



Linda S. Vail, MPA, Health Officer

INGHAM COUNTY POLLUTION PREVENTION PROGRAM
STATUS SHEET FOR TOXIC, HAZARDOUS, OR POLLUTING MATERIALS

This information is required by the Ingham County Pollution Prevention Regulation and may be used in the event of an emergency. Please be as accurate as possible and print or type all responses. If you have questions please call (517) 887.4312.

BUSINESS INFORMATION

Legal Business Name:
Street Address:
City and Township: Zip Code:
Fire Department Jurisdiction:
Mailing Address (If different than site address):
Business Owner Name:
Business Owner Address:
Property Parcel #: 33- (Use tax ID # where building is located if on multiple parcels)
Hazardous Waste Generator Number (if applicable): (MID or MIG number issued by State)
Nature of Business:

FACILITY CONTACTS (All future correspondence will be mailed to the Primary Contact)

Primary Contact Name:
Phone (Day): E-Mail:
Emergency Contact Name #1:
Phone (Day): Phone (Evening):
Emergency Contact Name #2:
Phone (Day): Phone (Evening):

Please use the following checklist to ensure that you have completed all required reporting:

- Completed Business Information Sheet
Completed Hazardous Materials Inventory
Accurate Site Plan
Completed Manufacturer Inventory
Completed Waste Materials Inventory

- NO CHANGES to my last chemical inventory mailed to your office and ALL ELEMENTS of the Ingham County Pollution Prevention Chemical Status Sheet(s) remain ACCURATE and COMPLETE
Other documentation as provided in section 3.1 (SPCC, PIPP, RCRA, etc.)

ALL FORMS AND PAYMENT ARE DUE MARCH 1ST OF EACH REPORTING YEAR

I declare that the information on this status sheet is true and accurate to the best of my knowledge.

Signature: Date:

Printed Name:

Environmental Health

## **MANUFACTURER INVENTORY (FRESH CHEMICAL):**

In case of an emergency it is sometimes necessary to obtain information from chemical manufacturers so that chemical compatibility and hazardous nature can be determined. Please list the name, address, and phone number of the manufacturers of the materials you store so that emergency responders can call the manufacturers if needed.

**Make additional copies of this sheet to list all manufacturers if necessary.**

<b>Manufacturer Name:</b>	<b>Address:</b>	<b>Phone:</b>
1. _____	_____	_____
	_____	
2. _____	_____	_____
	_____	
3. _____	_____	_____
	_____	
4. _____	_____	_____
	_____	
5. _____	_____	_____
	_____	
6. _____	_____	_____
	_____	
7. _____	_____	_____
	_____	
8. _____	_____	_____
	_____	
9. _____	_____	_____
	_____	
10. _____	_____	_____
	_____	
11. _____	_____	_____
	_____	
12. _____	_____	_____
	_____	
13. _____	_____	_____
	_____	
14. _____	_____	_____

**TOXIC, HAZARDOUS, OR POLLUTING MATERIALS INVENTORY (FRESH CHEMICAL):**

This inventory must include all raw materials (including oils and other petroleum based products) for which you have a safety data sheet (SDS).  
**Make additional copies of this sheet to list all materials if necessary.**

INFORMATION	INGREDIENTS	PERCENT	PHYSICAL STATE	CAS#	HAZARD	MAXIMUM STORAGE	END POINT	STORAGE TYPE
A) Common Name B) Manufacturer C) Storage Location	Chemical Names (Top three ingredients)	%	<u>S</u> olid <u>L</u> iquid <u>G</u> as	CAS Number (See SDS or product label)	Class I-VIII (See Page 5 for instructions)	Maximum Storage Volume	<u>H</u> auled Off-site <u>I</u> ncorporated into product <u>S</u> anitary Sewer <u>A</u> ir <u>R</u> ecycled <u>O</u> ther	See Page 5 for instructions
Example:								
A) Lacquer Thinner	Toluene	46%	L	108-88-3	Class 3, 6	40 gallons	I,H	D
B) ACME Chemical	Xylene	32%		1330-20-7				
C) Paint Room	Benzene	22%		71-43-2				
A)								
B)								
C)								
A)								
B)								
C)								
A)								
B)								
C)								
A)								
B)								
C)								

**WASTE MATERIALS INVENTORY:**

This inventory is to be completed for all liquid industrial and hazardous wastes. **Make additional copies of this sheet to list all wastes if necessary.**

INFORMATION	INGREDIENTS	PERCENT	MAXIMUM AMOUNT	ANNUAL AMOUNT
A) DOT Shipping Name B) Waste Hauler C) Storage Location	Waste Chemical Name (Top three ingredients by percent)	Maximum %	Maximum amount at any time	Amount generated annually
Example:				
A) Waste Thinner	Paint	30%	30 gallons	180 gallons
B) Joe's Hauling	Xylene	20%		
C) Paint Room	Methyl Ethyl Ketone	50%		
A)				
B)				
C)				
A)				
B)				
C)				
A)				
B)				
C)				
A)				
B)				
C)				
A)				
B)				
C)				
A)				
B)				
C)				
A)				
B)				
C)				

## **HAZARD CLASS:**

On the hazardous material inventory the following hazard classes are to be used. These classes have been revised to satisfy the requirements of the Fire Fighter Right-To-Know Regulation (Bulletin #33).

