

UNIFIED PROGRAM (UP) FORM

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (LACoCUPA Form 2731)

(one page per material per building or area)

ADD
 DELETE
 REVISE
 REPORTING YEAR 200
 Page of

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As)										3
CHEMICAL LOCATION 201					SUB LOCATION 199			CHEMICAL LOCATION CONFIDENTIAL (EPCRA) <input type="checkbox"/> YES <input type="checkbox"/> NO 202		
FACILITY ID #							MAP# (optional) 203		GRID# (optional) 204	

II. CHEMICAL INFORMATION

CHEMICAL NAME 205					TRADE SECRET <input type="checkbox"/> Yes <input type="checkbox"/> No 206						
If Subject to EPCRA, refer to instructions											
COMMON NAME 207					EHS* <input type="checkbox"/> Yes <input type="checkbox"/> No 208			RS* <input type="checkbox"/> Yes <input type="checkbox"/> No 246a			
CAS# 209					*If EHS or RS is "Yes", all amounts below must be in lbs.						
FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210											
HAZARDOUS MATERIAL TYPE (Check one item only) <input type="checkbox"/> a. PURE <input type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE 211					RADIOACTIVE <input type="checkbox"/> Yes <input type="checkbox"/> No 212			CURIES 213			
PHYSICAL STATE (Check one item only) <input type="checkbox"/> a. SOLID <input type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS 214					LARGEST CONTAINER 215						
FED HAZARD CATEGORIES (Check all that apply) <input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH 216											
AVERAGE DAILY AMOUNT 217			MAXIMUM DAILY AMOUNT 218			ANNUAL WASTE AMOUNT 219			STATE WASTE CODE 220		
UNITS* (Check one item only) <input type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS 221							DAYS ON SITE: 222				
* If EHS, amount must be in pounds.											
STORAGE CONTAINER											
<input type="checkbox"/> a. ABOVE GROUND TANK			<input type="checkbox"/> e. PLASTIC/NONMETALLIC DRUM			<input type="checkbox"/> i. FIBER DRUM		<input type="checkbox"/> m. GLASS BOTTLE		<input type="checkbox"/> q. RAIL CAR	
<input type="checkbox"/> b. UNDERGROUND TANK			<input type="checkbox"/> f. CAN			<input type="checkbox"/> j. BAG		<input type="checkbox"/> n. PLASTIC BOTTLE		<input type="checkbox"/> r. OTHER	
<input type="checkbox"/> c. TANK INSIDE BUILDING			<input type="checkbox"/> g. CARBOY			<input type="checkbox"/> k. BOX		<input type="checkbox"/> o. TOTE BIN			
<input type="checkbox"/> d. STEEL DRUM			<input type="checkbox"/> h. SILO			<input type="checkbox"/> l. CYLINDER		<input type="checkbox"/> p. TANK WAGON 223			
STORAGE PRESSURE <input type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT 224											
STORAGE TEMPERATURE <input type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC 225											

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	RS 246b	CAS #
1 226	227	<input type="checkbox"/> Yes 228	<input type="checkbox"/> Yes	229
2 230	231	<input type="checkbox"/> Yes 232	<input type="checkbox"/> Yes	233
3 234	235	<input type="checkbox"/> Yes 236	<input type="checkbox"/> Yes	237
4 238	239	<input type="checkbox"/> Yes 240	<input type="checkbox"/> Yes	241
5 242	243	<input type="checkbox"/> Yes 244	<input type="checkbox"/> Yes	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
 (Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY			DATE RECEIVED			REVIEWED BY		
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA		

Hazardous Materials Inventory – Chemical Description (LACoCUPA Form 2731)

Complete a separate Hazardous Materials Inventory - Chemical Description page for each hazardous material (hazardous substances and hazardous waste) handled at your facility in aggregate quantities equal to or greater than 500 pounds, 55 gallons, 200 cubic feet of gas (calculated at standard temperature and pressure), or the federal threshold planning quantity for Extremely Hazardous Substances, whichever is less. Also, complete a page for each radioactive material handled over quantities for which an emergency plan is required by 10 CFR Parts 30, 40, or 70. Completed inventories should reflect all reportable quantities of hazardous materials at your facility, reported **separately** for each building or outside adjacent area, with **separate** pages for unique occurrences of physical state, storage temperature and storage pressure. Please, number all pages of your submittal.

