

Changes in Tier II Reporting

Chemical Inventory Reporting to
LEPC, SERC and Fire
Departments

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ENVIRONMENTAL PROTECTION AGENCY
40 CFR Part 370
[EPA-HQ-SFUND-2010-0763; FRL-9674-1]
RIN 2050-AG64
Hazardous Chemical Reporting:
Revisions to the Emergency and
Hazardous Chemical Inventory Forms
(Tier I and Tier II)
AGENCY: Environmental Protection
Agency (EPA).
ACTION: Final rule.
Federal Register / Vol. 77, No. 135 /
Friday, July 13, 2012, page 41300

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- Facility latitude and longitude;
- Facility identification numbers assigned under EPCRA's toxic release inventory (TRI) program and the Clean Air Act's risk management program (RMP);
- Whether the location where the hazardous chemicals are stored is manned or unmanned;

3

- Contact information for the facility emergency coordinator,
- Contact information,
- E-mail addresses of the owner or operator and emergency contact(s);

4

•The maximum number of occupants that may be present at the facility at any one time (amending the requirement to report the number of full-time employees);

5

•Contact information for the emergency coordinator for facilities subject to EPCRA Section 302. Section 302 requires that facilities provide the SERC and LEPC with a onetime notification if there are any extremely hazardous substances (EHSs) present at the site in excess of their threshold planning quantities;

6

- Data elements to indicate if the facility is subject to EPCRA Section 302 and if the facility is subject to the RMP;

7

- Information on whether there are pure chemicals or mixtures at the facility;
and
- A description of the storage types and conditions.

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Check if information below is identical to the information submitted last year.

Reporting Period: January 1 to December 31, 20

Tier Two Emergency and Hazardous Chemical Inventory <i>Specific Information by Chemical</i>				For Official Use Only State ID#: Date Received	
Facility Identification					
Name		Maximum No. of Occupants: <input type="checkbox"/> N/A		<input type="checkbox"/> Manned <input type="checkbox"/> Unmanned	
Street		County		City	
Latitude		Longitude		NAICS Code	
Dun & Bradstreet Number		TRI Facility ID: <input type="checkbox"/> N/A		RMP Facility ID: <input type="checkbox"/> N/A	
Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Subject to Chemical Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Management Program)?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Owner or Operator Information			Parent Company Information (optional)		
Name			Name		
Address			Dun & Bradstreet Number:		
Phone Number ()			Email		
Phone Number ()			Email		
Facility Emergency Coordinator (If applicable)			Tier II Information Contact		
Name			Name		
Title			Title		
Email Address			Email Address		
Phone Number ()			24-hour Phone ()		
Phone Number ()			24-hour Phone ()		
Email Address			Email Address		
Emergency Contacts					
Name			Name		
Title			Title		
Phone Number ()			24-hour Phone ()		
Phone Number ()			24-hour Phone ()		
Email Address			Email Address		
Certification (Read and sign after completing all sections)			Reporting Ranges Weight Range in pounds		
<p>I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.</p> <p>_____ Name and official title of owner/operator OR owner/operator's authorized representative</p> <p>_____ Signature Date Signed</p>			Range Code	From	To
			01	0	99
			02	100	499
			03	500	999
			04	1,000	4,999
			05	5,000	9,999
			06	10,000	24,999
			07	25,000	49,999
			08	50,000	74,999
			09	75,000	99,999
			10	100,000	499,999
			11	500,000	999,999
			12	1,000,000	9,999,999
13	10,000,000	Greater than 10 million			
<p>The public reporting and recordkeeping burden for this collection of information is estimated to range from 6 to 120 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.</p>					

