

 Tier Two Emergency and Hazardous Chemical Inventory				State ID#:		
Facility Identification						
Facility Name			Maximum Number of Occupants: <input type="checkbox"/> N/A		<input type="checkbox"/> Manned <input type="checkbox"/> Unmanned	
Street (location)		County	City		State SD	
Latitude	Longitude		NAICS Code	Facility Phone # (optional)		
Dun & Bradstreet #		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)			
Company Name			Company Name		Dun & Bradstreet #	
Mail Address			Mail Address			
Phone Number		Email	Phone Number		Email	
Facility Emergency Coordinator			Tier II Information Contact			
Contact Person Name			Contact Person Name		Title	
Title			Mail Address			
Phone Number (work)			Phone Number (work)			
Phone Number (24-hour)			Phone Number (work)			
Email			Email			
Emergency Contacts						
Name		Title	Name		Title	
Phone Number (work)		Phone Number (24-hour)	Phone Number (work)		Phone Number (24-hour)	
Email Address			Email Address			
Certification (Read and sign after completing all sections)			Range Codes			
I certify under penalty of law that I have personally examined and am familiar with all information submitted in pages one through _____, and based on my inquiry of the individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete. _____ Name and title Owner/operator or owner/operator's authorized representative _____ Signature _____ Date Signed			Amount Stored Weight Ranges			
			Range Code	From	To	
			01	0 pounds	99 pounds	
			02	100 pounds	499 pounds	
			03	500 pounds	999 pounds	
			04	1,000 pounds	4,999 pounds	
			05	5,000 pounds	9,999 pounds	
			06	10,000 pounds	24,999 pounds	
			07	25,000 pounds	49,999 pounds	
			08	50,000 pounds	74,999 pounds	
			09	75,000 pounds	99,999 pounds	
			10	100,000 pounds	499,999 pounds	
			11	500,000 pounds	999,999 pounds	
			12	1,000,000 pounds	9,999,999 pounds	
13	10,000,000 pounds	Greater than 10 million pounds				

