



CITY OF GARDEN GROVE
FIRE DEPARTMENT

TEL: (714) 741-5600
FAX: (714) 741-5640

November 23, 2015

Kara Chatham
AEI Consultants
(949) 752-9300

Records Search for 7012 Belgrave Ave., Garden Grove, CA 92841

Dear Ma'am:

Enclosed are the records found concerning the history of the above-mentioned site(s), especially as it pertains to fire code violation history, permits, the use, storage, or disposal of hazardous substances, and the installation or removal of underground flammable or combustible liquid storage tanks.

The City of Garden Grove Fire Department has utilized its best efforts to locate the records requested. However, the City makes no representation as to the accuracy of the records or that all records requested were retained or located. The City does not provide records on spills, leaks or clean-up, as that information is provided through the County of Orange Health Dept.

Sincerely,

A handwritten signature in black ink, appearing to read 'Nate Brady', written over a horizontal line.

Nate Brady
Division Chief/Fire Marshal

A handwritten signature in black ink, appearing to read 'Thanh Nguyen', written over a horizontal line.

By: Thanh Nguyen
Fire Captain/Senior Fire Protection Specialist

File No	Permit No	DBA / Address/Permit description	Date Expires
8587	811031	INSIGHT SYSTEMS EXCHANGE 7012 BELGRAVE Ave HIGH-PILED COMBUSTIBLE STOCK	<u>6</u> 2016

**Violation List for
INSIGHT SYSTEMS EXCHANGE
7012 BELGRAVE Ave**

Date Issued	Date Cleared	Code #	Violation Description
10/15/2013	10/15/2013		No Violation
04/17/2010	04/27/2010		Annual - sprinkler 1- test, annual - alarm 1 - test
05/14/2009	05/21/2009	CFC 1011.2	Provide illuminated exit sign(s).

Inspection # :001669 1.Insp_Date:04-17-00
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info :HAZ MAT DISCLOSURE ON FILE 6.Buslic :159458
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :4/11/01 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:1705
15.Sprinklers:Y 19.ReInsp date: COLLINS, PATRICK S

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Violation Code Violation description
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1
2

Inspection # :011646 1.Insp_Date:
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info :HAZ MAT DISCLOSURE ON FILE 6.Buslic :159458
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :5-16-96 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:
15.Sprinklers:Y 19.ReInsp date:

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Violation Code Violation description
=====

1
2

Inspection # :021624 1.Insp_Date:02-27-02
2. Permit # :020216
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :DORN SPE
5. Address Info : 6.Buslic :
7. Business Owner :DORN SPE
8. Business Address :7012 BELLGRAVE 10.Bus Phone898-8230
9. Business CityStZip:GARDEN GROVE CA 92841 11.EmerPhone310-791-3929

12.Occ Group :F1 16.5yr Cert. :04/06/01 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :04-24-02
14.No of Ext :21.21 18.Haz Mat'I :Y 22.InspectorId:2512
15.Sprinklers:Y 19.ReInsp date: WAIDELICH, SUSAN C

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Violation Code Violation description
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- 1 1001.5 PROVIDE SPRINKLER COVERAGE UNDER MEZZANINE
- 2 8100 MAINTAIN STORAGE UNDER 12'
- 3 1001.5 PROVIDE BAGS ON SPRINKLER HEADS IN SPRAY BOOTH
- 4 8000 LABEL STORAGE AREA NOTING EMPTY AND WASTE CONTAINERS

Inspection # :932270 1.Insp_Date:06-10-93
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info : 6.Buslic :124316
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :B2 16.5yr Cert. :3-15-91 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :06-10-93
14.No of Ext :21.21 18.Haz Mat'I :N 22.InspectorId:1404
15.Sprinklers:Y 19.ReInsp date: CARTER, RICHARD L

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Violation Code Violation description
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- 1
- 2

Inspection # :942164 1.Insp_Date:04-11-94
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info : 6.Buslic :131932
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :B2 16.5yr Cert. :3-15-91 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :04-11-94
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:9034
15.Sprinklers:Y 19.ReInsp date: VIZE, TIMOTHY A

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Violation Code Violation description
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1 NO VIOLATIONS NOTED

Inspection # :952066 1.Insp_Date:04-13-95
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info : 6.Buslic :124316
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :B2 16.5yr Cert. :3-15-91 20.MBCC :N
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :04-13-95
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:6567
15.Sprinklers:Y 19.ReInsp date: OWENS, MICHAEL J

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Violation Code Violation description
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1 NONE

Inspection # :961881 1.Insp_Date:05-03-96
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info : 6.Buslic :124316
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :5-16-96 20.MBCC :Y
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :07-09-96
14.No of Ext :21.21 18.Haz Mat'I :N 22.InspectorId:4607
15.Sprinklers:Y 19.ReInsp date: KINGMAN, LEWIS E

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Violation Code Violation description

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1 UFC 1001.5 HAVE 5YR CERT CONDUCTED ON SPRINKLER SYSTEM

Inspection # :971751 1.Insp_Date:01-01-97
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info :HAZ MAT DISCLOSURE ON FILE 6.Buslic :124316
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :5-16-96 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :
14.No of Ext :21.21 18.Haz Mat'I :N 22.InspectorId:5190
15.Sprinklers:Y 19.ReInsp date: LUKAS JR, EDWARD F

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Violation Code Violation description

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1
2

Inspection # :981700 1.Insp_Date:
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info :HAZ MAT DISCLOSURE ON FILE 6.Buslic :124316
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :5-16-96 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:
15.Sprinklers:Y 19.ReInsp date:

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Violation Code Violation description
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1
2

Inspection # :991687 1.Insp_Date:
2. Permit # :
3. Address :7012 BELGRAVE AVE
4. Business Name/DBA :OMNI-PAK INDUSTRIES
5. Address Info :HAZ MAT DISCLOSURE ON FILE 6.Buslic :159458
7. Business Owner :FRED E SIEGEL
8. Business Address :220 RIVO ALTO CANAL 10.Bus Phone895-7999
9. Business CityStZip:LONG BEACH, CA 90803 11.EmerPhone895-5379

12.Occ Group :F2 16.5yr Cert. :5-16-96 20.MBCC :
13.Occ Load : 17.FDC loc :WESTSIDE 21.Clear date :
14.No of Ext :21.21 18.Haz Mat'l :N 22.InspectorId:
15.Sprinklers:Y 19.ReInsp date:

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Violation Code Violation description
=====
1
2

0. PERMIT# : 020216
 1. INSPECTION# : 021624
 2. PERMIT LOC : 7012 BELGRAVE AVE
 3. BUSINESS NAME: DORN SPE
 4. PHONE: 898-8230
 5. BILL-TO-NAME : DORN SPE
 6. BILL-TO-ADDR : 7012 BELLGRAVE
 7. BILL-TO-CSZ : GARDEN GROVE CA 92841
 8. REMARKS :
 9. BUS LICENSE:165455
 10. OCC CLASS :F1
 11. ISSUE DATE :04-26-02
 12. EXPIRATION :04-30-03
 13. TOTAL FEES :170.00
 14. INSPECTOR :2512
 WAIDELICH, SUSAN C

NO.	CODE	DESCRIPTION / CONDITION	FEE
1	801031	HAZARDOUS MATERIALS USE, HANDLING OR STORAGE OF HAZARDOUS MATERIALS SHALL COMPLY WITH ALL APPLICABLE STATE AND LOCAL CODES.	00.00
2	491011	HOT WORK THE PERFORMANCE OF WELDING AND CUTTING OPERATIONS SHALL COMPLY WITH ALL APPLICABLE STATE AND LOCAL CODES.	60.00
3	451021	SPRAYING/DIPPING SPRAYING OR DIPPING OPERATIONS UTILIZING FLAMMABLE/ COMBUSTIBLE LIQUIDS SHALL COMPLY WITH ALL APPLICABLE STATE AND LOCAL CODES.	110.00

0. PERMIT# : 080036
 1. INSPECTION# :
 2. PERMIT LOC : 7012 BELGRAVE AVE
 3. BUSINESS NAME: INSIGHT INVESTMENTS CORP.
 4. PHONE: 714-939-2300
 5. BILL-TO-NAME : INSIGHT INVESTMENT CORP.
 6. BILL-TO-ADDR : 600 CITY PARKWAY #500
 7. BILL-TO-CSZ : ORANGE CA 92868
 8. REMARKS :
 9. BUS LICENSE:
 10. OCC CLASS :TENT
 11. ISSUE DATE :08-07-08
 12. EXPIRATION :08-07-08
 13. TOTAL FEES :70.00
 14. INSPECTOR :3303
 SOLTIS, SABRINA M

NO.	CODE	DESCRIPTION / CONDITION	FEE
1	321031	TENTS/AIR STR. ERECTION AND USE OF A TENT IN EXCESS OF 200 SQUARE FEET OR CANOPY IN EXCESS OF 400 SQUARE FEET SHALL COMPLY WITH ALL APPLICABLE STATE AND LOCAL CODES.	70.00

0. PERMIT# : 940418

1. INSPECTION# :

2. PERMIT LOC : 7012 BELGRAVE AVE

3. BUSINESS NAME: OMNI-PAK INDUSTRIES 9. BUS LICENSE:

4. PHONE: 895-7999 10. OCC CLASS :B2

5. BILL-TO-NAME : OMNI-PAK INDUSTRIES 11. ISSUE DATE :02-01-94

6. BILL-TO-ADDR : 7012 BELGRAVE AVE 12. EXPIRATION :08-01-94

7. BILL-TO-CSZ : GARDEN GROVE CA 92841 13. TOTAL FEES :35.00

8. REMARKS : 14. INSPECTOR :0732

BOOKER, NICKOLAS D

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NO. CODE DESCRIPTION / CONDITION FEE
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1 801031 HAZARDOUS MATERIALS 35.00
      USE, HANDLING OR STORAGE OF HAZARDOUS MATERIALS SHALL COMPLY
      WITH ALL APPLICABLE STATE AND LOCAL CODES.

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0. PERMIT# : 940511

1. INSPECTION# :

2. PERMIT LOC : 7012 BELGRAVE AVE

3. BUSINESS NAME: OMNI-PAK INDUSTRIES 9. BUS LICENSE:

4. PHONE: 895-7999 10. OCC CLASS :B2

5. BILL-TO-NAME : OMNI-PAK INDUSTRIES 11. ISSUE DATE :08-24-94

6. BILL-TO-ADDR : 7012 BELGRAVE AVE 12. EXPIRATION :08-01-95

7. BILL-TO-CSZ : GARDEN GROVE CA 92841 13. TOTAL FEES :35.00

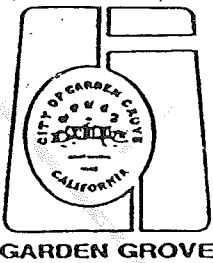
8. REMARKS : 14. INSPECTOR :0732

BOOKER, NICKOLAS D

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NO. CODE DESCRIPTION / CONDITION FEE
=====
1 801031 HAZARDOUS MATERIALS 35.00
      USE, HANDLING OR STORAGE OF HAZARDOUS MATERIALS SHALL COMPLY
      WITH ALL APPLICABLE STATE AND LOCAL CODES.

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CITY OF GARDEN GROVE, CALIFORNIA

MAILING ADDRESS: P.O. BOX 3070, GARDEN GROVE, CALIFORNIA 92642
714-741-5600

GARDEN GROVE

MF 1-13-94

BUSINESS EMERGENCY PLAN

"OMNI-PAK INDUSTRIES"

Business Name Raven Industries, dba Omni-Pak Industries

Business Address 7012 Belgrave Avenue City Garden Grove State CA Zip 92641

Mailing Address same as above City _____ State _____ Zip _____

Business Phone (714) 895-7999 Business License # 124316

Fax Number (714) 891-0542

Owner/Operator: Name _____ Phone Number () _____

Address _____ City _____ State _____ Zip _____

Type of Business Operation Manufacturing - nutritional products

EPA # _____ SIC Code 2023

Emergency Contacts: Name Jolien Garabedian

Address 7012 Belgrave Avenue City Garden Grove State CA Zip 92641

24 Hour Phone Number (714) 803-0858 Phone Number () _____

Property Owner: Name Fujita Property Mgmt. Phone Number (714) 891-6601

Address 12791 Western Ave., Suite J City Garden Grove State CA Zip 92641

Total Number of Employees 75 Dun and Brad Street Numbers 11 - 506 - 2382

Office Use Only

MLI# _____ Short Long _____

(1) 3/4/96 NB

(office use only)

1. NAME	2. HAZARDOUS SUBSTANCES IN PRODUCT (top 3 as per % weight on MSDS)	3. CAS NO.	4. SARA Hazed Class Table 1	5. Physical State Table 2	6. MAX. DAILY AMOUNT Table 3	7. AVG. DAILY AMOUNT Table 3	8. DAYS ON SITE	9. CONTAINER TYPE Table 4	10. STORAGE PR
Hydrochloric Acid	HCL	7647-01-0	3-5	P-L	00	00	365	G-L	1
Sodium Hydroxide	NaOH	1310-73-2	3-5	P-L	00	00	365	L	1
Sulfuric Acid	CH ₄ O ₃ S	75-75-2	3-5	P-L	00	00	365	G	1
Sulfuric Acid	H ₂ SO ₄	7664-93-2	3-5	P-L	00	00	365	G	1
Hydrogen Peroxide	CH ₃ OOH	64-19-7	3-5	P-L	00	00	365	G	1
Methanol	MeOH	67-56-1	1-5	P-L	00	00	365	G	1
Acetonitrile	Me ₃ CN	75-05-8	1-5	P-L	00	00	365	G	1
Potassium Sulfate	Potassium Sulfate	7778-80-5							
Mercuric Oxide	Mercuric Oxide	21908-53-2	1-5	M-S	00	00	365	G	1
Helium	Helium	7440-59-7	2-5	P-G	00	00	365	K	1
Nitrogen	N ₂	7727-37-9	2-5	P-G	00	00	365	K	1
Propane	Propane	74-98-6							
Propylene	Propylene	115-07-1	1-4	M-G	00	00	365	K	1
Butanes	Butanes	various							

Table#2	TABLE # 3 Amount Chart	Table#4 Container Type	Table#5 Storage
Physical State	Value Amount Range	A- Aboveground Tank B- Bag(s) C- Box(s) D- Carboy(s) E- Drum(s) or Barrel(s) F- Fixed Pressurized Cylinders G- Glass Containers H- In Machinery or Equip.	I- Insulated Tank(Cryogenics) J- Metal Containers K- Movable Pressurized Cylinders L- Plastic Containers M- Rail Car N- Silo O- Tank inside building P- Underground Tank Q- Other
P-Pure M-Mixture S-Solid (Report pounds) L-Liquid (Report gallons) G-Gas (Report cubic feet)	00 0 99 01 100 299 02 300 599 03 600 999 04 1000 5999 05 6000 9999 06 10000 19999 07 20000 49999+		Pressure 1- Ambient 2- Less than 3- Greater than An

DISCLOSURE FORM

BE TYPEWRITTEN.

DATE: 2-12-96

PAGE #



8. DAYS ON SITE	9. CONTAINER TYPE <small>Table 4</small>	10. STORAGE CODE PRESSURE/TEMP. <small>Table 5</small>	11. LOCATION <small>(NOTE BY QUADRANT AND DESCRIBE AREA)</small>	12. STATE WASTE NUMBER <small>(3 DIGIT CODE)</small>	13. DOT/UN/NA NUMBER	14. HAZARD CLASS <small>Table 6</small>
365	G-L	1 - 1	Lab		UN1789	4
365	L	1 1	Lab		UN1824	4
365	G	1 1	Lab			
365	G	1 1	Lab		UN1830	4
365	G	1 1	Lab		UN2789	4
365	G	1 1	Lab		UN1230	3
365	G	1 - 1	Lab		UN1648	3
365	G	1 1	Lab		UN1641	20
365	K	1 1	Lab			15
365	K	1 1	Lab		UN1066	15
365	K	1 1	Warehouse		UN1978	10

nics) ylinders	Table#5 Storage Code Pressure / Temperature 1- Ambient 2- Less than ambient 3- Greater than ambient 1- Ambient 2 - Less than ambient, but not cryogenic 3 - Greater than ambient 4 - Cryogenic * Ambient = room pressure or temperture	Table#6 Hazard Class (see MSDS sheets for info) 1- Blasting Agent 2- Carcinogen 3- Combustible 4- Corrosive 5- Cryogenics 6- Etiologic Agents 7- Explosive A 8- Explosive B 9- Explosive C 10- Flammable Compressed Gas 11- Flammable Liquid 12- Flammable Solid 13- Hypergolic 14- Irritant 15- Non Flammable Compressed Gas 16- Organic Peroxide 17- Oxidizer 18- Pesticide 19- Poison A (Compressed Poisonous Gas) 20- Poison B (Solid/Liquid) 21- Pyrophic or Spontaneously Combustible 22- Radioactive
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A Hazardous Materials Disclosure Business is required by law to notify the Garden Grove Fire Department within 15 days of any of the following events:

1. Change of business address.
2. Change of business ownership.
3. Change of business name.
4. Cessation of business.
5. Use of a previously undisclosed hazardous material.
6. A 100% increase in the quantity of a previously disclosed material.