<b><u>Class I</u></b> Explosives/Blasting Agents (Not including class C explosives)	<b><u>Class V</u></b> Oxidizer Organic Peroxide
<b><u>Class II</u></b> Poison Gas Flammable Gas Non-Flammable Gas	<b><u>Class VI</u></b> Poison Irritating Material: Liquid Irritating Material: Solid
<b><u>Class III</u></b> Flammable Liquid Combustible Liquid	<b><u>Class VII</u></b> Radioactive Material (Yellow III Label)
<b><u>Class IV</u></b> Flammable Solid (Dangerous when wet) Flammable Solid Spontaneously Combustible	<b><u>Class VIII</u></b> Corrosives: Liquid Corrosives: Solid

***If a Safety Data Sheet is not required for the substance, and it is not an oil product, please use NONDOT***

## **STORAGE TYPE:**

The following codes are to be used for storage types. These codes are the same codes used for Tier II reporting.

**A= Above Ground Tank**

**G= Carboy**

**M= Glass Bottles or Jugs**

**B= Below Ground Tank**

**H= Silo**

**N= Plastic Bottles or Jugs**

**C= Tank Inside Building**

**I= Silo**

**O= Tote Bin**

**D= Steel Drum**

**J= Fiber Drum**

**P= Tank Wagon**

**E= Plastic Drum**

**K= Box**

**Q= Rail Car**

**F= Can**

**L= Cylinder**

**R= Other**

## **TIER II REPORTING:**

If you store an Extremely Hazardous Substance (EHS) above designated threshold planning quantities (designated under Section 302 of Federal SARA Title III), or you store 10,000 pounds or more of any chemical required to have an SDS, you are required to submit a Tier II report to your Local Emergency Planning Committee (LEPC) and the Michigan Department of Environmental Quality (MDEQ). Tier II forms are mailed from the MDEQ. If you have lost your Tier II report form or would like additional copies, please contact the Ingham County Health Department, Environmental Health at (517) 887-4312.

## **EMERGENCY/SPILL PLAN:**

Facilities regulated by the Ingham County Pollution Prevention Regulation may be required to have an emergency plan. Because of the large number of laws that require emergency planning, Ingham County will consider any of the following plans acceptable, as long as they are accurate and complete. Please submit a copy of your plans to the Ingham County Health Department, Environmental Health. For questions about emergency/spill plans, please contact the Ingham County Health Department, Environmental Health at (517) 887.4312.

- PIPP PLAN - If you store materials on the Michigan Critical Materials Register, if you store over 40,000 gallons of oil/petroleum product, or if you store 5 tons of solid salt (including salt/salt mix) or 1,000 gallons of liquid salt, you are required to have a Pollution Prevention Plan (PIPP).
- SPCC PLAN - If a petroleum product spill from your facility could reach a waterway and you store over 1320 gallons of petroleum product above ground or over 40,000 gallons below ground, or you have a single oil tank over 600 gallons, you are required to have a Spill Control Counter Measure Plan (SPCC).
- HMMP PLAN - If you do not need a PIPP or SPCC and you store over 500 gallons of hazardous materials you are required to submit a Hazardous Materials Management Plan (HMMP).

## **SITE PLAN:**

Each regulated facility is required to submit an accurate site plan. If you have previously submitted a site plan and there have been no changes to your facility, you are not required to submit a new plan. Copies of these site plans will be made available to your local fire department for emergency use, and therefore must be accurate as possible. A sample plan can be found on page 7.

### **Site Plan Instructions:**

On a separate piece of paper, provide a site plan of the property and building(s) at this address. The orientation of the building(s) should be such that North is at the top of the page. Streets adjacent to the property should also be indicated on the drawing. Below is a list of the types of information that must be included on a site plan as well as the symbols you should use when preparing the plan:

Entrance	_____	---
Emergency Exits	_____	E
Evacuation Route	_____	---->
Storm Sewer	_____	⊕
Sanitary Sewer	_____	○
Other Point of Discharge	_____	⊗
Fire Hydrant	_____	●
Automatic Sprinkler Head	_____	⊙ AS
Outside Sprinkler Connect	_____	⌋
Well	_____	⊙
Above-Ground Storage Tank	_____	10,000
Below-Ground Storage Tank	_____	5,000
Guard Station	_____	◇ G
Material Safety Data Sheet File	_____	⊙ S
Knox Box	_____	□ K

Staging Area or Loading Dock \_\_\_\_\_ \*

#### Utility Emergency Shut-Offs:

Electric	_____	⊙ E
Gas	_____	⊙ G
Water	_____	⊙ W
Halon	_____	⊙ H

#### Hazardous Materials Storage

Flammables	_____	F
Reactives	_____	R
Corrosives	_____	C
Oxidizers	_____	O
Poisons	_____	P
Explosives	_____	E
Radioactive	_____	RA

# SAMPLE SITE PLAN

