



Downey Fire Department

11111 Brookshire Boulevard
Downey, California 90241
(562) 904-7345



REQUEST FOR INFORMATION UNDER THE *COMMUNITY RIGHT-TO-KNOW* LAWS

The Emergency Planning & Community Right-to-Know Act (EPCRA), also known as Title III of the Superfund Amendments and Reauthorization Act (SARA), was signed into law on October 17, 1986 by Congress as national legislation on community safety. This law is designed to help local communities protect public health, safety, and the environment from chemical hazards.

The public has a right to know the chemical/hazardous materials information disclosed to the City of Downey Fire Department under the provisions of Title III of the Superfund Amendment and Reauthorization Act (SARA) of 1986, Chapter 6.95 of the California Health and Safety Code, and Title 27 of the California Code of Regulations.

To request information, please complete the *Information Request Form*, and contact:

Downey Fire Department
Hazardous Materials Section
11111 Brookshire Avenue
Downey, California 90241
(562) 904-7345

Please note the following conditions when requesting information:

1. A fee is assessed for request to access disclosure records. A fee of \$20.00 for the 1st request, and \$10.00 for each additional request will be assessed.
2. A separate request form is required for each facility
3. **Photo Identification Is Required Before Any Information Will Be Released.**
4. **Information indicating locations of hazardous materials storage/handling will NOT be released**
5. Information that is protected under the Privacy Act (i.e. home telephones) **will not** be released
6. Information that has been designated by the facility as a **trade secret**, requires additional time and procedures. The Hazardous Materials Section will advise you of these additional procedures.
7. If information requested is not available, you will be notified in writing.

Downey Fire Department
Hazardous Materials Section
Information Request Form

RECORDS REQUEST LOCATION (Site)

Business Site Address #1: _____

Business Site Address #2: _____

Business Name #1 (if applicable): _____

Business Name #2 (if applicable): _____

Information Requested:

- | | | |
|---|---|--|
| <input type="checkbox"/> Chemical/Hazardous Materials Information | <input type="checkbox"/> Underground Tank Information | <input type="checkbox"/> Fire Code Information |
| <input type="checkbox"/> Aboveground Tank Information | <input type="checkbox"/> Spill/Release History | <input type="checkbox"/> Enforcement History |

Purpose of your request:

REQUESTER INFORMATION

Name: _____

Business Name: _____
(EH&S Company)

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No.: _____ Fax No.: _____

Email Address: _____

Driver's License Number: _____ State Issued: _____ DOB: _____

OFFICIAL USE ONLY

Information Supplied By (DFD Representative): _____ Date: _____

Photo ID: Driver License Government Issued ID Agency Issued ID Other ID _____