	YES	NO
1. Are there any underground storage containers located on the business property?	_____	<input checked="" type="checkbox"/>
2. Is trade secret protection requested for any of the information included in this disclosure?	_____	<input checked="" type="checkbox"/>
3. Are there school(s), hospital(s), extended day care or long term health facilities within 1000 feet (straight line distance) of business property?	<input checked="" type="checkbox"/>	_____
4. Are extremely Hazardous Materials or Acutely Hazardous Materials being handled on business property (State and Federal reporting)?	_____	<input checked="" type="checkbox"/>

I certify, under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete.

Print Name of ~~Owner~~ Officer: Officer Jolien Garabedian

Print Name of Document Preparer: Jolien Garabedian

Signature of Owner/Operator: Jolien Garabedian Date: 2/28/96

NOTE: Keep a copy of entire disclosure packet for your records.

RETURN THE ORIGINAL DISCLOSURE FORM, BUSINESS PLAN, AND MSDS SHEETS TO THE GARDEN GROVE FIRE DEPARTMENT



* NEW
FEE MISCELLANEOUS \$ 35.00

CITY OF GARDEN GROVE, CALIFORNIA
MAILING ADDRESS: P.O. BOX 3070, GARDEN GROVE, CALIFORNIA 92642
714-741-5600

BUSINESS EMERGENCY PLAN

Business Name Omni-Pak Industries

Business Address 7012 Belgrave Ave City Garden Grove State CA Zip 92641

Mailing Address Same As Above City _____ State _____ Zip _____

Business Phone (714) 895-7999 Business License # 124316
Fax Number (714) 891-0542

Owner/Operator: Name N/A Phone Number () _____

Address _____ City _____ State _____ Zip _____

Type of Business Operation Manufacturing

EPA # _____ SIC Code N/A

Emergency Contacts: Name APS Security Alternate Contact: Sam Pfister 996-2917

Address 14726 Ramona Avenue City Chino State CA Zip 91710

24 Hour Phone Number (714) 956-8551 Phone Number (909) 465-0802

Property Owner: Name Fujita Property Management Phone Number (310) 451-3937

Address P.O. Box 1860 City Santa Monica State CA Zip 90406

Total Number of Employees App. 60 Dun and Brad Street Numbers N/A

and approximately 30 Temporary employees per day = Approx. 90/per day

Office Use Only

MLI# 12859 Short Long _____

18935

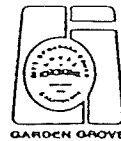
Ok 3-7-94

HAZARDOUS WASTE DISCLOSURE FORM

THIS FORM IS TO BE TYPEWRITTEN.

DATE: 02/28/94

PAGE # _____



GARDEN GROVE

7. AVERAGE DAILY AMOUNT Table 3	8. DAYS ON SITE	9. CONTAINER TYPE Table 4	10 STORAGE CODE PRESSURE/ TEMP. Table 5	11 LOCATION (NOTE BY QUADRANT AND DESCRIBE AREA)	12 STATE WASTE NUMBER (3 DIGIT CODE)	13. DOT/ UN/NA NUMBER	14. HAZARD CLASS Table 6
00	365	G	1-1	Laboratory - Bench Top / Cabinet		2789	4
00	365	L	1-1	Laboratory - Bench Top / Cabinet		1779	4
00	365	G-L	1-1	Laboratory - Bench Top / Cabinet		1789	4
00	365	G	1-1	Laboratory - Bench Top / Cabinet		1230	11
00	365	G	1-1	Laboratory - Bench Top / Cabinet		2031	17
00	365	G	1-1	Laboratory - Bench Top / Cabinet		1830	4
00	365	K	1-1	Laboratory - Bench Top / Cabinet		1046	15

Table#5 Storage Code

Pressure / Temperature	
1- Ambient	1- Ambient
2- Less than ambient	2 - Less than ambient, but not cryogenic
3- Greaterthan ambient	3 - Greater than ambient
	4 - Cryogenic
* Ambient = room pressure or temperature	

Table#6 Hazard Class (see MSDS sheets for info)

1- Blasting Agent	9- Explosive C	17- Oxidizer
2- Carcinogen	10- Flammable Compressed Gas	18- Pesticide
3- Combustible	11- Flammable Liquid	19- Poison A
Liquids	12- Flammable Solid	(Compressed Poisonous G
4- Corrosive	13- Hypergolic	20- Poison B (Solid/Liquid)
5- Cryogenics	14- Irritant	21- Pyrophic or Spontaneously
6- Etiologic Agents	15- Non Flammable	Combustible
7- Explosive A	Compressed Gas	22- Radioactive
8- Explosive B	16- Organic Peroxide	

A Hazardous Materials Disclosure Business is required by law to notify the Garden Grove Fire Department within 15 days of any of the following events:

1. Change of business address.
2. Change of business ownership.
3. Change of business name.
4. Cessation of business.
5. Use of a previously undisclosed hazardous material.
6. A 100% increase in the quantity of a previously disclosed material.

	YES	NO
1. Are there any underground storage containers located on the business property?	_____	_____ ✓
2. Is trade secret protection requested for any of the information included in this disclosure?	_____	_____ ✓
3. Are there school(s), hospital(s), extended day care or long term health facilities within 1000 feet (straight line distance) of business property?	_____ ✓	_____
4. Are extremely Hazardous Materials or Acutely Hazardous Materials being handled on business property (State and Federal reporting)?	_____	_____ ✓

I certify, under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete.

Print Name of ^{officer} Owner: _____ Jolien Garabedian

Print Name of Document Preparer: _____ Same

Signature of Owner/Operator: Jolien Garabedian Date: 3/3-94

NOTE: Keep a copy of entire disclosure packet for your records.

RETURN THE ORIGINAL DISCLOSURE FORM, BUSINESS PLAN, AND MSDS SHEETS TO THE GARDEN GROVE FIRE DEPARTMENT

GARDEN GROVE



Closed
2/23/07

FIRE DEPARTMENT

HAZARDOUS MATERIALS INSURE PROGRAM



Screen Printing Equipment
<http://www.dornspe.com>

Helcio Trindade
Chief Technology Officer

INSURING FORMS PACKET PART 1

7012 Belgrave Avenue
Garden Grove, CA 92841

Phone 714-898-8230
Fax 714-898-8132
helciot@dornspe.com

FOR OFFICIAL USE ONLY						
FACILITY ID NO.	<u>456</u>					
BUSINESS NAME	<u>Dorn</u>					
APPROVED BY:	<u>J.A.</u>	DATE:	<u>2/14/03</u>			
NEW BUSINESS	<u>To Disclosure</u>					UPDATE
FEE	1	2	3	<u>4</u>	5	6
PICK	<u>4D</u>	BUSLIST	__	CALARP:	__	CUPA: __ GIS



BUSINESS INFORMATION

FACILITY # (Supplied by GGFD)	3 0 0 3 5	456	BEGINNING DATE	7/7/2003	1	ENDING DATE	12/31/2003	2		
BUSINESS NAME	DORN SPE, INC.				4	BUSINESS PHONE	714 898-8230	5		
BUSINESS SITE ADDRESS	7012 BELGRAVE AVENUE									
CITY	GARDEN GROVE			7	STATE	CA	8	ZIP	92841	9
DUN & BRADSTREET	00-958-3212		10	SIC CODE (4 DIGIT #)		11	FIRE DISTRICT	2314	12	
COUNTY	ORANGE									
BUSINESS OPERATOR NAME	HELICIO TRINDADE				14	OPERATOR'S PHONE	714 898 8230	15		

BUSINESS OWNER

OWNER NAME	BILL DORN				16	OWNER PHONE	714 898 8230	17		
OWNER MAILING ADDRESS	SAME AS ABOVE									
CITY				19	STATE		20	ZIP		21

ENVIRONMENTAL CONTACT

CONTACT NAME	HELICIO TRINDADE				22	CONTACT PHONE	714 898 8230	23		
CONTACT MAILING ADDRESS	SAME AS ABOVE									
CITY				25	STATE		26	ZIP		27

PRIMARY EMERGENCY CONTACTS SECONDARY

NAME	TITLE	BUSINESS PHONE	24-HR. PHONE	PAGER #	NAME	TITLE	BUSINESS PHONE	24-HR. PHONE	PAGER #
HELICIO TRINDADE	OPERATIONS MANAGER	714 898-8230	310 791-3929	-	IGNACIO CONTRERAS	PRODUCTION MANAGER	714 898 8230	714 546 4572	-

ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIBE THE TYPE OF BUSINESS OPERATION:	SCREEN PRINTING EQUIPMENT MANUF.	38	TOTAL # OF EMPLOYEES	45	39
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)		40	ATTENTION	ANA ROMERO	41
PROPERTY OWNER NAME	DMW FINANCIAL	42	ADDRESS	GAME AS ABOVE	43
			PHONE	714 898 8230	44

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE		45	DATE		46
NAME OF SIGNER (print)	HELICIO TRINDADE	47	NAME OF DOCUMENT PREPARER (print)	HELICIO TRINDADE	49
TITLE OF SIGNER	OPERATIONS MANAGER	48	TITLE OF DOCUMENT PREPARER	OPERATIONS MANAGER.	50



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1 Page ___ of ___ 2

FACILITY ID# 3 0 0 3 5 38 BUSINESS NAME DORN SPE, INC.

I. FACILITY INFORMATION

CHEMICAL LOCATION SOUTH WALL OF SHOP OUTSIDE BUILDING

CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # F7 7

II. CHEMICAL INFORMATION

CHEMICAL NAME WASTE SOLVENT BASE PAINT WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME SOLVENT BASE PAINT 9 An EHS Chemical Yes No 12
*If EHS is "Yes", all amounts must be LBS

CAS # MIXTURES 10 FIRE CODE HAZARD CLASSES (supplied by GGFD) 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 30 19 MAXIMUM DAILY AMOUNT 50 20 ANNUAL WASTE AMOUNT 150 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 90 24 LARGEST CONTAINER 50 25
 c POUNDS d TONS
*If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a ABOVEGROUND TANK e PLASTIC DRUM i VAT m CYLINDER q TANK WAGON 26
 b UNDERGROUND TANK f NONMETALLIC DRUM j FIBER DRUM n GLASS CONTAINER r RAIL CAR
 c TANK INSIDE BLDG g METAL CONTAINER k BAG(S) o PLASTIC CONTAINER s TOTE BIN
 d STEEL DRUM h CARBOY l BOX(S) p IN MACH OR EQUIP t OTHER _____

STORAGE PRESSURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT 27

STORAGE TEMPERATURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT d CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 30	32
2	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
3	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
4	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
5	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

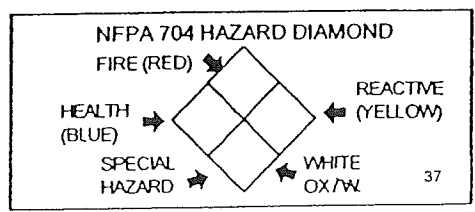
PLACARDING INFORMATION

UNDOT # _____ 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS _____ 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X _____ 36
If EPCRA, Please Sign Here



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HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

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Page _____ of _____ 2

FACILITY ID# 30035 BUSINESS NAME DORN SPE, INC.

I. FACILITY INFORMATION

CHEMICAL LOCATION SOUTH WALL OF SHOP OUTSIDE BUILDING 6
CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # I 6 GRID # F7 7

II. CHEMICAL INFORMATION

CHEMICAL NAME Ethylene Glycol WASTE MACHINE COOLANT WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME MACHINE COOLANT "MANSIZE" An EHS Chemical Yes No 12
* If EHS is "Yes", all amounts must be LBS

CAS # mixture 10 FIRE CODE HAZARD CLASSES (supplied by GGFD) Irritant 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE d ACUTE HEALTH e CHRONIC HEALTH 18

AVERAGE DAILY AMOUNT 30 19 MAXIMUM DAILY AMOUNT 50 20 ANNUAL WASTE AMOUNT 150 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 90 24 LARGEST CONTAINER 50 25
 c POUNDS d TONS
* If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a ABOVEGROUND TANK b UNDERGROUND TANK c TANK INSIDE BLDG d STEEL DRUM e PLASTIC DRUM f NONMETALLIC DRUM g METAL CONTAINER h CARBOY i VAT j FIBER DRUM k BAG(S) l BOX(S) m CYLINDER n GLASS CONTAINER o PLASTIC CONTAINER p IN MACH OR EQUIP q TANK WAGON r RAIL CAR s TOTE BIN t OTHER 26

STORAGE PRESSURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT 27

STORAGE TEMPERATURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT d CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
5	Ethylene Glycol Monobutyl Ether	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 31	011-76-2 32
4	Tetrasodium Salt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	6069-02-8 32
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

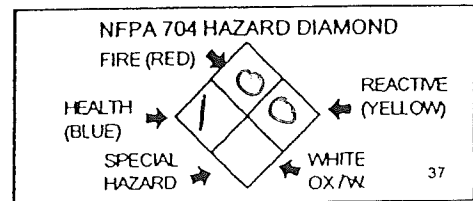
PLACARDING INFORMATION

UNDOT # _____ 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS _____ 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X _____ 36
If EPCRA, Please Sign Here



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HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

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Page ___ of ___ 2

FACILITY ID#	30035	BUSINESS NAME	DORN SPE, INC
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I. FACILITY INFORMATION

CHEMICAL LOCATION	SOUTH WALL OF SHOP OUTSIDE BUILDING		
CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	MAP #	1
		GRID #	F7

II. CHEMICAL INFORMATION

CHEMICAL NAME	WASTE	<input checked="" type="checkbox"/> Yes	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
COMMON NAME	PAINT FILTERS		* If EPCRA see instructions	
CAS #	10	FIRE CODE HAZARD CLASSES (supplied by GGFD)	13	

TYPE (Check one item only)	<input type="checkbox"/> a PURE	<input type="checkbox"/> b MIXTURE	<input checked="" type="checkbox"/> c WASTE	14	RADIOACTIVE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	15	CURIES	16
PHYSICAL STATE (Check one item only)	<input checked="" type="checkbox"/> a SOLID	<input type="checkbox"/> b LIQUID	<input type="checkbox"/> c GAS	17	FED HAZARD CATEGORIES	<input type="checkbox"/> a FIRE	<input type="checkbox"/> b REACTIVE	<input type="checkbox"/> c PRESSURE RELEASE	18
						<input type="checkbox"/> d ACUTE HEALTH	<input type="checkbox"/> e CHRONIC HEALTH		

AVERAGE DAILY AMOUNT	30	19	MAXIMUM DAILY AMOUNT	50	20	ANNUAL WASTE AMOUNT	150	21	STATE WASTE CODE	22
UNITS	<input checked="" type="checkbox"/> a GALLONS	<input type="checkbox"/> b CUBIC FEET	23	DAYS ON SITE	90	24	LARGEST CONTAINER	150	25	
	<input type="checkbox"/> c POUNDS	<input type="checkbox"/> d TONS								

STORAGE CONTAINER (Check all that apply)	<input type="checkbox"/> a ABOVEGROUND TANK	<input type="checkbox"/> e PLASTIC DRUM	<input type="checkbox"/> i VAT	<input type="checkbox"/> m CYLINDER	<input type="checkbox"/> q TANK WAGON	26
	<input type="checkbox"/> b UNDERGROUND TANK	<input type="checkbox"/> f NONMETALLIC DRUM	<input type="checkbox"/> j FIBER DRUM	<input type="checkbox"/> n GLASS CONTAINER	<input type="checkbox"/> r RAIL CAR	
	<input type="checkbox"/> c TANK INSIDE BLDG	<input type="checkbox"/> g METAL CONTAINER	<input type="checkbox"/> k BAG(S)	<input type="checkbox"/> o PLASTIC CONTAINER	<input type="checkbox"/> s TOTE BIN	
	<input checked="" type="checkbox"/> d STEEL DRUM	<input type="checkbox"/> h CARBOY	<input type="checkbox"/> l BOX(S)	<input type="checkbox"/> p IN MACH OR EQUIP	<input type="checkbox"/> t OTHER	

STORAGE PRESSURE	<input checked="" type="checkbox"/> a AMBIENT	<input type="checkbox"/> b ABOVE AMBIENT	<input type="checkbox"/> c BELOW AMBIENT	27
------------------	---	--	--	----

STORAGE TEMPERATURE	<input checked="" type="checkbox"/> a AMBIENT	<input type="checkbox"/> b ABOVE AMBIENT	<input type="checkbox"/> c BELOW AMBIENT	<input type="checkbox"/> d CRYOGENIC	28
---------------------	---	--	--	--------------------------------------	----

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	30 31 32
2	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	30 31 32
3	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	30 31 32
4	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	30 31 32
5	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	30 31 32

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

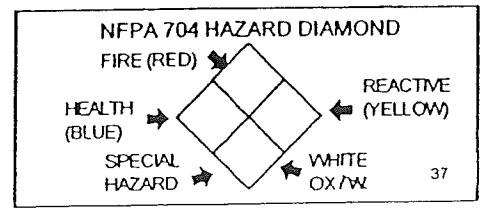
PLACARDING INFORMATION

UNDOT # _____ 33
 Refer to shipping papers or MSDS

DOT HAZARD CLASS _____ 34
 Refer to shipping papers or MSDS

EPCRA YES NO 35

X _____ 36
 If EPCRA, Please Sign Here



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HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

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FACILITY ID# 30035 BUSINESS NAME DORN SPE, INC.

