

Instructions for Completing the Pure Chemical Inventory Form

Please list as much information as possible. A complete survey will ensure compliance with New Jersey Department of Health and Senior Services laws. Contact REHS at 732/445-2550 with questions about this form or how to complete it properly.

Room Information Section: Please fill in all boxes in this section. It is *extremely* important to fill in the section “# of Employees Potentially Exposed.”

Column 1. Hazardous Chemical Name: List the name of the pure chemical product. Pure chemicals should not have multiple ingredients. If a product has multiple ingredients, please list it on the “Chemical Mixture Form.”

Column 2. CAS Number: List all known CAS numbers as they correspond to the product names.

Column 3. Container Type: Identify and list which of the following container codes matches with your product.

TA	above ground tank
TB	below ground tank
TI	tank inside building
DS	steel drum
DP	plastic drum
DF	fiber drum
CN	can
CB	carboy
SI	silo
BA	bag
BX	box
CY	cylinder
BG	bottles or jugs (glass)
BP	bottles or jugs (plastic)
BN	tote bin
TW	tank wagon
RC	rail car
OT	other (describe)

Column 4. Number of Containers: List the number of containers of this product at the location listed in “Room Information.”

Column 5. Container Unit: List the units of the container. For liquid products, the units should be gallons (G). For solid products, the units should be pounds (P). For compressed air products, the units should be cubic feet (C).

Return completed survey forms to: REHS
Building 4086
Livingston Campus

Deadline for submittal to REHS:

