

<b>EPA FORM R</b> <b>PART II. CHEMICAL - SPECIFIC INFORMATION</b>	TRI FACILITY ID NUMBER  Toxic Chemical Category or Generic Name
--	---

**SECTION 1. TOXIC CHEMICAL IDENTITY** (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS NUMBER (IMPORTANT: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
1.2	Toxic Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
1.3	Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes"; Generic name must be structurally descriptive.)

**SECTION 2. MIXTURE COMPONENT IDENTITY** (Important: DO NOT complete this section if you complete Section 1. above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
-----	--

**SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY**  
 (Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. <input type="checkbox"/> Produce    b. <input type="checkbox"/> Import If produce or import: c. <input type="checkbox"/> For on-site use/processing d. <input type="checkbox"/> For sale/distribution e. <input type="checkbox"/> As a byproduct f. <input type="checkbox"/> As an impurity	a. <input type="checkbox"/> As a reactant b. <input type="checkbox"/> As a formulation component c. <input type="checkbox"/> As an article component d. <input type="checkbox"/> Repackaging	a. <input type="checkbox"/> As a chemical processing aid b. <input type="checkbox"/> As a manufacturing aid c. <input type="checkbox"/> Ancillary or other use

**SECTION 4. MAXIMUM AMOUNT OF TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR**

4.1	<input style="width: 50px;" type="text"/> (Enter two-digit code from instruction package.)
-----	--

**SECTION 5. QUANTITY OF TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM**

		A. Total Release (pounds/year)(enter range from instructions or estimate)	B. Basis of estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>		
5.2	Stack or point air emissions	NA <input type="checkbox"/>		
5.3	Discharges to receiving streams or water bodies (enter one name per box)			
Stream or Water Body Name				
5.3.1				
5.3.2				
5.3.3				
5.4.1	Underground Injection on-site to Class I Wells	NA <input type="checkbox"/>		
5.4.2	Underground Injection on-site to Class II-V Wells	NA <input type="checkbox"/>		