I. FACILITY INFORMATION

CHEMICAL LOCATION SOUTH WALL OF SHOP OUTSIDE BUILDING.

CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # F7 7

II. CHEMICAL INFORMATION

CHEMICAL NAME WASTE WATER BASE PAINT WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME WATER BASE PAINT 9 An EHS Chemical Yes No 12
* If EHS is "Yes", all amounts must be LBS

CAS # 10 FIRE CODE HAZARD CLASSES (supplied by GGFD) 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 30 19 MAXIMUM DAILY AMOUNT 50 20 ANNUAL WASTE AMOUNT 150 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 90 24 LARGEST CONTAINER 50 25
 c POUNDS d. TONS
* If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM i. VAT m. CYLINDER q. TANK WAGON 26
 b. UNDERGROUND TANK f. NONMETALLIC DRUM l. FIBER DRUM n. GLASS CONTAINER r. RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER o. PLASTIC CONTAINER s. TOTE BIN
 d. STEEL DRUM h. CARBOY j. BOX(S) p. IN MACH OR EQUIP t. OTHER _____

STORAGE PRESSURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
2	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
3	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
4	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
5	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32

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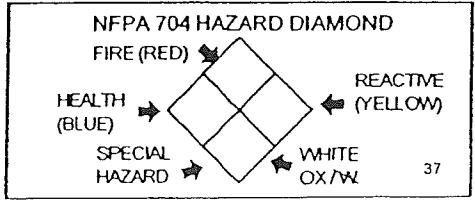
PLACARDING INFORMATION

UNDOT # _____ 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS _____ 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X _____ 36
If EPCRA, Please Sign Here



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HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

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FACILITY ID# 30035 BUSINESS NAME DORN SPE, INC.

I. FACILITY INFORMATION

CHEMICAL LOCATION NORTH SOUTH WALL OF SHOP (INSIDE BUILDING)
CONFIDENTIAL LOCATION Yes No 5 MAP # I 6 GRID # J6 7

II. CHEMICAL INFORMATION

CHEMICAL NAME POLANE #66 REDUCER WASTE Yes 8 TRADE SECRET Yes No 11
COMMON NAME REDUCER 9 An EHS Chemical Yes No 12
* If EPCRA see instructions
* If EHS is "Yes", all amounts must be LBS

CAS # MIXTURE 10 FIRE CODE HAZARD CLASSES (supplied by GGFD) 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 5 GAL 19 MAXIMUM DAILY AMOUNT 10 GAL 20 ANNUAL WASTE AMOUNT 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 DAYS 24 LARGEST CONTAINER 5 GAL 25
 c POUNDS d TONS
* If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a ABOVEGROUND TANK e PLASTIC DRUM i VAT m CYLINDER q TANK WAGON 26
 b UNDERGROUND TANK f NONMETALLIC DRUM j FIBER DRUM n GLASS CONTAINER r RAIL CAR
 c TANK INSIDE BLDG g METAL CONTAINER k BAG(S) o PLASTIC CONTAINER s TOTE BIN
 d STEEL DRUM h CARBOY l BOX(S) p IN MACH OR EQUIP t OTHER

STORAGE PRESSURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT 27

STORAGE TEMPERATURE a AMBIENT b ABOVE AMBIENT c BELOW AMBIENT d CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
20	TOLUENE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	108-88-3
36	ISOPROPYL ACETATE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	108-21-4
45	n-BUTYL ACETATE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	123-86-4
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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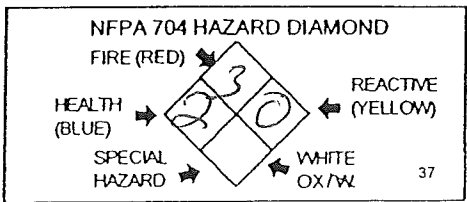
PLACARDING INFORMATION

UNDOT # 33 Refer to shipping papers or MSDS

DOT HAZARD CLASS 3 34 Refer to shipping papers or MSDS

EPCRA YES NO 35

X 36 If EPCRA, Please Sign Here



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MATERIAL SAFETY DATA SHEET

R7K84
06 00

Section 1 -- PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NUMBER

R7K84

HMIS CODES

Health	2
Flammability	3
Reactivity	0

PRODUCT NAME

POLANE* 66 Reducer

MANUFACTURER'S NAME

THE SHERWIN-WILLIAMS COMPANY
101 Prospect Avenue N.W.
Cleveland, OH 44115

EMERGENCY TELEPHONE NO.

(216) 566-2917

DATE OF PREPARATION

01-JUL-03

INFORMATION TELEPHONE NO.

(216) 566-2902

Section 2 -- COMPOSITION/INFORMATION ON INGREDIENTS

% by WT	CAS No.	INGREDIENT	UNITS	VAPOR PRESSURE
20	108-88-3	Toluene		
		ACGIH TLV	50 ppm (skin)	22 mm
		OSHA PEL	100 ppm (skin)	
		OSHA PEL	150 ppm (skin) STEL	
36	108-21-4	Isopropyl Acetate		
		ACGIH TLV	250 ppm	47.5 mm
		ACGIH TLV	310 ppm STEL	
		OSHA PEL	250 ppm	
		OSHA PEL	310 ppm STEL	
45	123-86-4	n-Butyl Acetate		
		ACGIH TLV	150 ppm	10 mm
		ACGIH TLV	200 ppm STEL	
		OSHA PEL	150 ppm	
		OSHA PEL	200 ppm STEL	

Section 3 -- HAZARDS IDENTIFICATION

ROUTES OF EXPOSURE

INHALATION of vapor or spray mist.

EYE or SKIN contact with the product, vapor or spray mist.

EFFECTS OF OVEREXPOSURE

Irritation of eyes, skin and upper respiratory system.

May cause nervous system depression. Extreme overexposure may result in unconsciousness and possibly death.

SIGNS AND SYMPTOMS OF OVEREXPOSURE

Headache, dizziness, nausea, and loss of coordination are indications of excessive exposure to vapors or spray mists.

Redness and itching or burning sensation may indicate eye or excessive skin exposure.

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE

None generally recognized.

CANCER INFORMATION

For complete discussion of toxicology data refer to Section 11.

Continued on page 2

=====
Section 4 -- FIRST AID MEASURES

If INHALED: If affected, remove from exposure. Restore breathing.
Keep warm and quiet.
If on SKIN: Wash affected area thoroughly with soap and water.
Remove contaminated clothing and launder before re-use.
If in EYES: Flush eyes with large amounts of water for 15 minutes.
Get medical attention.
If SWALLOWED: Do not induce vomiting.
Get medical attention immediately.

=====
Section 5 -- FIRE FIGHTING MEASURES

FLASH POINT LEL UEL
35 F PMCC 1.0 7.6

FLAMMABILITY CLASSIFICATION

RED LABEL -- Flammable, Flash below 100 F

EXTINGUISHING MEDIA

Carbon Dioxide, Dry Chemical, Foam

UNUSUAL FIRE AND EXPLOSION HAZARDS

Closed containers may explode when exposed to extreme heat.

Application to hot surfaces requires special precautions.

During emergency conditions overexposure to decomposition products may cause a health hazard. Symptoms may not be immediately apparent. Obtain medical attention.

SPECIAL FIRE FIGHTING PROCEDURES

Full protective equipment including self-contained breathing apparatus should be used.

Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible autoignition or explosion when exposed to extreme heat.

=====
Section 6 -- ACCIDENTAL RELEASE MEASURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

Remove all sources of ignition. Ventilate the area.

Remove with inert absorbent.

=====
Section 7 -- HANDLING AND STORAGE

STORAGE CATEGORY

DOL Storage Class IB

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE

Contents are FLAMMABLE. Keep away from heat, sparks, and open flame.

During use and until all vapors are gone: Keep area ventilated - Do not smoke - Extinguish all flames, pilot lights, and heaters - Turn off stoves, electric tools and appliances, and any other sources of ignition.

Consult NFPA Code. Use approved Bonding and Grounding procedures.

Keep container closed when not in use. Transfer only to approved containers with complete and appropriate labeling. Do not take internally. Keep out of the reach of children.

=====
Section 8 -- EXPOSURE CONTROLS/PERSONAL PROTECTION
=====

PRECAUTIONS TO BE TAKEN IN USE

Use only with adequate ventilation.
Avoid contact with skin and eyes. Avoid breathing vapor and spray mist.
Wash hands after using.

VENTILATION

Local exhaust preferable. General exhaust acceptable if the exposure to materials in Section 2 is maintained below applicable exposure limits. Refer to OSHA Standards 1910.94, 1910.107, 1910.108.

RESPIRATORY PROTECTION

If personal exposure cannot be controlled below applicable limits by ventilation, wear a properly fitted organic vapor/particulate respirator approved by NIOSH/MSHA for protection against materials in Section 2.

PROTECTIVE GLOVES

Wear gloves which are recommended by glove supplier for protection against materials in Section 2.

EYE PROTECTION

Wear safety spectacles with unperforated sideshields.

OTHER PRECAUTIONS

Intentional misuse by deliberately concentrating and inhaling the contents can be harmful or fatal.

=====
Section 9 -- PHYSICAL AND CHEMICAL PROPERTIES
=====

PRODUCT WEIGHT	7.25 lb/gal	868 g/l
SPECIFIC GRAVITY	0.87	
BOILING POINT	185 - 264 F	85 - 128 C
MELTING POINT	Not Available	
VOLATILE VOLUME	100 %	
EVAPORATION RATE	Slower than ether	
VAPOR DENSITY	Heavier than air	
SOLUBILITY IN WATER	N.A.	
VOLATILE ORGANIC COMPOUNDS (VOC Theoretical)		
7.25 lb/gal	868 g/l	Less Water and Federally Exempt Solvents
7.25 lb/gal	868 g/l	Emitted VOC

=====
Section 10 -- STABILITY AND REACTIVITY
=====

STABILITY -- Stable

CONDITIONS TO AVOID

None known.

INCOMPATIBILITY

None known.

HAZARDOUS DECOMPOSITION PRODUCTS

By fire: Carbon Dioxide, Carbon Monoxide

HAZARDOUS POLYMERIZATION

Will not occur

=====
Section 11 -- TOXICOLOGICAL INFORMATION
=====

CHRONIC HEALTH HAZARDS

No ingredient in this product is an IARC, NTP or OSHA listed carcinogen. Prolonged overexposure to solvent ingredients in Section 2 may cause adverse effects to the liver, urinary, blood forming, cardiovascular and reproductive systems.

Reports have associated repeated and prolonged overexposure to solvents with permanent brain and nervous system damage.

=====
TOXICOLOGY DATA
=====

CAS No.	Ingredient Name					
108-88-3	Toluene	LC50	RAT	4HR	4000	ppm
		LD50	RAT		5000	mg/kg
108-21-4	Isopropyl Acetate	LC50	RAT	4HR	Not Available	
		LD50	RAT		3000	mg/kg
123-86-4	n-Butyl Acetate	LC50	RAT	4HR	2000	ppm
		LD50	RAT		13100	mg/kg

=====
Section 12 -- ECOLOGICAL INFORMATION
=====

ECOTOXICOLOGICAL INFORMATION

No data available.

=====
Section 13 -- DISPOSAL CONSIDERATIONS
=====

WASTE DISPOSAL METHOD

Waste from this product may be hazardous as defined under the Resource Conservation and Recovery Act (RCRA) 40 CFR 261.

Waste must be tested for ignitability to determine the applicable EPA hazardous waste numbers.

Incinerate in approved facility. Do not incinerate closed container. Dispose of in accordance with Federal, State/Provincial, and Local regulations regarding pollution.

=====
Section 14 -- TRANSPORT INFORMATION
=====

No data available.

=====
Section 15 -- REGULATORY INFORMATION
=====

SARA 313 (40 CFR 372.65C) SUPPLIER NOTIFICATION

CAS No.	CHEMICAL/COMPOUND	% by WT	% Element
108-88-3	Toluene	20	

=====

CALIFORNIA PROPOSITION 65

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.
TSCA CERTIFICATION

All chemicals in this product are listed, or are exempt from listing, on the TSCA Inventory.

=====

Section 16 -- OTHER INFORMATION

This product has been classified in accordance with the hazard criteria of the CPR and the MSDS contains all of the information required by the CPR.

The above information pertains to this product as currently formulated, and is based on the information available at this time. Addition of reducers or other additives to this product may substantially alter the composition and hazards of the product. Since conditions of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1 Page of 2

FACILITY ID# 30035 38 BUSINESS NAME DORN SPE, INC 3

I. FACILITY INFORMATION

CHEMICAL LOCATION NORTH SOUTH WALL OF SHOP INSIDE BUILDING 4

CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # J6 7

II. CHEMICAL INFORMATION

CHEMICAL NAME MANSIZE WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME MANSIZE 9 An EHS Chemical Yes No 12
* If EHS is "Yes", all amounts must be LBS

CAS # MIXTURE 10 FIRE CODE HAZARD CLASSES (supplied by GGF) IRITANT 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 20 19 MAXIMUM DAILY AMOUNT 30 20 ANNUAL WASTE AMOUNT - 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 24 LARGEST CONTAINER 5 25
 c POUNDS d TONS
* If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM i. VAT m. CYLINDER q. TANK WAGON 26
 b. UNDERGROUND TANK f. NONMETALLIC DRUM j. FIBER DRUM n. GLASS CONTAINER r. RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER k. BAG(S) o. PLASTIC CONTAINER s. TOTE BIN
 d. STEEL DRUM h. CARBOY l. BOX(S) p. IN MACH OR EQUIP t. OTHER _____

STORAGE PRESSURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
5	ETHYLENE GLYCOL MONOBUTYL	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	111-76-2 ³²
4	EDTA, TETRASODIUM SALT	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	064-02-8 ³²
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

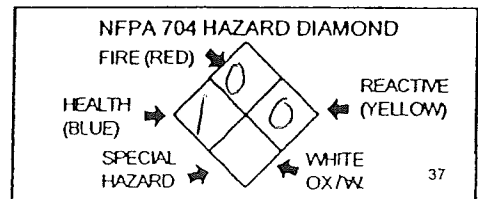
PLACARDING INFORMATION

UNDOT # _____ 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS _____ 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X _____ 36
If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670 PAGE 1
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02

MATERIAL SAFETY DATA SHEET MANSIZE

Section 01 Identification

Info Furnished By..... BRENNTAG WEST, INC
Address..... 10747 PATTERSON PLACE, SANTA FE SPRINGS, CA 90670
Emergency Phone #..... 1-800-424-9300
Date Effective..... 06/26/01
Product or Trade Name..... MANSIZE
Chemical Family..... MIXTURE/NOT APPLICABLE
Chemical Name/Synonyms.... MANSIZE
HAZARDOUS INGREDIENTS CAS REGISTRATION #RATION HAZARD DATAATA
ETHYLENE GLYCOL MONOBUTYL ETHER(5%) 000111-76-2
EDTA, TETRASODIUM SALT(4%) 000064-02-8
NON-HAZARDOUS AND OTHER INGREDIENTS
BELOW REPORTABLE LEVELS

TRACE IMPURITIES AND ADDITIONAL MATERIAL NAMES NOT LISTED ABOVE MAY ALSO APPEAR IN THE REGULATORY INFORMATION SECTION (SECTION 15) TOWARDS THE END OF THE MSDS. THESE MATERIALS MAY BE LISTED FOR LOCAL "RIGHT TO KNOW" COMPLIANCE AND FOR OTHER REASONS.