Chemical Description	Physical and Health Hazards	Inventory	Type of Storage	Storage Conditions (Pressure, Temperature)	Storage Locations	Additional Reporting Information (Optional)
<input type="checkbox"/> Check if information below is identical to the information submitted last year. Chemical Name: CAS No. EHS: Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Trade Secret	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactive <input type="checkbox"/> Immediate (Acute) <input type="checkbox"/> Delayed (Chronic)	Maximum Amount Range Code: Average Daily Amount Range Code: No. of days on site:			Confidential: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Below Reporting Thresholds (optional) <input type="checkbox"/> State or Local Requirements
<input type="checkbox"/> Check if information below is identical to the information submitted last year. Mixture or Product Name: <input type="checkbox"/> Not Available CAS No. <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Trade Secret EHS: Yes <input type="checkbox"/> No <input type="checkbox"/> EHS(s) Name (if applicable): CAS No. Non-EHS(s) Name (optional):	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactive <input type="checkbox"/> Immediate (Acute) <input type="checkbox"/> Delayed (Chronic)	Maximum Amount (Total Mixture) Range Code: Average Daily Amount (Total Mixture) Range Code: No. of days on site: Maximum Amount of each EHS in the Mixture Range Code:			Confidential: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Below Reporting Thresholds (optional) <input type="checkbox"/> State or Local Requirements

Optional Attachments: I have attached a site plan I have attached a list of site coordinate abbreviations
 I have attached a description of dikes and other safeguard measures

INSTRUCTIONS

TIER II INVENTORY FORM

GENERAL INFORMATION

Submission of this Tier II form (when requested) is required under section 312 of the Emergency Planning and Community Right-to-Know Act (EPCRA) which was enacted as Title III of the Superfund Amendments and Reauthorization Act of 1986, Public Law 99-499, 42 U.S.C. Section 11022. The purpose of this Tier II form is to provide State and local officials and the public with specific information on hazardous chemicals present at your facility during the past year.

CERTIFICATION

The owner or operator or the officially designated representative of the owner or operator must certify that all information included in the Tier II submission is true, accurate, and complete. On the first page of the Tier II report, enter your full name and official title. Sign your name and enter the current date. Also, enter the total number of pages included in the Confidential and Non-Confidential Information Sheet as well as all attachments. An original signature is required on at least the first page of the submission. Subsequent pages must contain either an original signature, a photocopy of the original signature, or a signature stamp. Each page must contain the date on which the original signature was affixed to the first page of the submission and the total number of pages in the submission.

Note: Check with your State for specific requirements for the submission and certification.

YOU MUST PROVIDE ALL THE INFORMATION REQUESTED ON THIS FORM TO FULFILL TIER II REPORTING REQUIREMENTS.

This form may also be used as a worksheet for completing the Tier I form or may be submitted in place of the Tier I form. Your State may have specific requirements.

WHO MUST SUBMIT THIS FORM

Section 312 of EPCRA requires that the owner or operator of a facility submit their Tier II form if so requested by a State emergency response commission, a local emergency planning committee, or local fire department with jurisdiction over the facility.

This request may apply to the owner or operator of any facility that is required under regulations implementing the Occupational Safety and Health Act of 1970, to prepare or have available a Material Safety Data Sheet (MSDS) for a hazardous chemical present at the facility. MSDS requirements are specified in the Occupational Safety and Health Administration

(OSHA) Hazard Communication Standard (HCS), found in Title 29 of the Code of Federal Regulations (CFR) at Section 1910.1200.

This form does not have to be submitted if all of the chemicals located at your facility are excluded under Section 311(e) of EPCRA (discussed below).

WHAT CHEMICALS ARE INCLUDED

If you are submitting the Tier II form in lieu of Tier I, you must report the required information on this Tier II form for each hazardous chemical present at your facility in quantities equal to or greater than established threshold amounts (discussed below), unless the chemicals are excluded under Section 311(e) of EPCRA.

Hazardous chemical means any hazardous chemical as defined under 29 CFR 1910.1200(c) except that such term does not include substances excluded from section 311(e), as discussed below.

If you elect to submit Tier I rather than Tier II, you may still be required to submit Tier II information upon request.

WHAT CHEMICALS ARE EXCLUDED

Section 311(e) of EPCRA excludes the following substances:

- 1) Any food, food additive, color additive, drug, or cosmetic regulated by the Food and Drug Administration;
- 2) Any substance present as a solid in any manufactured item to the extent exposure to the substance does not occur under normal conditions of use;
- 3) Any substance to the extent it is used for personal, family, or household purposes, or is present in the same form and concentration as a product packaged for distribution and use by the general public;
- 4) Any substance to the extent it is used in a research laboratory or a hospital or other medical facility under the direct supervision of a technically qualified individual; and
- 5) Any substance to the extent it is used in routine agricultural operations or is a fertilizer held for sale by a retailer to the ultimate customer.

