TYPE	EQUIPMENT AVAILABLE G1.	LOCATION	CAPABILITY *(If applicable)*
Safety and First Aid	1. ☐ CHEMICAL PROTECTIVE SUITS, APRONS, OR VESTS	G2.	G3.
	2. ☒ CHEMICAL PROTECTIVE GLOVES	G4. model shop; warehouse	G5.
	3. ☐ CHEMICAL PROTECTIVE BOOTS	G6.	G7.
	4. ☒ SAFETY GLASSES / GOGGLES / SHIELDS	G8. model shop; warehouse	G9.
	5. ☐ HARD HATS	G10.	G11.
	6. ☐ CARTRIDGE RESPIRATORS	G12.	G13.
	7. ☐ SELF-CONTAINED BREATHING APPARATUS (SCBA)	G14.	G15.
	8. ☒ FIRST AID KITS / STATIONS	G16. Model shop; warehouse; office. See ma	G17.
	9. ☐ PLUMBED EYEWASH FOUNTAIN / SHOWER	G18.	G19.
	10. ☒ PORTABLE EYEWASH KITS	G20. Model Shop; warehouse	G21.
	11. ☐ OTHER	G22.	G23.
	12. ☐ OTHER	G24.	G25.
Fire Fighting	13. ☒ PORTABLE FIRE EXTINGUISHERS	G26. Throughout facility. See map.	G27.
	14. ☒ FIXED FIRE SYSTEMS / SPRINKLERS / FIRE HOSES	G28. Throughout facility. All buildings are fully	G29.
	15. ☐ FIRE ALARM BOXES OR STATIONS	G30.	G31.
	16. ☐ OTHER	G32.	G33.
Spill Control and Clean-Up	17. ☒ ALL-IN-ONE SPILL KIT	G34. warehouse	G35.
	18. ☒ ABSORBENT MATERIAL	G36. warehouse	G37.
	19. ☒ CONTAINER FOR USED ABSORBENT	G38. warehouse	G39.
	20. ☐ BERMING / DIKING EQUIPMENT	G40.	G41.
	21. ☒ BROOM	G42. Janitor closet	G43.
	22. ☐ SHOVEL	G44.	G45.
	23. ☒ SHOP VAC	G46. Model shop	G47.
	24. ☐ EXHAUST HOOD	G48.	G49.
	25. ☐ EMERGENCY SUMP / HOLDING TANK	G50.	G51.
	26. ☐ CHEMICAL NEUTRALIZERS	G52.	G53.
	27. ☐ GAS CYLINDER LEAK REPAIR KIT	G54.	G55.
	28. ☐ SPILL OVERPACK DRUMS	G56.	G57.
	29. ☐ OTHER	G58.	G59.
Communi-cations and Alarm Systems	30. ☒ TELEPHONES (Includes cellular)	G60. throughout facility	G61.
	31. ☒ INTERCOM / PA SYSTEM	G62. Offices/model shop	G63.
	32. ☐ PORTABLE RADIOS	G64.	G65.
	33. ☐ AUTOMATIC ALARM CHEMICAL MONITORING EQUIPMENT	G66.	G67.
Other	34. ☐ OTHER	G68.	G69.
	35. ☐ OTHER	G70.	G71.

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H. EARTHQUAKE VULNERABILITY

Identify areas of the facility that are vulnerable to hazardous materials releases / spills due to earthquake-related motion. These areas require immediate isolation and inspection.

VULNERABLE AREAS: (Check all that apply)	H1.	LOCATIONS (e.g., shop, outdoor shed, forensic lab)	
☒ 1. HAZARDOUS MATERIALS / WASTE STORAGE AREA		model shop; warehouse	H2.
☐ 2. PROCESS LINES / PIPING			H3.
☐ 3. LABORATORY			H4.
☐ 4. WASTE TREATMENT AREA			H5.

Identify mechanical systems vulnerable to releases / spills due to earthquake-related motion. These systems require immediate isolation and inspection.

