



# PFD HAZARDOUS MATERIALS INVENTORY

Questions: 745-3281

Fax form: 745-2460

COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ LOCATION: \_\_\_\_\_

REPRESENTATIVE: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATED: \_\_\_\_\_ EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

Please rank hazardous materials in quantity.

(non-business hours #, cellular #, etc)

TRADE NAME	CHEMICAL NAME	UN #	QUANTITY Litres & Container (eg. 2000 L in Steel 45 gallon drums)	RATE OF USE (low – med – high)	MITIGATION INFO ON SITE (yes – no)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					