



Hazardous Materials Inventory Statement

Business Name: _____ **Address:** _____ **Bldg #:** _____ **Date:** _____

Completed By (Print Name): _____ **Telephone Number:** _____

Chemical or Trade Name ₍₁₎	CAS Number ₍₂₎	Conc. % ₍₃₎	Phys. State ₍₄₎	Max. Daily Amount ₍₅₎	Units ₍₆₎	EHS ₍₇₎	Hazard Class(es) ₍₈₎	Storage Location ₍₉₎	Storage Code ₍₁₀₎	Mixture ₍₁₁₎
Example Chemical	1234-05	100%	Liquid	1400	Gal	No	A-G-S	A-2-4	B-1-5	No