

Oregon Hazardous Substance Information Survey Annual Report 2003



12/14/04

Oregon Office of Homeland Security
Office of State Fire Marshal
Hazardous Substance Information System
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Introduction

Overview

The Office of State Fire Marshal (OSFM) annually surveys Oregon facilities as authorized by the Oregon Community Right to Know and Protection Act (ORS 453.307 through 453.402). The Hazardous Substance Information Survey (HSIS) identifies hazardous substances that are used, stored, manufactured and/or disposed of throughout Oregon. The Act requires businesses and industry to provide demographic information and to report hazardous substances at or above reportable quantities. Any private or governmental business facility possessing reportable quantities of hazardous substances are required to report specific information including the chemical name, maximum amount and storage location. These facilities are also required to notify the OSFM within 30 days of any substantive changes that occur at the facility.

This report summarizes the information gathered from the annual HSIS sent to covered facilities in 2003.

What benefits are achieved through this information?

A number of benefits related to emergency response planning and protection activities are achieved with the information gathered through the HSIS, including:

- Informed emergency responders and emergency planners in the event of an incident. Having accurate information is essential in order to effectively protect themselves, the facility, the surrounding community and the environment should an incident occur
- Targeting tools for hazardous materials planning activities
- Risk reduction concerning property losses
- Increased protection for properties with neighboring facilities that may have hazardous substances
- Timely and appropriate emergency response to an incident

These benefits are achieved by facilities whether or

not hazardous substances are present at the site. It is as important for emergency responders and planners to know there are no hazardous substances present as it is for them to know there are hazardous substances present.

How is the information used?

The OSFM has created a database containing information received from the HSIS. Once the information is data entered and validated, groups and individuals are able to access the information to help with their hazardous substance related activities.

Data collected through the HSIS is provided annually to each local fire department, county emergency manager, county health administrator, the Local Emergency Planning Committee (LEPC) and the State Emergency Response Commission (SERC). This information enables them to effectively plan for and respond to incidents involving hazardous materials and other emergencies.

The HSIS non-confidential information can be accessed via the web at www.sfm.state.or.us. This database has preset queries allowing the user to interact with the data in a variety of ways.

The database is also available on CD and can be obtained by completing and submitting the Request for Hazardous Substance Information form, which is included in this report. In addition, the Community Right to Know (CR2K) Unit has staff available to help individuals with more detailed requests. This information is available in a variety of formats, from electronic transfers to hard copy. Examples of the information available include:

- Demographic information
- Amounts and types of hazardous substances used, stored and manufactured at a facility
- Amounts of hazardous substances transported to and from facilities
- Specific hazards relating to hazardous substances at the facility

Community Right to Know Survey and Compliance Programs

Authority and Application

The Community Right to Know Survey and Compliance Program Rules are promulgated under the Office of State Fire Marshal's authority contained in ORS 453.367 and 453.402(2). OAR chapter 837, division 85, applies to covered employers, owners and operators of fixed facilities where hazardous substances or wastes are likely to be manufactured, generated, used, stored, possessed or disposed of.

Purpose and Scope

- To assure all reportable quantities of hazardous substances that are used, stored, manufactured, processed or disposed of at fixed facilities are identified and the information is submitted to the OSFM.
- To address the process by which the information is distributed to emergency personnel, public agencies and the public.
- To establish procedures for issuing non-compliance notices for failure to comply with the reporting requirements.
- To address the process by which hazardous substance information is identified and submitted to the OSFM.
- To address the process by which covered employers, owners, and operators will be evaluated to determine their level of compliance.
- To address the process by which penalties are assessed.

Hazardous Substance Information Hotline

The Hazardous Substance Information Hotline has been established to serve as a gateway for callers who have questions regarding hazardous substances and related reporting requirements. The hotline is active M-F 8:00-5:00 PST. The number is: (503) 378-6835.



Number of Program Related Phone Calls in 2003

Hazardous Substance Information Survey Calls

- ◆ Approximately 9,416 calls received

Information provided included:

- ◆ Explanation of who must report
- ◆ What substances are reportable
- ◆ How to determine reportable quantities
- ◆ How to determine average, maximum and yearly amounts
- ◆ General survey and reporting information

Hazardous Substance Possession Fee Calls

- ◆ Approximately 657 calls received

Information provided included:

- ◆ Explanation on how fees are calculated and assessed
- ◆ What programs are funded by the fees
- ◆ The basis necessary to request a fee review
- ◆ Procedures to follow for requesting a fee review
- ◆ How the review process works and deadlines for filing a review

Data Collection and Distribution

The 2003 surveys were mailed out monthly beginning in February 2003 and ending in October 2003. The distribution of surveys to facilities each month is determined by the county the facility is located in. This chart shows the county distribution for each month.



February	Baker, Crook, Gilliam, Grant, Harney, Jefferson, Klamath, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, Wheeler
March	Deschutes, Marion, Polk
April	Coos, Curry, Jackson, Josephine
May	Benton, Douglas, Linn
June	Lane, Lincoln
July	Clackamas, Hood River, Yamhill
August	Tillamook, Washington
September	Columbia, Multnomah (Zip Codes greater than or equal to 97217)
October	Clatsop, Multnomah (Zip Codes less than or equal to 97216)

In 2003 the Office of State Fire Marshal's Community Right to Know Unit received and processed 76 requests for Hazmat incident information, 204 requests for customized hazardous substance information and 3 requests for Toxic Release Inventory information. In addition, monthly updates were provided for the information on the OSFM web page, which was accessed approximately 4,604 times in 2003.

The first priority, once data is entered and validated, is sending detailed and summary information to local fire departments via the Hazardous Substance Information System (HSIS) CD. This information helps emergency service personnel better serve and protect their communities. The information allows agencies to do targeted pre-planning which can be a crucial step in protecting human life, property, and the environment in an emergency.

Both detailed and summary information (via the HSIS CD) is also sent to other agencies; e.g., local emergency planning groups, county health agencies, and emergency managers. Except for secured information,

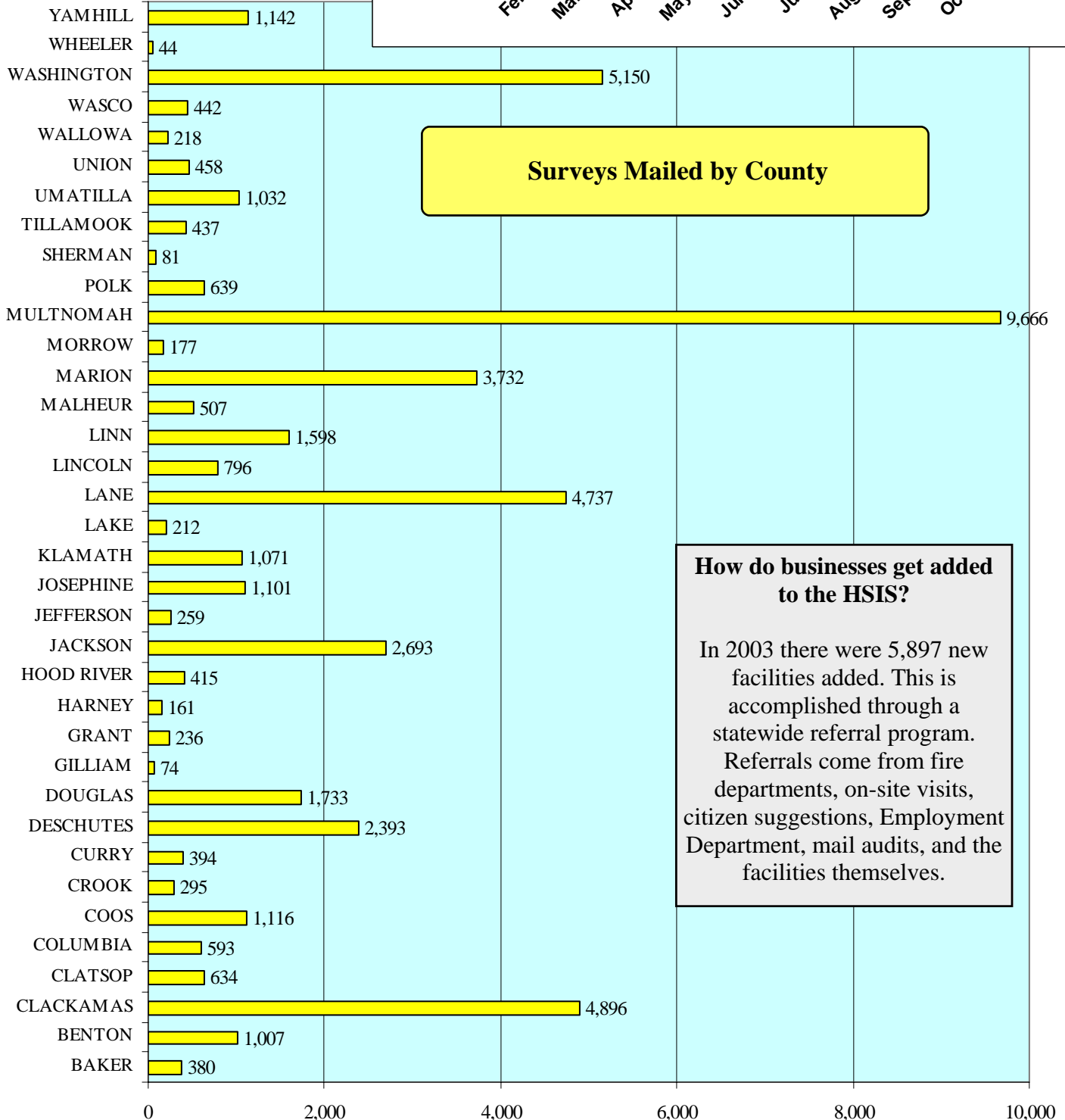
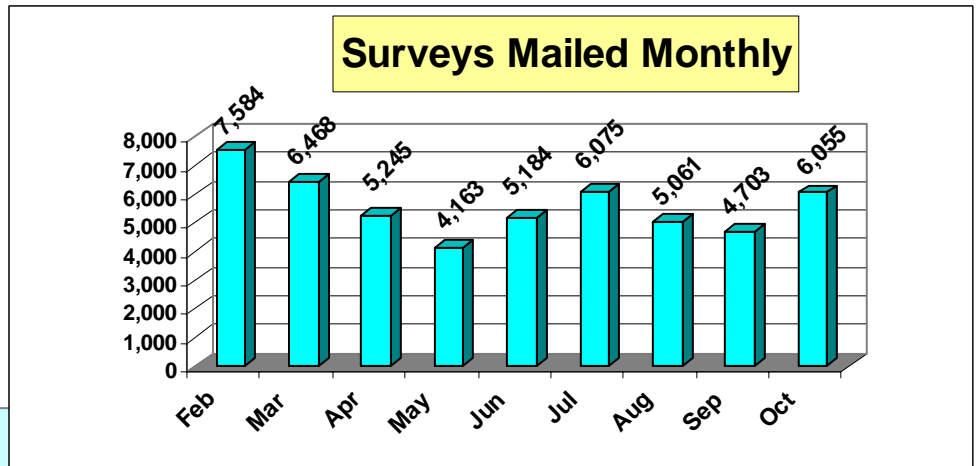
most other information is accessible to the public under Oregon's Community Right to Know and Protection Act.

The information gathered (not including secured information) is also available via the internet at www.sfm.state.or.us.

In 2003, the Community Right to Know Unit created and distributed HSIS CD's to 305 fire departments and hazardous materials response teams, 72 emergency managers and 24 county health administrators. In addition, special requests generated 25 CD's for emergency responders and 55 CD's for the general public.

Survey Mailing

Number of surveys mailed in 2003 shown by month and county, with a total of 50,538 surveys mailed.



Surveys Mailed by County

How do businesses get added to the HSIS?

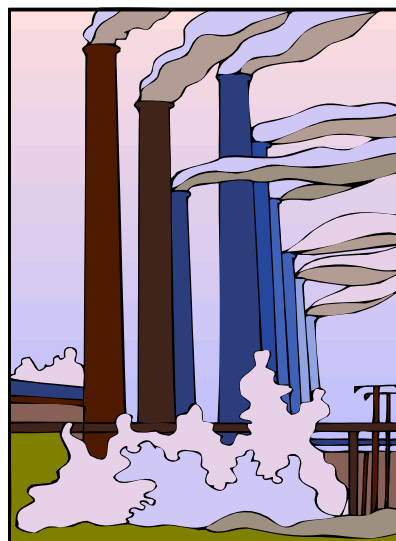
In 2003 there were 5,897 new facilities added. This is accomplished through a statewide referral program. Referrals come from fire departments, on-site visits, citizen suggestions, Employment Department, mail audits, and the facilities themselves.

EHS and 112(r) Facilities

Section 302 – Extremely Hazardous Substances (EHS)

Facilities that have Extremely Hazardous Substances (EHS) present at any one time that meet or exceed the specified Threshold Planning Quantity (TPQ) as defined by the Environmental Protection Agency (EPA) under the Emergency Planning and Community Right to Know Act (EPCRA) are subject to the EHS planning and reporting requirements. Of the approximate 33,042 facilities who submitted their 2003 Hazardous Substance Information Survey, about 3.7% identified themselves as meeting these requirements.