VULNERABLE SYSTEMS: (Check all that apply)	H6.	LOCATIONS	
☒ 1. SHELVES, CABINETS AND RACKS		model shop; warehouse	H7.
☐ 2. TANKS (EMERGENCY SHUTOFF)			H8.
☒ 3. PORTABLE GAS CYLINDERS		warehouse	H9.
☒ 4. EMERGENCY SHUTOFF AND/OR UTILITY VALVES		office; warehouse	H10.
☒ 5. SPRINKLER SYSTEMS		office; warehouse	H11.
☐ 6. STATIONARY PRESSURIZED CONTAINERS (e.g., Propane dispensing tank)			H12.

I. EMPLOYEE TRAINING

Explanation of Requirement: Employee training is required for all employees handling hazardous materials and hazardous wastes in day-to-day or clean-up operations including volunteers and/or contractors. Training must be:

- Provided within 6 months for new hires;
- Amended as necessary prior to change in process or work assignment;
- Given upon modification to the Emergency Response / Contingency Plan, and updated/refreshed annually for all employees.

Required content includes all of the following:

- Material Safety Data Sheets;
- Hazard communication related to health and safety;
- Methods for safe handling of hazardous substances;
- Fire hazards of materials / processes;
- Conditions likely to worsen emergencies;
- Coordination of emergency response;
- Notification procedures;
- Applicable laws and regulations;
- Communication and alarm systems;
- Personal protective equipment;
- Use of emergency response equipment (e.g. Fire extinguishers, respirators, etc.);
- Decontamination procedures;
- Evacuation procedures;
- Control and containment procedures;
- UST monitoring system equipment and procedures (if applicable).

INDICATE HOW EMPLOYEE TRAINING PROGRAM IS ADMINISTERED (Check all that apply) I1.

☒ 1. FORMAL CLASSROOM; ☐ 2. VIDEOS; ☐ 3. SAFETY / TAILGATE MEETINGS;

☒ 4. STUDY GUIDES / MANUALS (Specify): Environmental Awareness Universal Waste Hazardous Waste Management Personal Protecti I2.

☐ 5. OTHER (Specify): I3.

☐ 6. NOT APPLICABLE BECAUSE FACILITY HAS NO EMPLOYEES

Large Quantity Generator (LQG) Training Records: Large quantity hazardous waste generators (i.e., who generate more than 270 gallons/1,000 kilograms of hazardous waste per month) must retain written documentation of employee hazardous waste management training sessions which includes:

- A written outline/agenda of the type and amount of both introductory and continuing training that will be given to persons filling each job position having responsibility for the management of hazardous waste (e.g., labeling, manifesting, compliance with accumulation time limits, etc.).
- The name, job title, and date of training for each hazardous waste management training session given to an employee filling such a job position; and
- A written job description for each of the above job positions that describes job duties and the skills, education, or other qualifications required of personnel assigned to the position.
- Current employee training records must be retained until closure of the facility.
- Former employee training records must be retained at least three years after termination of employment.

J. LIST OF ATTACHMENTS

(Check one of the following) J1.

☐ 1. NO ATTACHMENTS ARE REQUIRED; *or*

☐ 2. THE FOLLOWING DOCUMENTS ARE ATTACHED: J2.

K. SIGNATURE / CERTIFICATION

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete, and that a copy is available on site.

SIGNATURE OF OWNER/OPERATOR	DATE SIGNED K1.
Gary Owens	02/06/2014
NAME OF SIGNER (print) K2.	TITLE OF SIGNER K3.
	Director, Operations

DRAFT

CITY OF BERKELEY
Department of ...ning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

For Dept Use Only
Entered: 7/19/15
by: GT
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 8-17-15 Time: 1000 Page: 1 of 2

Facility Name: Peerless Lighting

Address: 2246 Fifth St. Phone: 845-2760

Owner/Operator Name: Acuity Brands Lighting

Facility Representative(s): Chris Cooper

Permitted CUPA Activities: ☒ HMBP ☐HW (☐LQG ☐SQG ☐CESQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP
Inspections Conducted: ☒HMBP ☐HW (☐RCRA LQG) ☐UW ☐TP (TIER: _____) ☐UST ☐APSA ☐CalARP ☒SW
Unannounced: ☐ Yes ☒ No
Purpose of Inspection: ☒Routine ☐Follow-up Inspection ☐RTC QA ☐Closure ☐Permit Screen ☐Other_____
Consent Granted for: ☒Inspection ☒Photos (include log) ☐Samples; Consent Granted By: C. Cooper