OSHA regulations, Section 1910.1200(b), stipulate exemptions from the requirement to prepare to have available an MSDS.

REPORTING THRESHOLDS

Minimum thresholds have been established for Tier I/Tier II reporting in 40 CFR part 370). These thresholds are as follows:

For Extremely Hazardous Substances (EHSs) designated under EPCRA Section 302, the reporting threshold is 500 pounds (or 227 kg.) or the threshold planning quantity (TPQ), whichever is lower. (EHSs and their TPQs are listed in 40 CFR part 355, Appendix A and B).

For gasoline (all grades combined) at a retail gas station, the threshold level is 75,000 gallons (or approximately 283,900 liters), if the tank(s) was stored entirely underground and was in compliance at all times during the preceding calendar year with all applicable Underground Storage Tank (UST) requirements at 40 CFR part 280 or requirements of the State UST program approved by the Agency under 40 CFR part 281.

For diesel fuel (all grades combined) at a retail gas station, the threshold level is 100,000 gallons (or approximately 378,500 liters), if the tank(s) was stored entirely underground and the tank(s) was in compliance at all times during the preceding calendar year with all applicable Underground Storage Tank (UST) requirements at 40 CFR part 280 or requirements of the State UST program approved by the Agency under 40 CFR part 281.

Note: A retail gas station means a retail facility engaged in selling gasoline and/or diesel fuel principally to the public for motor vehicle use on land.

For all other hazardous chemicals for which facilities are required to have or prepare an MSDS, the minimum reporting threshold is 10,000 pounds (or 4,540 kg.).

You need to report hazardous chemicals that were present at your facility at any time during the previous calendar year at levels that equal or exceed these thresholds. For instructions on threshold determinations for components of mixtures, see "What About Mixtures?" in this document.

Note: States may have lower reporting thresholds and additional chemicals covered by the state right-to-know regulations. Contact your state for any specific requirements for that state.

Please read these instructions carefully. Print or type all responses.

WHEN TO SUBMIT THIS FORM

Owners or operators of facilities that have hazardous chemicals present at the facility in quantities equal to or greater than set threshold levels must submit either Tier I or Tier II form by March 1.

Note: All states currently require facilities to submit federal Tier II inventory form or the state developed form or format including on-line reporting and certification. Contact your state for the specific requirements for that state.

WHERE TO SUBMIT THIS FORM

Send the completed Tier II form(s) to each of the following organizations:

- 1) Your State Emergency Response Commission or Tribal Emergency Response Commission.
- 2) Your Local Emergency Planning Committee.
- 3) The fire department with jurisdiction over your facility.

REPORTING PERIOD

Enter the appropriate calendar year, beginning January 1 and ending December 31.

IDENTICAL INFORMATION

Check the box located at the top of page one of the form, if the information being reported is identical to that submitted last year. Chemical descriptions, hazards, amounts, and locations must be provided in this year's form, even if the information is identical to that submitted last year.

FACILITY IDENTIFICATION

Enter the complete name and address of the location of your facility where the hazardous chemicals are stored. Enter the full street address or state road, county, city, state, and zip code.

Provide the latitude and longitude for the location of your facility.

Indicate if the facility is manned or unmanned.

Estimate the maximum number of occupants that may be present at any one time at your facility. You should include contractors, vendors and people that may be present for any training or other events as well as employees. If the location is not manned at all times, check the box marked "N/A".

Enter the primary North American Industry Classification System (NAICS) code and the Dun & Bradstreet number of your facility. The financial officer of your facility should be able to provide the Dun & Bradstreet number. If your firm does not have this information, contact the State or regional office of Dun & Bradstreet to obtain your facility number or have one assigned.

SUBJECT TO EMERGENCY PLANNING

Indicate if your facility is subject to the emergency planning notification requirement under EPCRA section 302, codified in 40 CFR part 355.

