SCOTTSDALE FIRE DEPARTMENT
HAZARDOUS MATERIALS MANAGEMENT PLAN
Short Form

SUBMITTAL REQUIREMENTS

The reporting of hazardous materials applies to any amount stored, dispensed, used or handled at new or existing businesses or facilities within the City of Scottsdale. Anyone applying to the Fire Department to store, dispense, use or handle hazardous materials must submit a hazardous materials information package. The hazardous materials package must be prepared by the permit applicant and submitted to the Fire Department for review and approval thirty days prior to bringing hazardous materials on site; or when applying for a building or tenant improvement permit from Development Services (if hazardous materials will be on site).

Note: Any hazardous materials that exceed the exempt amounts below, in any one category or as listed in the 2015 International Fire Code, Tables 105.6.8, 105.6.10 & 105.6.20, shall be required to apply for a Fire Department permit and complete an extensive HMMP. Use this form only when the following criterion is met.

HMMP Short Form - (Minimal Storage Site) A facility shall qualify as a minimal storage site if the quantity of each hazardous material stored in one or more facilities in an aggregate quantity is 500 pounds or less for solids, 55 gallons or less for liquids, or 200 cubic feet or less at NTP for compressed gases and does not exceed the threshold planning quantity as listed in 40 C.F.R., Part 355, Sections 302 & 304. The applicant for a facility, which qualifies as a minimal storage site, is allowed to file the short form HMMP. Such plans shall include the following components:

1. General facility information,

2. A simple line drawing of the facility showing the location of storage facilities and indicating the hazard class or classes and physical state of the hazardous materials being stored,

3. Information describing that the hazardous materials will be stored and handled in a safe manner and will be appropriately contained, separated and monitored, and

4. Assurance that security precautions have been taken, employees have been appropriately trained to handle the hazardous materials and react to emergency situations, adequate labeling and warning signs are posted, adequate emergency equipment is maintained, and the disposal of hazardous materials will be in an appropriate manner.

MATERIAL SAFETY DATA SHEETS (MSDS)

Material safety data sheets are excellent resources. Much of the information requested relating to the hazardous materials inventory may be obtained from the MSDS. MSDS’ are required to be provided by the chemical supplier or manufacturer, and are required to be readily available at the business or facility.

Submit one set of Material Safety Data Sheets in alphabetical order with the Haz-Mat package.

INCOMPLETE FORMS WILL NOT BE ACCEPTED!
CONSULTANTS

If needed, consultants should be able to evaluate the MSDS and determine the hazard category(s) for the hazardous materials stored, used or processed. See “Chemists-Analytical” or “Consulting” in the yellow pages of the telephone directory.

IMPACT

It is important that all questions and information requested on all forms is accurately documented. If a specific question or subject is not applicable, document “N/A”. Incomplete or inaccurate information will be returned to the responsible party, which may result in a delay in paperwork processing or inspection compliance.

FORMS

1. Complete the attached General Information form and sign the declaration.

2. Complete the attached hazardous materials inventory form. Instructions for completing the form are on sheet 3.
INSTRUCTIONS FOR COMPLETING THE INVENTORY FORM

"ITEM"  List chemicals in sequential order; 1, 2, 3, … etc.

"CODE"  Enter the following descriptive codes as they apply to each material. You may list more than one code if applicable.

\[
P = \text{PURE} \quad M = \text{MIXTURE} \quad S = \text{SOLID} \quad L = \text{LIQUID} \quad G = \text{GAS}
\]

"CHEMICAL NAME"  List the chemical name as shown on the Material Safety Data Sheet. (MSDS)

"QUANTITY IN STORAGE"  Applies to hazardous materials that are not used or dispensed until ready for use.

"QUANTITY USED OPEN"  Defined as the use of a solid or liquid hazardous material in a vessel or system that is continuously open to the atmosphere during normal operations and where vapors are liberated, or the product is exposed to the atmosphere during normal operations. Examples of open systems for solids and liquids include dispensing from or into open beakers or containers, and dip tanks and plating operations.