If you have questions about specific EHS planning and reporting requirements, contact the EPA Emergency Planning and Community Right To Know Hotline (800) 424-9346, Monday through Friday 9 AM to 6 PM, Eastern Time. You can also find EHS information at the EPA web site: <http://yosemite.epa.gov/oswer/ceppoweb.nsf/content/epcraOverview.htm?OpenDocument#emergencyplanning> and a list of EHS substances at http://yosemite.epa.gov/oswer/ceppoehs.nsf/EHS_Profile?openform

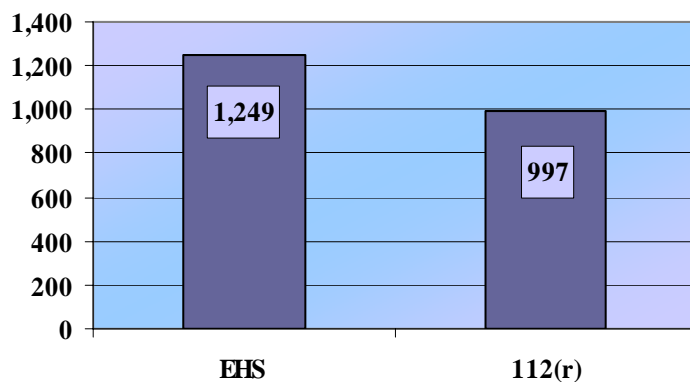


Section 112(r) – Clean Air Act (CAA)

The Clean Air Act (CAA) Amendments of 1990 included revisions to Section 112(r), Prevention of Accidental Releases. These revisions are referred to as Risk Management Plans, and are intended to help prevent accidental releases of certain toxic and flammable substances, minimize the effects of releases, and develop procedures to inform the public and local agencies responsible for responding to accidental releases. Of the approximate 33,042 facilities who submitted their 2003 Hazardous Substance Information Survey, about 3% identified themselves as being subject to the reporting requirements of Section 112(r) of the Clean Air Act.

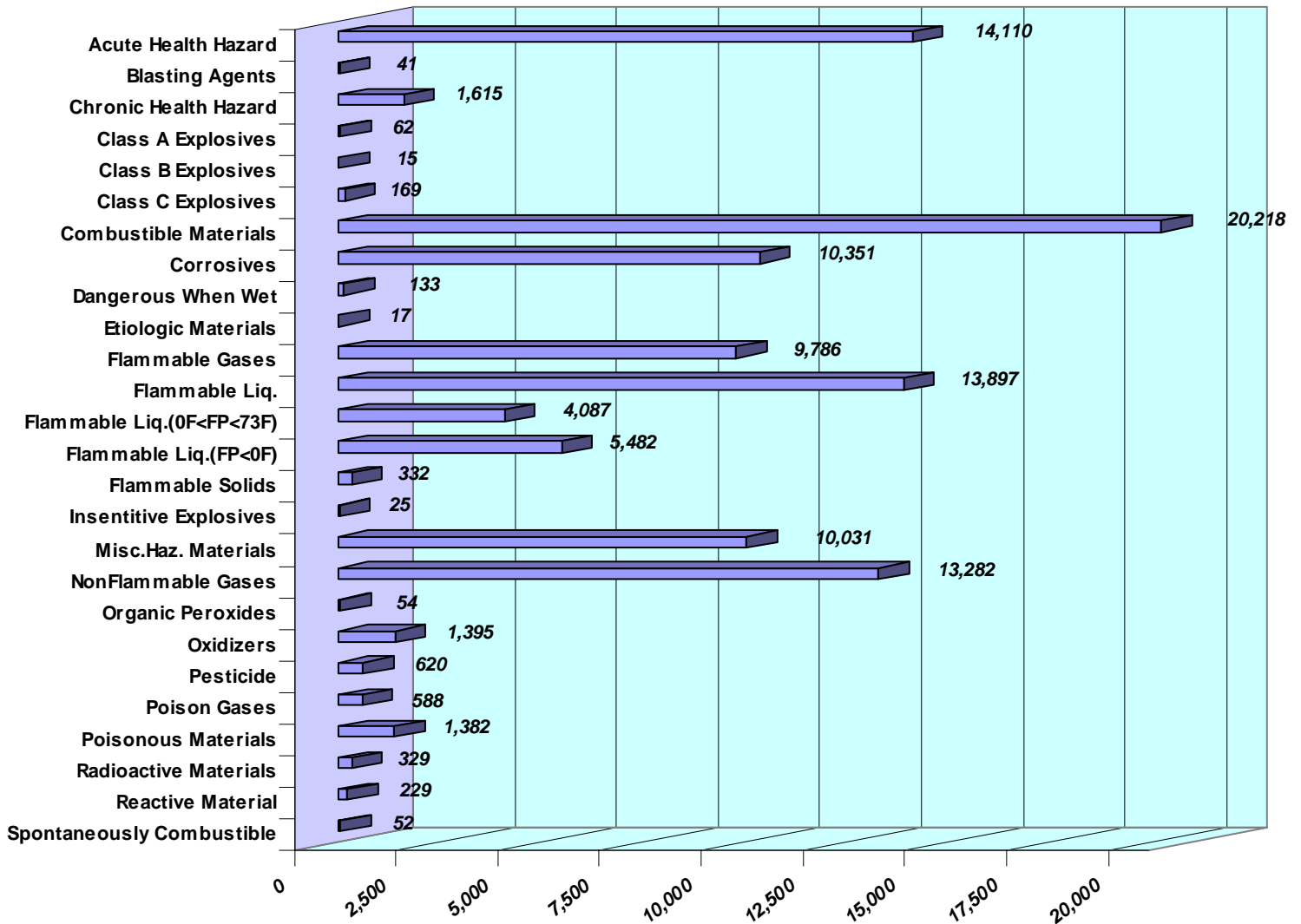
If you have questions about specific 112(r) reporting requirements, contact EPA's RCRA, Superfund and EPCRA Hotline (800) 424-9346, Monday through Friday 9 AM to 6 PM, Eastern Time, **or** Calvin Terada, RMP Program Coordinator, (206) 553-4141 **or** visit the CEPPO home page on the World Wide Web at <http://yosemite.epa.gov/oswer/ceppoweb.nsf/content/index.html>. A list of 112(r) substances can be found at <http://yosemite.epa.gov/oswer/ceppoweb.nsf/content/chemicals.htm>

Number of facilities that have identified themselves as being subject to the reporting requirements of EHS or 112(r)

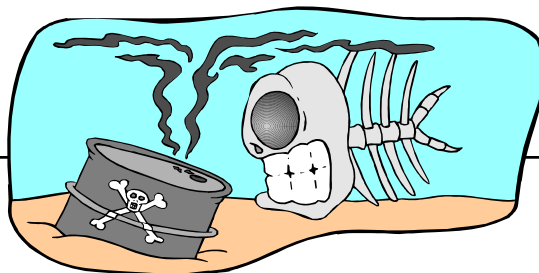


Number of Hazardous Substances Reported, By Primary Hazard Classification

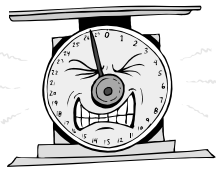
The information gathered through the Hazardous Substance Information Survey can be organized in many different ways to accommodate the specific needs of the user. The following pages have information shown by chemical hazard class, amount, city and county.



Below are examples of hazardous substances belonging in each hazard classification. Many substances can be associated with more than one hazard classification.



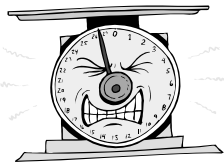
Class A Explosives (1.1)	Dynamite Geldyne Tovex	Reactive Materials (4.4)	Picric Acid Polymeric MDI Sulfuric Acid 48-93%
Class B Explosives (1.2)	Apcogel Blasting Caps Grenades Flash Bang	Combustible Materials (4.5)	ABS Resin Imaging Oil Rotella Oil 30
Class C Explosives (1.3)	Ammunition Black Powder Firecrackers	Oxidizers (5.1)	Metex IT Oxxium 200 Silver Nitrate
Blasting Agents (1.4)	Anfo Fertilizer Nitro Carbonitrate Tovan Super 80-Water Gel	Organic Peroxides (5.2)	Cumene Hydroperoxide Methyl Ethyl Ketone Peroxide Miesie Polyester Hardener
Insensitive Explosives (1.5)	Austinite Blastex Plus Hydromite	Poisonous Materials (6.1)	Mocap EC Phenol Potassium Titanium Fluoride
Flammable Gases (2.1)	Hydrogen Cyanide Isobutane Silane	Etiologic Materials (6.2)	Ethidium Bromide Vectobac Biolarvicide Waste Bio-Hazardous
NonFlammable Gases (2.2)	Cougar 700 Nitrogen Refrigerant 134A	Acute Health Hazards (6.3)	Diethylene Glycol Lorsban 4E N/F Brake Parts Cleaner
Flammable Liquid FP<0F (3.1)	Ethyl Chloride Gasoline Methyl-T-Butyl Ether	Chronic Health Hazards (6.4)	Dowanol DM Ludox CL Saf-T-Side Oil
Flammable Liquid 0F<FP<73F (3.2)	Ethanol Metasystox-R N-Propyl Acetate	Pesticides (6.5)	Mirage Parathion 8EC Roundup Herbicide
Flammable Liquid 73F<FP<141F (3.3)	Methoxychlor EC Mineral Spirits Octane Boost	Radioactive Materials (7.3)	Nickel 63 Phosphorus 32 Thorium Oxide
Flammable Solids (4.1)	Phosphorous Rhodium Sodium Hydrosulfite	Corrosives (8.0)	Hydrofluoric Acid Solutions Proxel Quorum Pink II HF
Spontaneously Combustible Materials (4.2)	Lexan 920 Linseed Oil Sodium Metal	Misc. Haz. Materials (9.0)	Corn Syrup L-Lysine NB Rubber
Dangerous When Wet (4.3)	Calcium Carbide Calcium Cyanamide Phosfume Tabs		



Hazardous Substances Reported in Quantities Over 1 Million Pounds, Gallons or Cubic Feet



ABS PLASTIC	CR50 R630 780 830 PF708 ISHIHARA	KINGSFORD MATCHLIGHT BRIQUETTES
ABS RESIN	CRUDE OIL	KRF M73Y PRODUCTS
ACETYLENE	CRYOLITE/BATH SOLID	KRF M75Y PRODUCTS
ALUMINA	DIATOMACEOUS EARTH	LATEX EMULSIONS
ALUMINUM	DIESEL FUELS	LEAD ACID BATTERIES-DRY
ALUMINUM HYDROXIDE	DOLOMITE LIME	LEAD ACID BATTERIES-WET
AMMONIA ANHYDROUS	DOLOMITE PELLETIZED	LEAD ALLOYS AND SCRAP
AMMONIUM NITRATE	DOLOMITIC HYDRATED LIME	LEAD OXIDE
AMMONIUM NITRATE FERTILIZERS	ETHANOL	LIME MUD
AMMONIUM PHOSPHATE	FBB SAND ONE GRAIN 422	LIME SLUDGE
AMMONIUM PHOSPHATE FERTILIZER	FERTILIZER 38.5,40,41,42,43,44-0-0	LIMESTONE
AMMONIUM PHOSPHATE MONOBASIC	FERTILIZER 0-0-60	LIMESTONE PELLETIZED
AMMONIUM PHOSPHATE SULFATE	FERTILIZER 0-0-62.3	LUBE OIL BLENDING ADDITIVES
AMMONIUM POLYPHOSPHATE	FERTILIZER 10-34-0	MAGNESIUM CHLORIDE
AMMONIUM SULFATE	FERTILIZER 11-52-0	MARINE DIESEL OIL
AMMONIUM SULFATE FERTILIZER	FERTILIZER 16-20-0	MATRIX-MINEX A-270
ARGON	FERTILIZER 20-0-0	MAX CEM
ARGON LIQUID	FERTILIZER 20-0-0-24	METHANOL
ARSENIC ACID SOL	FERTILIZER 20-0-0-5	MONOAMMONIUM PHOSPHATE FERTILIZER
ASPHALT	FERTILIZER 20-3-3-3	MOTOR OIL
ASPHALT CHARGE STOCK	FERTILIZER 21-0-0	MURIATE OF POTASH
ASPHALT EMULSION	FERTILIZER 21-0-0-24	MURIATE OF POTASH 0-0-60
ASPHALT LIQUID	FERTILIZER 21-0-0-24 & 20.5-0-0	MUSTARD AGENT
AVIATION GASOLINE	FERTILIZER 21-0-0-24S	NAPHTHA
AZ 1512-SED PHOTORESIST	FERTILIZER 32-0-0	NATURAL GAS
BLACK LIQUOR	FERTILIZER 32-0-0 AN	NIKE GRIND FOAM FRACTION
BLASTING AGENT	FERTILIZER 46-0-0	NIKE GRIND RUBBER FRACTION
BUNKER C FUEL OIL	FERTILIZER MIXTURE	NITROGEN
CALCINED COKE	FERTILIZER UAN-32	NITROGEN CRYOGENIC
CARBON ANODE BUTTS	FERTILIZER UREA	NORTHSTAR SODIUM HYPOCHLORITE
CARBON DIOXIDE	FLOUR	N-SOL 32
CCA TYPE C	FLY ASH	OIL NEUTRAL BASE
CEMENT	FORMALDEHYDE	OXYGEN
CHLORINE	FORMALDEHYDE SOLUTION	OXYGEN LIQUID
CHRISTY MINERALS CALCINED FLINT	FUEL OIL	PARTICLEBOARD
CHROMIC ACID	GASOLINE	PEBBLE QUICKLIME
CLAD PANEL	GREEN DIAMOND SAND	PENTA TREATED WOOD
CLARIFIER UNDERFLOW SLURRY	GREEN LIQUOR	PENTACHLOROPHENOL SOLN
COAL	GYPNUM	PERLITE
COAL TAR PITCH-LIQUID	HAZARDOUS WASTE SOLID, NOS	PERLITE NA66
COAL TAR PITCH-SOLID	HEATSET INKS	PFR PRODUCTS
COKE	HELIUM	PFR PRODUCTS-LACTATE
COKE CALCINED PETROLEUM	ISO 95 POLYISOCYANURATE INSULATION BOARD	PHENOL
COMPRESSED AIR	JET FUEL	PHENOLIC RESIN
COOLANT	KINGSFORD CHARCOAL BRIQUETTES	PLY VENEER



