TOXICS CHEMICAL RELEASE INVENTORY
FORM A

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center
P. O. Box 1513
Lanham, MD 20703-1513
ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
(See instruction in Appendix E)
Enter “X” here if this is a revision
For EPA use only

IMPORTANT: See instructions to determine when “Not Applicable (NA)” boxes should be checked.

PART 1. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[ ] No (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized
(Answer only if “YES” in 2.1)

SECTION 3. CERTIFICATION
(Important: Read and sign after completing all form sections.)

Pursuant to 40 CFR 372.27(a)(1), “I hereby certify that to the best of my knowledge and belief for the toxic chemical(s) listed in this statement, for this reporting year, the annual reportable amount for each chemical, as defined in 40 CFR 372.27(a)(1), did not exceed 5,000 pounds, which included no more than 2,000 pounds of total disposal or other releases to the environment, and that the chemical was manufactured, or processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year;” and/or

Pursuant to 40 CFR 372.27(a)(2), “I hereby certify that to the best of my knowledge and belief for the toxic chemical(s) of special concern listed in this statement, there were zero disposals or other releases to the environment (including disposals or other releases that resulted from catastrophic events) for this reporting year, the “Annual Reportable Amount of a Chemical of Special Concern” for each such chemical, as defined in 40 CFR 372.27(a)(2), did not exceed 500 pounds for this reporting year, and that the chemical was manufactured, or processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.”

Name and official title of owner/operator or senior management official: ____________________________
Signature: ____________________________ Date Signed: ____________________________

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number

Facility or Establishment Name
Facility or Establishment Name or Mailing Address (If different from street address)

Street
Mailing Address

City/County/State/Zip Code
City/State/Zip Code
Country (Non-US)

4.2 This report contains information for: (Important: Check c or d if applicable)
[ ] A Federal facility [ ] GOCO

4.3 Technical Contact Name
Telephone Number (include area code)

Email Address

4.4 Intentionally left blank

4.5 NAICS Code (s) (6 digits)
[ ] Primary
[ ] Secondary
[ ] Tertiary
[ ] Other

4.6 Dun & Bradstreet Number (s) (9 digits)

SECTION 5. PARENT COMPANY INFORMATION

5.1 Name of Parent Company
[ ] NA

5.2 Parent Company’s Dun & Bradstreet Number
[ ] NA

EPA Form 9350 -2 (Rev. 11/2006) - Previous editions are obsolete.
### EPA FORM A

**PART II. CHEMICAL IDENTIFICATION**

*Do not use this form for reporting Dioxin and Dioxin-like Compounds*

**TRIFID:**

#### SECTION 1. TOXIC CHEMICAL IDENTITY

| Report of __ | __ |

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked “yes”. Generic Name must be structurally descriptive.)

#### SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you completed Section 1 above)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

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*See the TRI Reporting Forms and Instructions Manual for the TRI-listed Dioxin and Dioxin-like Compounds

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(Make additional copies of this page, if needed)