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
		MET W TODAY TO INSPECT FOR COMPLIANCE WITH THE HMBP AND STORMWATER PROGRAMS.
	HM OBS 1	OBSERVED LOCATIONS, AMTS, E.R. EQUIPMENT TO BE CONSISTENT WITH 2015 HMBP REPORTING. TRAINING RECORDS MAINTAINED AND CURRENT.
	HW OBS 1	FACILITY DOES NOT GENERATE HW. UNIVERSAL WASTE MANAGEMENT, LABELING, AND ACCUMULATION TIMES ARE IN COMPLIANCE.
	HM OBS 2	FACILITY IS MAINLY R&D, NOT MANUFACTURING. OBSERVED VOLUMES OF HM'S APPEAR TO BE BELOW REPORTING THRESHOLDS REQUIRED BY THE STATE OR CITY OF BERKELEY (<55g + <200 CF) POSSIBLE CANDIDATE TO BE EXEMPT FROM CUPA.
	STORM OBS 1	VERY LOW POTENTIAL FOR NON-SW DISCHARGE.
		NO CUPA OR STORMWATER VIOLATIONS OBSERVED.
	NOTE:	RECEIVED CLOSURE APPLICATION FOR HM STORAGE FACILITIES.

Note: The facility is subject to re-inspection at any time (re-inspection fees may apply). STATEMENTS CONFIRMED BY INSPECTION TODAY. GF.

☐ CUPA violations cited on page(s) NONE shall be corrected within ____ days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: Cynthia Cooper Title: Safety Coordinator
Inspector's Signature: _____ Inspector's Name: Geoff Fiedler

DRAFT

Alameda Countywide
Clean Water Program
Standard Stormwater Facility Inspection Report Form

ENTERED 1-19-15

Municipality: BERKELEY
Date: 8-17-15 Time: 1000
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☒ Routine Inspection ☐ Response to Complaint ☐ Follow-up | Follow-up Inspection Due: N. A.

NAME OF FACILITY: PEGRLESS LIGHTING
SITE ADDRESS: 2246 FIFTH ST.

CONTACT NAME: CHRIS COOPER
PHONE: 845-2760
BUSINESS TYPE/ACTIVITY: COMMERCIAL LIGHTING MFR.
SIC: 3646
☐ High Priority Facility

Is the property owner different than the facility owner? ☒ yes ☐ no If yes, complete the following:
NAME PHONE
MAILING ADDRESS

Is the facility covered under any other programs or permits? (Check all that apply.)
☐ None ☐ Sanitary sewer
☐ Air quality ☒ Hazmat business plan ☐ Underground storage tanks ☐ Aboveground storage tanks
☐ Fire department(hazmat storage) ☐ Hazmat waste generator ☐ Retail food facility ☐ Other

Is the facility covered under a storm water permit? ☒ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented
NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential PTNL	Effectiveness BMP	Actual Discharge NSW	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
A. Outdoor Process/Manufacturing Areas	✓				☐
B. Outdoor Material Storage Areas	✓				☐
C. Outdoor Waste Storage/Disposal Areas		1	0		☐ DUMPSTER/RECYCLABLES CLOSED/LOCKED.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				☐
E. Outdoor Parking Areas and Access Roads		1	0		☐ WELL MAINTAINED. NO STAINING, LIGT SPILLS OR TRASH.
F. Outdoor Wash Areas	✓				☐
G. Rooftop Equipment		1	0		☐ NOTED ~~ARE~~ DISCHARGE OF WATER AT DOWNSPOUTS ON BANCROFT WAY.
H. Outdoor Drainage from Indoor Areas		1	0		☐ NO SIGNIFICANT POTENTIAL. MANLY AGGREGATE/LOW VOLUME LIQUIDS.
I. Other (describe):	✓				☐

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☒ Maintenance required in storm drain system ☐ yes ☒ no

VERY LOW POTENTIAL FOR NON-STORMWATER DISCHARGE. LOW VOLUME LIQUIDS, APPROX LESS THAN 10 GALS, STORED IN CABINETS, INDOORS.