Hazardous Substances Reported in Quantities Over 1 Million Pounds, Gallons or Cubic Feet Continued



POLYETHYLENE	USED FOUNDRY SAND
POLYETHYLENE GLYCOL	VACUUM GAS OIL
POLYETHYLENE PELLETS	WASTE 300 WASTEWATER
POLYVINYL CHLORIDE RESIN	WASTE BOILER FLY ASH
PORTLAND CEMENT	WASTE NEWS PRINT
PORTLAND CEMENT TYPE III	WASTE OIL
POTASH	WASTE PROCESS MIXED
POTASSIUM CHLORIDE	WHEAT FLOUR
POTASSIUM CHLORIDE FERTILIZER	WHITE LIQUOR
POTASSIUM SULFATE FERTILIZERS	WOOD CHIP & DUST
PUREGOLD MEDIUM CHIPS	WOOD FRACTIONS
QUICKLIME	ZIRCON
RECYCLED FUEL OIL	ZIRCONIUM BASE ALLOYS
RECYCLED GLASS	ZIRCONIUM BASIC CARBONATE
REFRACTORY BRICK	ZIRCONIUM HAFNIUM FD SOLN
RESIDUAL FUEL OIL	ZIRCONIUM METAL
RESIN PLASTIC ABS	ZIRCONIUM RAFFINATE
RESIN UREA FORMALDEHYDE	ZIRCONIUM SPONGE
ROOFING ASPHALT	
ROOFING GRANULES	
RUBBER STYRENE BUTADIENE	
SALT CAKE	
SARIN	
SAWDUST/SHAVING	
SI-388 TONER	
SILICA SAND	
SODA ASH	
SODIUM CHLORATE CRYSTALS	
SODIUM NITRATE	
SODIUM SULFATE	
SOYBEAN MEAL	
STA-LOK 400	
STARCH AMYLUM /CORN STARCH	
THB 150N	
TITANIUM BASE ALLOYS	
TITANIUM INGOTS	
TURBO POWER PLUS	
TYPE S MORTAR	
UN-32/NS-1 10-34-0	
URAN 32-0-0	
UREA	
UREA AMMONIUM NITRATE SOLU- TION	
UREA FERTILIZER	
UREA FORMALDEHYDE CONCEN- TRATE 85%	
UREA RESIN	

Information by City

Since these historical records were created, some city names have been changed in the active survey database to more accurately reflect where these facilities are located.

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
ADAIR VILLAGE	3	2	67%	6
ADAMS	11	5	45%	108
ADEL	4	3	75%	15
ADRIAN	15	11	73%	24
AGNESS	3	3	100%	5
ALBANY	690	313	45%	2,556
ALDERWOOD	1	0	0%	0
ALKALI LAKE	2	1	50%	11
ALMA	1	1	100%	3
ALOHA	294	79	27%	296
ALPINE	1	1	100%	1
ALSEA	28	9	32%	31
ALVADORE	3	3	100%	11
AMITY	59	21	36%	73
ANDREWS	1	1	100%	2
ANTELOPE	5	4	80%	10
APPLEGATE	6	3	50%	5
ARCH CAPE	5	2	40%	2
ARLINGTON	23	17	74%	119
AROCK	2	2	100%	7
ASHLAND	335	107	32%	380
ASTORIA	281	126	45%	601
ATHENA	21	10	48%	51
AUBURN MTN	1	1	100%	2
AUMSVILLE	85	29	34%	130
AURORA	155	58	37%	276
AZALEA	10	3	30%	4
BAKER CITY	259	98	38%	412
BALD MT	1	1	100%	1
BANDON	121	61	50%	182
BANKS	72	24	33%	108
BASKET MOUNTAIN	1	1	100%	8
BATES	1	1	100%	4
BAY CITY	19	9	47%	43
BEAR MT	1	1	100%	2
BEAR SPRINGS	1	1	100%	2
BEATTY	4	3	75%	6
BEAVER	9	8	89%	18
BEAVER MARSH	2	0	0%	0
BEAVERCREEK	75	15	20%	44

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
BEAVERTON	1,175	346	29%	1,947
BEND	1,569	456	29%	2,001
BIGGS JUNCTION	3	1	33%	2
BIRKENFELD	8	5	63%	12
BLACHLY	12	5	42%	9
BLACK BUTTE	2	2	100%	5
BLACK BUTTE RNC	1	1	100%	22
BLACKWELL	1	0	0%	0
BLODGETT	14	5	36%	14
BLUE RIVER	14	9	64%	48
BLY	16	7	44%	17
BOARDMAN	63	43	68%	366
BONANZA	27	16	59%	64
BONNEVILLE	1	1	100%	2
BORING	271	74	27%	310
BRANDY BAR	1	1	100%	1
BRIDAL VEIL	1	1	100%	1
BRIDGE	1	1	100%	3
BRIGHTON	1	0	0%	0
BRIGHTWOOD	15	5	33%	11
BROADBENT	3	2	67%	8
BROGAN	3	2	67%	2
BROOKINGS	190	77	41%	323
BROOKS	44	27	61%	154
BROTHERS	7	5	71%	13
BROWNLEE VILLAGE	1	0	0%	0
BROWNSVILLE	43	18	42%	41
BUENA VISTA	1	0	0%	0
BURLINGTON	1	1	100%	1
BURNS	106	50	47%	172
BURNT WOODS	1	1	100%	1
BUTTE FALLS	21	14	67%	35
BUTTEVILLE	1	0	0%	0
BUXTON	7	2	29%	3
CABBAGE HILL	1	1	100%	2
CAMAS VALLEY	18	10	56%	25
CAMP SHERMAN	6	5	83%	11
CANBY	290	115	40%	633
CANNON BEACH	22	9	41%	18
CANYON CITY	34	17	50%	63
CANYONVILLE	39	16	41%	57
CARLTON	59	30	51%	155

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
CARMEN-SMITH	1	1	100%	1
CARVER	3	1	33%	1
CASCADE LOCKS	36	19	53%	114
CASCADE SUMMIT	1	1	100%	4
CASCADIA	5	4	80%	17
CAVE JUNCTION	88	44	50%	162
CEDAR BUTTE	1	1	100%	1
CENTRAL POINT	379	138	36%	640
CHARLESTON	21	15	71%	56
CHEHALEM MT	1	1	100%	1
CHEMULT	20	15	75%	52
CHERRY GROVE	1	1	100%	2
CHESHIRE	12	3	25%	7
CHILOQUIN	68	33	49%	135
CHRISTMASVALLEY	21	9	43%	24
CLACKAMAS	655	260	40%	1,827
CLATSKANIE	74	40	54%	363
CLOVERDALE	33	24	73%	68
COBURG	44	21	48%	139
COLTON	50	15	30%	51
COLUMBIA CITY	16	9	56%	31
CONDON	51	21	41%	90
COOS BAY	460	222	48%	919
COQUILLE	128	50	39%	165
CORBETT	46	14	30%	60
CORNELIUS	129	52	40%	508
CORVALLIS	756	271	36%	1,511
COTTAGE GROVE	253	87	34%	375
COVE	20	6	30%	15
CRABTREE	4	2	50%	3
CRANE	9	5	56%	12
CRATER LAKE	5	5	100%	16
CRAWFORDSVILLE	3	2	67%	2
CRESCENT	21	10	48%	36
CRESCENT LAKE	8	6	75%	18
CRESWELL	116	38	33%	164
CROOKED RVR RCH	19	5	26%	29
CULP CREEK	3	1	33%	1
CULVER	39	20	51%	164
CURTIN	5	1	20%	2
DAIRY	5	2	40%	4
DALE	2	2	100%	6

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
DALLAS	202	77	38%	425
DAMASCUS	1	0	0%	0
DAYS CREEK	11	7	64%	36
DAYTON	65	31	48%	359
DAYVILLE	10	5	50%	11
DEADWOOD	5	3	60%	3
DEER ISLAND	21	7	33%	44
DEPOE BAY	27	11	41%	27
DETROIT	19	13	68%	43
DEXTER	33	12	36%	54
DIAMOND	1	1	100%	1
DIAMOND LAKE	2	2	100%	12
DILLARD	17	14	82%	220
DODSON BUTTE	1	1	100%	2
DONALD	17	8	47%	137
DORA	1	0	0%	0
DORENA	3	1	33%	1
DRAIN	54	25	46%	121
DREWSEY	2	1	50%	1
DUFUR	16	8	50%	30
DUNDEE	45	18	40%	65
DUNES CITY	1	0	0%	0
DURHAM	9	3	33%	25
DURKEE	6	5	83%	26
EAGLE CREEK	49	14	29%	61
EAGLE POINT	130	39	30%	118
ECHO	24	11	46%	29
EDDYVILLE	9	3	33%	8
ELGIN	40	17	43%	105
ELK CITY	1	1	100%	3
ELKTON	22	14	64%	68
ELMIRA	35	10	29%	33
ELSIE	1	1	100%	2
EMPIRE	1	1	100%	2
ENTERPRISE	106	63	59%	188
ESTACADA	139	54	39%	208
EUGENE	2,629	900	34%	5,015
FAIRVIEW	58	21	36%	128
FALCON COVE BCH	1	0	0%	0
FALL CREEK	10	2	20%	6
FALLS CITY	7	5	71%	7
FERNRIDGE	1	0	0%	0

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
FIELDS	3	3	100%	7
FINN ROCK	3	1	33%	13
FLORENCE	175	75	43%	256
FOREST GROVE	263	117	44%	835
FORT KLAMATH	1	1	100%	2
FORT ROCK	6	4	67%	6
FOSSIL	18	12	67%	35
FOSTER	14	5	36%	40
FOX	1	0	0%	0
FRANKLIN	1	1	100%	3
FRENCHGLEN	2	2	100%	4
GALES CREEK	10	3	30%	6
GALICE	1	1	100%	4
GARDINER	11	8	73%	46
GARIBALDI	25	18	72%	65
GASTON	75	27	36%	118
GATES	15	8	53%	16
GEARHART	32	6	19%	16
GERVAIS	53	23	43%	90
GILCHRIST	9	5	56%	20
GLADSTONE	112	36	32%	193
GLASCOW	1	1	100%	1
GLENADA	1	1	100%	1
GLENDALE	42	20	48%	104
GLENEDEN BEACH	14	5	36%	23
GLENWOOD	1	0	0%	0
GLIDE	36	15	42%	63
GOBLE	1	1	100%	1
GOLD BEACH	94	41	44%	148
GOLD HILL	64	19	30%	73
GOSHEN	13	5	38%	14
GOVERNMENT CAMP	21	13	62%	45
GRAND RONDE	25	10	40%	20
GRANITE	2	2	100%	5
GRANTS PASS	891	286	32%	1,077
GRASS VALLEY	8	4	50%	6
GRESHAM	647	201	31%	1,149
GRIZZLY MT	1	1	100%	2
HAINES	15	8	53%	17
HALFWAY	31	11	35%	36
HALSEY	49	25	51%	433

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
HAMMOND	13	3	23%	20
HAPPY VALLEY	7	4	57%	7
HARBOR	30	12	40%	30
HARNESS MTN	1	1	100%	2
HARPER	5	3	60%	8
HARRISBURG	79	43	54%	401
HATFIELD	1	1	100%	2
HAUSER	2	2	100%	2
HAYMAKER	1	1	100%	2
HEBO	14	8	57%	18
HELIX	9	7	78%	17
HEMLOCK	1	0	0%	0
HEPPNER	59	36	61%	117
HEREFORD	1	0	0%	0
HERMISTON	353	139	39%	1,003
HILLSBORO	1,042	369	35%	2,352
HINES	31	20	65%	84
HOMESTEAD	1	0	0%	0
HOOD RIVER	325	114	35%	715
HOODOO BUTTE	1	1	100%	1
HORSE ROCK	1	1	100%	2
HORTON	3	2	67%	5
HUBBARD	94	43	46%	236
HUNTINGTON	16	9	56%	38
HYATT LAKE	1	1	100%	1
IDANHA	5	5	100%	17
IDLEYLD PARK	21	18	86%	61
IMBLER	15	7	47%	43
IMNAHA	4	2	50%	7
INDEPENDENCE	110	51	46%	498
INTERLACHEN	1	0	0%	0
IONE	14	10	71%	79
IRONSIDE	2	1	50%	4
IRRIGON	26	14	54%	67
ISLAND CITY	35	24	69%	124
JACKSONVILLE	65	10	15%	53
JAMIESON	1	0	0%	0
JASPER	6	5	83%	31
JEFFERSON	50	16	32%	126
JEWELL	2	2	100%	4
JOHN DAY	101	43	43%	192

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
JOHNS PEAK	1	1	100%	2
JORDAN VALLEY	23	17	74%	67
JOSEPH	58	25	43%	76
JUNCTION CITY	233	95	41%	479
JUNTURA	6	5	83%	16
KEATING	1	1	100%	1
KEIZER	200	50	25%	161
KENO	17	8	47%	31
KENT	2	1	50%	9
KENYON MT	1	1	100%	1
KERBY	8	3	38%	8
KIMBERLY	2	2	100%	3
KING CITY	11	3	27%	7
KING MOUNTAIN	1	1	100%	2
KLAMATH FALLS	770	337	44%	1,666
KNAPPA	7	6	86%	7
LA GRANDE	290	137	47%	737
LA PINE	130	42	32%	142
LACOMB	4	1	25%	1
LAFAYETTE	22	13	59%	32
LAKE GROVE	1	0	0%	0
LAKE OF THE WOOD	2	2	100%	15
LAKE OSWEGO	478	125	26%	472
LAKESIDE	31	13	42%	23
LAKEVIEW	136	80	59%	291
LANGLOIS	12	11	92%	26
LAPINE	5	0	0%	0
LEABURG	14	8	57%	34
LEBANON	321	118	37%	599
LEXINGTON	15	10	67%	44
LIME	1	1	100%	2
LINCOLN CITY	162	61	38%	173
LOGSDEN	6	3	50%	5
LONDON	2	2	100%	2
LONG CREEK	11	7	64%	25
LOOKINGGLASS	1	1	100%	2
LORANE	9	6	67%	21
LOSTINE	22	9	41%	13
LOWELL	25	17	68%	72
LYONS	37	14	38%	107
MADRAS	168	93	55%	545

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
MALIN	33	20	61%	57
MANNING	4	1	25%	1
MANZANITA	13	8	62%	19
MAPLETON	22	10	45%	81
MARCOLA	19	8	42%	16
MARYLHURST	4	2	50%	6
MARYS PEAK	1	1	100%	2
MAUPIN	34	22	65%	87
MCCOY	1	0	0%	0
MCKENZIE BRIDGE	9	4	44%	29
MCLEAD	1	0	0%	0
MCMINNVILLE	393	164	42%	1,132
MCNARY	1	1	100%	4
MEACHAM	6	2	33%	14
MEDFORD	1,180	399	34%	2,359
MEDICAL SPRINGS	1	1	100%	2
MEHAMA	11	6	55%	17
MERLIN	44	15	34%	54
MERRILL	41	23	56%	119
METOLIUS	6	2	33%	2
MIDLAND	3	1	33%	2
MILL CITY	34	13	38%	97
MILLERSBURG	9	6	67%	46
MILTON FREEWATR	147	57	39%	362
MILWAUKIE	647	177	27%	1,053
MIST	7	4	57%	35
MITCHELL	12	8	67%	23
MOLALLA	229	79	34%	322
MONMOUTH	80	30	38%	166
MONROE	47	25	53%	158
MONUMENT	9	6	67%	18
MORO	21	10	48%	43
MOSIER	18	10	56%	16
MT ANGEL	66	31	47%	512
MT BALDY	2	2	100%	4
MT HOOD	12	5	42%	21
MT HOOD-PARKDAL	2	1	50%	2
MT LOOKOUT	1	1	100%	2
MT VERNON	26	13	50%	24
MULINO	50	14	28%	76
MURPHY	5	4	80%	23
MYRTLE CREEK	132	50	38%	163

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
MYRTLE POINT	108	40	37%	123
NEHALEM	45	22	49%	60
NEOTSU	4	1	25%	2
NESKOWIN	6	3	50%	4
NETARTS	3	3	100%	6
NEW PINE CREEK	1	0	0%	0
NEWBERG	315	109	35%	660
NEWPORT	246	110	45%	427
NICOLIAI RIDGE	2	1	50%	2
NIMROD	1	1	100%	1
NORTH BEND	204	100	49%	440
NORTH PLAINS	78	30	38%	113
NORTH POWDER	19	8	42%	61
NORWAY	3	3	100%	9
NOTI	15	6	40%	48
NYSSA	77	34	44%	232
OAK GROVE	12	7	58%	52
OAKLAND	52	20	38%	66
OAKRIDGE	55	31	56%	137
OAKVILLE	1	1	100%	1
O'BRIEN	5	3	60%	4
ODELL	17	12	71%	130
ONTARIO	298	151	51%	868
OPHIR	3	0	0%	0
OREGON CITY	658	171	26%	892
ORIENT	1	1	100%	2
OTIS	37	13	35%	36
OTTER ROCK	3	2	67%	5
OWYHEE RESERVOIR	1	0	0%	0
OXBOW	6	5	83%	30
PACIFIC CITY	16	8	50%	18
PAISLEY	13	9	69%	34
PALMER BUTTE	1	1	100%	2
PARKDALE	24	13	54%	67
PAULINA	7	5	71%	13
PEDEE	1	0	0%	0
PENDLETON	310	137	44%	710
PHILOMATH	154	73	47%	324
PHOENIX	60	28	47%	91
PILOT ROCK	22	11	50%	54
PINE CREEK	1	1	100%	2

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
PINE GROVE	4	3	75%	4
PINE HURST	1	0	0%	0
PISTOL RIVER	1	0	0%	2
PLACER	1	1	100%	0
PLEASANT HILL	42	12	29%	1
PLUSH	2	1	50%	32
PORT ORFORD	53	28	53%	86
PORTLAND	9,277	3,224	35%	22,110
POST	2	2	100%	2
POWELL BUTTE	26	9	35%	24
POWERS	22	12	55%	36
PRAIRIE CITY	24	11	46%	44
PRAIRIE PEAK	1	1	100%	2
PRESCOTT	1	1	100%	1
PRINCETON	1	1	100%	1
PRINEVILLE	258	110	43%	544
PROSPECT	18	12	67%	63
PROSPECT HILL	1	1	100%	1
PROVOLT	2	2	100%	3
RAINIER	79	38	48%	181
RALEIGH HILLS	1	0	0%	0
REDMOND	466	163	35%	709
REEDSPORT	113	50	44%	192
RESTON	1	1	100%	3
RHODODENDRON	11	3	27%	7
RICHARDSON	1	1	100%	1
RICHLAND	18	8	44%	24
RICKREALL	34	15	44%	235
RIDDLE	51	21	41%	179
RIDDLE CREEK	1	0	0%	0
RILEY	2	2	100%	5
RITTER	1	1	100%	1
ROCKAWAY BEACH	20	12	60%	22
ROGUE RIVER	82	22	27%	95
ROME	1	0	0%	0
ROSE LODGE	6	4	67%	9
ROSEBURG	800	320	40%	1,483
RUFUS	12	7	58%	31
RUGGS	1	0	0%	0
SAGINAW	1	1	100%	19
SALEM	2,340	821	35%	5,471

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
SANDY	241	88	37%	271
SANTIAM JCT	1	0	0%	0
SAUVIE ISLAND	1	1	100%	14
SCAPPOOSE	120	50	42%	184
SCHOLLS	1	1	100%	2
SCIO	61	32	52%	94
SCOTTS MILLS	14	6	43%	8
SCOTTSBURG	3	2	67%	8
SEAL ROCK	21	5	24%	28
SEASIDE	142	53	37%	211
SELMA	23	10	43%	16
SENECA	9	6	67%	11
SHADY COVE	33	15	45%	26
SHANIKO	8	5	63%	8
SHEDD	20	3	15%	60
SHERIDAN	89	41	46%	296
SHERWOOD	267	98	37%	653
SILETZ	29	9	31%	16
SILVER LAKE	21	15	71%	46
SILVERTON	195	72	37%	353
SIMNASHO	3	2	67%	2
SISKIYOU MT	3	2	67%	8
SISTERS	133	43	32%	139
SIXES	4	0	0%	0
SOUTHBEACH	38	21	55%	100
SPRAGUE RIVER	8	6	75%	10
SPRAY	13	9	69%	23
SPRING RIVER	1	1	100%	2
SPRINGFIELD	773	287	37%	2,141
ST BENEDICT	1	1	100%	3
ST HELENS	178	73	41%	481
ST PAUL	35	19	54%	200
STAFFORD	1	1	100%	2
STANFIELD	32	12	38%	49
STAYTON	151	67	44%	839
STONE BUTTE	1	1	100%	2
STUKEL MT	1	1	100%	2
SUBLIMITY	31	8	26%	107
SUMMER LAKE	3	2	67%	13
SUMMERVILLE	11	3	27%	5
SUMNER	1	1	100%	2

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
SUMPTER	9	3	33%	8
SUN RIVER	2	0	0%	0
SUNNY VALLEY	8	3	38%	6
SUNRIVER	41	22	54%	81
SUTHERLIN	137	52	38%	199
SWEET HOME	164	66	40%	333
SWISSHOME	5	3	60%	16
TAKILMA	1	1	100%	1
TALENT	75	23	31%	98
TANGENT	64	43	67%	367
TENMILE	9	5	56%	9
TERREBONNE	44	11	25%	21
THE DALLES	314	142	45%	693
TIDE	1	1	100%	1
TIDEWATER	12	5	42%	12
TIGARD	756	209	28%	1,037
TILLAMOOK	222	110	50%	525
TILLER	7	3	43%	7
TIMBER	3	2	67%	2
TIMBERLINE	1	1	100%	17
TOEDO	1	1	100%	4
TOKETEE	3	3	100%	20
TOLEDO	88	45	51%	242
TOLOVANA PARK	1	0	0%	0
TRAIL	16	11	69%	51
TROUTDALE	221	72	33%	377
TROY	2	2	100%	8
TUALATIN	527	215	41%	1,879
TURNER	69	31	45%	159
TYGH VALLEY	22	10	45%	42
UKIAH	10	6	60%	24
UMAPINE	1	1	100%	1
UMATILLA	65	32	49%	431
UMPQUA	11	4	36%	10
UNION	32	16	50%	55
UNITY	9	2	22%	4
VALE	70	42	60%	176
VAN	1	1	100%	2
VAUGHN	1	1	100%	28
VENETA	96	29	30%	116
VERNONIA	67	24	36%	87
VIDA	15	5	33%	6

Information by City

Name of City	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances Reported
WAKONDA BEACH	1	0	0%	0
WALDPORT	73	31	42%	64
WALLOWA	25	11	44%	38
WALTON	9	1	11%	2
WAMIC	10	7	70%	17
WAPINITIA	1	0	0%	0
WARM SPRINGS	27	20	74%	68
WARREN	30	5	17%	20
WARRENTON	110	51	46%	271
WASCO	33	23	70%	132
WAUNA	2	2	100%	6
WELCHES	23	8	35%	27
WEST HARNESS MT	1	1	100%	2
WEST LINN	261	48	18%	0
WESTFALL	1	1	100%	229
WESTFIR	5	3	60%	6
WESTLAKE	5	0	0%	10
WESTON	17	7	41%	0
WESTPORT	7	3	43%	73
WHEELER	9	7	78%	4
WHITE CITY	208	96	46%	14
WILBUR	2	2	100%	905
WILDERVILLE	8	4	50%	5
WILLAMINA	53	29	55%	8
WILLIAMS	22	8	36%	177
WILSONVILLE	369	113	31%	21
WIMER	1	1	100%	1,076
WINCHESTER	7	3	43%	1
WINCHESTER BAY	11	6	55%	20
WINSTON	55	23	42%	36
WIPPER HILL	1	1	100%	62
WOLF CREEK	13	7	54%	2
WOLF MOUNTAIN	1	1	100%	14
WOLF RIDGE	1	0	0%	1
WOOD VILLAGE	23	12	52%	0
WOODBURN	274	110	40%	45
WREN	1	1	100%	1,553
YACHATS	13	11	85%	2
YAMHILL	53	23	43%	29
YONCALLA	41	25	61%	86
ZIG ZAG	2	0	0%	70

