



U.S. Environmental Protection Agency
 Washington, DC 20460
 Partial Updating of TSCA Inventory Data Base
 Site Report

Form U

2016

(Section 8(a) Toxic Substances Control Act, 15 U.S.C. 2607(a))

Check all that apply	
Original 2016 submission	X
Joint submission(s)- as primary submitter	X
Joint submission – as secondary submitter	
Revision to an original submission	

CERTIFICATION

Certification Statement: I hereby certify to the best of my knowledge and belief that all information entered on this form is complete and accurate.

I further certify that, pursuant to 15 U.S.C. § 2613(c), for all claims for protection for any confidential information made with this submission, all information submitted to substantiate such claims is true and correct, and that it is true and correct that the person submitting the claim has:

- (i) taken reasonable measures to protect the confidentiality of the information;
- (ii) determined that the information is not required to be disclosed or otherwise made available to the public under any other Federal law;
- (iii) a reasonable basis to conclude that disclosure of the information is likely to cause substantial harm to the competitive position of the person; and
- (iv) a reasonable basis to believe that the information is not readily discoverable through reverse engineering.

Any knowing and willful misrepresentation is subject to criminal penalty pursuant to 18 U.S.C. § 1001.

Signature		Official Title	
Name (printed)		Email	
Date Signed		Address	

PART I. COMPANY & SITE IDENTIFICATION INFORMATION

SECTION A. PARENT COMPANY INFORMATION

1.A.1	Parent Company Name	
1.A.2	Parent Company Dun & Bradstreet Number	
1.A.3	Parent Company Address (line 1)	
1.A.4	Parent Company Address (line 2)	
1.A.5	City	1.A.6 County/Parish
1.A.7	State	1.A.8 Zip Code

SECTION B. SITE INFORMATION

1.B.1	Site Name	
1.B.2	Site Dun & Bradstreet Number	
1.B.3	Site Address (line 1)	
1.B.4	Site Address (line 2)	
1.B.5	City	1.B.6 County/Parish
1.B.7	State	1.B.8 Zip Code

SECTION C. TECHNICAL CONTACT INFORMATION									
1.C.1	Prefix		First Name		Middle Initial				
	Last Name				Suffix				
1.C.2	Company Name								
1.C.3	Telephone								
1.C.4	Email Address								
1.C.5	Mailing Address (line 1)								
1.C.6	Mailing Address (line 2)								
1.C.7	City		1.C.8	State		1.C.9	Zip Code		
1.C.10	Country								

*Confidentiality claims for information in Part I, Sections A, B, and C, are made, as necessary, for each chemical substance on subsequent pages.

PART II. MANUFACTURING INFORMATION										
SECTION A. CHEMICAL IDENTIFICATION										
2.A.1	CBI for Chemical Identification									
2.A.2	Chemical Identifying Number				2.A.3	Number ID Code				
2.A.4	Chemical Name									
SECTION A. JOINT SUBMISSION INFORMATION (Primary Submitter only)								NA	X	
2.A.5	Trade name									
2.A.6	Other Information									
2.A.7	Secondary Company Name									
2.A.7	Secondary Company Address									
2.A.9	City		2.A.10	State or Province		2.A.11	Zip Code		2.A.12	Country
SECTION B. MANUFACTURING INFORMATION										
2.B.1	CBI for Company Identification			2.B.10	Number of Workers			CBI		
2.B.2	CBI for Site Identification			2.B.11	Maximum Concentration			CBI		
2.B.3	CBI for Technical Contact Information			2.B.12	Is chemical being recycled?			CBI		
				Report		a. Physical Form		b. % PV in Each Physical Form		
				Physical Form		Check all that apply	CBI	Percent	CBI	
Report CY 2015 Production Volume										
2.B.4	Activity	M or I	CBI	2.B.13	Dry Powder					
2.B.5	Domestically Manufactured		CBI	2.B.14	Pellets or Large Crystals					
2.B.6	Imported		CBI	2.B.15	Water or Solvent Wet Solid					
2.B.7	Chemical never physically at site		CBI	2.B.16	Other Solid					
2.B.8	Volume used on site		CBI	2.B.17	Gas or Vapor					
2.B.9	Volume Exported		CBI	2.B.18	Liquid					
				2.B.19	NKRA					