EXPOSURE GUIDELINES:

INGREDIENT	ACGIH TLV	ACGIH STEL	OSHA PEL	OSHA STEL
ETHYLENE GLYCOL MONOBUTYL ETHER	25 PPM	N/EST	25 PPM	N/EST
EDTA, TETRASODIUM SALT	N/EST	N/EST	N/EST	N/EST

N/EST = NOT ESTABLISHED
SEE 29 CFR 1910.0000 (D) (2) AND ACGIH "THRESHOLD LIMIT VALUES FOR CHEMICAL SUBSTANCES AND PHYSICAL AGENTS BIOLOGICAL EXPOSURE INDICES" BOOKLET (APPENDIX C) FOR THE DETERMINATION OF EXPOSURE LIMITS FOR MIXTURES. CONSULT AN INDUSTRIAL HYGENIST OR SIMILAR PROFESSIONAL TO CONFIRM THAT THE CALCULATED EXPOSURE LIMITS ARE APPROPRIATE.

COMPONENTS FOUND ON ONE OF THE OSHA DESIGNATED CARCINOGEN LISTS ARE LISTED BELOW.

INGREDIENT	NTP	IARC	OSHA
ETHYLENE GLYCOL MONOBUTYL ETHER	N	N	N
EDTA, TETRASODIUM SALT	N	N	N

THIS PRODUCT DOES NOT CONTAIN ANY CHEMICALS REPORTABLE UNDER CALIFORNIA PROPOSITION 65.

Section 02 Physical Data

Boiling Point(760 MM HG).. 212 DEG.F, 99.99 DEG.C
% Volatile By Volume..... N/AV
Melting Point..... N/AV
Vapor Pressure(20 Deg C).. N/AV
Vapor Density(Air=1)..... N/AV
Solubility In Water..... SOLUBLE
Appearance & Color..... LIGHT AMBER

The information herein is given in good faith, but no warranty, express or implied, is made.

Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02 PAGE 2

MATERIAL SAFETY DATA SHEET MANSIZE

Specific Gravity..... 0.95-1.0
Evaporation Rate(Bu.Ac.=1) N/AV
PHYSICAL STATE: LIQUID

ODOR: N/AV

FREEZING POINT: N/AV

PRODUCT PH: 12.0-12.4

Section 03 Fire And Explosion Hazard Data

FLASH POINT METHOD: N/AP

LOWER FLAMMABILITY LIMIT: N/AP

UPPER FLAMMABILITY LIMIT: N/AP

AUTOIGNITION TEMPERATURE: N/AP

FLAMMABILITY CLASSIFICATION: N/AP

EXTING. MEDIA: USE WATER SPRAY, CARBON DIOXIDE, DRY CHEMICAL, OR FOAM.

FIRE FIGHTING: USE NIOSH-APPROVED SELF-CONTAINED BREATHING APPARATUS AND COMPLETE PROTECTIVE CLOTHING WHEN FIGHTING CHEMICAL FIRES.

FIRE HAZARDS: NONE KNOWN

Section 04 Reactivity Data

STABILITY: STABLE

CONDITIONS TO AVOID: EXPOSURE TO HIGH TEMPERATURES SHOULD BE MINIMIZED.

INCOMPATIBILITY: STRONG OXIDIZERS

DECOMPOSITION: TOXIC OXIDES OF CARBON, OXIDES OF PHOSPHORUS

POLYMERIZATION: POLYMERIZATION WILL NOT OCCUR.

Section 05 Spill, Leak And Disposal Procedures

SMALL SPILLS: CONTAIN SPILL AND VENTILATE AREA.
ABSORB ON INERT MEDIA AND CONTAINERIZE FOR DISPOSAL.

LARGE SPILLS: CONTAIN SPILL AND VENTILATE AREA. PERMIT ONLY TRAINED PERSONNEL

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Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02 PAGE 3

MATERIAL SAFETY DATA SHEET MANSIZE

WEARING FULL PROTECTIVE EQUIPMENT TO ENTER THE SPILL AREA. COLLECT THE SPILL IN A WASTE CONTAINER OR REMOVE WITH A VACUUM TRUCK. PREVENT SPILL FROM ENTERING NATURAL WATERCOURSES.

PROTECTIVE EQUIPMENT/SPILL-RELEASE INSTRUCTIONS:
WEAR COMPLETE PROTECTIVE CLOTHING WHEN CLEANING UP CHEMICAL SPILLS. SPILLS AND RELEASES MAY HAVE TO BE REPORTED TO FEDERAL AND/OR LOCAL AUTHORITIES. SEE THE REGULATORY INFORMATION SECTION (SECTION 14) REGARDING REPORTING REQUIREMENTS.

DISPOSAL CONSIDERATIONS

RCRA WASTE: NO
RCRA ID NUMBER: N/AP

VOC CONTENT (LBS/GAL) N/AV

WASTE DISPOSAL PROCEDURE: DISCHARGE, TREATMENT, OR DISPOSAL MAY BE SUBJECT TO FEDERAL, STATE, OR LOCAL LAWS. STATE AND LOCAL REGULATIONS AND RESTRICTIONS ARE COMPLEX AND MAY DIFFER FROM FEDERAL DISPOSAL REGULATION. THE INFORMATION OFFERED HERE IS FOR THE PRODUCT AS SHIPPED. USE AND/OR ALTERATIONS TO THE PRODUCT SUCH AS MIXING WITH OTHER MATERIALS MAY SIGNIFICANTLY CHANGE THE CHARACTERISTICS OF THE MATERIAL AND ALTER THE RCRA CLASSIFICATION AND THE PROPER DISPOSAL METHOD.

Section 06 Health Hazard Data

EMERGENCY OVERVIEW: CAUTION! MAY BE IRRITATING TO EYES, SKIN, AND RESPIRATORY TRACT.

POTENTIAL HEALTH EFFECTS

SKIN: CONTACT WITH THE SKIN MAY CAUSE IRRITATION.

EYES: CONTACT WITH THE EYES MAY CAUSE IRRITATION.

INGESTION: INGESTION MAY CAUSE GASTROINTESTINAL IRRITATION, NAUSEA, VOMITING, AND DIARRHEA.

INHALATION: INHALATION MAY BE IRRITATING TO RESPIRATORY TRACT.

MEDICAL CONDITIONS AGGRAVATED: EXPOSURE TO THIS PRODUCT MAY AGGRAVATE PRE-EXISTING SKIN DISORDERS.

TOXOLOGICAL INFORMATION

IMMEDIATE EFFECTS: NO DATA AVAILABLE

Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670 PAGE 4
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02

MATERIAL SAFETY DATA SHEET MANSIZE

DELAYED EFFECTS (CHRONIC AND SUBCHRONIC)

CARCINOGENICITY: NO DATA AVAILABLE

MUTAGENICITY: NO DATA AVAILABLE

EPIDEMIOLOGY: NO DATA AVAILABLE

TERATOGENICITY: NO DATA AVAILABLE
REPRODUCTIVITY: NO DATA AVAILABLE

NEUROTOXICITY: NO DATA AVAILABLE

Section 07 First Aid Procedures And Physician Notes

SKIN CONTACT: REMOVE CONTAMINATED CLOTHING AND SHOES.
WASH EXPOSED AREAS WITH SOAP AND WATER.
CALL A PHYSICIAN IF IRRITATION PERSISTS.

EYE CONTACT: FLUSH EYES WITH WATER FOR AT LEAST 15 MINUTES.
CALL A PHYSICIAN IF IRRITATION PERSISTS.

INGESTION: INDUCE VOMITING.
GET IMMEDIATE MEDICAL ATTENTION.

INHALATION: REMOVE TO FRESH AIR.
IF BREATHING HAS STOPPED. GIVE ARTIFICIAL RESPIRATION.
GET MEDICAL ATTENTION.

NOTES TO PHYSICIAN: NO DATA AVAILABLE

Section 08 Special Handling Information

ENGINEERING CONTROLS: GOOD GENERAL VENTILATION (TYPICALLY 10 AIR CHANGES/HR)
SHOULD BE USED. VENTILATION RATES SHOULD BE MATCHED TO CONDITIONS. USE PROCESS
ENCLOSURES, LOCAL EXHAUST VENTILATION, OR OTHER ENGINEERING CONTROLS TO
MAINTAIN AIRBORNE LEVELS BELOW RECOMMENDED EXPOSURE LIMITS.

PERSONAL PROTECTIVE EQUIPMENT
SKIN: WEAR PROTECTIVE GLOVES MADE OF NEOPRENE OR RUBBER.

EYE: WEAR CHEMICAL SAFETY GOGGLES.

RESPIRATORY: IF ENGINEERING CONTROLS DO NOT MAINTAIN AIRBORNE CONCENTRATIONS
BELOW RECOMMENDED LIMITS, WEAR A NIOSH-APPROVED RESPIRATOR FOR ORGANIC VAPORS.

OTHER: EMERGENCY SHOWERS, EYE-WASH STATIONS, AND FIRE BLANKETS SHOULD BE
ACCESSIBLE. WEAR PROTECTIVE CLOTHING.

Section 09 Special Precautions And Additional Information

HANDLING: AVOID CONTACT WITH SKIN, EYES, AND CLOTHING.

The information herein is given in good faith, but no warranty, express or
implied, is made.

Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02 PAGE 5

MATERIAL SAFETY DATA SHEET MANSIZE

AVOID BREATHING PRODUCT VAPORS AND MISTS.
DO NOT TAKE INTERNALLY.
WASH THOROUGHLY AFTER HANDLING THIS MATERIAL.

STORAGE: KEEP CONTAINER CLOSED WHEN NOT IN USE.
THIS MATERIAL SHOULD BE STORED AT MODERATE TEMPERATURES.

Section 10 Hazardous Ingredients

NEPA HAZARD RATINGS (H-F-R): 1-0-0
HMIS HAZARD RATINGS (H-F-R): 1-0-0

ECOLOGICAL INFORMATION
NO DATA AVAILABLE

TRANSPORTATION INFORMATION

D.O.T. SHIPPING NAME: NONE

D.O.T. HAZARD CLASS: NONE
DOT ID NUMBER: NONE

DOT PACKING GROUP: NONE

IMDG HAZARD CLASS: NONE

ICAO HAZARD CLASS: NONE

CERCLA "REPORTABLE QUANTITY" (RQ): NO RQ

SPILLS/RELEASES RESULTING IN THE LOSS OF THIS PRODUCT AT OR ABOVE ITS RQ
REQUIRES IMMEDIATE NOTIFICATION TO THE NATIONAL RESPONSE CENTER (1-800-424-880
2) AND TO YOUR LOCAL EMERGENCY PLANNING COMMITTEE.

FEDERAL REGULATIONS

TSCA INVENTORY STATUS: YES

WHMIS CLASSIFICATION (CANADA): NOT AVAILABLE
FOREIGN INVENTORY: NO DATA AVAILABLE

ADDITIONAL REGULATORY INFORMATION

THIS PRODUCT DOES NOT CONTAIN ANY CHEMICALS REPORTABLE UNDER CALIFORNIA
PROPOSITION 65.

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implied, is made.

Tuesday, June 24, 2003

BRENNTAG WEST, INC. 10747 PATTERSON PLACE SANTA FE SPRINGS, CA 90670
PHONE#... (562)903-9626 MSDS#... 8310 7/15/02 PAGE 6

MATERIAL SAFETY DATA SHEET MANSIZE

MASSACHUSETTS SUBSTANCE LIST: SODIUM HYDROXIDE, 2-BUTOXYETHANOL

NEW JERSEY SUBSTANCE LIST: SODIUM HYDROXIDE, 2-BUTOXYETHANOL

PENNSYLVANIA HAZARDOUS SUBSTANCE LIST: SODIUM HYDROXIDE, 2-BUTOXYETHANOL

Section 11 SARA Title III Information

SECTION 311/312 HAZARD CLASS: IMMEDIATE (ACUTE) HEALTH HAZARD

INGREDIENTS	SECTION 313	SECTION 302
ETHYLENE GLYCOL MONOBUTYL ETHER	Y	N
EDTA, TETRASODIUM SALT	N	N

Section 99 Footnotes

DISCLAIMER:

THE INFORMATION HERIN IS PRESENTED IN GOOD FAITH AND IS BELIEVED TO BE CORRECT AS OF THE DATE HEREOF. HOWEVER, BRENNTAG-WEST MAKES NO REPRESENTATION AS TO THE COMPLETENESS AND ACCURACY THEREOF. USES MUST MAKE THEIR OWN DETERMINATION AS TO THE SUITABILITY OF THE PRODUCT FOR THEIR PURPOSES PRIOR TO USE. NO REPRESENTAITONS OR WARRANTIES, EITHER EXPRESSED OR IMPLIED, OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, OR OF ANY OTHER NATURE WITH RESPECT TO THE PRODUCT OR TO THE INFORMATION HEREIN IS MADE HEREUNDER. BRENNTAG-WEST SHALL IN NO EVENT BE RESPONSIBLE FOR ANY DAMAGES OF WHATSOEVER NATURE DIRECTLY OR INDIRECTLY RESULTING FROM THE PUBLICATION, OR USE OF, OR RELIANCE UPON THE INFORMATION CONTAINED HEREIN.

The information herein is given in good faith, but no warranty, express or implied, is made.

456

GARDEN GROVE



FIRE DEPARTMENT

HAZARDOUS MATERIALS DISCLOSURE PROGRAM

REPORTING FORMS PACKET: PART 2

BUSINESS EMERGENCY PLAN

LONG VERSION

THE FOLLOWING FORMS ARE FOR USE IN THE EVENT OF AN ACTUAL
OR THREATENING HAZARDOUS MATERIALS EMERGENCY.

FILL THESE FORMS OUT COMPLETELY AND BE READY TO HAND
THEM TO THE FIRE DEPARTMENT PERSONNEL WHEN THEY
ARRIVE AT THE EMERGENCY SCENE.

IN THE EVENT OF AN EMERGENCY,

CALL 911

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM
BUSINESS EMERGENCY PLAN**

EMERGENCY NOTIFICATIONS

A handler of hazardous materials is required to immediately report any release or threatened release of hazardous materials to the Garden Grove Fire Department. Failure to do so may result in criminal and/or civil prosecution.

REQUIRED NOTIFICATIONS

In the event of a release or threatened release of hazardous materials, it is state law to notify each of the following agencies:

<u>AGENCY</u>	<u>PHONE NUMBERS</u>
Garden Grove Fire Department, Police, Paramedics	911
Office of Emergency Services (OES)	(800) 852-7550 or (916) 427-4341
National Response Center	(800) 424-8802

Individual(s) Responsible for Calling These Agencies
OPERATIONS MANAGER AND OFFICE MANAGER

Provide the following information when you call:

- Name of the person and business.
- Business street address.
- Location of the incident.
- Type of incident (spill, gas release, etc.)
- The name(s) of the chemical substance(s) involved.
- The amount of the chemical substances involved.
- The extent of injuries, if any.
- Possible hazards to human health and/or the environment.
- Emergency call-back phone number (714) 898-8230

If a chemical spill or release at your facility could create a toxic cloud or a liquid stream that could drift beyond your facility, then, identify nearby facilities that could be in imminent danger.

To the North:	Facility <u>GIULIANO'S DISTRIBUTION</u>	Phone (<u>714</u>) <u>895-9661</u>
	Facility _____	Phone (____) _____
To the South:	Facility <u>COVE WEST</u>	Phone (<u>714</u>) <u>891-2358</u>
	Facility <u>SU GROUP</u>	Phone (<u>714</u>) <u>898-2900</u>
To the East:	Facility <u>PACIFICA HIGH SCHOOL</u>	Phone (<u>714</u>) <u>663-6575</u>
	Facility _____	Phone (____) _____
To the West:	Facility <u>"FOR LEASE" (LEE & ASSOC.)</u>	Phone (<u>949</u>) <u>724-1000</u>
	Facility _____	Phone (____) _____

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM
BUSINESS EMERGENCY PLAN**

OPTIONAL NOTIFICATIONS

1. Hazardous Waste Contractor
Name: SAFETY KLEEN (714) 435-0605
2. Insurance Company
Name: HANTFORD (916) 294-1000
3. Poison Control Center - 24-Hour
1-(800) 876-4766

EVACUATION PLANS AND PROCEDURES

Evacuation Alarms - Describe the type of alarm signals that will be used to start an evacuation at this facility: (Vocal, paging system, manual alarm, etc.)

THE EVACUATION WILL START BY ANNOUNCING
ON THE PAGING SYSTEM AS WELL AS BY
SUPERVISORS VOCAL INSTRUCTIONS.

Evacuation Drills

Evacuation drills and records proving you have held such drills are required by California law. The drill record does NOT have to be provided to the Fire Department with this business plan, but shall be maintained for a period of three years and shall be available for review by Fire Department personnel. The record shall include the facilitator's name, title, facility location, date of drill, and the signature of the facilitator. For your convenience, a form for recording list information is included with this packet. Make additional copies, as needed.