"QUANTITY USED CLOSED"  Defined as the use of a solid or liquid hazardous material in a closed vessel or system that remains closed during normal operations where vapors emitted by the product are not liberated outside of the vessel or system and the product is not exposed to the atmosphere during normal operations. This includes all USES of compressed gases. Examples of closed systems for solids and liquids include reaction process operations and product conveyed through a piping system into a closed vessel, system or piece of equipment.

"TOTAL AMOUNT"  Defined as the total quantity of all chemicals in storage by the above methods.

"UNIT"  Enter the units used. Use the following codes.

\[
\begin{align*}
\text{LB} &= \text{POUNDS} \\
\text{GA} &= \text{GALLONS} \\
\text{CF} &= \text{CUBIC FEET}
\end{align*}
\]

"NFPA 704"  This is a classification system published by the National Fire Protection Association and the International Fire Code, section F101. These resources briefly summarize the Health (H), Flammability (F), Reactivity (R) and Other (O) hazardous characteristics of a substance. If characteristics have not been assigned by NFPA, the facility using the material is responsible for obtaining qualified assistance in making a determination of the characteristics and including them on the inventory form.

"IFC PHYSICAL HAZARD CLASS"  This is a Physical Hazard(s) as identified in the International Fire Code.

"IFC HEALTH HAZARD CLASS"  This is a Health Hazard(s) as identified in the International Fire Code.

"EHS"   Extremely Hazardous Substance (EHS) is defined by SARA Title III. If the material is an EHS, place a check mark in the column.

"MAP REF"  Use the map reference to identify storage location(s) of Hazardous Materials.

(3)
<table>
<thead>
<tr>
<th>ITEM</th>
<th>CODE</th>
<th>CHEMICAL</th>
<th>QUANTITY IN STORAGE</th>
<th>QUANTITY USED OPEN</th>
<th>QUANTITY USED CLOSED</th>
<th>TOTAL AMOUNT</th>
<th>UNIT</th>
<th>NFPA 704</th>
<th>IFC PHYSICAL HAZARD CLASS</th>
<th>IFC HEALTH HAZARDS CLASS</th>
<th>E</th>
<th>H</th>
<th>S</th>
<th>MAP REF</th>
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</thead>
<tbody>
<tr>
<td>0</td>
<td>M, L</td>
<td>SAMPLE PRODUCT METHYL ETHYL (90%)</td>
<td>333</td>
<td>333</td>
<td>333</td>
<td>999</td>
<td>GA</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>OX</td>
<td>1A FLAMM</td>
<td>IRITANT CORROSIV</td>
<td>X</td>
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**CODE**  **UNIT**  **NFPA**

- P = PURE
- S = SOLID
- M = MIXTURE
- G = GAS
- L = LIQUID
- LB = POUNDS
- GA = GALLONS
- CF = CUBIC FEET
- H = HEALTH
- F = FLAMMABILITY
- R = REACTIVITY
- O = OTHER
HAZARDOUS MATERIALS
MAP GRID

Business Name:

Date:

Address:

Page ____ of ____

Number of employees in facility depicted above:
## GENERAL INFORMATION

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Address</th>
<th>Phone</th>
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<table>
<thead>
<tr>
<th>Person Responsible for the Business</th>
<th>Title</th>
<th>Phone</th>
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<thead>
<tr>
<th>Emergency Contacts/Coordinators</th>
<th>Title</th>
<th>Home Phone</th>
<th>Work Phone</th>
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<th>Person Responsible for the Application/Principal Contact</th>
<th>Title</th>
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<table>
<thead>
<tr>
<th>Property Owner</th>
<th>Business Address</th>
<th>Home Address</th>
<th>Work Phone</th>
<th>Home Phone</th>
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<tr>
<th>Principle Business Activity</th>
<th>Number of Employees</th>
<th>Number of Shifts</th>
<th>Shift Change Times</th>
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<tr>
<th>Hours of Operation</th>
<th>Miscellaneous Information</th>
<th># of Employees Assigned to each Shift</th>
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<tr>
<td></td>
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<td>A: _________ B: _________ C: _________</td>
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(Must be signed by owner/operator or designated representative)

Declaration - I certify that the information above and on the following parts is true and correct to the best of my knowledge.

Print Name: ________________________________________  Title: ___________________________________________

Signature: __________________________________________  Date: ______________________