## Critical and Hazardous Materials List

Please fill out the following list as per instructions, return to the Building and Planning Department, and retain a copy at your place of business. Feel free to make copies, attach additional pages, and/or add explanatory notes, if appropriate.

<table>
<thead>
<tr>
<th>Company Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Property Address:</td>
<td></td>
</tr>
</tbody>
</table>

### PRODUCT 1

- Product and/or Chemical Name:
- Maximum Quantity (Gals, Lbs, Cu.Ft):
- Material Classification (UBC Table 3D, 3E):
- MSDS Sheet etc.:
- Area Stored and/or Used:
- Proposed Method of Storage:

### PRODUCT 2

- Product and/or Chemical Name:
- Maximum Quantity (Gals, Lbs, Cu.Ft):
- Material Classification (UBC Table 3D, 3E):
- MSDS Sheet etc.:
- Area Stored and/or Used:
- Proposed Method of Storage:

### PRODUCT 3

- Product and/or Chemical Name:
- Maximum Quantity (Gals, Lbs, Cu.Ft):
- Material Classification (UBC Table 3D, 3E):
- MSDS Sheet etc.:
- Area Stored and/or Used:
- Proposed Method of Storage:

Revised 07/25/03
<table>
<thead>
<tr>
<th>PRODUCT 4</th>
<th>PRODUCT 5</th>
<th>PRODUCT 6</th>
<th>PRODUCT 7</th>
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<tbody>
<tr>
<td>Product and/or Chemical Name:</td>
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<td>Area Stored and/or Used:</td>
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<td>Proposed Method of Storage:</td>
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</tr>
</tbody>
</table>

Revised 07/25/03
PRODUCT 8

Product and/or Chemical Name:

Maximum Quantity (Gals, Lbs, Cu.Ft):

Material Classification (UBC Table 3D, 3E):

MSDS Sheet etc.:

Area Stored and/or Used:

Proposed Method of Storage:

The above is a true and correct accounting of the chemicals intended to be used and/or stored at the referenced facilities.

Signed by: ___________________________ Date: ___________________________

FOR OFFICE USE ONLY

Activity SIC Code: __________

Designation: _______ Critical Use Activity _______ Not a Critical use Activity _______

Reviewed By: ___________________________ Date: ___________________________