NOTE: WATER OBSERVED IN STREET AND DOWNSPOUTS ON BANCROFT WAY. RECOMMEND IDENTIFYING SOURCE. DISCHARGE OF UNTREATED CONDENSATE TO THE STORMDRAIN SYSTEM IS ILLEGAL.

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☒ 3; Third | ☐ Referred to; Details:

ENFORCEMENT: ☒ None ☐ Verbal Notice ☐ Warning Notice ☐ Administrative Action ☐ Administrative Action w/ Penalty &/or Cost Recovery ☐ Legal Action

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Facility Representative: Christine L Cooper Inspector: G. FIGUEROA

2/2

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Peerless Air Quality Modeling Meeting

NABR - FYI

Date: May 29, 2012
Time: 4:00 – 4:30
Location: LSA Berkeley Office/Video Conference

Meeting Agenda

1. Dispersion Modeling Overview

- ISCST3 Air Dispersion Model
- Model uses site specific meteorological data, terrain data, and emissions data to determine pollutant concentrations at a specific location
- Health Risk is determined based on the pollutant concentrations using calculations and methodology from the EPA.

2. Peerless Model Inputs

- Interstate 80 (I-80)
- Railway Line (LSA used 2009 EPA Train Emissions Data)
- Amtrak Station (LSA used 2009 EPA Train Emissions Data)
- On-Site Truck Idling at Project Loading Areas
- Emission Sources in the Project Vicinity

3. BAAQMD Standards

BAAQMD Significance Threshold Levels

Risks and Hazards Single Source Impacts (New Source / Receptor)	
Cancer Risk	10 in one million
Acute / Chronic Hazard Indices	1.0
$PM_{2.5}$	0.3 ug/m^3
Risks and Hazards Cumulative Impact (New Source / Receptor)	
Cancer Risk	100 in one million
Acute / Chronic Hazard Indices	10.0
$PM_{2.5}$	0.8 ug/m^3

Source: BAAQMD, 2011. *Air Quality CEQA Guidelines.* May

4. Model Results

Model results shown in the following tables indicate the project would not exceed the recommended BAAQMD Thresholds at the Project or Cumulative level.

ASSUMES PM 2.5 IS
. 100% DIESEL EXHAUST
. ONE BLOCK FROM RR TRACKS

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Cancer (In One Million)							
Height	I-80	Train Tracks	Davlin Coatings	Pacific Steel*	Truck Idling	Amtrak Idling	Total
0 Feet	2.11	0.027	As Per BAAQMD Plant was closed Feb. 9, 2011	1.50	0.260	0.023	3.92
6 Feet	2.11	0.027			0.259	0.023	3.92
20 Feet	2.07	0.025			0.250	0.023	3.87
30 Feet	2.03	0.023			0.240	0.023	3.81
40 Feet	1.96	0.020			0.225	0.022	3.73
50 Feet	1.89	0.018			0.208	0.022	3.63

*Risk based on Impact to 651 Addison - Health Risk Assessment

$PM_{2.5}$							
Height	I-80	Train Tracks	Davlin Coatings	Pacific Steel	Truck Idling	Amtrak Idling	Total
0 Feet	0.03	0.0003	As Per BAAQMD Plant was closed Feb. 9, 2011	NA	0.011	0.0003	0.04
6 Feet	0.03	0.0003			0.011	0.0003	0.04
20 Feet	0.03	0.0003			0.010	0.0003	0.04
30 Feet	0.03	0.0003			0.010	0.0003	0.04
40 Feet	0.03	0.0002			0.009	0.0003	0.04
50 Feet	0.03	0.0002			0.008	0.0002	0.03