SUBJECT TO CHEMICAL ACCIDENT PREVENTION

Indicate if your facility is subject to chemical accident prevention provisions under section 112(r) of the Clean Air Act, also known as the Risk Management Program (RMP), codified in 40 CFR part 68.

IDENTIFICATION NUMBER UNDER TRI AND RMP

If your facility is subject to the Toxic Release Inventory (TRI) program under section 313 of EPCRA, provide the identification number assigned by EPA. If your facility is not subject to this reporting requirement or if your facility has not been assigned a number under this program, check the box marked "N/A".

If your facility is subject to the chemical accident prevention provisions codified in 40 CFR part 68, also known as the Risk Management Program, provide the facility identification number assigned by EPA. If your facility is not subject to this provision or if your facility has not been assigned a number, check the box marked "N/A".

OWNER/OPERATOR

Enter the owner or operator's full name, mailing address, and phone number. Provide the email address of the owner or operator of the facility.

PARENT COMPANY

Enter the name, mailing address, phone number, email address and Dun & Bradstreet number of the parent company. *Note: These are optional data elements.*

FACILITY EMERGENCY COORDINATOR

If applicable, enter the name, title, email address, phone number and 24-hour phone number of the facility emergency coordinator.

Note: Section 303(d)(1) of EPCRA requires facilities subject to the emergency planning notification requirement (including additional facilities designated by the Governor or the SERC under EPCRA section 302(b)(2)) to designate a facility representative who will participate in the local emergency planning process as a facility emergency coordinator. EPA encourages facilities not subject to the emergency planning notification requirement also to provide this information, if available, for effective emergency planning in your community.

TIER II INFORMATION CONTACT

Enter the name, title, email address and phone number of the person knowledgeable of the information contained in the Tier II inventory form.

EMERGENCY CONTACT

Enter the name, title, phone number and email address of at least one local person or office that can act as a referral if emergency responders need assistance in responding to a chemical accident at the facility. If there is more than one person assigned to this duty, provide the same information for that person.

Provide an emergency phone number where such emergency information will be available 24 hours a day, every day. This requirement is mandatory. The facility must make some arrangement to ensure that a 24-hour contact is available.

CHEMICAL INFORMATION

Description, Hazards, Amounts, and Locations

The main section of the Tier II form requires specific information on amounts and locations of hazardous chemicals, as defined in the OSHA Hazard Communication Standard.

Separate fields are provided for reporting both pure chemicals and mixtures. For each entry, check the box indicating if the information is identical to the information submitted last year. Chemical descriptions, hazards, amounts, and locations must be provided even if the information is identical to that submitted last year.

- What units should I use?

Calculate all amounts as *weight in pounds*. To convert gas or liquid volume to weight in pounds, multiply by an appropriate density factor.

- What about mixtures?

If a hazardous chemical is part of a mixture, you have the option of reporting the entire mixture or only the portion of the mixture that is a particular hazardous chemical (e.g., if a hazardous solution weighs 100 lbs. but is composed of only 5% of a particular hazardous chemical, you can indicate either 100 lbs. of the mixture *or* 5 lbs. of the chemical).

The option used for each mixture at your facility must be consistent with the option used in your Section 311 reporting.

Because EHSs are important to emergency planning requirement under EPCRA section 303, EHSs have lower reporting thresholds under EPCRA section 312. The amount of an EHS at a facility (both pure EHSs and EHSs in mixtures) must be aggregated for purposes of threshold determination. It is suggested that the aggregation calculation be done as a first step in determining whether reporting threshold has been met or exceeded. Once you determine whether a threshold for an EHS has been reached, you may report the mixture or product name. You must also report any EHSs present in the mixture. You do not need to report any non-EHSs in the mixture, but may if you wish to do so.

Although you have an option to report either the mixture or the EHS, as provided in 40 CFR 370.14, you must be consistent with your EPCRA section 311 reporting.

For any mixture containing an EHS that the facility is reporting as a mixture, the facility must check the box “yes” to indicate that the mixture contains an above-threshold EHS. You must also write the name of the EHS(s) contained in the mixture on the line provided.

You are not required to list any non-EHSs in the mixture. This is optional.