The following four forms:

- A) Evacuation Drill Record
- B) Emergency Coordinator Task Completion Sheet
- C) Emergency Chemical Disclosure Form
- D) Training Record

These forms are designed to assist you in organizing, planning and maintaining permanent records. They are to be retained at the business, and may be requested by emergency responders upon their arrival or during your annual fire inspection.

GARDEN GROVE FIRE DEPARTMENT

EVACUATION DRILL RECORD

Business Name: DORN SPE, INC.

Street Address: 7012 BELGRAVE AVE., GARDEN GROVE, CA 92841

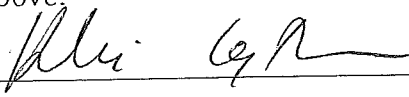
Date of evacuation drill: 7/10/2003

Brief description of drill: ALL PERSONNEL WAS INSTRUCTED TO REPORT TO THE MEETING LOCATION AS DESCRIBED IN THE EVACUATION PLAN.

Facilitator's Name: HELICIO TRINPADE

Facilitator's Title: OPERATIONS MANAGER.

I hereby certify, under penalty of perjury, that I facilitated the evacuation drill as described above.

Signature of Facilitator 

Date Signed: 7/10/2003

Date of evacuation drill: _____

Brief description of drill: _____

Facilitator's Name: _____

Facilitator's Title: _____

I hereby certify, under penalty of perjury, that I facilitated the evacuation drill as described above.

Signature of Facilitator _____

Date Signed: _____

THIS RECORD TO BE RETAINED AT THE BUSINESS
MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED

GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN

"EMERGENCY COORDINATOR TASK COMPLETION SHEET"

_____ Date and time the incident was reported: Date: _____

Time: _____

_____ Identify the nature and extent of the incident.

_____ Activate internal facility alarms or communication systems.

_____ Notify the Fire Department.

_____ Designate an employee to direct emergency response units to the incident scene.

_____ Initiate prearranged mitigation and evacuation plans.

_____ Secure all emergency shut-off valves (as required).

_____ Initiate internal company notifications.

_____ Account for all evacuated personnel.

_____ Have resource material available for use by responding agencies (maps drawings, Material Safety Data Sheets (MSDS), etc.)

_____ Identify actions taken by the business to control the incident.

_____ Secure the incident scene to include treatment, storage or disposal of hazardous materials or waste involved.

_____ Other: (specify)

THIS RECORD TO BE RETAINED AT THE BUSINESS

THIS FORM SHALL BE GIVEN TO THE EMERGENCY RESPONDERS
UPON THEIR ARRIVAL AT THE FACILITY.

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM
EMERGENCY CHEMICAL DISCLOSURE FORM**

Complete the following information for all hazardous chemicals involved in or potentially affected by the incident. Make as many additional copies of this form as you may require, IN ADVANCE, and keep the copies in a convenient place for your immediate use during an emergency.

Chemical Name: WATER BASE PAINT (WASTE)
CAS Number (if known): ----- - ---- - MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: PAINT FILTERS (WASTE)
CAS Number (if known): ----- - ---- - MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: MACHINE COOLANT (WASTE)
CAS Number (if known): ----- - ---- - MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: SOLVENT BASE PAINT (WASTE)
CAS Number (if known): ----- - ---- - MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: POLANE #66 REDUCER
CAS Number (if known): ----- - ---- - MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

THIS FORM SHALL BE GIVEN TO THE EMERGENCY RESPONDERS
UPON THEIR ARRIVAL AT THE FACILITY.

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM
EMERGENCY CHEMICAL DISCLOSURE FORM**

Complete the following information for all hazardous chemicals involved in or potentially affected by the incident. Make as many additional copies of this form as you may require, IN ADVANCE, and keep the copies in a convenient place for your immediate use during an emergency.

Chemical Name: DARK GRAY ACRYLIC ENAMEL
CAS Number (if known): _____ - _____ - _____ MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: MANI ZE
CAS Number (if known): _____ - _____ - _____ MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: INDUSTRIAL WASH PRIMER GREEN
CAS Number (if known): _____ - _____ - _____ MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: ACETONE
CAS Number (if known): _____ 67-64-1

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

Chemical Name: POLAR H5 POLYURETHANE ENAMEL
CAS Number (if known): _____ - _____ - _____ MIXTURE

Amount of chemical spilled or released: _____
If still spilling, the estimated amount of the chemical substance remaining in the original container. _____

THIS FORM SHALL BE GIVEN TO THE EMERGENCY RESPONDERS
UPON THEIR ARRIVAL AT THE FACILITY.

**GARDEN GROVE FIRE DEPARTMENT
TRAINING RECORDS FOR HAZARDOUS MATERIALS
AND EMERGENCIES**

In addition to planning and conducting training programs, each employer should maintain training records for no less than three years. For your convenience, a form for recording this information is provided for your use. These reports do not have to be mailed back to the Fire Department with the Business Plan, but should be available to Fire Department personnel upon request. Make as many additional copies of these form as you need.

Employee Name: BILL DORN
Employee Title: C.F.O.
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JIM WALKER
Employee Title: PRESIDENT
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ANA ROMERO
Employee Title: CFO
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: HELICIO TRINDADE
Employee Title: COO
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

THIS RECORD TO BE RETAINED AT THE BUSINESS
MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED

**GARDEN GROVE FIRE DEPARTMENT
TRAINING RECORDS FOR HAZARDOUS MATERIALS
AND EMERGENCIES**

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Employee Name: GEORGE ZAVALA
Employee Title: INVENTORY CONTROL MGR/CUSTOMER SERVICE
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ALFONSO MORA
Employee Title: NATIONAL & INTERNATIONAL SALES
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JIM AGUILAR
Employee Title: ACCOUNTS PAYABLE
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: DARRYL D. WESSON
Employee Title: ACCOUNTS RECEIVABLE
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

THIS RECORD TO BE RETAINED AT THE BUSINESS
MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED

**GARDEN GROVE FIRE DEPARTMENT
TRAINING RECORDS FOR HAZARDOUS MATERIALS
AND EMERGENCIES**

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Employee Name: EUNICE KIM
Employee Title: ACCOUNTING MGR.
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: MEGAN GIRAUD
Employee Title: RECEPTIONIST
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: MARIE-ANTOINETTE S. CALLANTA
Employee Title: EXECUTIVE ASSISTANT, H.R.
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: YADIRA ZEPEDA
Employee Title: PURCHASING
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: NORMA VIVAR
Employee Title: JANITORIAL/MAINTENANCE
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: GABRIEL MACIAS
Employee Title: SENIOR DESIGNER
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: RICHARD GUITIEREZ
Employee Title: ENGINEER
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: RICKY NGUYEN
Employee Title: ENGINEER
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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TRAINING RECORDS FOR HAZARDOUS MATERIALS
AND EMERGENCIES**

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Employee Name: LARRY RODRIGUEZ
Employee Title: ENGINEER
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: VITO FORLANO
Employee Title: WEB DESIGNER
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: CARLOS ROMERO
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: IGNACIO CONTRERAS
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: JESUS ORDAZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: DONALD SPEARS
Employee Title: TECHNICIAN
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: GEORGE FORCE
Employee Title: TECHNIC DIRECTOR
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: MICHAEL MITCHELL
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: MARTIN TORRES
Employee Title: SHIPPING and RECEIVING
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: SAMMY BURNLEY
Employee Title: TECHNICIAN
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ARMANDO MALDONADO
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ENRIQUE CARLOS
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: JUVENAL LUNA
Employee Title: TECHNICIAN
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: PAUL BARRON
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JACINTO BEZA
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JAVIER CERDA
Employee Title: _____
Training Provided: - EXIT BUILD.
- MEETING PLACE
Date Completed: 7/10/2003

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**GARDEN GROVE FIRE DEPARTMENT
TRAINING RECORDS FOR HAZARDOUS MATERIALS
AND EMERGENCIES**

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Employee Name: ATANACIO FERNANDEZ
Employee Title: _____
Training Provided: - MEETING PLACE
- EXIT BUILDING
Date Completed: 7/10/2003

Employee Name: HUGO PONCE
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JOSE GONZALEZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: _____

Employee Name: CARLOS GUZMAN
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: RAMON GUZMAN
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ENRIQUE GONZALEZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JESUS MUNOZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: ANTIOLO OCAMPO
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: SAMUEL PONCE
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: FRANCISCO RAMIREZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: JOSE RODRIGUEZ
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: PETER SMIT
Employee Title: ENGINEERING
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

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Employee Name: VICENTE SOSA
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: HUGO TEJEDA
Employee Title: _____
Training Provided: - EXIT BUILDING
- MEETING PLACE
Date Completed: 7/10/2003

Employee Name: _____
Employee Title: _____
Training Provided: _____
Date Completed: _____

Employee Name: _____
Employee Title: _____
Training Provided: _____
Date Completed: _____

THIS RECORD TO BE RETAINED AT THE BUSINESS
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**GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN**

EVACUATION PLANNING

Describe the evacuation routes, emergency exits, and staging areas for employees in each work area at this facility. (A "staging area" is a specific location where your personnel meet after an evacuation, where you make sure everyone got out safely).

1. Working area: MAIN WAREHOUSE
Evacuation route: ALL 3 MAIN BAY DOORS
Emergency exits: MAIN BAY DOORS.
Staging area: MEETING LOCATION PARKING LOT

2. Working area: OFFICE AREA
Evacuation route: MAIN ENTRANCE
Emergency exits: MAIN ENTRANCE
Staging area: MEETING LOCATION PARKING LOT

3. Working area: _____
Evacuation route: _____
Emergency exits: _____
Staging area: _____

4. Working area: _____
Evacuation route: _____
Emergency exits: _____
Staging area: _____

5. Working area: _____
Evacuation route: _____
Emergency route: _____
Emergency exits: _____
Staging are: _____

MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED.

GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN

EMPLOYEE RESPONSIBILITIES:

Every business is required to develop an emergency plan. Part of this plan shall include the pre-assignment of important emergency duties to specific employees, and training of employees to carry out these emergency duties. Provide this information below for those employees who will carry out the emergency duties.

JOB TITLE: OPERATIONS MANAGER

EMERGENCY FUNCTION(S)

- a. HEAD COUNT AT MEETING LOCATION
- b. EXECUTE EVACUATION PROCEDURE
- c. _____
- d. _____

JOB TITLE: OFFICE MANAGER

EMERGENCY FUNCTION(S)

- a. INITIATE OFFICE AREA EVACUATION
- b. ENSURE THAT OFFICE AREA IS CLEAN
- c. _____
- d. _____

JOB TITLE: WAREHOUSE MANAGER

EMERGENCY FUNCTION(S)

- a. INITIATE MAIN WAREHOUSE EVACUATION
- b. ENSURE THAT MAIN WAREHOUSE IS CLEAN.
- c. _____
- d. _____

MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED.

GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN

TRAINING

Every Business handling hazardous materials above the minimum limits shall provide training for their employees in the following area:

- A. Method for safe handling of hazardous materials.
- B. Procedures for notification and coordination with emergency agencies, in the event of a spill or threatened spill.
- C. Use of emergency response equipment and supplies under the control of the handler.
- D. Emergency mitigation procedures in response to a release or threatened release hazardous material.
- E. Tasks assigned to employees in the event of a hazardous materials emergency.
- F. Evacuation procedures.

Describe the type of training programs you either are currently using or will use during the next year to provide the required employee training.

DORN SPE, INC. IS IN THE PROCESS OF DRAFTING A TRAINING PROGRAM THAT WILL ADDRESS THE ISSUES RELATED TO HAZARDOUS MATERIAL HANDLING. THE MANUAL WILL COVER ALL THE BASIC ISSUES AS LISTED ABOVE. ALL PERSONNEL WILL BE INSTRUCTED ON HOW TO HANDLE, REPORT, AND EVACUATION PROCEDURES. IN ADDITION, ALL PERSONNEL WILL BE INSTRUCTED ON HOW TO READ THE PLANT MAP INDICATING ALL EXITS AND SPILL CONTROL DEVICES.

MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED.

**GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN**

PREVENTION

Part of the emergency pre-planning process is to identify potential hazards BEFORE an emergency, then either eliminate the hazard (if feasible) or prepare to handle the hazard should an emergency occur. To help you in this task, the form below is designed to help you identify potential hazards and to plan for minimizing the hazard. Complete this information for each hazardous materials storage location within your facility.

<u>HAZARDOUS MATERIALS STORAGE LOCATION</u>	<u>PREVENTATIVE MEASURE</u>
1. <u>WEST SOUTH WALL INSIDE</u>	<u>KEEP INSIDE CABINETS</u>
2. <u>WEST SOUTH WALL OUTSIDE</u>	<u>KEEP DRUMS ON SPILL PREVENTION ENCLOSURES.</u>
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

Comments relating to the listed storage areas:

ALL MATERIAL ARE TO BE MAINTAINED INSIDE
FIRE PROOF CABINETS. IN ADDITION, ALL AREAS
MUST BE CLEAN AND NEAT.

Prevention Measures to be taken at this location:

A NONE AT THIS TIME

Estimated date of completion: _____

Actual date of completion: _____

MAKE ADDITIONAL COPIES OF THIS FORM, AS NEEDED

**GARDEN GROVE FIRE DEPARTMENT
BUSINESS EMERGENCY PLAN**

A BUSINESS IS REQUIRED BY LAW TO NOTIFY THE GARDEN GROVE FIRE DEPARTMENT WITHIN 30 DAYS OF ANY OF THE FOLLOWING EVENTS:

1. Change of business address.
2. Change of business ownership
3. Change of business name.
4. Cessation of business operation (quitting business).
5. Use or handling of a previously undisclosed hazardous material.
6. A 100% increase in the quantity of a previously disclosed hazardous material.

IN ADDITION, IF A BUSINESS HANDLES EXTREMELY (ACUTELY) HAZARDOUS MATERIALS, THE BUSINESS MUST NOTIFY THE GARDEN GROVE FIRE DEPARTMENT WITHIN 30 DAYS OF ANY OF THE FOLLOWING EVENTS:

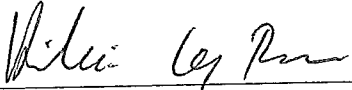
1. A modification, change, or addition to your facility which either increases your usage of extremely hazardous materials by 10% or greater, or substantially increases the risk in handling extremely hazardous materials at that address.

Your business is required by State law to retain a copy of this entire Business Plan, chemical inventory, material safety data sheets and site maps, for review by Fire Department personnel. State where your disclosure and Emergency Business Plan will be kept.

Show location on site map also using symbol in the legend.

Note: A fee is charged for a replacement copy from the Garden Grove Fire Department.

I CERTIFY, UNDER PENALTY OF PERJURY, THAT THE ENCLOSED INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: 
NAME: HELICIO TRINDADE
TITLE: OPERATIONS MANAGER
DATE: 7/11/2003



CITY OF GARDEN GROVE
11301 ACACIA PARKWAY
GARDEN GROVE, CALIFORNIA 92842
(714) 741-5636

CUPA

FACILITY INFORMATION

BUSINESS ACTIVITIES

Page 1 of ___

I. FACILITY IDENTIFICATION

FACILITY ID# 3 0 0 3 5 4 5 6 1. EPA ID # (Hazardous Waste Only) CAL 000220657

BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As)

DORN SPE INC.