Chronic Health Index							
Height	I-80	Train Tracks	Davlin Coatings	Pacific Steel*	Truck Idling	Amtrak Idling	Total
0 Feet	0.005	0.00006	As Per BAAQMD Plant was closed Feb. 9, 2011	0.11	0.002	0.0001	0.117
6 Feet	0.005	0.00006			0.002	0.0001	0.117
20 Feet	0.005	0.00006			0.002	0.0001	0.117
30 Feet	0.005	0.00005			0.002	0.0001	0.117
40 Feet	0.004	0.00005			0.002	0.0001	0.117
50 Feet	0.004	0.00004			0.002	0.00005	0.116

*Risk based on Impact to 651 Addison - Health Risk Assessment
Chronic HI within 200 meters of Pacific Steel

Acute Health Index							
Height	I-80	Train Tracks	Davlin Coatings	Pacific Steel	Truck Idling	Amtrak Idling	Total
0 Feet	0.0004	0.00E+00	As Per BAAQMD Plant was closed Feb. 9, 2011	NA	0.0E+00	0.0E+00	0.0004
6 Feet	0.0004	0.00E+00			0.0E+00	0.0E+00	0.0004
20 Feet	0.0004	0.00E+00			0.0E+00	0.0E+00	0.0004
30 Feet	0.0003	0.00E+00			0.0E+00	0.0E+00	0.0003
40 Feet	0.0003	0.00E+00			0.0E+00	0.0E+00	0.0003
50 Feet	0.0003	0.00E+00			0.0E+00	0.0E+00	0.0003

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Onsite Emission Units

*No Hourly Adjustments were considered. All hours assumed to equal.

# Trucks per Day (ea. Pt.)	100	
Day per Year (ea. Pt.)	350	
Time Idling (ea. Truck.)	5 minutes as Per ARB's Idling Reg	
PM10 EF (g/Hr.)	0.86	ARB's Online Idling EF



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Model Inputs:

Model Used: ISCST3
Elevated Terrain: From Web Lakes'
Building Downwash: Yes
Receptor Heights: 0, 6, 20, 30, 40, and 50 feet

Meteorological Data:

Station: UC Richmond
Years: 2003 - 2005

Offsite Emission Units:*

*No Hourly Adjustments were considered. All hours assumed to equal.

Roadway Name: I-80
Lanes: 10
Lane Distance (ea.): 1719.49 feet (524.1 meters)
Annual Average Daily Trips: 265,000 (CalTrans Data)
Emission Factors: EMFAC2011 (ARB Online)
EMFAC Speeds: All Speeds
% Trucks: 4.79 (CalTrans Data)
Days / Year: 365

Railway:

of Tracks: 3
Track Distance (ea.): 1190.62 feet (362.9 meters)
Ave. Horsepower: 1064 BHP
Train Speed: 15 MPH
Train Types: Large Line Haul
Passenger/ Commuter
Emission Factors: EPA April 2009
of Locomotives Per Year: 114 (2012) - 240 (2080)

AmTrack Station:

Idle Time	30	Minutes
EF g/hr	47.94	
Max Loc/Yr	60	g/sec
PM10 g/Yr	1438.2	4.56E-05



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5. Explanation of Variance with other West Berkeley Studies

- **700 University Ave EIR**
  - Health Risk Assessment conducted in 2004
  - Used an on-site air sample to determine $PM_{2.5}$ concentration (no modeling)
    - -- Small sample volume
    - -- Collection point on-top of restaurant
    - -- Construction was occurring at time of sample
  - Assumed 100 percent of $PM_{2.5}$ would be diesel exhaust
  - Applied what is now the single source threshold for cumulative impacts

- **651 Addison EIR**
  - Prepared in 2008
  - Freeway emissions evaluated using EMFAC2007 (current version is EMFAC2011)
  - Modeling doesn't account for all reductions in locomotive emissions that are achieved through 2008 EPA regulations. EPA released new locomotive emission factors in 2009 which are approximately 50 percent lower than assumed in the 2008 study.
  - 651 Addison site is located approximately 100 feet from train station
  - Peerless residential sites are located approximately 1,000 feet from train station

DRAFT

Planning and Development Department
Toxics Management Division

May 12, 2008

Re: Hazardous Materials Storage and Hazardous Waste Generation Reporting Requirements

Dear Mr. Osborn:

Toxics Management Division (TMD) has determined that Wine.com is storing or using hazardous materials in quantities that require reporting under fire and hazardous materials regulations. My inspection report dated April 20, 2008 required completion and submittal of the Hazardous Materials Business Plan (HMBP) by April 20. As of today, the TMD has not received the HMBP.