1. FACILITY ID NUMBER This number is assigned by the CUPA. This is the unique number which identifies your facility.
3. BUSINESS NAME Enter the full legal name of the business.
199. SUB LOCATION Enter the sub-location where applicable such as basement, emergency generator, chiller unit, pump room. If chemicals are stored in different suites within a building, the suite may also be entered in the sub location field.
200. ADD/DELETE/ REVISE Indicate if the material is being added to the inventory, deleted from the inventory, or if the information previously submitted is being revised. NOTE: You may choose to leave this blank if you resubmit your entire inventory annually.
201. CHEMICAL LOCATION Enter the building or outside/ adjacent area where the hazardous material is handled. A chemical that is stored at the same pressure and temperature, in multiple locations within a building, can be reported on a single page. NOTE: This information is not subject to public disclosure pursuant to HSC § 25506.
202. CHEMICAL LOCATION CONFIDENTIAL - EPCRA All businesses which are subject to the Emergency Planning and Community Right to Know Act (EPCRA) must check "Yes" to keep chemical location information confidential; otherwise, check "No".
203. MAP NUMBER If a map is included, enter the number of the map on which the location of the hazardous material is shown.
204. GRID NUMBER If grid coordinates are used, enter the grid coordinates of the map that correspond to the location of the hazardous material.
205. CHEMICAL NAME Enter the proper chemical name associated with the Chemical Abstract Service (CAS) number of the hazardous material. This should be the International Union of Pure and Applied Chemistry (IUPAC) name found on the Material Safety Data Sheet (MSDS). NOTE: If the chemical is a mixture, do not complete this field; instead, complete the "COMMON NAME" field.
206. TRADE SECRET - Check "Yes" if the information in this section is declared a trade secret, or "No" if it is not.
State requirement : If yes, and the business is not subject to EPCRA, disclosure of trade secret information is bound by HSC § 25511. **Federal requirement :** If yes, and the business is subject to EPCRA, disclosure of the designated Trade Secret information is bound by 40 CFR, and the business must submit a "Substantiation to Accompany Claims of Trade Secrecy" form (40 CFR 350.27) to U.S. EPA.
207. COMMON NAME Enter the common name or trade name of the hazardous material or mixture containing a hazardous material.
208. EHS Check "Yes" if the hazardous material is an Extremely Hazardous Substance (EHS), as defined in 40 CFR, Part 355, Appendix A. If the material is a mixture containing an EHS, leave this section blank and complete the section on hazardous components below.
209. CAS # Enter the Chemical Abstract Service number for the hazardous material. For mixtures, enter the CAS number of the mixture only if it has a number; otherwise, leave this blank and report CAS numbers of the individual hazardous components in the appropriate section below.
210. FIRE CODE HAZARD CLASSES This information shall be provided if the local fire chief deems it necessary and requests the CUPA or PA to collect it. A list of the hazard classes and instructions on how to determine which class a material falls under are found in the appendices of Article 80 of the Uniform Fire Code. If a material has more than one hazard class, include all. Contact CUPA or PA for guidance.
211. HAZARDOUS MATERIAL TYPE Check the one box that best describes the type of hazardous material: pure, mixture or waste. If the substance is a waste, check only that box. If the substance is a mixture or waste, complete the hazardous components section.
212. RADIOACTIVE Check "Yes" if the hazardous material is radioactive or "No" if it is not.
213. CURIES If the material is radioactive, report the activity in curies; use up to nine digits with a floating decimal point to report activity in curies.
214. PHYSICAL STATE Check the one box that best describes the state in which the hazardous material is handled: solid, liquid or gas.
215. LARGEST CONTAINER Enter the total capacity of the largest container in which the material is stored.