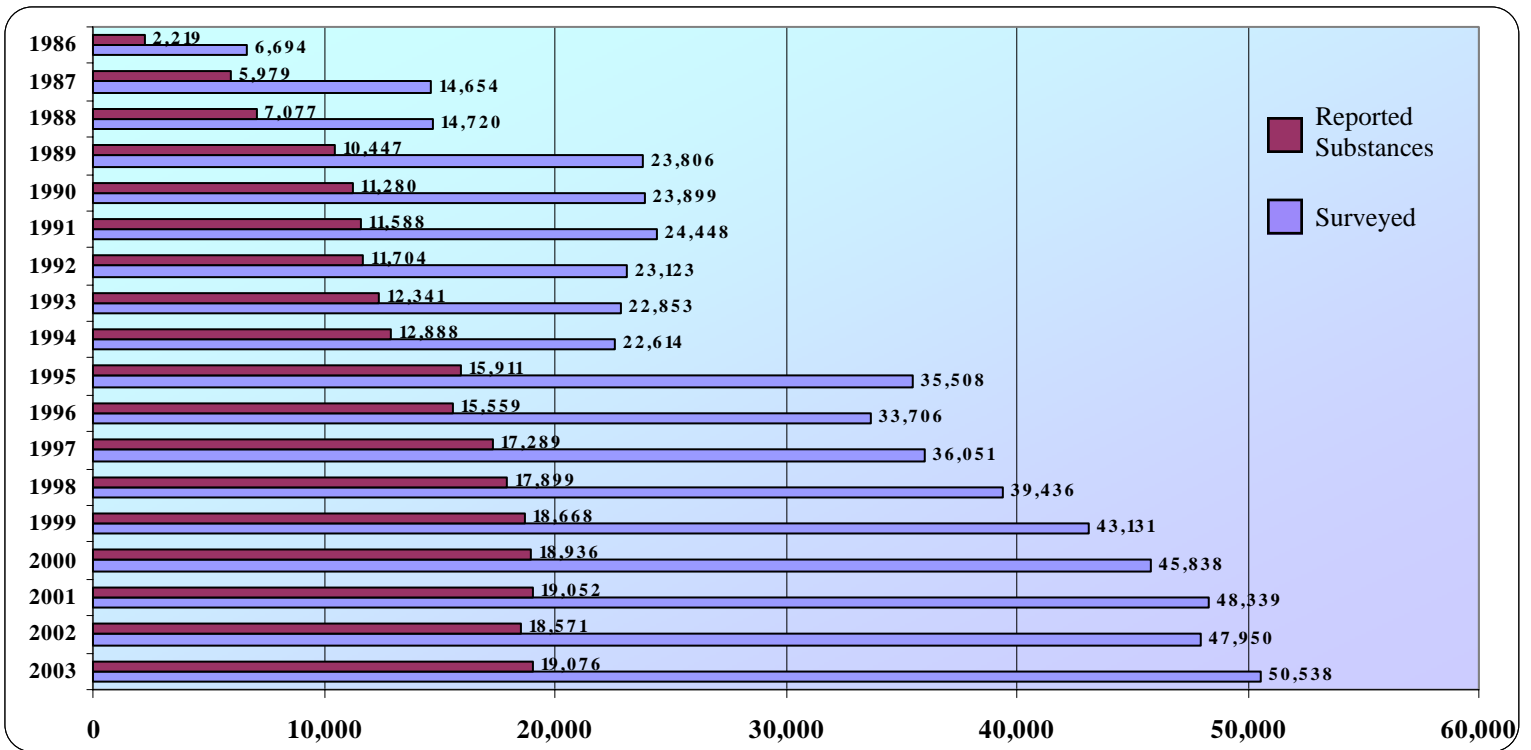
Information by County

Name of County	# of Facilities Surveyed	# of Facilities Reporting Substances	% of Facilities Reporting Substances	Total Substances per County
BAKER	380	153	40%	626
BENTON	1007	386	38%	2042
CLACKAMAS	4896	1525	31%	8177
CLATSOP	634	270	43%	1350
COLUMBIA	593	253	43%	1274
COOS	1116	533	48%	1987
CROOK	295	127	43%	585
CURRY	394	175	44%	620
DESCHUTES	2393	740	31%	3125
DOUGLAS	1733	750	43%	3371
GILLIAM	74	38	51%	209
GRANT	236	116	49%	407
HARNEY	161	87	54%	291
HOOD RIVER	415	163	39%	1003
JACKSON	2693	942	35%	4998
JEFFERSON	259	142	55%	810
JOSEPHINE	1101	392	36%	1402
KLAMATH	1071	504	47%	2281
LAKE	212	127	60%	447
LANE	4737	1720	36%	9480
LINCOLN	796	344	43%	1216
LINN	1598	722	45%	5246
MALHEUR	507	270	53%	1412
MARION	3732	1365	37%	10233
MORROW	177	112	63%	671
MULTNOMAH	9666	3371	35%	23053
POLK	639	253	40%	1627
SHERMAN	81	49	60%	212
TILLAMOOK	437	237	54%	871
UMATILLA	1032	443	43%	2946
UNION	458	216	47%	1115
WALLOWA	218	113	52%	332
WASCO	442	216	49%	937
WASHINGTON	5150	1696	33%	10578
WHEELER	44	30	68%	83
YAMHILL	1142	480	42%	3008

Historical Data

Year	Number Surveyed	Number Reporting Substances	Percent Reporting Substances
2003	50,538	19,076	38%
2002	47,950	18,571	39%
2001	48,339	19,052	39%
2000	45,838	18,936	41%
1999	43,131	18,668	43%
1998	39,436	17,899	45%
1997	36,051	17,289	48%
1996	33,706	15,559	46%
1995	35,508	15,911	45%
1994	22,614	12,888	57%
1993	22,853	12,341	54%
1992	23,123	11,704	51%
1991	24,448	11,588	47%
1990	23,899	11,280	47%
1989	23,806	10,447	44%
1988	14,720	7,077	48%
1987	14,654	5,979	41%
1986	6,694	2,219	33%

The Office of State Fire Marshal's Community Right to Know Unit has been collecting information through the Hazardous Substance Information Survey since 1986. Since then, the number of facilities surveyed has grown from 6,694 in 1986 to 50,538 in 2003.



Survey Information

The following pages include information and instructions on how the survey is completed. For a complete copy of the survey instruction booklet, visit our web site at: www.sfm.state.or.us. Shown on this page are the tables used for completion of the survey. The next page gives information on reporting requirements, followed by two pages of specific instructions from the survey instruction booklet and a sample copy of the survey.

TABLE I
Physical State

1=Solid
2=Liquid
3=Gas

TABLE II
Quantity Units

1=Pounds
2=Gallons
3=Cubic Feet
4=Millicuries

TABLE III
Reporting quantities amounts and codes

CODE	FROM...	TO...
00	0	4
01	5	9
02	10	19
03	20	49
04	50	199
10	200	499
11	500	999
20	1,000	4,999
21	5,000	9,999
30	10,000	49,999
31	50,000	99,999
40	100,000	249,999
41	250,000	499,999
42	500,000	749,999
43	750,000	999,999
50	1,000,000	2,499,999
51	2,500,000	4,999,999
52	5,000,000	7,499,999
53	7,500,000	9,999,999
60	10,000,000	24,999,999
61	25,000,000	49,999,999
70	50,000,000	74,999,999
71	75,000,000	99,999,999
80	100,000,000	249,999,999
81	250,000,000	499,999,999
90	500,000,000	749,999,999
91	750,000,000	999,999,999
99	1 Billion	Higher than 1 Billion

TABLE IV
Storage Codes

A = Aboveground tank
B = Underground tank
C = Tank inside building
D = Steel drum
E = Plastic or non-metallic drum
F = Can
G = Carboy
H = Silo
I = Fiber drum
J = Bag
K = Box
L = Cylinder
M = Glass bottles, jugs, or buckets
N = Plastic bottles, jugs, or buckets
O = Totebin
P = Tank wagon
Q = Railcar
R = Other
S = Dewar

TABLE V
Temperature and Pressure Conditions and Storage

Codes	Storage Conditions
	(PRESSURE)
1	Normal pressure
2	Greater than normal pressure
3	Less than normal pressure
	(TEMPERATURE)
4	Normal temperature
5	Greater than normal temperature
6	Less than normal temperature but not cryogenic
7	Cryogenic conditions

TABLE VI
Hazard Classification Codes

(1.1) Class A Explosives	(4.3) Dangerous When Wet
(1.2) Class B Explosives	(4.4) Reactive Materials
(1.3) Class C Explosives	(4.5) Combustible Materials
(1.4) Blasting Agents	(5.1) Oxidizers
(1.5) Insensitive Explosives	(5.2) Organic Peroxides
(2.1) Flammable Gases	(6.1) Poisonous Materials
(2.2) Nonflammable Gases	(6.2) Etiologic Materials
(2.3) Poison Gases	(6.3) Acute Health Hazards
(3.1) Flammable Liq. (FP<0°F)	(6.4) Chronic Health Hazards
(3.2) Flammable Liq. (0°F<FP<73°F)	(6.5) Pesticides
(3.3) Flammable Liq. (73°F<FP<141°F)	(7.3) Radioactive Materials
(4.1) Flammable Solids	(8.0) Corrosives
(4.2) Spontaneously Combustible Materials	(9.0) Misc. Hazardous Materials

Reporting Criteria

What must be reported?

All substances that OR-OSHA requires a Material Safety Data Sheet (MSDS) be created for, must be considered for reporting. If the maximum amount on site at any time during the survey period meets or exceeds the reportable quantities established by the Office of State Fire Marshal, the substance is required to be reported. This includes substances produced and waste products.

1. Facilities must report any substance requiring an MSDS that they have equal to or greater than:

- 50 gallons of a liquid
- 200 cubic feet of a gas
- 500 pounds of a solid



2. Facilities must report on the survey any poison or explosive they have equal to or greater than:

- 5 gallons of a liquid
- 20 cubic feet of a gas
- 10 pounds of a solid



3. Facilities must report **any** quantity of a radioactive substance including radioactive wastes. **EXCEPTION:** Sealed source radioactive materials, as defined by OAR 333-100-055(71), are not required to be reported; e.g., contained in smoke detectors, survey equipment and small laboratory testing equipment.

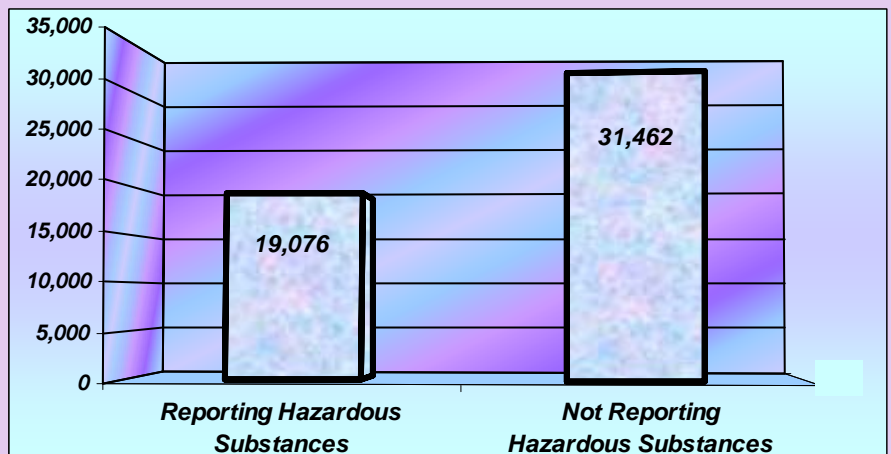


4. Extremely Hazardous Substances (EHS) that meet or exceed their Threshold Planning Quantity (TPQ) are required to be reported at the TPQ or the amounts listed above, whichever is lower.

Exceptions

1. In 2003, the reportable quantity was 1,000 cubic feet for the following gases, if they are not cryogenic: Argon, Carbon Dioxide, Helium, Krypton, Neon, Nitrogen and Xenon. Note: The exception on gases changed in 2004. For information, call 503-378-6835.
2. Gases intended for human/animal ingestion and/or inhalation either directly or added to a product are exempt from reporting if **ALL** of the following apply:
 - The gas is present at the site where human/animal ingestion/inhalation occur
 - The gas is not being used in a manufacturing process
 - The gas is not a cryogenic
 - The gas is not being stored at the site in a quantity exceeding 1,000 cubic feet

In the year 2003 there were 50,538 facilities that reported through the Hazardous Substance Information Survey. Of those, 19,076 reported they had reportable quantities of hazardous substances and 31,462 reported that they did not have a reportable quantity of hazardous substances.



INSTRUCTIONS AND DEFINITIONS

THIS SURVEY IS REQUIRED TO BE FILLED OUT COMPLETELY AND ACCURATELY FOR THE SURVEY PERIOD. See sample survey included in this report. THE SURVEY PERIOD IS THE 12 MONTHS PRIOR TO THE RECEIPT OF THIS SURVEY.

ALL PORTIONS MUST BE TYPED OR PRINTED.

Please take the time to accurately report the hazardous substances for each site. **If you have sites that have not been previously surveyed and you have not notified this office, please complete the request form for unreported sites included in this booklet for each location.** Call the Hazardous Substance Information Hotline if you have any questions. If updates need to be made, cross out any information that is no longer correct and provide updated information in the gray shaded area.

SECTION A HAZARDOUS SUBSTANCE PRESENCE

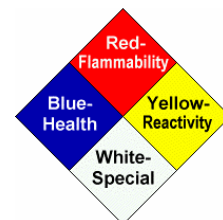
1. Check “Yes” or “No” depending upon whether or not your facility had hazardous substances in reportable quantities during the survey period. A hazardous substance is any substance for which a Material Safety Data Sheet (MSDS) is required by Oregon Occupational Safety and Health Act (OSHA). **Substances will NOT be deleted from the survey unless the “NO LONGER REPORTABLE” box in Section D is checked.**
2. Check “Yes” or “No” depending upon whether or not an Extremely Hazardous Substance (EHS) was present at this facility at or above its Threshold Planning Quantity (TPQ) during the survey period. Refer to the section in this booklet on EHS.
3. Check “Yes” or “No” depending upon whether or not the facility is subject to the reporting requirements of Section 112(r) of the Clean Air Act. Refer to the section in this booklet on the Clean Air Act, Section 112(r).
4. Check “Yes” or “No” depending upon whether or not your facility is subject to the notification requirements of OR-OSHA’s Process Safety Management (PSM) Program. Refer to the section in this booklet on OR-OSHA’s PSM program.

SECTION B DEMOGRAPHIC DATA

1. **NAICS Code 1** (North American Industry Classification System Code) - List the six-digit number that corresponds to the business activity at your facility. If you are unsure of your code you can obtain information at <http://www.census.gov/epcd/www/naics.html>.
2. **NAICS Code 2** - List the six-digit number that corresponds to any other type of business activity at your facility, if applicable.
3. **Business Activity** - Describe the type of business occurring at the site address identified in #10. Is it Logging, Landscaping, Silicon Chip Manufacturing, Sawmill, Welding Shop, Automotive Repair Shop, Gas Station, Office, etc. If the site is an office, also state the main type of business for the office. E.g., Office for trucking company.
4. **Dun & Bradstreet #** - Enter this number if applicable.
5. **Owner/CEO/Reg Agent**- This is the person of legal record for the facility E.g, owner, chief executive officer, registered agent, director, and/or president.
6. **Send to Attention of** - This person will receive all correspondence regarding the HSIS.