This letter serves as a notice of violation and requires that you submit the forms to TMD by **May 26, 2008**. If TMD does not receive your update by **May 26, 2008**, you will be fined a late filing fee as laid out in our fee schedule. In addition, non-compliance with hazardous materials reporting requirements of Section 25514 (a), Chapter 6.95 of Division 20 of the California Health and Safety Code is a violation and can result in fines of **$2,000 fine per day**.

Please call me at (510) 981-7469 if you have any questions about completing the HMBP or feel that you have received this letter in error.

Sincerely,

Carrie Estadt

Carrie Estadt
Hazardous Material Specialist II

Attachment: April 20, 2008 Inspection Form

DRAFT

2118 Milvia Street, Suite 300, Berkeley, California 94704 TEL: (510) 981-7460 TDD: (510) 981-7474 FAX: (510) 981-7470

Planning and Development Department
Toxics Management Division

INSPECTION FORM

Facility Name: Wine.com
Address: 2220 Fourth Street
Phone: 510-704-8007

Date: 3/20/08 Page: 1 of 1
Contact: Jim Osborn

Onsite this date to determine if permit is required for hazardous materials storage or hazardous waste generation.

Met with Jim Osborn and they have storage of propane above permit thresholds. Reporting forms required.

Fluorescent bulbs taken care of by Peerless (landlord). Provided Universal Waste flyer.

Submit HMBP to Toxics Management by 4/20/08.

Facility Contact Signature: Jim Osborn
Title: Manager

Inspector: Carlie Ettadt
Hazardous Materials Specialist
Reinspect Date: ____

ENTERED 3/20/08 CAE

2118 Milvia Street, Suite 300, Berkeley, California 94704 TEL: (510) 981-7460 TDD: (510) 981-7474 FAX: (510) 981-7470

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Non-Waste Hazardous Materials Inventory Spreadsheet

206 TRADE SECRET ☐ Yes ☐ No | 202 CHEMICAL LOCATION CONFIDENTIAL ☐ Yes ☐ No | If EPCRA, please sign here:

3 Business Name: | Business Address: | 200 Add ☐ Revise ☐ Delete ☐

201, 203, 204 Storage Location, Map #	205, 207 Chemical & Common Name	226, 227 Chemical Names of Hazardous Components and % Weight	209, 229 CAS # for each component	208, 228 EHS	210 Hazard Classes (code below)	214, 211, 212 Physical State and Type	218, 217, 215 Quantity Stored: Max Daily	Average Daily	Largest Container	221 Units	216 SARA Class	224, 225 Pressure & Temp
	Propane	☒ Same as first column	74-98-6	☐ Yes ☐ No	FG	☐ solid ☐ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	8 * 34.1 = 272.8 / * 8 = 2,182	6 / 222 Days on site ☒ 365	8 gallons / 223 Storage Container	☐ lbs ☐ gal ☒ cu. ft. ☐ µ curie ☐ other	☒ Fire ☒ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☒ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryoge
	Tripropylene Glycol Methyl Ether	☒ Same as first column	025498-49-1	☐ Yes ☐ No		☐ solid ☒ liquid ☒ gas ☐ pure ☐ mixture ☐ radioactive	250 gallons	150 gallons / 222 Days on site ☐ 365	250 gallons / 223 Storage Container	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryoge
	Polymeric Diphenylmethane Diisocyanate	☒ Same as first column	9016-87-9	☐ Yes ☐ No		☐ solid ☒ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	250 gallons	100 gallons / 222 Days on site ☐ 365	250 gallons / 223 Storage Container	☐ lbs ☒ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☒ Ambient ☐ > Amb. ☐ < Amb. Temp ☒ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryoge
		☐ Same as first column		☐ Yes ☐ No		☐ solid ☐ liquid ☐ gas ☐ pure ☐ mixture ☐ radioactive	/ 222 Days on site ☐ 365	/ 223 Storage Container		☐ lbs ☐ gal ☐ cu. ft. ☐ µ curie ☐ other	☐ Fire ☐ Pressure ☐ Reactive Health: ☐ Acute ☐ Delayed	Pressure ☐ Ambient ☐ > Amb. ☐ < Amb. Temp ☐ Ambient ☐ > Amb. ☐ < Amb. ☐ Cryoge