SECTION C. TECHNICAL CONTACT INFORMATION									
1.C.1	Prefix		First Name		Middle Initial				
	Last Name				Suffix				
1.C.2	Company Name								
1.C.3	Telephone								
1.C.4	Email Address								
1.C.5	Mailing Address (line 1)								
1.C.6	Mailing Address (line 2)								
1.C.7	City		1.C.8	State		1.C.9	Zip Code		
1.C.10	Country								

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SECTION A. CHEMICAL IDENTIFICATION										
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2.A.4	Chemical Name									
SECTION A. JOINT SUBMISSION INFORMATION (Primary Submitter only)									NA	
2.A.5	Trade name									
2.A.6	Other Information									
2.A.7	Secondary Company Name									
2.A.7	Secondary Company Address									
2.A.9	City		2.A.10	State or Province		2.A.11	Zip Code		2.A.12	Country
SECTION B. MANUFACTURING INFORMATION										
2.B.1	CBI for Company Identification			2.B.10	Number of Workers			CBI		
2.B.2	CBI for Site Identification			2.B.11	Maximum Concentration			CBI		
2.B.3	CBI for Technical Contact Information			2.B.12	Is chemical being recycled?			CBI		
				Report Physical Form		a. Physical Form		b. % PV in Each Physical Form		
						Check all that apply	CBI	Percent	CBI	
Report CY 2015 Production Volume										
2.B.4	Activity	M or I	CBI	2.B.13	Dry Powder					
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2.B.9	Volume Exported		CBI	2.B.18	Liquid					
				2.B.19	NKRA					

Paperwork Reduction Act Notice

The annual public burden for this collection of information, which is approved under OMB Control Number 2070-0162, varies depending on the submitter's experience with CDR reporting, and is estimated to average 126.44 hours per year for the average multi-chemical submission of 7.5 chemicals per site with 22% of reports consisting of partial reports and 15% of sites as new reporters. A full report includes manufacturing, processing, and use information. A partial report includes manufacturing information and does not include processing and use information. According to the Paperwork Reduction Act, "burden" means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. For this collection it includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information; processing and maintaining information; and disclosing or providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number. The OMB control number for this collection appears above. In addition, the OMB control numbers for EPA's regulations, after initial display in the final rule, are listed in 40 CFR part 9. Expiration. XXXX .

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden (including the use of automated collection techniques) to: Director, Collection Strategies Division, U.S. Environmental Protection Agency (Mail Code 2822), 1200 Pennsylvania Ave, N.W., Washington, D.C. 20460. Include the OMB control number in any correspondence, but do not submit the completed form to this address. The requested information should be submitted in accordance with the instructions accompanying the form, or as specified in the corresponding regulation.



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Check all that apply	
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Joint submission – as secondary submitter	X
Revision to an original submission	

Part IV. Joint Submission – Secondary Submitter					
PART IV. SECONDARY COMPANY IDENTIFICATION INFORMATION					
SECTION A. SECONDARY COMPANY INFORMATION					
4.A.1	Secondary Company Name				
4.A.2	Secondary Company Address (line 1)				
4.A.3	Secondary Company Address (line 2)				
4.A.4	City		4.A.5	County/Parish	
4.A.6	State		4.A.7	Zip Code	
4.A.8	Country				

Not For Submission

Page ___ of ___.

SECTION B. SECONDARY TECHNICAL CONTACT INFORMATION					
4.B.1	Prefix		First Name		Middle Initial
	Last Name				Suffix
4.B.2	Company Name				
4.B.3	Telephone				
4.B.4	Email Address				
4.B.5	Mailing Address (line 1)				
4.B.6	Mailing Address (line 2)				
4.B.7	City		4.B.	County/Parish	
4.B.8	State		4.B.9	Zip Code	
4.B.10	Country				

SECTION D. TRADE PRODUCT IDENTIFICATION INFORMATION					
4.D.1	Trade product name				
4.D.2	a. Chemical Name	CBI	b. Chemical Identifying Number	c. ID Code	d. Percent of Formulation +
4.D.3	Other Information				

+Formulations provided by secondary submitters are held as confidential

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