INSTRUCTIONS AND DEFINITIONS

7. **E-mail Address** - Company's e-mail address. If there is no e-mail address enter NONE. Do not enter web sites.
8. **Business Name** - Name that the business is known by, operates under or DBA.
9. **Dept. or Div.** - Department or Division of the Company if applicable.
10. **Site Address** - A facility's business location in Oregon, including street number and name, city, county, and zip code. A facility may have more than one site. Each site is separate if it has a different address or if a distance or barriers physically separate it from another site. A separate survey must be completed for each site.
11. **Mailing Address** - The address that will receive all correspondence regarding the HSIS.
12. **Business Phone** - Telephone number that can be used to contact your company during business hours.
13. **Number of Employees** - Number of persons employed by your business at this site only.
14. **Emergency Assistance Contact Person** - Person qualified to give on-site information concerning hazardous substances used at this site. This is required under both state and federal statutes.
15. **Emergency Contact Phones** - Daytime and nighttime phone numbers for the emergency contact person.
16. **Responsible Fire Department** - Name of the fire department that would respond to an emergency at this site.
17. **Emergency Plan** - Check "Yes" or "No" depending upon whether or not your company has a WRITTEN emergency plan. If yes, enter where the plan is kept.
18. **Automatic Fire Suppression** - Check "Yes" or "No" depending upon whether or not your building has an automatic sprinkler system or other automatic fire suppression system.
19. **Are Buildings/Tanks/Areas Placarded According to NFPA 704?** - Check "Yes" or "No" depending upon your company's use of the National Fire Protection Agency's (NFPA) 704 code. If you have any questions, contact your local fire department or the Office of State Fire Marshal.
20. **Other Placarding** - Check "Yes" or "No" if labeling or placarding other than NFPA 704 is used.



SECTION C PERSON COMPLETING FORM

1. **Print Name** - Printed name of the person completing the survey.
2. **Signature** - Signature of the person completing the survey.
3. **Date** - Enter the date you completed the survey.
4. **Phone Number** - Enter the phone number (and extension if applicable) of the person completing the survey.

SECTION D SUBSTANCE INFORMATION – This section is completed only if you have reportable quantities.

Common/Trade Name - Enter the name of the hazardous substance in the space provided. The name of the hazardous substance is on the Material Safety Data Sheet (MSDS), container, package or tank that the substance came in. **A substance name is to be reported only once on the survey even if it is stored in several different locations at the facility.** The HSIS will be returned if duplicate entries of substance names are entered.

Hazardous Ingredient - Enter the name of the chemical present in the substance in highest concentration. See the Material Safety Data Sheet or contact your supplier.

No Longer Reportable - Check this box if the substance is no longer reportable. A substance is no longer reportable only if the substance was not on site in a reportable quantity at any time during the previous 12 months.

Extremely Hazardous Substance (EHS) - If this product is or contains an EHS, place an X in this box. A list of EHS substances is provided in this instruction booklet.

112(r) - If this product is or contains a 112(r) substance, place an X in this box. A list of 112(r) substances is provided in this instruction booklet.

Process Safety Management (PSM) - If this product is or contains a PSM substance, place an X in this box. A list of PSM substances is provided in this instruction booklet.

Pure or Mixture - Enter a 1 or 2 in the brackets. Pure substances have only one component; e.g., oxygen or acetone. Mixtures contain two or more different components mixed together; e.g., paint or gasoline. See the Material Safety Data Sheet or contact your supplier for assistance.

Physical State - Enter the code number that represents the physical state of the substance as it would be if released into the atmosphere. (Use Table I for code values.)

Unit of Measure - Enter the code number that represents the applicable unit of measure for this substance. (Use Table II for code values). Report solids in pounds, liquids in gallons, gases in cubic feet, radioactives in millicuries, and liquefied and cryogenic gases in gallons.

Average Amount - Enter the two-digit code for the average amount possessed during the previous 12 months. (Use Table III. Also see FAQ section on how to calculate). This amount cannot be greater than the maximum amount code or the location maximum (loc max) code.

Maximum Amount - Enter the two-digit code for the maximum amount possessed at one time during the previous 12 months. (Use Table III). The Max Amt code must be equal to or larger than the Avg Amt code and the Loc Max code.

Amount In - Enter the two-digit code for the amount of the substance transported to the facility during the previous 12 months (Use Table III). NOTE: If no amounts were transported to the facility, place 00 in the box.

Amount Out - Enter the two-digit code for the amount of the substance transported off the site during the previous 12 months (Use Table III). NOTE: If no amounts were transported from the facility, place 00 in the box. (This does not include accidental and/or intentional releases or the fuel, gas, oil, etc., used in the company vehicles or other substances consumed at the site).

Number of Days on Site - Enter the number of days the substance was on site during the previous 12 months.

Storage Codes - Enter the code(s) that describe the type(s) of storage containers and conditions of storage for this substance; e.g., C 1 4. (Use Tables IV & V) Review the example located on the tables page for assistance. Note: More than one storage code may apply.

Hazard Classes - Enter all applicable hazard classes that apply to this substance (use Table VI). Department of Transportation guides or Material Safety Data Sheets can be used for reference. More than one hazard class may apply.

CAS NUMBER - Enter the Chemical Abstract Service identifier number (if known) for the ingredient listed in highest concentration. Material Safety Data Sheets can be used for reference.

UN/NA NUMBER - Enter the United Nations/North America 4 digit classification number (if known). Material Safety Data Sheets can be used for reference.

EPA Pesticide Registration Number - If the substance reported is a pesticide, enter the EPA Pesticide Registration Number that is located on the pesticide label.

Locations - Report or update the locations using the format indicated below. All locations containing a reportable quantity of a substance must be reported in the “location” field of Section D along with the Loc Max code for that location. Loc Max codes cannot be greater than the Max Amt Code. If there are more locations with reportable quantities than space allows, enter the additional locations on the Section E form provided. If the facility does not have a reportable quantity in a single location but the accumulative amount throughout the facility reaches the OSFM reportable quantity, enter “various” on the first location line in the “Building” column, a “V” in the “quadrant” column and the Loc. Max code for the amount of substance throughout the facility. At least one location must be entered for each substance name reported. See **Storage Locations** page for more detailed instructions.

If a storage location previously reported is no longer applicable check the “delete” box next to the location to be removed. If the substance should be removed from the survey completely, check the “No Longer Reportable” box next to the substance information.

	In/Out	Building	Floor	Area	Room	Quadrant	Loc Max Use Table III
<input type="checkbox"/> Delete	[I]	[Main]	[1]	[NA]	[Repair]	[NE]	[10]
<input type="checkbox"/> Delete	[O]	[Warehouse]	[]	[Parking Lot]	[NA]	[SW]	[04]
<input type="checkbox"/> Delete	[I]	[Various]	[1]	[NA]	[NA]	[V]	[04]

Enter all fields that apply.

SECTION E ADDITIONAL LOCATION SHEET – This section is completed only if you have reportable quantities.

Location - If additional space is needed to report substance locations than is available under Section D, complete Section E, including all required information as instructed under Section D “Location”.

Due Date: _____

Facility ID Number: _____

2003

OREGON STATE FIRE MARSHAL
HAZARDOUS SUBSTANCE INFORMATION SURVEY

Cross off the old or incorrect information and type or print changes or additions in the [bracketed] areas.

SECTION A HAZARDOUS SUBSTANCE PRESENCE Check the correct box to the left.

- YES NO 1. Were there hazardous substances present at this site in reportable quantities during this survey period?
- YES NO 2. Were Extremely Hazardous Substances (EHS) present at this site at or above the threshold planning quantities during this survey period?
- YES NO 3. Is this facility subject to the reporting requirements of Section 112(r) of the Clean Air Act?
- YES NO 4. Is this facility subject to the Process Safety Management (PSM) requirements of OR-OSHA?

SECTION B DEMOGRAPHIC DATA Complete, correct or add information in the [bracketed] areas.

- 1. SIC CODE 1: _____ DEFINITION: _____
- 2. SIC CODE 2: _____ DEFINITION: _____
- 3. BUSINESS ACTIVITY AT THIS SITE:
[]
- 4. DUN & BRADSTREET #: _____
- 5. MANAGER'S NAME: _____
- 6. SEND TO ATTENTION OF: _____
- 7. E-MAIL ADDRESS: _____
- 8. BUSINESS NAME: _____
- 10. SITE ADDRESS:
[]
CITY: _____
[]
COUNTY: _____
[]
STATE: _____ ZIP CODE: _____
[] []
- 12. BUSINESS PHONE: _____
[]
- 14. EMERGENCY ASSISTANCE CONTACT PERSON FOR THIS SITE:
[]
- 16. RESPONSIBLE FIRE DEPARTMENT: _____
[]

SAMPLE

- 9. DEPT OR DIV: _____
[]
- 11. MAILING ADDRESS:
[]
CITY: _____
[]
COUNTY: _____
[]
STATE: _____ ZIP CODE: _____
[] []
- 13. NUMBER OF EMPLOYEES AT THIS SITE: _____
[]
- 15. EMERGENCY CONTACT PHONES:
DAY: _____ NIGHT: _____
[] []

SPECIAL FIRE DEPARTMENT INFORMATION This section is for information the fire service needs to know in case of an emergency.

- 17. YES NO WRITTEN EMERGENCY PLAN. IF YES, WHERE AT SITE: _____
- 18. YES NO AUTOMATIC FIRE SUPPRESSION SYSTEM PRESENT; e.g., sprinklered, halon system, etc.
- 19. YES NO ARE STORAGE BUILDINGS/TANKS/AREAS PLACARDED ACCORDING TO NFPA 704?
- 20. YES NO ARE OTHER TYPES OF PLACARDS USED?

SECTION C PERSON COMPLETING FORM

Signature required: I certify that the information provided is true and accurate to the best of my knowledge. This person will be contacted to answer any questions needing clarification.

- 1. PRINT NAME: _____
- 2. SIGNATURE: _____
- 3. Date: _____ Phone: _____ Ext: _____

For office use only: R _____ F _____ DE _____ / _____ C _____

Chemical Form

2003 OREGON STATE FIRE MARSHAL Hazardous Substance Information Survey

Facility ID Number

SECTION D

Cross off the old or incorrect information and type or print changes or additions in the [bracketed] area.

Common Name or Trade Name: []

Hazardous Ingredient: []

Form with checkboxes for 'No Longer Reportable', '112R', 'EHS', 'PSM', '1-Pure', '2-Mixture' and a table with columns: Physical State, Units of Measure, Avg Amt Code, Max Amt Code, Amt IN Code, Amt OUT Code, No Days On Site, Storage Code, Hazard Class, UN/NA if known, EPA Pesticide Registration No., CAS No. if known.

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Common Name or Trade Name: []

Hazardous Ingredient: []

Form with checkboxes for 'No Longer Reportable', '112R', 'EHS', 'PSM', '1-Pure', '2-Mixture' and a table with columns: Physical State, Units of Measure, Avg Amt Code, Max Amt Code, Amt IN Code, Amt OUT Code, No Days On Site, Storage Code, Hazard Class, UN/NA if known, EPA Pesticide Registration No., CAS No. if known.

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Common Name or Trade Name: []

Hazardous Ingredient: []

Form with checkboxes for 'No Longer Reportable', '112R', 'EHS', 'PSM', '1-Pure', '2-Mixture' and a table with columns: Physical State, Units of Measure, Avg Amt Code, Max Amt Code, Amt IN Code, Amt OUT Code, No Days On Site, Storage Code, Hazard Class, UN/NA if known, EPA Pesticide Registration No., CAS No. if known.

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Location Form

2003 OREGON STATE FIRE MARSHAL Additional Location Sheet

Facility ID Number

SECTION E

Enter the information in the [bracketed] areas.

Common Name or Trade Name: []

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Common Name or Trade Name: []

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row. A large 'SAMPLE' watermark is overlaid on the table.

Common Name or Trade Name: []

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Common Name or Trade Name: []

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Common Name or Trade Name: []

LOCATION

Table with columns: In/Out, Building, Floor, Area, Room, Quadrant, Loc Max Use Table III. Includes 'Delete' checkboxes for each row.

Requests for Information

How to Request Information



To request information, complete and submit the "Request for Hazardous Substance Information" form found on the OSFM website at www.sfm.state.or.us (example shown on next two pages). All requested information must be provided on the form. Mail your request to the address below, or fax the request to the number listed on the form.

Office of Homeland Security
Office of State Fire Marshal
Hazardous Substance Information System
4760 Portland Road NE
Salem, Oregon 97305-1760

Material Safety Data Sheet (MSDS)

There are over 14,000 MSDSs currently available from the Office of State Fire Marshal. They can be obtained in three different ways:

1. They are available on the internet at the Office of State Fire Marshal's web site at www.sfm.state.or.us.
2. They are available on the Office of State Fire Marshal's Hazardous Substance Information System MSDS CDs.
3. If the internet is not accessible, copies of MSDSs can be sent electronically through email or as a hardcopy by completing and submitting the information request form.

Hazardous Substance Information System Compact Disc



Data obtained from the Hazardous Substance Information Survey is available on the HSIS CD. Information available on the CD includes, but is not limited to, the following:

- The hazardous substances and quantity ranges a facility has on site.
- Where hazardous substances are located throughout Oregon. There are multiple ways to search for data; e.g., by county, city, zip code, chemical, and hazard classification.
- Specific chemical information; e.g., hazard classification, health hazards and hazardous ingredient in highest concentration.
- Over 14,000 MSDSs are available on separate CDs (when requested) and can be viewed on screen and printed.
- There are several preset queries and reports that allow the user to interact with the data.



Fire Service and Emergency Response

The Hazardous Substance Information System CD is sent to fire departments on an annual basis. There are many preset queries that can be used to analyze the information available for a specific area. If there is a need for assistance in managing the data, or if it is found that additional queries would be useful, please complete the information request form and/or contact our office at (503) 378-6835.

