

<p><b>Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY</b></p> <p><i>Specific Information by Chemical</i></p>	<p><b>Facility Identification</b>                  Name _____                  Street _____                  City _____ Borough _____ State _____ Zip _____                  NAICS Code _____ Dun &amp; Brad Number _____</p>	<p><b>Owner/Operator Name</b>                  Name _____ Phone ( ) _____                  Mail Address _____</p>
	<p><b>FOR OFFICIAL USE ONLY</b></p>	<p>ID # _____                  Date Received _____</p>

**Important: Read all instructions before completing form**      Reporting Period From January 1 to December 31, 20\_\_\_\_       Check if information below is identical to the information submitted last year.

<b>Confidential Location Information Sheet</b>	<b>Container Type</b>	<b>Pressure</b>	<b>Temperature</b>	<b>Storage Codes and Locations (Confidential)</b>	<b>Optional</b>																																
				<i>Storage Locations</i>																																	
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<p><b>Certification</b> <i>(Read and sign after completing all sections)</i>                  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><b>Optional Attachments</b>  <input type="checkbox"/> I have attached a site plan  <input type="checkbox"/> I have attached a list of site coordinate abbreviations  <input type="checkbox"/> I have attached a description of dikes and other safeguards measures</p>
<p>_____ Name and official title of owner/operator OR owner/operator's authorized representative</p>	<p>_____ Signature</p>
<p>_____ Date signed</p>	