CHEMICAL DESCRIPTION

Pure Chemical:

Provide the chemical name (or common name of the chemical) as provided on the Material Safety Data Sheet (MSDS). Enter the Chemical Abstract Service registry number (CAS).

Indicate if the chemical is an EHS.

Check box for ALL applicable descriptors: solid, liquid, or gas.

Trade secret regulations can be found in 40 CFR part 350.

You may also visit EPA website at www.epa.gov/emergencies/content/epcra/tier2.htm#sub.

Mixture:

- Provide the name of the mixture, product name or trade name as provided on the material safety data sheet (MSDS).
- Enter the Chemical Abstract Service (CAS) number of the mixture, if available.
- Check box for ALL applicable descriptors: solid, liquid, or gas.
- If the mixture contains any EHS, check the box “yes”, and then enter the name and CAS number of each EHS in the mixture.
- You are not required to list non-EHSs in the mixture, but may report if you wish to do so.
- If you are withholding the name of a chemical or mixture in accordance with criteria specified in EPCRA section 322, enter the generic class or category that is structurally descriptive of the chemical (e.g., list toluene diisocyanate as organic isocyanate) and check the box marked Trade Secret. Trade secret information should be submitted to EPA and must include a substantiation.
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PHYSICAL AND HEALTH HAZARDS

For each chemical you have listed, check all the physical and health hazard categories that apply. These hazard categories are defined in 40 CFR 370.66. The two health hazard categories and three physical hazard categories are a consolidation of the 23 hazard categories defined in the OSHA Hazard Communication Standard, 29 CFR 1910.1200.

**Hazard Category Comparison
For Reporting Under Sections 311 and 312**

<u>EPA's Hazard Categories</u>	<u>OSHA's Hazard Categories</u>
Fire Hazard	Flammable Combustion Liquid Pyrophoric Oxidizer
Sudden Release of Pressure	Explosive Compressed Gas
Reactive	Unstable Reactive Organic Peroxide Water Reactive
Immediate (Acute) Health Hazards	Highly Toxic Toxic Irritant Sensitizer Corrosive Other hazardous chemicals with an adverse effect with short term exposure
Delayed (Chronic) Health Hazard	Carcinogens Other hazardous chemicals with an adverse effect with long term exposure

MAXIMUM AMOUNT

- 1) For each hazardous chemical or mixture, estimate the maximum amount present at your facility on any single day during the reporting period.

If you are reporting a mixture, you must list any EHS(s) present in the mixture and report the maximum amount and the CAS number(s) of each EHS present in the mixture.

- 2) Find the appropriate range value code in Table I.
- 3) Enter this range value as the maximum amount.

TABLE I - REPORTING RANGES

Range Value	Weight Range in Pounds	
	From	To
01	0	99
02	100	499
03	500	999
04	1,000	4,999
05	5,000	9,999
06	10,000	24,999
07	25,000	49,999
08	50,000	74,999
09	75,000	99,999
10	100,000	499,999
11	500,000	999,999
12	1,000,000	9,999,999
13	10,000,000	Greater than 10 million

EXAMPLE:

You received one large shipment of a solvent mixture last year. The shipment filled five 5,000-gallon storage tanks. You know that the solvent contains 10% benzene, which is a hazardous chemical.

You figure that 10% of 25,000 gallons is 2,500 gallons. You also know that the density of benzene is 7.29 pounds per gallon, so you multiply 2,500 gallons by 7.29 pounds per gallon to get a weight of 18,225 pounds.

Then you look at Table I and find that the range value 06 corresponds to 18,225. You enter 06 as the Maximum Amount.

AVERAGE DAILY AMOUNT

- 1) For each hazardous chemical, estimate the average weight in pounds that was present at your facility during the year.
- 2) To do this, total all daily weights and divide by the number of days the chemical was present on the site.
- 3) Find the appropriate range value in Table I.
- 4) Enter this range value as the Average Daily Amount.

EXAMPLE:

The 25,000-gallon shipment of solvent you received last year was gradually used up and completely gone in 315 days. The sum of the daily volume levels in the tank is 4,536,000 gallons. By dividing 4,536,000 gallons by 315 days on-site, you calculate an average daily amount of 14,400 gallons.