Internet Access



Data obtained from the Hazardous Substance Information Survey is also available via the internet at www.sfm.state.or.us. Facility and/or chemical information can be looked up in a variety of ways, such as by facility, city, county and chemical at http://www.sfm.state.or.us/CR2K/Database_Search.html. Other information available on the Office of State Fire Marshal's web site are hazardous materials incident information at http://www.sfm.state.or.us/CR2K_IncDB/Incident_Search.html and MSDSs at http://www.sfm.state.or.us/CR2K_SubDB/MSDS_Search.htm.

Confidential Information

Some of the information gathered is confidential. Only fire service and emergency response personnel are given the following information:

- Specific storage locations of substances
- Emergency contact night phone number
- Specific information on substances classified in certain hazard classes that could pose an increased concern for public safety

Request for Hazardous Substance Information



NOTE: ALL REQUESTER INFORMATION MUST BE PROVIDED BEFORE THE REQUEST CAN BE PROCESSED

Mailing Address: Office of State Fire Marshal
4760 Portland Rd. NE
Salem OR 97305-1760

Phone: (503) 378-6835
Fax: (503) 373-1825
email: SFM.CR2K@state.or.us

1. Requester & Title:	2. Date Requested:
3. Organization:	4. Phone Number:
5. Email Address:	6. Fax Number:
7. Requester Mailing Address:	8. Requester County & Street Address:

9. Describe what information you are requesting. Include the Name and Address of the Site(s) you are requesting information for. On the second page of this form, check the data elements you want included in your report, if applicable. If more space is needed than is provided, add additional pages.

10. Describe what the information will be used for.

11. How would you like to receive the information? 1. <input type="checkbox"/> Verbal 2. <input type="checkbox"/> Printed Copy 3. <input type="checkbox"/> Fax 4. <input type="checkbox"/> E-Mail Transfer 5. <input type="checkbox"/> Diskette 6. <input type="checkbox"/> CD, How Many _____	12. If you are requesting 4, 5 or 6 please check format <input type="checkbox"/> Access <input type="checkbox"/> Excel <input type="checkbox"/> Other / Specify format → <input type="checkbox"/> Text <input type="checkbox"/> D-Base
---	--

OSFM USE ONLY

<p style="text-align: center;"><u>Type of Organization Requesting</u></p> <input type="checkbox"/> Educational Organization <input type="checkbox"/> General Medical <input type="checkbox"/> Emergency Management <input type="checkbox"/> Hospital <input type="checkbox"/> Environmental Consultant <input type="checkbox"/> General Government <input type="checkbox"/> Environmental Group <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Fire Service <input type="checkbox"/> Private Business <input type="checkbox"/> Financial Institution <input type="checkbox"/> Public <input type="checkbox"/> Other / Specify →	<p style="text-align: center;"><u>Request Type</u></p> <input type="checkbox"/> HSIS CD ER <input type="checkbox"/> Survey <input type="checkbox"/> HSIS CD PUB <input type="checkbox"/> Incident <input type="checkbox"/> MSDS <input type="checkbox"/> Inc & Surv <input type="checkbox"/> H&M ER <input type="checkbox"/> HMT <input type="checkbox"/> TRI <input type="checkbox"/> H&M PUB <input type="checkbox"/> EHS <input type="checkbox"/> Pesticide <input type="checkbox"/> 112R <input type="checkbox"/> Secured HazClass <input type="checkbox"/> PSM <input type="checkbox"/> Other / Specify → <input type="checkbox"/> Tech Asst
<p style="text-align: center;"><u>Purpose</u></p> <input type="checkbox"/> Education / Library <input type="checkbox"/> Response <input type="checkbox"/> Company Look-up <input type="checkbox"/> Planning <input type="checkbox"/> Presentation / Meeting <input type="checkbox"/> Exercise <input type="checkbox"/> Regulatory <input type="checkbox"/> ESA <input type="checkbox"/> Other / Specify ↓ <input type="checkbox"/> TTA	Person Receiving Request: _____ Person Providing Request: _____ Person Verifying: _____ Date Request Provided: _____ Query Name: _____ Special Request Approval: _____
Type of S.I. H.C. <input type="checkbox"/> Spec. Loc <input type="checkbox"/> Emer Night # <input type="checkbox"/> On going <input type="checkbox"/> One Time <input type="checkbox"/>	

INSTRUCTIONS FOR FILLING OUT THE REQUESTER SECTION OF THIS FORM

NOTE: ALL REQUESTER INFORMATION MUST BE PROVIDED BEFORE THE REQUEST CAN BE PROCESSED

IF AN AREA OF THE REQUEST FORM DOES NOT APPLY, ENTER “NONE” OR “N/A”

1. **Requester:** Enter the name of the person requesting the information.
2. **Date Requested:** Enter the date the information is being requested.
3. **Organization:** Enter the name of the organization the requester is affiliated with.
4. **Phone Number:** Enter the Phone Number of the person requesting the Information.
5. **Email Address:** Enter the email address of the person requesting the information.
6. **Fax Number:** Enter the fax number of the person requesting the information.
7. **Requester Mailing Address:** Enter the mailing address of the person requesting the information.
8. **Requester Street Address:** Enter the street address of the person requesting the information. If the street address is the same as the mailing address enter “**SAME**”.
9. **Describe what information you are requesting:** Enter a detailed description of the information you are requesting. Provide enough detail to give a clear understanding of what information you want. Be sure to include the **Name and Address** of the facility you are requesting the information for.
10. **Describe what the information will be used for:** Enter a description of what this information will be used for.
11. **How would you like to receive the Information?** Check the box that indicates how you would like to receive the information. If requesting fax or email, be sure to provide that information in number 5 or 6 as applicable.
12. **If you are requesting 4, 5 or 6 please check format:** If requesting an electronic version of the information, check the box indicating the format in which you want to receive it. If the format you want is not identified by a check box, write the format in the area identified as “**Other / Specify format**”.

SURVEY & INCIDENT DATABASE FIELD SELECTIONS:

SURVEY	SURVEY CONT
1. <input type="checkbox"/> Are Hazardous Substances Present at Facility	35. <input type="checkbox"/> Storage Location- Restricted
2. <input type="checkbox"/> EHS Substances that Meet TPQ	36. <input type="checkbox"/> Facility ID Number
3. <input type="checkbox"/> Subject to Sec 112R of CAA	37. <input type="checkbox"/> Geo Loc Codes
4. <input type="checkbox"/> Subject to PSM Requirements	
5. <input type="checkbox"/> SIC Codes for Facility	
6. <input type="checkbox"/> Business Activity	
7. <input type="checkbox"/> Manager's Name	
8. <input type="checkbox"/> Send to Attention of	
9. <input type="checkbox"/> Email Address	
10. <input type="checkbox"/> Business Name	
11. <input type="checkbox"/> Department / Division	
12. <input type="checkbox"/> Site Address	
13. <input type="checkbox"/> Mailing Address	
14. <input type="checkbox"/> Business Phone	
15. <input type="checkbox"/> Number of Employees	
16. <input type="checkbox"/> Emergency Contact Person	
17. <input type="checkbox"/> Emergency Contact Day Number	
18. <input type="checkbox"/> Emergency Contact Night Number- Restricted	
19. <input type="checkbox"/> Responsible Fire Dept.	
20. <input type="checkbox"/> Substance Name	
21. <input type="checkbox"/> Hazardous Ingredient	
22. <input type="checkbox"/> Is or Contains a 112r substance	
23. <input type="checkbox"/> Is or Contains an EHS	
24. <input type="checkbox"/> Is or Contains a PSM substance	
25. <input type="checkbox"/> Physical Sate	
26. <input type="checkbox"/> Unit of Measure	
27. <input type="checkbox"/> Max Amount. Code	
28. <input type="checkbox"/> Amount In	
29. <input type="checkbox"/> Amount Out	
30. <input type="checkbox"/> Storage Code	
31. <input type="checkbox"/> Hazard Class	
32. <input type="checkbox"/> UN/NA Number	
33. <input type="checkbox"/> EPA Pesticide Reg. Number	
34. <input type="checkbox"/> CAS Number	
	INCIDENT
	A. <input type="checkbox"/> District of Incident
	B. <input type="checkbox"/> County of Incident
	C. <input type="checkbox"/> Dept. Responding
	D. <input type="checkbox"/> Date of Incident <input type="checkbox"/> Day of the Week
	E. <input type="checkbox"/> Call Time
	F. <input type="checkbox"/> In Route Time
	G. <input type="checkbox"/> Arrive Time
	H. <input type="checkbox"/> Depart Scene Time
	I. <input type="checkbox"/> Time Back in quarters
	J. <input type="checkbox"/> In Service Time
	K. <input type="checkbox"/> Incident Location
	L. <input type="checkbox"/> Responsible Party Information
	M. <input type="checkbox"/> Scene Type
	N. <input type="checkbox"/> Area Type
	O. <input type="checkbox"/> Weather Type
	P. <input type="checkbox"/> Agencies Responding
	Q. <input type="checkbox"/> Action Taken
	R. <input type="checkbox"/> Source of Incident
	S. <input type="checkbox"/> Material Involved
	T. <input type="checkbox"/> Cause of Incident
	U. <input type="checkbox"/> Hazmat Behavior on Release
	V. <input type="checkbox"/> Chemical Name and Information
	W. <input type="checkbox"/> Material Identity
	X. <input type="checkbox"/> Estimated Property Loss
	Y. <input type="checkbox"/> Casualties

HAZARDOUS SUBSTANCE INFORMATION SYSTEM REFERRAL PROGRAM

During certain facility inspections conducted by participating local fire inspectors, a hazardous materials inventory review is conducted. The purpose of these reviews are to supplement the Community Right to Know (CR2K) auditing activities. Reviews also help place unreported facilities into the Oregon Hazardous Substance Information System and validate the accuracy of the information in the system. To process and track the unreported or misreported information obtained during these reviews, a CR2K survey referral form is completed.



The Office of State Fire Marshal (OSFM) recognizes the need to jointly coordinate with local fire departments in the processing of information obtained during these reviews. Without a coordinated effort there is no assurance the information obtained will be entered into the Hazardous Substance Information System. This Referral Program formalizes this coordinated effort.

Prior to conducting a hazardous substance inventory review, the inspector should review the Hazardous Substance Information System to see if the facility is reporting, and if so, what they are reporting. This will better prepare the inspector to determine whether or not a referral should be initiated. Information obtained during the Hazardous Substance Information System review can be compared to what is actually at the facility. Things to look for in the Hazardous Substance Information System are:

- Is the facility currently in the Hazardous Substance Information System?
- What North American Industrial Classification System (NAICS) code corresponds to the business activity of the facility — (what type of operation is it)?
- What has been reported by other facilities in the same NAICS?
- What hazardous substances were reported by the facility?
- If hazardous substances were reported, what quantities were reported?

Once a fire department determines that a referral should be initiated, they complete the Referral Form and mail it to the OSFM/CR2K unit for processing. Once the OSFM receives the referral, the following steps are taken:

- Review the referral information
- Assign a facility ID number and enter the facility information given on the referral into the database
- Mail the survey and track it until returned to the OSFM/CR2K Unit
- Process substance information when the survey is returned
- Notify the submitting fire department of the update

NOTE: If your fire department is interested in finding out more information or initiating a referral system, call the CR2K Services Coordinator, Terry Wolfe, at (503) 373-1540 ext. 219.

<p>Referral Form Instructions: The following are the items on the referral form and what information needs to be entered into the corresponding fields. Anyone completing the form is encouraged to provide as much information as possible, <u>however the bolded items below are the only items that are required for proper Office of State Fire Marshal processing.</u> Once the information is provided, please send the referral form to the address below.</p>	<p>Office of State Fire Marshal Attn: CR2K Unit 4760 Portland Rd NE Salem OR 97305</p>
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- | | | |
|--------------------------|---|---|
| 1. | Company Name | Enter the name the company is doing business as (DBA) |
| 2. | Dept/Div | Enter the name of the department or division of the site in question e.g, paper mill, this is also used for the “official business name”, if the DBA is being used as the company name |
| 3. | Site Location | Enter the site address, city, state and zip code |
| 4. | Site County | Enter the county the facility is located in |
| 5. | Responding Fire Dept | Enter the responding fire dept e.g, Portland |
| 6. | Mailing Address | Enter the entire mailing address for the facility |
| 7. | Manager’s Name | Enter the name of the manager, owner, or whoever is in charge of the site |
| 8. | Phone Number | Enter the phone number for the facility |
| 9. | Send to the Attn Of | Enter the name of the person who the survey and correspondences should be sent to |
| 10. | SIC Code1 | Enter the primary SIC Code for the facility if known |
| 11. | SIC Code2 | Enter the secondary SIC Code for the facility if known |
| 12. | Business Activity | Enter the type of business that is conducted at the facility |
| 13. | E-mail Address | Enter the email address for the company or “N/A” if the Co does not have an email address |
| 14. | Person Notifying of Referral | Enter the name of the person who is giving the information regarding the facility |
| 15. | Phone | Enter the phone number for the person who is giving information regarding the facility |
| 16. | Organization Notifying of Referral | This is who is notifying OSFM of this unreported site e.g, Company Initiated if Co is notifying, Portland Fire if Portland is notifying |
| 17. | Station | This is the name of the fire station that is submitting the referral. |
| 18. | OSFM Staff | Enter your initials here |
| 19. | Date | Enter the date the referral form was completed |
| 20. | Hazardous Substances | To be completed by a fire inspector if they are at the site |
| 21. | Quantities | To be completed by a fire inspector if they are at the site |
| 22. | Location | To be completed by a fire inspector if they are at the site |
| 23. | New Subst | To be completed by a fire inspector if they are at the site |
| REVIEWER USE ONLY | | |
| 24. | Facility not currently in HSIS | After the referral form is complete, the person completing the form needs to check this box so that the data entry staff knows that the system has initially been checked for duplication |
| 25. | Facility Misreported Reportable Quantities | If it is determined the facility misreported reportable quantities this box will need to be checked |
| 26. | Facility Failed to Report Reportable Substances | If it is determined the facility failed to report substances, this box will need to be checked |
| 27. | Facility given copy of subs chng brochure | Enter appropriate information |
| 28. | Facility given copy of Rep. Rqmnt brochure | Enter appropriate information |

Note: The Referral form also has a section for comments. If you feel there may be some comments that would be helpful to either the data entry staff, or someone who may review this file in the future, make sure that they are entered in the comments section.