Chemical Description	Physical Hazards	Health Hazards	Inventory	Type of Storage	Storage Conditions	Storage Locations	Additional Information (Optional)
<input type="checkbox"/> Pure Chemical or <input type="checkbox"/> Mixture or Product Mixture Name: _____ CAS #: _____ <input type="checkbox"/> CAS not available <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Trade Secret Chemical is (or mixture contains) an Extremely Hazardous Substance (EHS) <input type="checkbox"/> Yes <input type="checkbox"/> No EHS Name(s) (if you checked "yes" above): _____ If this is a mixture, weight of the EHS portion (range code*): _____ Non EHS Name(s) (optional): _____	<input type="checkbox"/> Explosive <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) <input type="checkbox"/> Oxidizer (liquid, solid or gas) <input type="checkbox"/> Self-reactive <input type="checkbox"/> Pyrophoric (liquid or solid) <input type="checkbox"/> Pyrophoric gas <input type="checkbox"/> Self-heating <input type="checkbox"/> Organic peroxide <input type="checkbox"/> Corrosive to metal <input type="checkbox"/> Gas under pressure (compressed gas) <input type="checkbox"/> In contact with water emits flammable gas <input type="checkbox"/> Combustible dust <input type="checkbox"/> Hazard not otherwise classified <input type="checkbox"/> No Hazard	<input type="checkbox"/> Acute toxicity (any route of exposure) <input type="checkbox"/> Skin corrosion or irritation <input type="checkbox"/> Serious eye damage or eye irritation <input type="checkbox"/> Respiratory or skin sensitization <input type="checkbox"/> Germ cell mutagenicity <input type="checkbox"/> Carcinogenicity <input type="checkbox"/> Reproductive toxicity <input type="checkbox"/> Specific target organ toxicity (single or repeated exposure) <input type="checkbox"/> Aspiration hazard <input type="checkbox"/> Simple asphyxiant <input type="checkbox"/> Hazard not otherwise classified <input type="checkbox"/> No Hazard	Maximum Stored: <input type="checkbox"/> gallons <input type="checkbox"/> pounds Average Stored: <input type="checkbox"/> gallons <input type="checkbox"/> pounds Range Code* for maximum stored: Range Code* for average stored: Number of Days On Site:	<input type="checkbox"/> AST <input type="checkbox"/> UST <input type="checkbox"/> Tank in building <input type="checkbox"/> Steel drum <input type="checkbox"/> Plastic drum <input type="checkbox"/> Can <input type="checkbox"/> Carboy <input type="checkbox"/> Silo <input type="checkbox"/> Fiber drum <input type="checkbox"/> Bag <input type="checkbox"/> Box <input type="checkbox"/> Cylinder <input type="checkbox"/> Glass bottle/jug <input type="checkbox"/> Plastic bottle/jug <input type="checkbox"/> Tote bin <input type="checkbox"/> Tank wagon <input type="checkbox"/> Rail car <input type="checkbox"/> Battery <input type="checkbox"/> Other	Pressure: <input type="checkbox"/> Ambient <input type="checkbox"/> Greater than ambient <input type="checkbox"/> Less than ambient Temperature: <input type="checkbox"/> Ambient <input type="checkbox"/> Greater than ambient <input type="checkbox"/> Less than ambient but not cryogenic <input type="checkbox"/> Cryogenic	Confidential? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, a confidential location information sheet MUST also be submitted)	Size of largest container: <input type="checkbox"/> Chemical is fertilizer you use to make custom blends Voluntary Reports: <input type="checkbox"/> Amount stored is less than the reporting threshold <input type="checkbox"/> Chemical is a fertilizer you do not make onsite & do not use to make custom blends <input type="checkbox"/> Other explain:
<input type="checkbox"/> Pure Chemical or <input type="checkbox"/> Mixture or Product Mixture Name: _____ CAS #: _____ <input type="checkbox"/> CAS not available <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> Trade Secret Chemical is (or mixture contains) an Extremely Hazardous Substance (EHS) <input type="checkbox"/> Yes <input type="checkbox"/> No EHS Name(s) (if you checked "yes" above): _____ If this is a mixture, weight of the EHS portion (range code*): _____ Non EHS Name(s) (optional): _____	<input type="checkbox"/> Explosive <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) <input type="checkbox"/> Oxidizer (liquid, solid or gas) <input type="checkbox"/> Self-reactive <input type="checkbox"/> Pyrophoric (liquid or solid) <input type="checkbox"/> Pyrophoric gas <input type="checkbox"/> Self-heating <input type="checkbox"/> Organic peroxide <input type="checkbox"/> Corrosive to metal <input type="checkbox"/> Gas under pressure (compressed gas) <input type="checkbox"/> In contact with water emits flammable gas <input type="checkbox"/> Combustible dust <input type="checkbox"/> Hazard not otherwise classified <input type="checkbox"/> No Hazard	<input type="checkbox"/> Acute toxicity (any route of exposure) <input type="checkbox"/> Skin corrosion or irritation <input type="checkbox"/> Serious eye damage or eye irritation <input type="checkbox"/> Respiratory or skin sensitization <input type="checkbox"/> Germ cell mutagenicity <input type="checkbox"/> Carcinogenicity <input type="checkbox"/> Reproductive toxicity <input type="checkbox"/> Specific target organ toxicity (single or repeated exposure) <input type="checkbox"/> Aspiration hazard <input type="checkbox"/> Simple asphyxiant <input type="checkbox"/> Hazard not otherwise classified <input type="checkbox"/> No Hazard	Maximum Stored: <input type="checkbox"/> gallons <input type="checkbox"/> pounds Average Stored: <input type="checkbox"/> gallons <input type="checkbox"/> pounds Range Code* for maximum stored: Range Code* for average stored: Number of Days On Site:	<input type="checkbox"/> AST <input type="checkbox"/> UST <input type="checkbox"/> Tank in building <input type="checkbox"/> Steel drum <input type="checkbox"/> Plastic drum <input type="checkbox"/> Can <input type="checkbox"/> Carboy <input type="checkbox"/> Silo <input type="checkbox"/> Fiber drum <input type="checkbox"/> Bag <input type="checkbox"/> Box <input type="checkbox"/> Cylinder <input type="checkbox"/> Glass bottle/jug <input type="checkbox"/> Plastic bottle/jug <input type="checkbox"/> Tote bin <input type="checkbox"/> Tank wagon <input type="checkbox"/> Rail car <input type="checkbox"/> Battery <input type="checkbox"/> Other	Pressure: <input type="checkbox"/> Ambient <input type="checkbox"/> Greater than ambient <input type="checkbox"/> Less than ambient Temperature: <input type="checkbox"/> Ambient <input type="checkbox"/> Greater than ambient <input type="checkbox"/> Less than ambient but not cryogenic <input type="checkbox"/> Cryogenic	Confidential? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, a confidential location information sheet MUST also be submitted)	Size of largest container: <input type="checkbox"/> Chemical is fertilizer you use to make custom blends Voluntary Reports: <input type="checkbox"/> Amount stored is less than the reporting threshold <input type="checkbox"/> Chemical is a fertilizer you do not make onsite & do not use to make custom blends <input type="checkbox"/> Other explain:

*Find range codes on page 1 of the Tier II report (bottom right hand corner). Determine the weight of your chemical in pounds, then report (write down) the corresponding range code.