216. FEDERAL HAZARD CATEGORIES Check all categories that describe the physical and health hazards associated with the hazardous material. Fire: Flammable Liquids and Solids, Combustible Liquids, Pyrophorics, and Oxidizers.
Pressure Release: Explosives, Compressed Gases, and Blasting Agents.
Acute Health (Immediate): Highly Toxic, Toxic, Irritants, Sensitizers, Corrosives, and other chemicals with an adverse effect with short term exposure.
Reactive: Unstable Reactive, Organic Peroxides, Water Reactive, and Radioactive.
Chronic Health (Delayed): Carcinogens, Teratogens, Mutagens, and other chemicals with an adverse effect with long term exposure.
217. AVERAGE DAILY AMOUNT Calculate the average daily amount of the hazardous material or mixture containing a hazardous material, in each building or adjacent/ outside area. Calculations shall be based on the previous year's inventory of the material reported on this page. Total all daily amounts and divide by the number of days the chemical will be on site. If this is a material that has not previously been present at this location, the amount shall be the average daily amount you project to be on hand during the course of the year. This amount should be consistent with the units reported in box 221 and should not exceed that of maximum daily amount.
218. MAXIMUM DAILY AMOUNT Enter the maximum amount of each hazardous material or mixture containing a hazardous material, which is handled in a building or adjacent/outside area at any one time over the course of the year. This amount must contain at a minimum last year's inventory of the material reported on this page, with the reflection of additions, deletions, or revisions projected for the current year. This amount should be consistent with the units reported in box 221.
219. ANNUAL WASTE AMOUNT If the hazardous material being inventoried is a waste, provide an estimate of the annual amount handled.
220. STATE WASTE CODE If the material is a waste, enter the California 3-digit hazardous waste code from the Uniform Hazardous Waste Manifest.
221. UNITS Check the unit of measure that is most appropriate for the material being reported on this page: gallons, pounds, cubic feet or tons.
NOTE: If the material is a federally defined Extremely Hazardous Substance (EHS), all amounts must be reported in pounds. If material is a mixture containing an EHS, report the units that the material is stored in (gallons, pounds, cubic feet, or tons).
222. DAYS ON SITE List the total number of days during the year that the material is on site.
223. STORAGE CONTAINER Check all boxes that describe the type of storage containers in which the hazardous material is stored.
NOTE: If appropriate, you may choose more than one.
224. STORAGE PRESSURE Check the one box that best describes the pressure at which the hazardous material is stored.
225. STORAGE TEMPERATURE Check the one box that best describes the temperature at which the hazardous material is stored.
226. HAZARDOUS COMPONENTS 1-5 (% BY WEIGHT) Enter the percentage weight of the hazardous component in a mixture. If a range of percentages is available, report the highest percentage in that range. (Report components 2 - 5 in boxes 230, 234, 238, and 242.)
227. HAZARDOUS COMPONENTS 1-5 NAME When reporting a hazardous material mixture, list up to five chemical names of hazardous components in that mixture by percent weight (refer to MSDS or, in the case of trade secrets, refer to manufacturer). All hazardous components in the mixture present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, should be reported. If more than five hazardous components are present above these percentages, attach an additional sheet of paper to capture the required information. When reporting waste mixtures, list mineral and chemical composition. (Report components 2 - 5 in boxes 231, 235, 239, and 243.)
228. HAZARDOUS COMPONENTS 1-5 EHS Check "Yes" if the component of the mixture is considered an Extremely Hazardous Substance as defined in 40 CFR, Part 355. (Report components 2 - 5 in boxes 232, 236, 240, and 244.)
229. HAZARDOUS COMPONENTS 1-5 CAS List Chemical Abstract Service numbers of the hazardous components in the mixture. (Repeat for 2-5.)
246. LOCALLY COLLECTED INFORMATION Contact your local agency about if they require additional hazardous materials inventory information.