**OFFICE OF STATE FIRE MARSHAL
COMMUNITY RIGHT TO KNOW SURVEY REFERRAL FORM**

1. COMPANY NAME		2. DEPT/DIV		FACILITY I.D.			
3. SITE LOCATION (SITE, CITY, STATE, ZIP)							
4. SITE COUNTY			5. RESPONDING FIRE DEPT.				
6. MAILING ADDRESS (STREET ,CITY, STATE, ZIP)							
7. OWNER/CEO/ REG AGENT				8. PHONE			
9. SEND TO ATTN OF				10. SIC CODE 1		NAICS CODE 1	
				11. SIC CODE 2		NAICS CODE 2	
12. BUSINESS ACTIVITY				13. E-MAIL ADDRESS			
14. PERSON NOTIFYING OF REFERRAL			15. PHONE				
16. ORGANIZATION NOTIFYING OF REFERRAL							
17. STATION			18. OSFM STAFF		19. DATE		
20. HAZARDOUS SUBSTANCES		21. QUANTITY	22. LOCATION		23. NEW SUBSTANCES		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
_____		_____	_____		<input type="checkbox"/> Y <input type="checkbox"/> N		
REVIEWER USE ONLY							
24. <input type="checkbox"/> Facility Not Currently in HSIS							
25. <input type="checkbox"/> Facility Misreported Reportable Quantities							
26. <input type="checkbox"/> Facility Failed to Report Reportable Substances							
27. <input type="checkbox"/> Facility given copy of Substantive Change Brochure							
Date _____ Given To: _____							
28. <input type="checkbox"/> Facility given copy of CR2K Reporting Requirements Brochure							
Date _____ Given To: _____							
29. Person Forwarding to OSFM							
30. Date Forwarded							
PERSON COMMENTING				PHONE			
COMMENTS							

Community Right to Know Unit Audit Program

The Audit Program was developed to validate the information submitted on the Hazardous Substance Information Survey. This is accomplished by conducting review audits, on-site audits, fee and verification audits, and telephone consultations. In addition, informational workshops are provided to assist facilities in understanding the regulations and to provide guidance on how to stay in compliance with the regulations.

During 2003, the audit program conducted 2,185 review audits, 260 fee audits, 57 on-site audits, and 434 verification audits.

The Audit Program conducts several types of audit activities under two general categories. These categories are:

- Office of State Fire Marshal (OSFM) Initiated Audits, which result in enforcement action.
- Facility Initiated Audits, which are exempt from enforcement action.

Each of the two categories have different types of audits as indicated below.

OSFM Initiated Audits	Facility Initiated Audits
<ul style="list-style-type: none"> • On-site audits • Non-Response audits • Mail audits • Review audits • Verification Audits 	<ul style="list-style-type: none"> • Fee Review Request audits • Review audits
<p>Office of State Fire Marshal Initiated Audits - These are audits initiated by the Office of State Fire Marshal. If, during these types of audits, a facility is found to be in non-compliance with the reporting requirements, the facility is issued a Notice of Non-Compliance and Proposed/Final Penalty Assessment Order.</p>	<p>Facility Initiated Audits - These are audits initiated by the facility requesting assistance. If during these types of audits, a facility is found to be in non-compliance with the reporting requirements, the facility is NOT issued a Notice of Non-Compliance and Proposed/Final Penalty Assessment Order.</p>

NOTE: Facilities that are issued a Notice of Non-Compliance and Proposed/Final Penalty Assessment Order for a first instance of non-compliance will have the penalty suspended, provided they comply with the requirements prior to the end of the audit.

EXPLANATION OF AUDITS

On-site Audit - An audit initiated because of a possible reporting error, a review of a Standard Industrial Classification (SIC) code or a random selection process. These audits are conducted at the facility and include a walk-through of the entire site and a review of the facility records, such as purchase orders, invoices, etc.

Non-Response Audit - An audit initiated because of a facility's failure to comply with the reporting requirements. These audits include a review of the company file and may be conducted at the facility, over the phone or by mail.

Mail Audit - An audit initiated because of a possible reporting error or when an entire SIC code is being evaluated. These audits consist of sending the facility a letter explaining the audit, an explanation of the reporting requirements and a list of substances reported by other facilities within their SIC code. The facility is asked to re-evaluate their reporting information and notify the Office of State Fire Marshal of their findings. The Office of State Fire Marshal then evaluates their findings to determine whether or not an on-site audit should be made to verify the report.

Fee Review Request - A review initiated by the facility when they feel there has been an error in the Hazardous Substance Possession Fee billing. These reviews include a complete analysis of the company file, along with extensive facility personnel interviews, review of company records and a possible on-site audit.

Review Audits - An audit initiated by the Office of State Fire Marshal, or by the facility, in order to ask questions concerning their survey, or to make corrections to their survey. These audits consist of a file review and facility personnel interviews.

Verification Audits - An audit initiated by the Office of State Fire Marshal in order to verify information reported on their survey. These audits are conducted at the facility and may include a walk-through of the entire site and a review of the facility records, such as purchase orders, invoices, etc.

NON-COMPLIANCE AND PENALTY ASSESSMENT CRITERIA

For the purpose of determining the penalties that may be assessed for non-compliance of the reporting requirements, "Non-Compliance Classes" were established (OAR 837-085-0280). Those classes are:

- Class I** = Failure to request and/or submit the hazardous substance information survey or substantive changes when required.
- Class II** = Failure to maintain and/or provide hazardous substance records when requested.
- Class III** = Failure to report all required information and/or report the information correctly.
- Class IV** = Failure to immediately provide health professionals with hazardous substance information during a medical emergency.
- Class V** = Intentional misreporting of survey, substantive change, survey correction or records information.
- Class VI** = Failure, when submitting a survey, to report all reportable substances and/or report the correct maximum quantity.

PENALTIES

Covered employers, owners and operators found to be in Class I, II, III or IV non-compliance, will be assessed a penalty for each class for which they are in non-compliance, as follows:

Class I Non-Compliance	\$200.00
Class II Non-Compliance	\$70.00
Class III Non-Compliance	\$30.00
Class IV Non-Compliance	\$1,000.00

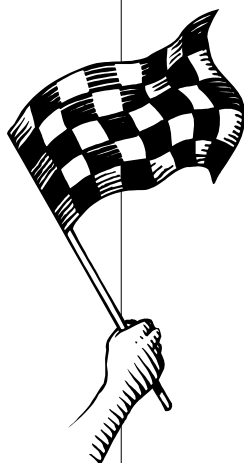
Class V Penalties will be assessed daily for each classification of non-compliance. Penalties will be calculated from the date the Office of State Fire Marshal receives the intentional misreporting, to the date the misreporting is identified.

Class VI Non-Compliance penalties will be assessed according to the total combined amounts of hazardous substances not reported.

SUSPENSION OF PENALTIES

- Penalties for *first instance* (within five years) Class I, II, III and/or VI Non-Compliance, will be suspended provided the employer, owner or operator submits the required information by the compliance date.
- Penalties for *second instance* (within five years) Class I, II, III and/or VI Non-Compliance, will have a 50% suspension provided the employer, owner or operator submits the required information by the compliance date.
- Penalties for *third instance* (within five years) Class I, II, III and/or VI Non-Compliance, will NOT be suspended.
- Penalties for Class IV and V Non-Compliance, will NOT be suspended.

Additional 2003 Accomplishments



- Provided 13,956 reminder letters, 15 days prior to the survey due date, to facilities that had not yet submitted their survey. This is done to remind facilities to submit their surveys by the due date, so they do not fall into a non-compliance situation.
- Received and processed 204 requests for customized hazardous substance information.
- Provided monthly updates to the hazardous substance information available on the OFSM web page. The CR2K web page was accessed over 4,604 times in 2003.
- Continued the information campaign to notify Oregon businesses about the requirement to make notification to the Office of State Fire Marshal, Community Right to Know Unit, if they meet or exceed the reportable quantities of hazardous substances.
- Coordinated, promoted and facilitated an Advanced HazMat Life Support class in Marion County FD#1 training facility in Brooks.
- Conducted eleven workshops on How to Complete the Hazardous Substance Information Survey. These presentations were made in locations around the state and provided information on the CR2K reporting requirements, and step-by-step instructions on how to complete the Hazardous Substance Information Survey.
- Coordinated and facilitated activities of the Interagency Hazard Communication Council (IHCC), State Emergency Response Commission (SERC), and Local Emergency Planning Committee (LEPC) members and provided them with administrative assistance.
- Facilitated and coordinated the implementation of the LEPC Community Response Capability Assessment Program.
- Facilitated the maintenance of the LEPC web site including programming to allow visitors to enter their Oregon address and cross reference with the OSFM HSIS database to determine if they may be in the planning circle for a facility containing hazardous material.
- Continued work on development and implementation for allowing electronic submission of the Hazardous Substance Information Survey on compact disc.
- Initiated the process of changing over from Standard Industrial Classification (SIC) codes to the North American Industrial classification System (NAICS). These coding systems are used to identify the type of business that is conducted at the facility.
- Attended over 40 Community Awareness and Emergency Response (CAER) group meetings, providing Community Right to Know information, and made five formal program presentations.
- Utilized Hazardous Materials Emergency Preparedness (HMEP) grant funding to complete a statewide hazardous materials commodity flow study; and to purchase interactive First Responder Hazardous Materials Awareness and Operations level training CD's for OSP; and to provide local emergency preparedness trainings, attended by a total of 1,205 individuals involved in fire service, law enforcement, Emergency Medical Service (EMS), and various other disciplines.
- Utilized HMEP grant funding to support Columbia County by developing and mailing a brochure to notify community members of the new Community Alert and Notification (CAN) system. This automated phone notification system allows for targeted notifications in emergencies and requires permission from persons with unlisted numbers and do not call options to include their numbers.



AVAILABLE PUBLICATIONS

Reports and Booklets

“Hazardous Materials Emergency Incident Statewide Quarterly Summary Report”

- This is a two page report identifying the number of hazardous material incidents and general information of the incidents occurring within Oregon by quarter.

“Annual Report of Hazardous Materials Incidents in Oregon”

- This booklet contains a listing of the hazardous material incidents occurring in Oregon each year, along with a summary of the amounts released, hazard class and other general information.

“Historical Listing of all HazMat Incidents as Reported to the Office of State Fire Marshal”

- This is a historical report of the information collected through the Hazardous Material Incident Report system since 1986. The report contains an updated listing of all hazardous material incidents occurring in Oregon, including the county, city location, chemical and incident date and information on how to obtain additional data or reports.

“Hazardous Substance Information System Questions & Answers”

- This document gives a brief history and answers 24 of the most frequently asked questions about the Hazardous Substance Information Survey and Community Right to Know program.

“Hazardous Materials Incident Reporting System Training Manual”

- This booklet explains who completes the hazardous materials incident report, when a report needs to be completed and how to complete the report.

“Oregon Hazardous Substance Information Survey and Possession Fee” booklet

- This booklet includes Oregon Revised Statutes and Oregon Administrative Rules pertaining to the Community Right to Know (CR2K) and Hazardous Substance Possession Fee programs. It also includes a sample survey and instruction booklet which outlines the CR2K reporting requirements.

Pamphlets and Brochures

“What are Hazardous Substances” pamphlet

- This is a pamphlet providing information on how to determine whether or not a facility has hazardous substances, as defined by the Oregon Community Right To Know reporting requirements.

“Federal Emergency Planning and Community Right To Know, SARA Title III” pamphlet

- This pamphlet, published by the EPA, provides general information on the federal SARA Title III reporting requirements, by section and what the requirements mean to you.

“Office of State Fire Marshal Oregon Community Right To Know Information” pamphlet

- This pamphlet contains information about the reporting requirements of the Oregon Community Right To Know and Protection Act.

“Is your Facility Subject to the Reporting Requirements for Possession of Hazardous Substances?” pamphlet

- This pamphlet contains information on what the reporting requirements are for facilities that use, store, manufacture, and/or dispose of hazardous substances.

“What is a Substantive Change and How do I Submit One?” pamphlet

- This pamphlet explains to reporting facilities under what circumstances they need to immediately report changes on their survey, rather than during the annual submission.

“Shelter in Place” brochure

- This brochure outlines the five basic steps to shelter in place during a short-lived air release of hazardous chemicals.

“What is the Local Emergency Planning Committee (LEPC)” brochure

- This brochure outlines the mission, function, goals and structure of the Oregon LEPC and provides information on the benefits of membership and how to apply to serve on the LEPC.

“Is Your Community Prepared to Respond to a Hazardous Materials Incident?” brochure

- This brochure provides information on the LEPC process, what benefits the LEPC can provide to a community and how to become involved in LEPC activities.