DRAFT

210 Hazard Classes: **CAR** – Carcinogens; **CL** – Combustible Liquid ; **COR** – Corrosive; **CRY** – Cryogenic; **EX** – Explosive; **FG** – Flammable Gas; **FL** – Flammable Liquid; **FS** – Flammable Solid; **HT** – Highly Toxic; **IRR** – Irritant; **MISC** – Miscellaneous Hazardous Materials; **NFG** – Nonflammable Gas; **OP** – Organic Peroxide; **OX** – Oxydizer; **PYRO** – Pyrophoric; **SENS** – Sensitizer; **TX** – Toxic; **UR** – Unstable/Reactive; **WR** – Water Reactive

223 Storage Container Codes: **AGT** – Above Ground Tank; **B** – Bag; **BX** – Box; **C** – Can; **CB** – Carboy; **CYL** – Cylinder; **FD** – Fiber Drum; **GB** – Glass Bottle; **PB** – Plastic Bottle; **PD** – Plastic/Nonmetallic Drum; **SD** – Steel Drum, **S** – Silo; **RC** – Rail Car; **TB** – Tote Bin; **TW** – Tank Wagon; **UST** – Underground Tank; **O** – Other

Department of Planning and Development
TOXICS MANAGEMENT DIVISION
A Certified Unified Program Agency (CUPA)
2118 Milvia Street, Suite 300, Berkeley, California 94704
TEL: (510) 981-7460 ● TDD: (510) 981-6903 ● FAX: (510) 981-7470

SCANNED

Entered: 9/29/15
by: KB
Scanned by: _____

HAZARDOUS MATERIALS INSPECTION AND VIOLATION REPORT

Date: 9/29/15 Time: AM Page: 1 of 2

Facility Name: Wine.Com

Address: 2220 Fourth Street Phone: 982-3585

Owner/Operator Name: David Do

Facility Representative(s): " "

Permitted CUPA Activities: X HMBP ☐ HW (☐ LQG ☐ SQG ☐ CESQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP
Inspections Conducted: X HMBP ☐ HW (☐ RCRA LQG) ☐ UW ☐ TP (TIER: _____) ☐ UST ☐ APSA ☐ CalARP X SW
Unannounced: X Yes ☐ No
Purpose of Inspection: X Routine ☐ Follow-up Inspection ☐ RTC QA ☐ Closure ☐ Permit Screen ☐ Other _____
Consent Granted for: X Inspection ☐ Photos (include log) ☐ Samples; Consent Granted By: X

SUMMARY OF VIOLATIONS, CORRECTIVE ACTIONS, FINDINGS:

Class (M, II, I)	Violation Code/ Observation and PE	Citation, Description, Corrective Action Required, and/or Observation
	Observation	Routine Hazardous Materials Business Plan and Storm water inspection. The only Hazardous Materials listed on the HMBP is Propane. Training Plan covers HM.
	Observation	No Violations Noted

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Note: The facility is subject to re-inspection at any time (re-inspection fees may apply).

☐ CUPA violations cited on page(s) _____ shall be corrected within ____ days.
☐ SW violations cited shall be corrected within____ days or before the next rain event.
☐ Submit Certification of Return to Compliance form within 30 days.

Facility Representative Signature: X _____ Title: VP Operations

Inspector's Signature: _____ Inspector's Name: Karl Bushey