II. ACTIVITIES DECLARATION

NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page

Does your facility...			If Yes, please complete these pages of the UPCF...
A. HAZARDOUS MATERIALS Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES	4. <input checked="" type="checkbox"/> HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (Form 3)	
B. UNDERGROUND STORAGE TANKS (USTs) 1. Own or operate underground storage tanks? 2. Intent to upgrade existing or install new USTs? 3. Need to report closing a UST?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	5. <input checked="" type="checkbox"/> UST FACILITY (Formerly SWRCB Form A)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	6. <input checked="" type="checkbox"/> UST TANK (one page per tank) (Formerly Form B)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	7. <input checked="" type="checkbox"/> UST FACILITY <input checked="" type="checkbox"/> UST TANK (one page per tank) <input checked="" type="checkbox"/> UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C) <input checked="" type="checkbox"/> UST TANK (closure portion-one page per tank)	
C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs) Own or operate ASTs above these thresholds: - any tank capacity is greater than 660 gallons, or - the total aggregate capacity for the entire facility (ASTs, drums and portable containers) greater than 1,320 gallons?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	8. <input checked="" type="checkbox"/> NO FORM REQUIRED TO CUPAS	
D. HAZARDOUS WASTE 1. Generate hazardous waste? 2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)? 3. Treat hazardous waste on site? 4. Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)? 5. Consolidate hazardous waste generated at a remote site? 6. Need to report the closure/removal of a tank that was classified waste and cleaned onsite?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	9. <input checked="" type="checkbox"/> EPA ID NUMBER - provide at the top of this page	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	10. <input checked="" type="checkbox"/> RECYCLABLE MATERIALS REPORT (one per recycler)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	11. <input checked="" type="checkbox"/> ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772) <input checked="" type="checkbox"/> ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	12. <input checked="" type="checkbox"/> CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	13. <input checked="" type="checkbox"/> REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	14. <input checked="" type="checkbox"/> HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)	
E. LOCAL REQUIREMENTS Cal-ARP, California Accidental Release Prevention Program H&SC Chapter 6.95, Article 2, §25531 et seq --- Stationary Source with more than a Threshold Quantity of a Regulated Substance in a Process	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	15. <input checked="" type="checkbox"/> REGULATED SUBSTANCE REPORTING FORM (Orange County CUPA)	



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1 Page of 2

FACILITY ID# 3 0 0 3 5 38 BUSINESS NAME DORN SPE INC. 3

I. FACILITY INFORMATION

CHEMICAL LOCATION EAST SOUTH WALL OF SHOP INSIDE BUILDING. 4

CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # J 6 7

II. CHEMICAL INFORMATION

CHEMICAL NAME DARK GRAY ACRYLIC ENAMEL WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME DARK GRAY ACRYLIC ENAMEL 9 An EHS Chemical Yes No 12
*If EHS is "Yes", all amounts must be LBS

CAS # MIXTURE 10 FIRE CODE HAZARD CLASSES (supplied by GGF) Combustible liq. C111-A 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 20 19 MAXIMUM DAILY AMOUNT 30 20 ANNUAL WASTE AMOUNT 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 24 LARGEST CONTAINER 5 25
 c POUNDS d. TONS
*If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e PLASTIC DRUM i VAT m CYLINDER q TANK WAGON 26
 b. UNDERGROUND TANK f NONMETALLIC DRUM j. FIBER DRUM n. GLASS CONTAINER r RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER k. BAG(S) o PLASTIC CONTAINER s TOTE BIN
 d. STEEL DRUM h. CARBOY l. BOX(S) p IN MACH OR EQUIP t OTHER

STORAGE PRESSURE a AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a AMBIENT b ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
7	GLYCOL ETHER EB	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	111-76-2 32
1	GLYCOL ETHER DB	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	112-34-5 32
1.1	TEXANOL	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	25265-77-4 32
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	
		<input type="checkbox"/> Yes <input type="checkbox"/> No 31	

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

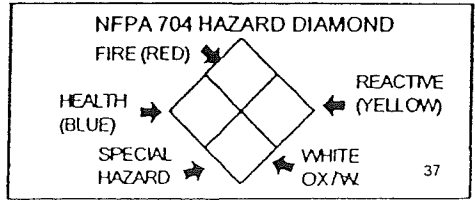
PLACARDING INFORMATION

UNDOT # 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X 36
If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

MATERIAL SAFETY DATA SHEET

24-hour Emergency Phone: 1-800-633-8253

Page 1

PRODUCT CODE: 8AE6315

PRODUCT NAME: 8-AE-6315 DK. GRAY ACRYLIC EN HMIS CODES: H C F R P
PRODUCT CODE: 8AE6315 2 1 0 J

SECTION I - MANUFACTURER IDENTIFICATION

MANUFACTURER'S NAME: P.F.I., INC. - PAINTS FOR INDUSTRY
ADDRESS : 9215 SANTA FE SPRINGS RD.

SANTA FE SPRINGS, CA, 90670
INFORMATION PHONE : (562) 946-6666 DATE PRINTED : 6/18/2003

SECTION II - HAZARDOUS INGREDIENTS/SARA III INFORMATION

Table with 5 columns: REPORTABLE COMPONENTS, CAS NUMBER, VAPOR PRESSURE mm Hg, @ TEMP, WEIGHT PERCENT. Rows include GLYCOL ETHER EB, GLYCOL ETHER DB, and TEXANOL.

*** No toxic chemical(s) subject to the reporting requirements of section 31 3 of Title III and of 40 CFR 372 are present. ***IN ACCORDANCE WITH THE EMERGENCY PLANNING AND COMMUNITY RIGHT-TO-KNOW ACT OF 1986(SARA) THIS INFORMATION MUST BE INCLUDED IN ALL MSDS'S THAT ARE COPIED AND DISTRIBUTED FOR THIS MATERIAL.

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING RANGE: 340.0 deg F TO 4 deg F SPECIFIC GRAVITY (H2O=1): 1.0721
BOILING POINT: 340.0 deg F
VAPOR DENSITY: HEAVIER THAN AIR EVAPORATION RATE: SLOWER THAN ETH
COATING V.O.C.: 216.7087 MATERIAL V.O.C.: 102.8147
SOLUBILITY IN WATER: SOLUBILITY BP
APPEARANCE AND ODOR: APPEARANCE BP

SECTION IV - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT: 140.0 211-A METHOD USED: TCC
FLAMMABLE LIMITS IN AIR BY VOLUME- LOWER: .6 UPPER: 10.6

EXTINGUISHING MEDIA: FOAM, CO2, DRY CHEMICAL

SPECIAL FIREFIGHTING PROCEDURES

Water may be ineffective on fire but water spray may be used to cool closed containers exposed to extreme heat or fire to prevent pressure build up.

UNUSUAL FIRE AND EXPLOSION HAZARDS

Keep away from heat, sparks and open flame. Closed containers may explode when exposed to extreme heat or fire. Do not apply to hot surfaces.

SECTION V - REACTIVITY DATA

M A T E R I A L S A F E T Y D A T A S H E E T

24-hour Emergency Phone: 1-800-633-8253

Page 1

PRODUCT CODE: 2U6415

PRODUCT NAME: 2-U-6415 GLOSS SAK WHITE POLY HMIS CODES: H C F R P

PRODUCT CODE: 2U6415 2 3 0 J

SECTION I - MANUFACTURER IDENTIFICATION

MANUFACTURER'S NAME: P.F.I., INC. - PAINTS FOR INDUSTRY
ADDRESS : 9215 SANTA FE SPRINGS RD.

SANTA FE SPRINGS, CA, 90670

INFORMATION PHONE : (562) 946-6666

DATE PRINTED : 6/18/2003

SECTION II - HAZARDOUS INGREDIENTS/SARA III INFORMATION

REPORTABLE COMPONENTS

Table with 5 columns: Component Name, CAS NUMBER, VAPOR PRESSURE (mm Hg), @ TEMP, WEIGHT PERCENT. Rows include BUTYL ACETATE, METHYL AMYL KETONE, and METHYL ETHYL KETONE.

*** No toxic chemical(s) subject to the reporting requirements of section 31 3 of Title III and of 40 CFR 372 are present. ***IN ACCORDANCE WITH THE EMERGENCY PLANNING AND COMMUNITY RIGHT-TO-KNOW ACT OF 1986 (SARA) THIS INFORMATION MUST BE INCLUDED IN ALL MSDS'S THAT ARE COPIED AND DISTRIBUTED FOR THIS MATERIAL.

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING RANGE: 175.0 deg F TO : deg F
SPECIFIC GRAVITY (H2O=1): 1.5677
BOILING POINT: 175.0 deg F
VAPOR DENSITY: HEAVIER THAN AIR
EVAPORATION RATE: SLOWER THAN ETH
COATING V.O.C.: 392.1900
MATERIAL V.O.C.: 392.1900
SOLUBILITY IN WATER: SOLUBILITY BP
APPEARANCE AND ODOR: APPEARANCE BP

SECTION IV - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT: 24.0 deg F METHOD USED: TCC
FLAMMABLE LIMITS IN AIR BY VOLUME- LOWER: 1.0 UPPER: 11.4

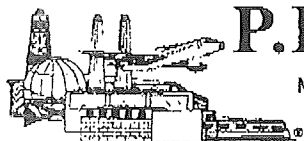
EXTINGUISHING MEDIA: FOAM, CO2, DRY CHEMICAL

SPECIAL FIREFIGHTING PROCEDURES

Water may be ineffective on fire but water spray may be used to cool closed containers exposed to extreme heat or fire to prevent pressure build up. UNUSUAL FIRE AND EXPLOSION HAZARDS

Keep away from heat, sparks and open flame. Closed containers may explode when exposed to extreme heat or fire. Do not apply to hot surfaces.

SECTION V - REACTIVITY DATA

**P.F.I., INC. - PAINTS FOR INDUSTRY**

Manufacturers of Aqua-Lac® & Innovative Coatings

9215 SANTA FE SPRINGS ROAD
SANTA FE SPRINGS, CA 90670

VOICE: (562) 946-6666

FAX: (562) 946-4000

MATERIAL SAFETY DATA SHEET**PAGE 2 OF 3**=====**SECTION V - REACTIVITY DATA**=====**STABILITY: STABLE
CONDITIONS TO AVOID**

Excessive heat, poor ventilation, corrosive atmospheres.

INCOMPATIBILITY (MATERIALS TO AVOID)

Alkaline materials, strong acids, and oxidizing materials.

HAZARDOUS DECOMPOSITION OR BYPRODUCTS

Carbon monoxide, carbon dioxide, oxides of nitrogen.

HAZARDOUS POLYMERIZATION: WILL NOT OCCUR=====**SECTION VI - HEALTH HAZARD DATA**=====**INHALATION HEALTH RISKS AND SYMPTOMS OF EXPOSURE**

Inhalation: May cause nasal and respiratory irritation, dizziness, weakness, fatigue, nausea, and headache. High concentrations may result in narcosis. Do not breath vapors or spray mist.

SKIN AND EYE CONTACT HEALTH RISKS AND SYMPTOMS OF EXPOSURE

Eye contact: Severe irritation, redness, tearing, and blurred vision.

Skin contact: Moderate irritation.

SKIN ABSORPTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

Skin absorption: May cause irritation, defatting, and dermatitis.

INGESTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

Ingestion: May cause gastrointestinal irritation, nausea, vomiting, and diarrhea. Do not ingest, eat, swallow, or chew this product or it's dried film.

HEALTH HAZARDS (ACUTE AND CHRONIC)

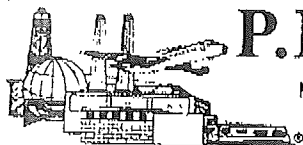
Acute: May cause eye, nose, respiratory tract and skin irritation, headache, drowsiness, and nausea. Ingestion may result in vomiting; aspiration (breathing-in) into lungs may result in aspiration pneumonitis. Chronic: Long term exposure may lead to central nervous system depression and dermatitis.

CARCINOGENICITY: NTP? NO IARC MONOGRAPHS? NO OSHA REGULATED? NO**MEDICAL CONDITIONS GENERALLY AGGRAVATED BY EXPOSURE**

Respiratory tract irritation, dermatitis, nausea, vomiting.

EMERGENCY AND FIRST AID PROCEDURES

Inhalation overexposure: Move person to fresh-air. If breathing stops, apply artificial respiration and seek immediate medical attention. Eye contact: Flush with large quantities of water for 20 minutes and see a doctor. Skin contact: Wash thoroughly with soap and water and see a doctor. Ingestion: Do not induce vomiting, can cause chemical pneumonitis and pulmonary edema. Contact physician immediately.



P.F.I., INC. - PAINTS FOR INDUSTRY

Manufacturers of Aqua-Lac® & Innovative Coatings

9215 SANTA FE SPRINGS ROAD
SANTA FE SPRINGS, CA 90670
VOICE: (562) 946-6666
FAX: (562) 946-4000

MATERIAL SAFETY DATA SHEET

PAGE 3 OF 3

SECTION VII - PRECAUTIONS FOR SAFE HANDLING AND USE

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

Remove all sources of ignition. Ventilate area. Mop up spills with inert absorbent material.

WASTE DISPOSAL METHOD

Dispose in accordance with all federal, state, and local regulations. Do not incinerate closed containers.

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING

Use non-sparking utensils when handling this material. Avoid hot metal surfaces. Use in cool, well-ventilated areas. Keep containers closed when not in use. Keep away from excessive heat and open flames. Do not smoke.

OTHER PRECAUTIONS

Ingestion and vomiting may cause aspiration via hydro carbon liquid into the lungs and cause pneumonitis and pulmonary edema/hemorrhage.

WARNING: THIS PRODUCT AND ITS VAPORS CONTAINS CHEMICALS KNOWN TO THE STATE OF CALIFORNIA TO CAUSE CANCER AND BIRTH DEFECTS OR OTHER REPRODUCTIVE HARM.

SECTION VIII - CONTROL MEASURES

RESPIRATORY PROTECTION

When using this material use a NIOSH/MSHA approved cartridge respirator or gas mask suitable to keep airborne mists and vapor concentrations below the time-weighted threshold limit values. When using in poorly ventilated and confined spaces, use a fresh-air supplying respirator or self-contained breathing apparatus.

VENTILATION

General mechanical ventilation or local exhaust may be suitable to keep vapor concentration below TLV. Ventilation equipment must be explosion proof. The use of air monitoring equipment is recommended. Do not breath vapors or mist.

PROTECTIVE GLOVES

Impermeable chemical handling gloves for skin protection.

EYE PROTECTION

Use chemical safety glasses, goggles, and faceshields for eye protection.

OTHER PROTECTIVE CLOTHING OR EQUIPMENT

Use impermeable aprons and protective clothing whenever possible to prevent skin contact. The use of head caps however is strongly recommended.

WORK/HYGIENIC PRACTICES

Eye washes and safety showers in the workplace is recommended.

SECTION IX - DISCLAIMER

DISCLAIMER

The information contained herein is based on the data available to us and is believed to be correct. However, P.F.I., Inc. makes no warranty expressed or implied regarding the accuracy of these data or the results to be obtained from the use thereof. PFI, INC. disclaims responsibility for damages of any kind resulting from this information or this product.



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1

Page of 2

FACILITY ID# 30035 38 BUSINESS NAME DORNSPE, INC.

I. FACILITY INFORMATION

CHEMICAL LOCATION NORTH SOUTH WALL OF SHOP INSIDE BUILDING
CONFIDENTIAL LOCATION Yes No 5 MAP # I 6 GRID # J6 7

II. CHEMICAL INFORMATION

CHEMICAL NAME INDUSTRIAL WASH PRIMER, GREEN WASTE Yes 8 TRADE SECRET Yes No 11
COMMON NAME PRIMER 9 An EHS Chemical Yes No 12
* If EPCRA see instructions
* If EHS is "Yes", all amounts must be LBS

CAS # MIXTURE 10 FIRE CODE HAZARD CLASSES (supplied by GGFD) Flammable Liq. F1-B, Toxic. 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16
PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH CHRONIC HEALTH

AVERAGE DAILY AMOUNT 15 19 MAXIMUM DAILY AMOUNT 20 20 ANNUAL WASTE AMOUNT 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 24 LARGEST CONTAINER 5 25
 c POUNDS d. TONS
* If EHS, amount must be in pounds

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM i. VAT m. CYLINDER q. TANK WAGON 26
 b. UNDERGROUND TANK f. NONMETALLIC DRUM l. FIBER DRUM n. GLASS CONTAINER r. RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER o. PLASTIC CONTAINER s. TOTE BIN
 d. STEEL DRUM h. CARBOY j. BAG(S) p. IN MACH OR EQUIP t. OTHER

STORAGE PRESSURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
2	TOLUENE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	108-88-3
0.3	ETHYLBENZENE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	100-41-4
2	XYLENE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1330-20-7
31	2-PROPANOL	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	67-63-0
10	2-METHYL-1-PROPANOL ³⁰	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	78-83-1

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

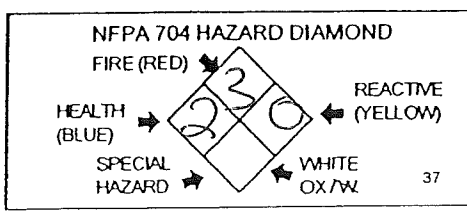
PLACARDING INFORMATION

UNDOT # 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X 36
If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

MATERIAL SAFETY DATA SHEET

P60G2
29 00=====
Section 1 -- PRODUCT AND COMPANY IDENTIFICATION
=====

PRODUCT NUMBER		HMIS CODES	
P60G2		Health	2*
		Flammability	3
		Reactivity	0
PRODUCT NAME	Industrial Wash Primer, Green		
MANUFACTURER'S NAME	THE SHERWIN-WILLIAMS COMPANY		
	101 Prospect Avenue N.W.		
	Cleveland, OH 44115		
DATE OF PREPARATION		EMERGENCY TELEPHONE NO.	
01-JUL-03		(216) 566-2917	
		INFORMATION TELEPHONE NO.	
		(216) 566-2902	

=====
Section 2 -- COMPOSITION/INFORMATION ON INGREDIENTS
=====

% by WT	CAS No.	INGREDIENT	UNITS	VAPOR PRESSURE
2	108-88-3	Toluene		
		ACGIH TLV	50 ppm (skin)	22 mm
		OSHA PEL	100 ppm (skin)	
		OSHA PEL	150 ppm (skin) STEL	
0.3	100-41-4	Ethylbenzene		
		ACGIH TLV	100 ppm	7.1 mm
		ACGIH TLV	125 ppm STEL	
		OSHA PEL	100 ppm	
		OSHA PEL	125 ppm STEL	
2	1330-20-7	Xylene		
		ACGIH TLV	100 ppm	5.9 mm
		ACGIH TLV	150 ppm STEL	
		OSHA PEL	100 ppm	
		OSHA PEL	150 ppm STEL	
31	67-63-0	2-Propanol		
		ACGIH TLV	400 ppm	33 mm
		ACGIH TLV	500 ppm STEL	
		OSHA PEL	400 ppm	
		OSHA PEL	500 ppm STEL	
10	78-83-1	2-Methyl-1-propanol		
		ACGIH TLV	50 ppm	8.7 mm
		OSHA PEL	50 ppm	
31	108-10-1	Methyl Isobutyl Ketone		
		ACGIH TLV	50 ppm	16 mm
		ACGIH TLV	75 ppm STEL	
		OSHA PEL	50 ppm	
		OSHA PEL	75 ppm STEL	
6	Proprietary	Epoxy Polymer		
		ACGIH TLV	Not Available	
		OSHA PEL	Not Available	
2	25036-25-3	Epoxy Polymer		
		ACGIH TLV	Not Available	
		OSHA PEL	Not Available	

Continued on page 2

0.1 1333-86-4 Carbon Black
ACGIH TLV 3.5 mg/m3
OSHA PEL 3.5 mg/m3
7 50922-29-7 Chromium Zinc Oxide
ACGIH TLV 0.01 mg/m3
OSHA PEL Not Available

0.69 Chromium VI (as Cr)

Section 3 -- HAZARDS IDENTIFICATION

ROUTES OF EXPOSURE

INHALATION of vapor or spray mist.

