COLUMBIA SOUTH SHORE WELL FIELD WELLHEAD PROTECTION
ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT
INSTRUCTIONS

INSTRUCTIONS FOR COMPLETING ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT

All questions must be answered. Do not leave blanks. Instructions for completing reporting form are given below.

SECTION A: INSTRUCTIONS: FACILITY INFORMATION

I. Enter the facility's official or legal name. Do not use a colloquial name.

II. Provide the physical location of the facility that is submitting the report. Include street, city, state and zip code.

III. Provide the mailing address where correspondence may be sent. Include street address or P.O. Box, city, state and zip code. If you have an e-mail address, please include that as well.

IV. The person completing the report must complete this portion. Provide signature of name and title of person completing the report. Provide printed name and phone number of person completing the report. Enter the date the report was completed

SECTION B: INSTRUCTIONS: ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT

1. On a facility map, indicate the locations where the hazardous material is stored or handled. If a site plan is already on file, you do not need to complete this again.

2. **Nonwaste:** Provide the common or trade name of the hazardous material. **Waste:** In lieu of trade names, you may provide the waste category.

3. Provide the major constituents chemical name.

4. Enter the chemical abstract service identification number (CAS number) found in 29 CFR, if known for the constituent of highest concerntration. Material Safety Data Sheets (MSDS) can be used as a reference.

5. Enter S = solid or L = liquid as it applies to the hazardous material's physical state.

6. Per the definition of hazardous material in Section 1.3.1 in the Columbia South Shore Well Field Wellhead Protection Program (WHPP)Reference Manual, the hazardous material in this report is subject to WHPP regulation based on one or more chemical categories, of the chemical categories in (a)-(e). Enter a quantity range for each of the categories you are reporting.

7. Please enter your NAICS (formerly SIC code) if known.

MAIL THE COMPLETED AND SIGNED ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT TO

Linda Hulme
Public Works Department
1300 NE Village Street
Fairview, OR 97024

FOR ADDITIONAL INFORMATION OR QUESTIONS REGARDING THIS REPORT, PLEASE CONTACT:

Linda Hulme City of Fairview 503-674-6234	or	Corky Collier Columbia Corridor Association 503-287-8686

COLUMBIA SOUTH SHORE WELL FIELD WELLHEAD PROTECTION ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT

Section A – Facility Information

I. Business Name

II. Site Address

III. Mailing Address

IV. E-Mail Address

V. Declaration

I certify that the information provided is true and accurate to the best of my knowledge.

❑ I have no reportable quantities of regulated chemicals.

❑ I have reportable quantities and have included my State Fire Marshal's Hazardous Substance Information Survey Report or the enclosed Hazardous Materials Inventory Report in addition to my Site Plan.

Signature: _____ Title:_____

Print Name: _____ Date: _____ Phone #: _____

MAIL COMPLETED ANNUAL HAZARDOUS MATERIAL INVENTORY AND FACILITY INFORMATION REPORTS BY NOVEMBER 30TH TO:

