



# Connecticut Department of Energy & Environmental Protection

## Emergency Planning and Community Right-to-Know

### Hazardous Chemical Reporting Notification Form

Please complete this notification form including any attachments in order to ensure the proper handling of facility information to the DEEP. Print or type unless otherwise noted. Retain a copy for your records .

A facility owner or operator must comply with the reporting requirements of 40 CFR part 370 if the Occupational Safety and Health Administration's (OSHA) Hazard Communication Standard requires the facility to prepare or have available a Material Safety Data Sheet (MSDS) for a hazardous chemical. Refer to the Final Ruling 40 CR Part 370 for specifics conditions.

#### Part I. Type of Reporting

<p>This notification is for (please enter a check mark by the type of notice which best describes this submission):</p> <p><input type="checkbox"/> A hazardous substance equal to or in access of 10,000 pounds</p> <p><input type="checkbox"/> Extremely hazardous substances is present at the facility (identified in Part II) at any one time in an amount equal to or greater than 500 pounds or the threshold planning quantity, whichever is lower.</p>
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#### Part II: Facility Information

1. Facility Name:		
Facility location [No PO Box]:		
City/Town:	State:	Zip Code:
Phone:	ext.	Fax:
2. Mailing Address:		
City/Town:	State:	Zip Code:
3. Business Phone:	ext.	Fax:
Email address:		
4. Facility Representative		
Name:		
Facility Representative Title:	24 hour Phone:	

#### Part III: List of Chemicals

<p>This report is for (please enter a check mark by the type of submitted which best described this submission):</p> <p><input type="checkbox"/> The list dated _____ (month/date/year) is enclosed with this form. The list of chemicals is being submitted to comply with Connecticut's requires for a list of chemicals in lieu of MSDSs. The hazardous chemicals on the list are grouped by hazard category as defined under section 40 CFR part 370.66. the list contains the chemical or common name of each hazardous chemical as provided on the MSDS.</p> <p><input type="checkbox"/> Material Safety Data Sheet(s) are enclosed with this form. Indicate the number of MDSDS sheets</p>
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**Part IV: Certification**

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

Signature of Authorized Representative	Date
Name of Authorized Representative (print or type)	Title (if applicable)
Signature of Preparer	Date
Name of Preparer	Title (if applicable)

**Mail completed form to:**

STATE EMERGENCY RESPONSE COMMISSION  
c/o DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION  
BUREAU OF MATERIALS MANAGEMENT AND COMPLIANCE ASSURANCE  
EMERGENCY RESPONSE AND SPILL PREVENTION  
79 ELM STREET  
HARTFORD, CT 06106-5127