EYE or SKIN contact with the product, vapor or spray mist.

EFFECTS OF OVEREXPOSURE

Irritation of eyes, skin and upper respiratory system.

May cause nervous system depression. Extreme overexposure may result in unconsciousness and possibly death.

SIGNS AND SYMPTOMS OF OVEREXPOSURE

Headache, dizziness, nausea, and loss of coordination are indications of excessive exposure to vapors or spray mists.

Redness and itching or burning sensation may indicate eye or excessive skin exposure.

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE

May cause allergic skin reaction in susceptible persons or skin sensitization.

CANCER INFORMATION

For complete discussion of toxicology data refer to Section 11.

Section 4 -- FIRST AID MEASURES

If INHALED: If affected, remove from exposure. Restore breathing.
Keep warm and quiet.
If on SKIN: Wash affected area thoroughly with soap and water.
Remove contaminated clothing and launder before re-use.
If in EYES: Flush eyes with large amounts of water for 15 minutes.
Get medical attention.
If SWALLOWED: Do not induce vomiting.
Get medical attention immediately.

Section 5 -- FIRE FIGHTING MEASURES

FLASH POINT LEL UEL
45 F PMCC 1.0 12.7

FLAMMABILITY CLASSIFICATION

RED LABEL -- Flammable, Flash below 100 F

EXTINGUISHING MEDIA

Carbon Dioxide, Dry Chemical, Foam

UNUSUAL FIRE AND EXPLOSION HAZARDS

Closed containers may explode when exposed to extreme heat.

Application to hot surfaces requires special precautions.

During emergency conditions overexposure to decomposition products may cause a health hazard. Symptoms may not be immediately apparent. Obtain medical attention.

=====

SPECIAL FIRE FIGHTING PROCEDURES

Full protective equipment including self-contained breathing apparatus should be used.

Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible autoignition or explosion when exposed to extreme heat.

Section 6 -- ACCIDENTAL RELEASE MEASURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

Remove all sources of ignition. Ventilate the area.
Remove with inert absorbent.

Section 7 -- HANDLING AND STORAGE

STORAGE CATEGORY

DOL Storage Class IB

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE

Contents are FLAMMABLE. Keep away from heat, sparks, and open flame.

During use and until all vapors are gone: Keep area ventilated - Do not smoke - Extinguish all flames, pilot lights, and heaters - Turn off stoves, electric tools and appliances, and any other sources of ignition.

Consult NFPA Code. Use approved Bonding and Grounding procedures.

Keep container closed when not in use. Transfer only to approved containers with complete and appropriate labeling. Do not take internally. Keep out of the reach of children.

Section 8 -- EXPOSURE CONTROLS/PERSONAL PROTECTION

PRECAUTIONS TO BE TAKEN IN USE

Use only with adequate ventilation.

Do not get in eyes or on skin. Avoid breathing vapor and spray mist.

Wash hands after using.

This coating may contain materials classified as nuisance particulates (listed "as Dust" in Section 2) which may be present at hazardous levels only during sanding or abrading of the dried film. If no specific dusts are listed in Section 2, the applicable limits for nuisance dusts are ACGIH TLV 10 mg/m3 (total dust), 3 mg/m3 (respirable fraction), OSHA PEL 15 mg/m3 (total dust), 5 mg/m3 (respirable fraction).

VENTILATION

Local exhaust preferable. General exhaust acceptable if the exposure to materials in Section 2 is maintained below applicable exposure limits. Refer to OSHA Standards 1910.94, 1910.107, 1910.108.

RESPIRATORY PROTECTION

If personal exposure cannot be controlled below applicable limits by ventilation, wear a properly fitted organic vapor/particulate respirator approved by NIOSH/MSHA for protection against materials in Section 2.

When sanding, wirebrushing, abrading, burning or welding the dried film, wear a particulate respirator approved by NIOSH/MSHA for protection against non-volatile materials in Section 2.

PROTECTIVE GLOVES

Wear gloves which are recommended by glove supplier for protection against materials in Section 2.

=====

EYE PROTECTION

Wear safety spectacles with unperforated sideshields.

OTHER PROTECTIVE EQUIPMENT

Use barrier cream on exposed skin.

OTHER PRECAUTIONS

Intentional misuse by deliberately concentrating and inhaling the contents can be harmful or fatal.

=====

Section 9 -- PHYSICAL AND CHEMICAL PROPERTIES

PRODUCT WEIGHT	7.44 lb/gal	891 g/l
SPECIFIC GRAVITY	0.89	
BOILING POINT	178 - 292 F	81 - 144 C
MELTING POINT	Not Available	
VOLATILE VOLUME	84 %	
EVAPORATION RATE	Slower than ether	
VAPOR DENSITY	Heavier than air	
SOLUBILITY IN WATER	N.A.	
VOLATILE ORGANIC COMPOUNDS (VOC Theoretical)		
5.57 lb/gal	668 g/l	Less Water and Federally Exempt Solvents
5.57 lb/gal	668 g/l	Emitted VOC

=====

Section 10 -- STABILITY AND REACTIVITY

STABILITY -- Stable

CONDITIONS TO AVOID

None known.

INCOMPATIBILITY

None known.

HAZARDOUS DECOMPOSITION PRODUCTS

By fire: Carbon Dioxide, Carbon Monoxide, Oxides of Metals in Section 2

HAZARDOUS POLYMERIZATION

Will not occur

=====

Section 11 -- TOXICOLOGICAL INFORMATION

CHRONIC HEALTH HAZARDS

Ethylbenzene is classified by IARC as possibly carcinogenic to humans (2B) based on inadequate evidence in humans and sufficient evidence in laboratory animals. Lifetime inhalation exposure of rats and mice to high ethylbenzene concentrations resulted in increases in certain types of cancer, including kidney tumors in rats and lung and liver tumors in mice. These effects were not observed in animals exposed to lower concentrations. There is no evidence that ethylbenzene causes cancer in humans.

Carbon Black is classified by IARC as possibly carcinogenic to humans (group 2B) based on experimental animal data, however, there is insufficient evidence in humans for its carcinogenicity.

Chromates are listed by IARC and NTP. Studies have associated exposure to Chromium VI compounds with an increased risk of respiratory cancer.

Prolonged overexposure to solvent ingredients in Section 2 may cause adverse effects to the liver, urinary, cardiovascular and reproductive systems.

Reports have associated repeated and prolonged overexposure to solvents with permanent brain and nervous system damage.

Continued on page 5

=====

TOXICOLOGY DATA

CAS No.	Ingredient Name					
108-88-3	Toluene	LC50	RAT	4HR	4000	ppm
		LD50	RAT		5000	mg/kg
100-41-4	Ethylbenzene	LC50	RAT	4HR	Not Available	
		LD50	RAT		3500	mg/kg
1330-20-7	Xylene	LC50	RAT	4HR	5000	ppm
		LD50	RAT		4300	mg/kg
67-63-0	2-Propanol	LC50	RAT	4HR	Not Available	
		LD50	RAT		5045	mg/kg
78-83-1	2-Methyl-1-propanol	LC50	RAT	4HR	Not Available	
		LD50	RAT		2460	mg/kg
108-10-1	Methyl Isobutyl Ketone	LC50	RAT	4HR	Not Available	
		LD50	RAT		2080	mg/kg
Proprietary	Epoxy Polymer	LC50	RAT	4HR	Not Available	
		LD50	RAT		Not Available	
25036-25-3	Epoxy Polymer	LC50	RAT	4HR	Not Available	
		LD50	RAT		Not Available	
1333-86-4	Carbon Black	LC50	RAT	4HR	Not Available	
		LD50	RAT		Not Available	
50922-29-7	Chromium Zinc Oxide	LC50	RAT	4HR	Not Available	
		LD50	RAT		Not Available	

=====

Section 12 -- ECOLOGICAL INFORMATION

ECOTOXICOLOGICAL INFORMATION

No data available.

=====

Section 13 -- DISPOSAL CONSIDERATIONS

WASTE DISPOSAL METHOD

Waste from this product may be hazardous as defined under the Resource Conservation and Recovery Act (RCRA) 40 CFR 261.

Waste must be tested for ignitability and extractability to determine the applicable EPA hazardous waste numbers.

Incinerate in approved facility. Do not incinerate closed container. Dispose of in accordance with Federal, State/Provincial, and Local regulations regarding pollution.

=====

Section 14 -- TRANSPORT INFORMATION

No data available.

=====
Section 15 -- REGULATORY INFORMATION

SARA 313 (40 CFR 372.65C) SUPPLIER NOTIFICATION

CAS No.	CHEMICAL/COMPOUND	% by WT	% Element
108-88-3	Toluene	2	
100-41-4	Ethylbenzene	0.3	
1330-20-7	Xylene	2	
108-10-1	Methyl Isobutyl Ketone	31	
	Chromium Compound	7	0.6
	Zinc Compound	7	4.1

CALIFORNIA PROPOSITION 65

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.

TSCA CERTIFICATION

All chemicals in this product are listed, or are exempt from listing, on the TSCA Inventory.

=====
Section 16 -- OTHER INFORMATION

This product has been classified in accordance with the hazard criteria of the CPR and the MSDS contains all of the information required by the CPR.

The above information pertains to this product as currently formulated, and is based on the information available at this time. Addition of reducers or other additives to this product may substantially alter the composition and hazards of the product. Since conditions of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1 Page ___ of ___ 2

FACILITY ID# 3003538 BUSINESS NAME DORN SPE, INC. 3

I. FACILITY INFORMATION

CHEMICAL LOCATION SOUTH WALL OF SHOP OUTSIDE BUILDING. 4
CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # F7 7

II. CHEMICAL INFORMATION

CHEMICAL NAME ACETONE WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME ACETONE 9 An EHS Chemical Yes No 12
*If EHS is "Yes", all amounts must be LBS

CAS # 67-64-1 10 FIRE CODE HAZARD CLASSES (supplied by GFD) Flammable Lig. F. 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIOS 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 30 19 MAXIMUM DAILY AMOUNT 50 20 ANNUAL WASTE AMOUNT - 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 24 LARGEST CONTAINER 50 25
 c POUNDS d TONS
*If EHS, amount must be in pounds.

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM i. VAT m. CYLINDER q. TANK WAGON 26
 b. UNDERGROUND TANK f. NONMETALLIC DRUM j. FIBER DRUM n. GLASS CONTAINER r. RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER k. BAG(S) o. PLASTIC CONTAINER s. TOTE BIN
 d. STEEL DRUM h. CARBOY l. BOX(S) p. IN MACH OR EQUIP t. OTHER

STORAGE PRESSURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
2	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
3	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
4	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32
5	29	<input type="checkbox"/> Yes <input type="checkbox"/> No 31	32

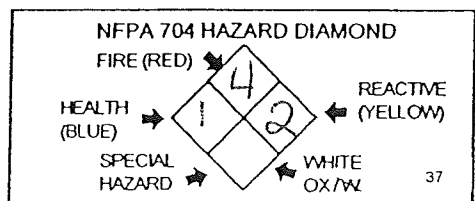
If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

PLACARDING INFORMATION

UNDOT # 1090 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 3 34
Refer to shipping papers or MSDS

EPCRA YES NO 35
X 36
If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

SaatiChem Remove PW1
Preparation Date: July 12, 2002

Att: Vaera

Page 1 of 4

SAATICHEM™

MATERIAL SAFETY DATA SHEET

1. PRODUCT AND COMPANY IDENTIFICATION

Product Name: SAATICHEM Remove PW1

General Use: Removes ink from screen-printing screens

Manufacturer: SAATICHEM
901 N. Business Center Drive, Mount Prospect, IL 60056 USA
Tel: 1-877-296-7697 or 1-847-296-7697 (Monday-Friday 8:00am – 4:30pm CST)
Fax: 1-847-296-7408
www.saati.com

Emergency Telephone Number: INFOTRAC 800-535-5053 or 352-323-3500, 24-hours everyday

2. COMPOSITION/INFORMATION ON INGREDIENTS

Chemical Name	Percentage	CAS Number	OSHA PEL	ACGIH TLV
Acetone	100	67-64-1	1000ppm TWA	500ppm TWA 750ppm STEL

This material is classified as hazardous under OSHA regulations.

3. HAZARDS IDENTIFICATION

Emergency Overview

Clear, colorless to amber liquid with acetone odor. **DANGER—EXTREMELY FLAMMABLE LIQUID AND VAPOR. VAPOR MAY CAUSE FLASH FIRE.** Causes eye, skin, and respiratory tract irritation. Affects central nervous system. Harmful if swallowed or inhaled.

Potential Health Effects

Eye: Causes irritation, reddening, and tearing.

Skin: Causes irritation and defatting of tissues.

Ingestion: Causes irritation.

Inhalation: Vapor causes irritation, nausea, dizziness, narcosis, and headache.

Chronic Effects/Carcinogenicity: May cause damage to kidneys and liver. Not found to be a human carcinogen.

4. FIRST AID MEASURES

Eyes: Immediately flush with water at least 15 minutes. Get medical attention immediately.

Skin: Wash with large amounts of soap and water. Get medical attention if irritation persists.

Ingestion: Do not induce vomiting. Wash out mouth with water provided person is conscious. Get medical attention immediately.

Inhalation: Remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Get medical attention if irritation persists.

5. FIRE FIGHTING MEASURES

SaatiChem Remove FW1
Preparation Date: July 12, 2002

Flash Point / Method: -20C (-4F)
Flammable Limits in air by volume percent: LEL=2.5%, UEL=12.8%
Extinguishing Media: Carbon dioxide, alcohol foam, or dry chemical. Water may be ineffective, except when used to cool fire exposed containers.
Protection of Fire Firefighter: Wear full protective equipment and self-contained breathing apparatus.
Fire & Explosion Hazards: Extremely flammable liquid and vapor. Vapor may cause flash fire. Can release vapors that form explosive mixtures at temperatures at or above the flashpoint.
Sensitivity to Mechanical Impact: Stable
Sensitivity to Static Discharge: Not available

6. ACCIDENTAL RELEASE MEASURES

Small spill: Ventilate area of leak or spill. Absorb spill with inert material (e.g., dry sand or earth).
Large spill: Eliminate with ignition sources. Ventilate area of leak or spill. Absorb spill with inert material (e.g., dry sand or earth). Do not use a combustible material such as saw dust. Do not flush to sewer. Water spray can be used to disperse vapors. Retain for proper removal and treatment.

7. HANDLING AND STORAGE

Protect against physical damage. Keep away from heat, sparks, and flame. Keep container closed. Use only with adequate ventilation. Containers should be bonded and grounded for transfers to avoid static sparks. Avoid contact with eyes, skin, and clothing. Avoid breathing vapor. Wash thoroughly after handling. Empty containers may also be hazardous due to residual materials.

