

EPCRA Tier Two Form: **HAZARDOUS CHEMICAL INVENTORY**

Reporting Period: 20 Info same as last year Y/N Storage Locations Confidential? Y/N

Facility Name > SC SERC January 2010

Chemical Name CAS#>

Hazardous Ingredients UN/NA EHS?

Physical State Pure Mixture Solid Liquid Gas Hazards Fire Pressure Reactive Acute Chronic

Max Daily Amount	Avg. Daily Amount	Days On Site	Container	Pressure	Temperature	Storage Location
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Max in largest vessel	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diked/spill containment area? Y/N	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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CERTIFICATION

Typed Name

Signature Signed: MO DD YR