You already know that the solvent contains 10% benzene, which is a hazardous chemical. Since 10% of 14,400 is 1,440, you figure that you had an average of 1,440 gallons of benzene. You also know that the density of benzene is 7.29 pounds per gallon, so you multiply 1,440 by 7.29 to get a weight of 10,500 pounds.

Then you look at Table I and find that the range value 06 corresponds to 10,500. You enter 06 as the Average Daily Amount.

NUMBER OF DAYS ON-SITE

Enter the number of days that the hazardous chemical was present on-site.

EXAMPLE:

The solvent composed of 10% benzene was present for 315 days at your facility. Enter 315 in the space provided.

STORAGE TYPES, CONDITIONS AND LOCATIONS

List all non-confidential locations of hazardous chemicals along with storage types and conditions associated with each location. Please note that a particular chemical may be located in several places around the facility.

STORAGE TYPES AND CONDITIONS

Enter the types and conditions of storage for each chemical that you are reporting.

- a. *Table II.* This table lists examples of some of the common storage types that facilities use at their site. You may provide a detailed description for the storage type at your facility.
- b. *Table III.* For each location, find the appropriate storage types for pressure and temperature conditions. You may provide a description for the various conditions at your facility.

Table II - STORAGE TYPES

Above ground tank
 Below ground tank
 Tank inside building
 Steel drum
 Plastic or non-metallic drum
 Can
 Carboy
 Silo
 Fiber drum
 Bag
 Box
 Cylinder
 Glass bottles or jugs
 Plastic bottles or jugs
 Tote bin
 Tank wagon
 Rail car
 Battery

Table III - PRESSURE AND TEMPERATURE CONDITIONS

(PRESSURE)
 Ambient pressure;
 Greater than ambient pressure
 Less than ambient pressure

(TEMPERATURE)
 Ambient temperature
 Greater than ambient temperature
 Less than ambient temperature but not cryogenic
 Cryogenic conditions

STORAGE LOCATIONS:

If the location information is confidential, indicate by checking the box “yes”. You must fill out the Confidential Location Information Sheet and submit that along with your Tier II Inventory Form to your SERC, LEPC and the local fire department. If the location is non-confidential, provide a brief description of the precise location of the chemical, so that emergency responders can locate the area easily. You may find it advantageous to provide the optional site plan or site coordinates as explained below.

For each chemical, indicate at a minimum the building or lot. Additionally, where practical, the room or area may be indicated. You may respond in narrative form with appropriate site coordinates or abbreviations.

If the chemical is present in more than one building, lot, or area location, list each location as appropriate.

OPTIONAL ATTACHMENTS

If you choose to attach one of the following, check the appropriate optional attachments box at the bottom of page two of the Tier II form.

- a. *A site plan* with site coordinates indicated for buildings, lots, areas, etc. throughout your facility.
- b. *A list of site coordinate abbreviations* that correspond to buildings, lots, areas, etc. throughout your facility.
- c. *A description of dikes and other safeguard measures* for storage locations throughout your facility.

EXAMPLE:

You may have benzene in the main room of the main building, and in tank 2 in tank field 10. You may attach a site plan with coordinates as follows: main building = G-2, tank field 10 = B-6. Fill in the Storage Location as follows:

B-6 [Tank 2] G-2 [Main Room]

CONFIDENTIAL INFORMATION

Under EPCRA Section 324, you may elect to withhold location information on a specific chemical from disclosure to the public. If you choose to do so, check the box marked “yes”.

- On a separate Tier II Confidential Location Information Sheet, enter the name and CAS number of each chemical for which you are keeping the location confidential.
- Enter the appropriate location and storage information, as described above for non-confidential locations.
- Attach the Tier II Confidential Location Information Sheet to the Tier II form. This separates confidential locations from other information that will be disclosed to the public.

ADDITIONAL REPORTING INFORMATION (OPTIONAL)

This column is for facilities that may wish to report hazardous chemicals below the reporting thresholds and/or to report any additional state or local requirements. Check the appropriate box and follow the same procedures as described above for reporting each hazardous chemical or for any mixture that contains a hazardous chemical.