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Engineering Controls: Use process enclosures, local exhaust ventilation, or other engineering controls to control airborne levels below the exposure limits.
Respiratory Protection: If concentrations are over the exposure limits, use a NIOSH-approved air-purifying respirator with an organic vapor cartridge or canister.
Skin Protection: Neoprene gloves, boots and apron as appropriate
Eye Protection: Safety goggles or face shield where splashing is possible

9. PHYSICAL AND CHEMICAL PROPERTIES

Physical State: Volatile liquid
Appearance: Clear, colorless to amber
Odor: fragrant, mint-like
Vapor Pressure: 400 mmHg at 39.5C (104°F)
Specific Gravity: 0.79 at 20C (4F)
Solubility in Water: Miscible
pH: Not applicable
Vapor Density: 2.0 (air=1)
Evaporation Rate: 7.7 calculated (butyl acetate=1)
Boiling Point: 56.5C (133°F)
Melting Point: -95C (-139F)
Percent Volatiles: 100%
Volatile Organic Compounds: exempt

10. STABILITY AND REACTIVITY

Stability/Conditions to avoid: Stable
Materials to avoid: Strong oxidizing agents, nitric and sulfuric acid mixtures, chloroform, alkalis, chlorine compounds, acids, potassium t-butoxide.

SaatiChem Remove PW1
Preparation Date: July 12, 2002

Page 3 of 4

Hazardous decomposition products: Carbon dioxide, carbon monoxide.
Hazardous polymerization: Will not occur

11. TOXICOLOGICAL INFORMATION

For Acetone (CAS#67-64-1)
LD50 oral (rat) = 5800 mg/kg
LC50 inhalation (rat) = 50100 mg/m³/8H
LD50 oral (mouse) = 3 g/kg
LC50 inhalation (rat) = 44 g/m³/4H
LD50 intraperitoneal (mouse) = 1297 mg/kg
LD50 oral (rabbit) = 5340 mg/kg

12. ECOLOGICAL INFORMATION

This material is expected to readily biodegrade and evaporate quickly. It is not expected to significantly bioaccumulate. When released into the soil it is expected to leach into ground water. When released into the air, it may be moderately degraded by reaction with photochemically produced hydroxyl radicals, it may be moderately degraded by photolysis, and/or be readily removed from the atmosphere by wet deposition.

Not expected to be toxic to aquatic life. The LC50/96-hour values for fish are over 100mg/l.

13. DISPOSAL CONSIDERATIONS

Dispose of in accordance with all current local, state, and federal regulations.

14. TRANSPORT INFORMATION

US DOT: Acetone, UN1090, 3, PGII
Transport Canada: Acetone, UN1090, 3, PGII
IATA: Acetone, UN1090, 3, PGII
IMO: Acetone, UN1090, 3, PGII

15. REGULATORY INFORMATION

US Federal Regulations

TSCA: All components of this product are listed on the TSCA Inventory.

CERCLA (40 CFR 117 & 302): This material contains a Reportable Quantity (RQ) Substance, acetone, and if 5000 pounds of acetone are released, notification to the National Response Center, Washington, DC (1-800-424-8802) is required.

SARA Title III (40 CFR 372)

Section 311/312 Hazard Categories: Immediate Health, Delayed Health, Fire

Section 313 Reportable Ingredients: Acetone (CAS#67-64-1).

US State Regulations

Pennsylvania Right-To-Know Act reportable components: Acetone (CAS#67-64-1).

California Proposition 65 reportable components: None.

SaatiChem Remove PW1
Preparation Date: July 12, 2002

Page 4 of 4

Canadian Regulations

DSL: All components of this product are listed on the Domestic Substances List.

WHMIS Classification: Class 2B

This product has been classified in accordance with the hazard criteria of the CPR and the MSDS contains all the information required by the CPR.

16. OTHER INFORMATION

HMIS Rating: Health-1, Fire-4, Reactivity-2, Personal Protection-G

MSDS prepared by: Joey Mucha, Regulatory Affairs Coordinator

Date Prepared: July 12, 2002



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1 Page of 2

FACILITY ID# 30035 38 BUSINESS NAME DORN SPE, INC. 3

I. FACILITY INFORMATION

CHEMICAL LOCATION NORTH SOUTH WALL OF SHOP INSIDE BUILDING. 4

CONFIDENTIAL LOCATION EPCRA Yes No 5 MAP # 1 6 GRID # J6 7

II. CHEMICAL INFORMATION

CHEMICAL NAME POLANE HS POLYURETHANE ENAMEL WASTE Yes 8 TRADE SECRET Yes No 11
* If EPCRA see instructions

COMMON NAME POLYURETHANE ENAMEL PAINT 9 An EHS Chemical Yes No 12
*If EHS is "Yes", all amounts must be LBS

CAS # MIXTURES 10 FIRE CODE HAZARD CLASSES (supplied by GGF D) 13

TYPE (Check one item only) a PURE b MIXTURE c WASTE 14 RADIOACTIVE Yes No 15 CURIES 16

PHYSICAL STATE (Check one item only) a SOLID b LIQUID c GAS 17 FED HAZARD CATEGORIES a FIRE b REACTIVE c PRESSURE RELEASE 18
 d ACUTE HEALTH e CHRONIC HEALTH

AVERAGE DAILY AMOUNT 10 19 MAXIMUM DAILY AMOUNT 20 20 ANNUAL WASTE AMOUNT 21 STATE WASTE CODE 22

UNITS a GALLONS b CUBIC FEET 23 DAYS ON SITE 30 24 LARGEST CONTAINER 5 25
 c POUNDS d TONS
*If EHS, amount must be in pounds.

STORAGE CONTAINER (Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM i. VAT m. CYLINDER q. TANK WAGON 26
 b. UNDERGROUND TANK f. NONMETALLIC DRUM j. FIBER DRUM n. GLASS CONTAINER r. RAIL CAR
 c. TANK INSIDE BLDG g. METAL CONTAINER k. BAG(S) o. PLASTIC CONTAINER s. TOTE BIN
 d. STEEL DRUM h. CARBOY l. BOX(S) p. IN MACH OR EQUIP t. OTHER

STORAGE PRESSURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT 27

STORAGE TEMPERATURE a. AMBIENT b. ABOVE AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
3 29	TOLUENE 30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	108-88-3 32
9 29	METHYL ETHYL KETONE 30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	78-93-3 32
7 29	METHYL N-AMYL KETONE 30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	110-43-0 32
4 29	ISOPROPYL ACETATE 30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	108-21-4 32
41 29	TITANIUM DIOXIDE 30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 31	13463-67-7 32

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

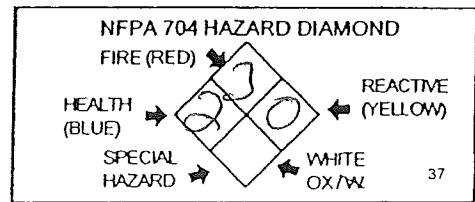
PLACARDING INFORMATION

UNDOT # 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 34
Refer to shipping papers or MSDS

EPCRA YES NO 35

X 36
If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

MATERIAL SAFETY DATA SHEET

F63HXW19213-4358

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 =====
 Section 1 -- PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NUMBER		HMS CODES	
F63HXW19213-4358		Health	2
		Flammability	3
		Reactivity	0
PRODUCT NAME	POLANE * HS Polyurethane Enamel, SAK WHITE		
MANUFACTURER'S NAME	THE SHERWIN-WILLIAMS COMPANY	EMERGENCY TELEPHONE NO.	(216) 566-2917
	101 Prospect Avenue N.W.		
	Cleveland, OH 44115		
DATE OF PREPARATION	01-JUL-03	INFORMATION TELEPHONE NO.	(216) 566-2902

 =====
 Section 2 -- COMPOSITION/INFORMATION ON INGREDIENTS

% by WT	CAS No.	INGREDIENT	UNITS	VAPOR PRESSURE
3	108-88-3	Toluene		
		ACGIH TLV	50 ppm (skin)	22 mm
		OSHA PEL	100 ppm (skin)	
		OSHA PEL	150 ppm (skin) STEL	
9	78-93-3	Methyl Ethyl Ketone		
		ACGIH TLV	200 ppm	70 mm
		ACGIH TLV	300 ppm STEL	
		OSHA PEL	200 ppm	
		OSHA PEL	300 ppm STEL	
7	110-43-0	Methyl n-Amyl Ketone		
		ACGIH TLV	50 ppm	2.14 mm
		OSHA PEL	100 ppm	
4	108-21-4	Isopropyl Acetate		
		ACGIH TLV	250 ppm	47.5 mm
		ACGIH TLV	310 ppm STEL	
		OSHA PEL	250 ppm	
		OSHA PEL	310 ppm STEL	
41	13463-67-7	Titanium Dioxide		
		ACGIH TLV	10 mg/m3 as Dust	
		OSHA PEL	10 mg/m3 Total Dust	
		OSHA PEL	5 mg/m3 Respirable Fraction	

 =====
 Section 3 -- HAZARDS IDENTIFICATION

ROUTES OF EXPOSURE

INHALATION of vapor or spray mist.

EYE or SKIN contact with the product, vapor or spray mist.

EFFECTS OF OVEREXPOSURE

Irritation of eyes, skin and upper respiratory system.

May cause nervous system depression. Extreme overexposure may result in unconsciousness and possibly death.

Continued on page 2

SIGNS AND SYMPTOMS OF OVEREXPOSURE

Headache, dizziness, nausea, and loss of coordination are indications of excessive exposure to vapors or spray mists.

Redness and itching or burning sensation may indicate eye or excessive skin exposure.

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE

None generally recognized.

CANCER INFORMATION

For complete discussion of toxicology data refer to Section 11.
=====

Section 4 -- FIRST AID MEASURES

- If INHALED: If affected, remove from exposure. Restore breathing. Keep warm and quiet.
- If on SKIN: Wash affected area thoroughly with soap and water. Remove contaminated clothing and launder before re-use.
- If in EYES: Flush eyes with large amounts of water for 15 minutes. Get medical attention.
- If SWALLOWED: Do not induce vomiting. Get medical attention immediately.
- =====

Section 5 -- FIRE FIGHTING MEASURES

FLASH POINT LEL UEL
37 F TCC 1.0 10.0

FLAMMABILITY CLASSIFICATION

RED LABEL -- Flammable, Flash below 100 F

EXTINGUISHING MEDIA

Carbon Dioxide, Dry Chemical, Foam

UNUSUAL FIRE AND EXPLOSION HAZARDS

Closed containers may explode when exposed to extreme heat.

Application to hot surfaces requires special precautions.

During emergency conditions overexposure to decomposition products may cause a health hazard. Symptoms may not be immediately apparent. Obtain medical attention.

SPECIAL FIRE FIGHTING PROCEDURES

Full protective equipment including self-contained breathing apparatus should be used.

Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible autoignition or explosion when exposed to extreme heat.
=====

Section 6 -- ACCIDENTAL RELEASE MEASURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

Remove all sources of ignition. Ventilate the area.

Remove with inert absorbent.

=====
Section 7 -- HANDLING AND STORAGE
=====

STORAGE CATEGORY

DOL Storage Class IB

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE

Contents are FLAMMABLE. Keep away from heat, sparks, and open flame.

During use and until all vapors are gone: Keep area ventilated - Do not smoke - Extinguish all flames, pilot lights, and heaters - Turn off stoves, electric tools and appliances, and any other sources of ignition.

Consult NFPA Code. Use approved Bonding and Grounding procedures.

Keep container closed when not in use. Transfer only to approved containers with complete and appropriate labeling. Do not take internally. Keep out of the reach of children.

=====
Section 8 -- EXPOSURE CONTROLS/PERSONAL PROTECTION
=====

PRECAUTIONS TO BE TAKEN IN USE

Use only with adequate ventilation.

Avoid contact with skin and eyes. Avoid breathing vapor and spray mist.

Wash hands after using.

This coating may contain materials classified as nuisance particulates (listed "as Dust" in Section 2) which may be present at hazardous levels only during sanding or abrading of the dried film. If no specific dusts are listed in Section 2, the applicable limits for nuisance dusts are ACGIH TLV 10 mg/m³ (total dust), 3 mg/m³ (respirable fraction), OSHA PEL 15 mg/m³ (total dust), 5 mg/m³ (respirable fraction).

VENTILATION

Local exhaust preferable. General exhaust acceptable if the exposure to materials in Section 2 is maintained below applicable exposure limits. Refer to OSHA Standards 1910.94, 1910.107, 1910.108.

RESPIRATORY PROTECTION

If personal exposure cannot be controlled below applicable limits by ventilation, wear a properly fitted organic vapor/particulate respirator approved by NIOSH/MSHA for protection against materials in Section 2.

When sanding or abrading the dried film, wear a dust/mist respirator approved by NIOSH/MSHA for dust which may be generated from this product, underlying paint, or the abrasive.

PROTECTIVE GLOVES

Wear gloves which are recommended by glove supplier for protection against materials in Section 2.

EYE PROTECTION

Wear safety spectacles with unperforated sideshields.

OTHER PRECAUTIONS

Intentional misuse by deliberately concentrating and inhaling the contents can be harmful or fatal.

Section 9 -- PHYSICAL AND CHEMICAL PROPERTIES

PRODUCT WEIGHT	11.53 lb/gal	1381 g/l
SPECIFIC GRAVITY	1.39	
BOILING POINT	174 - 308 F	78 - 153 C
MELTING POINT	Not Available	
VOLATILE VOLUME	39 %	
EVAPORATION RATE	Slower than ether	
VAPOR DENSITY	Heavier than air	
SOLUBILITY IN WATER	N.A.	
VOLATILE ORGANIC COMPOUNDS (VOC Theoretical)		
2.71 lb/gal	325 g/l	Less Water and Federally Exempt Solvents
2.71 lb/gal	325 g/l	Emitted VOC

Section 10 -- STABILITY AND REACTIVITY

STABILITY -- Stable
CONDITIONS TO AVOID

None known.

INCOMPATIBILITY

None known.

HAZARDOUS DECOMPOSITION PRODUCTS

By fire: Carbon Dioxide, Carbon Monoxide

HAZARDOUS POLYMERIZATION

Will not occur

Section 11 -- TOXICOLOGICAL INFORMATION

CHRONIC HEALTH HAZARDS

No ingredient in this product is an IARC, NTP or OSHA listed carcinogen.

Methyl Ethyl Ketone may increase the nervous system effects of other solvents.

Prolonged overexposure to solvent ingredients in Section 2 may cause adverse effects to the liver, urinary, cardiovascular and reproductive systems.

Rats exposed to titanium dioxide dust at 250 mg./m3 developed lung cancer, however, such exposure levels are not attainable in the workplace.

Reports have associated repeated and prolonged overexposure to solvents with permanent brain and nervous system damage.

TOXICOLOGY DATA

CAS No.	Ingredient Name					
108-88-3	Toluene	LC50	RAT	4HR	4000	ppm
		LD50	RAT		5000	mg/kg
78-93-3	Methyl Ethyl Ketone	LC50	RAT	4HR	Not Available	
		LD50	RAT		2740	mg/kg
110-43-0	Methyl n-Amyl Ketone	LC50	RAT	4HR	Not Available	
		LD50	RAT		1670	mg/kg
108-21-4	Isopropyl Acetate	LC50	RAT	4HR	Not Available	
		LD50	RAT		3000	mg/kg
13463-67-7	Titanium Dioxide	LC50	RAT	4HR	Not Available	
		LD50	RAT		Not Available	

Section 12 -- ECOLOGICAL INFORMATION

ECOTOXICOLOGICAL INFORMATION

No data available.

Section 13 -- DISPOSAL CONSIDERATIONS

WASTE DISPOSAL METHOD

Waste from this product may be hazardous as defined under the Resource Conservation and Recovery Act (RCRA) 40 CFR 261.

Waste must be tested for ignitability to determine the applicable EPA hazardous waste numbers.

Incinerate in approved facility. Do not incinerate closed container. Dispose of in accordance with Federal, State/Provincial, and Local regulations regarding pollution.

Section 14 -- TRANSPORT INFORMATION

No data available.

Section 15 -- REGULATORY INFORMATION

SARA 313 (40 CFR 372.65C) SUPPLIER NOTIFICATION

CAS No.	CHEMICAL/COMPOUND	% by WT	% Element
108-88-3	Toluene	3	
78-93-3	Methyl Ethyl Ketone	9	

CALIFORNIA PROPOSITION 65

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.

TSCA CERTIFICATION

All chemicals in this product are listed, or are exempt from listing, on the TSCA Inventory.

Continued on page 6

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Section 16 -- OTHER INFORMATION
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This product has been classified in accordance with the hazard criteria of the CPR and the MSDS contains all of the information required by the CPR.

The above information pertains to this product as currently formulated, and is based on the information available at this time. Addition of reducers or other additives to this product may substantially alter the composition and hazards of the product. Since conditions of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.