Linda Hulme
Public Works Department
1300 NE Village Street
Fairview, OR 97024

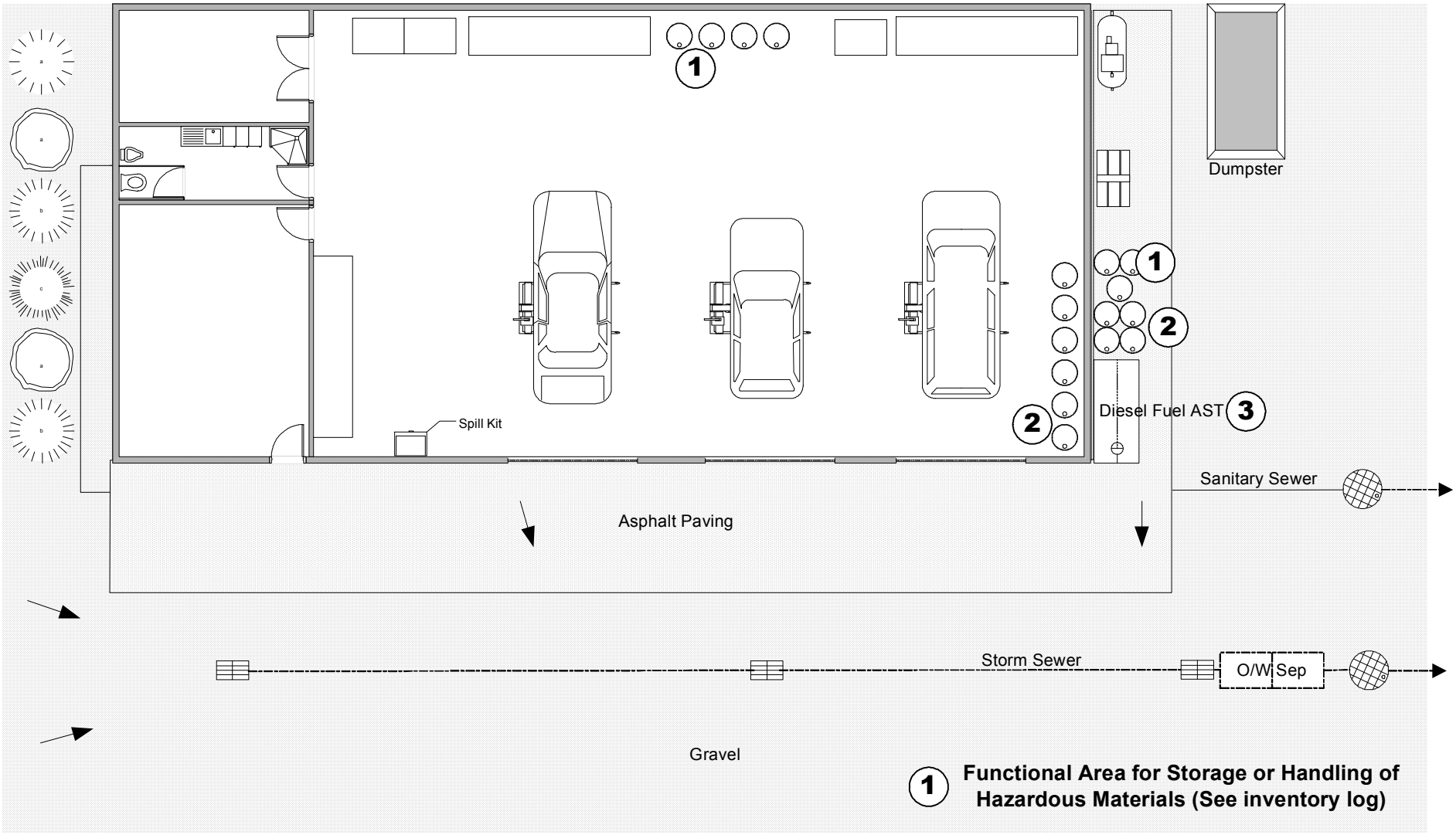
SECTION B – Annual Hazardous Material Inventory Report

Columbia South Shore Well Field Protection Program – Fuel and Hazardous Material Inventory

Company Name: _____ Date: ____/____/20___ NAICS or SIC Code [7]_____

Functional Area(s) [1]	Common or Trade Name [2]	Chemical [3]	CAS No. [4]	Physical State [5]		Hazardous Material Category [6] Please enter quantity range below for each category of hazardous material you are reporting. 0-4 gal 5-9 gal 10-19 gal 20-49 gal 50-199 gal 200 + gal					
						Halogenated Solvent	Carcinogen	Hazardous Substance	Hazardous Waste	Petroleum Fuel	Non-Fuel Petroleum
				S	L	> 10 gal/100 lbs (≥10% by wt)	> 50 gal/400 lbs (≥10% by wt)	> 50 gal/400 lbs (≥10% by wt)	> 30 gal/220 lbs (Any Conc.)	>50 gal in any Single Container	>50 gal in any Single Container

1. On a facility map, indicate the locations where the hazardous material is stored or handled.
2. **Nonwaste:** Provide the common or trade name of the hazardous material. **Waste:** In lieu of trade names, you may provide the Waste Category.
3. Provide the chemical name(s) of the major constituents that singularly or in the aggregate exceed the concentration threshold(s) identified in Section 1.3.1 of the Reference Manual.
4. Enter the chemical abstract service identification number (CAS number) found in 29 CFR, if known for the constituent of highest concentration. Material Safety Data Sheets (MSDS) can be used as a reference.
5. Enter one of the following codes by using an "X" as it applies to the hazardous material's physical state: S = Solid L = Liquid
6. Per the definition of hazardous material in Section 1.3.1 in the Reference Manual, the hazardous material in this report is subject to WHPP regulation based one or more if applicable, of the chemical categories above. Enter in the quantity range that applies to the hazardous material. More than one category may apply.
7. To find your NAICS code visit: www.naics.com or www.census.gov/eos/www/naics

Columbia South Shore Well Field Protection Program – Fuel and Hazardous Material Inventory

SAMPLE Facility Map