



CITY OF GARDEN GROVE
FIRE DEPARTMENT

Tel: (714) 741-5600
Fax: (714) 741-5640

6/9/2016

James McElroy
Property Consultants
(714) 600-3001

RE: Records Search for 11352 Westminster Blvd., Grove Blvd., Garden Grove CA

Dear James McElroy:

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 Department.

Sincerely,

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

Thanh Nguyen
Fire Captain/Senior Fire Protection Specialist

**Violation List for
RPM ELECTRIC MOTORS
11352 WESTMINSTER Ave**

Date Issued	Date Cleared	Code #	Violation Description
07/23/2013	12/02/2015	CFC 2701.5.	Complete Haz Mat Disclosure packet
07/27/2011	07/27/2011	CFC 3003.5.	Secure compressed gas cylinders.
08/18/2010	08/31/2010	CFC 605.1	Provide/ replace electrical
07/09/2008	07/30/2008		Remove bed from upstairs office.
07/09/2008	07/30/2008	CFC 1011.2	Provide illuminated exit sign(s).

Common Name	Chemical Name	Cas #	Location	Max Daily Amount	Map	Grid	Not Used/Used
RESIN B7-606	SOLVENTLESS RESIN	131-17-9	REAR OF SHOP AREA	75 Gallons	1	I-2	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
SAFETY-KLEEN 105	SOLVENT - SAFETY KLEEN		OUTSIDE - EAST WALL	35 Gallons	1	K-4	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
CHLORINATED HYDROCARBON	METHYLENE CHLORIDE	75-09-2	OUTSIDE - EAST WALL	5 Pounds	1	K-7	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
ACETYLENE	ACETYLENE	74-86-2	WORKSHOP AREA	200 Cubic Feet	1	G-4	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
WASTE OIL	WASTE OIL	64742-54-7	OUTSIDE - EAST WALL	55 Gallons	1	K-7	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
GUN WASH SOLVENT	SOLVENT, GUN WASH		OUTSIDE - EAST WALL	55 Gallons	1	K-7	<input type="checkbox"/> Delete <input type="checkbox"/> Modify
OXYGEN	OXYGEN	7782-44-7	WORKSHOP AREA	200 Cubic Feet	1	G-4	<input type="checkbox"/> Delete <input type="checkbox"/> Modify

Date Archived 01/07/2003

District 2722

Dbas RPM ELECTRIC MOTOR

Complex

Address

11352

WESTMINSTER

AVE

92843

Business Information

Business License No. 122112

Dunn and Bradstreet -

Sic Code-

Fax

E-Mail

Business Owner Name BON PHAM Home Phone

Construction Information

Construction type-

Occupancy group- F2

Occupancy Load- 0

Building Sq.ft- 0

Contacts Information

Property Owner

Building Owner

Contacts

Inspection Information

Deleted and Archived by James

File number 3100

Inspector-

Inspection History

Visits

Violations

Permits

Permits

EPS Information

**Business Operator -
Phone -
Environmental Contact -
phone -
address - ,**

Chemical Information

Tank Information

Disclosure Local Information

Invoices

External Invoices

Notes



GARDEN GROVE FIRE DEPARTMENT

Life Safety & Hazardous Materials Disclosure Program

11301 Acacia Parkway, Garden Grove, CA 92842

Bus 714-741-5600 Fax 714-741-5640

File # 213

Fire District 2722

Inspector _____

Next. Insp 9/2013

Occupant or DBA RPM Electric Motors

Bus Tel 714 638-4174

Address 11352 Westminster Ave

Suite _____

Zip 92843

Business Owner Ben Pham

Tel 714 638-4174

Emergency Contact Ben Pham

Tel 714 221-2176

Group _____ Load _____ Sprinklers F/P/N _____ 5-Year Cert _____ / _____ Haz-Mat

Fire Permits: Hot Work, Hazardous Materials

An inspection at the above location/occupancy revealed the following violation(s):

ASSEMBLY OCCUPANCIES

- Post maximum occupancy load sign (CFC 1004.3)
- Remove combustible decorative material (CFC 807.1.2)
- Remove storage under stairway (CFC 315.2.4)

SIGNS

- Provide address visible from the street (CFC 505.1)
- Provide hazardous materials warning signs (CFC 2703.5)

EXITS

- Provide approved panic hardware (CFC 1008.1.10)
- Remove locks, chains, bolts bars from exit doors (CFC 1008.1.9)
- Remove exit obstruction (CFC 1003.6)
- Provide illuminated exit sign(s) (CFC 1011.1)

ACCESS

- Provide outside Knox Box (CFC 506.1)
- Remove obstructions to fire apparatus access (CFC 503.4)

FIRE PROTECTION EQUIPMENT AND SYSTEMS

- Provide ___ extinguishers 2A10BC 40BC K (CFC 906.1)
- Service and tag extinguisher(s) (CFC 901.6)
- Hang extinguisher(s) 3.5'-5' from floor (CFC 906.9)
- Clean filters, ducts, hood above cooking surface (CFC 904.1)
- Service auto-extinguishing system semi-annually (CFC 904.11.6.2)
- 5 yr. certification on sprinkler/standpipe system (Title 14, Sect. 904)

MISCELLANEOUS

- Lower storage 18" below sprinklers OR 2' from ceiling (CFC 315.2.1)
- Secure compressed gas cylinders (CFC 3003.5.3)
- Post Business License Fire Dept. Permit (CFC 105.3.5)

NO VIOLATIONS

ELECTRICAL SAFETY PRECAUTIONS

- Discontinue use of extension cords (CFC 605.5)
- Keep 30" clear for access in front of electrical panel (CFC 605.3)
- Provide/replace Electrical Cover Socket Power strip (CFC 605.1)

HAZ-MAT SAFETY PRECAUTIONS

- Provide approved cabinet if more than 10 gal. flammable liquids (CFC 3404.3.4.3)
- Provide approved safety container(s) for flammable liquids (CFC 3404.3.1)

HAZARDOUS MATERIALS DISCLOSURE

(HSC CHAPTER 6.95 Section 25404, 25500 - 25520)

- Failure to implement and/or electronically submit a HMBP www.esubmit.ocgov.com
- Chemical inventory is incomplete and/or requires updating
- The Emergency Response Plan is inadequate and/or does not adequately address Notification, Mitigation, Evacuation, and/or Employee Training
- Site Map is incomplete or insufficient
- Failure to report a change in business or chemical inventory within 30 days of the following:
 - 100% or more increase in the quantity of a disclosed material
 - Addition of a previously undisclosed material
 - Change of business name or owner
- Failure to report a release or threatened release
- Failure to submit annual certification

MINOR VIOLATION

CLASS I VIOLATION

NO VIOLATIONS

CLASS II VIOLATION

ADDITIONAL VIOLATIONS AND/ OR NOTES:

Business Representative Signature: Ben Pham

Date: _____

Inspector Name/ID#: 9461 Whittaker

Date: 7/23/2013

Cleared

Mailback Card Due

Re-Inspection Date 08/23/2013

Final Notice



CITY OF GARDEN GROVE FIRE DEPARTMENT

11301 Acacia Parkway, Garden Grove, CA 92842 (714) 741-5600 (714) 741-5636

FORM 1

Hazardous Materials Business Information Form

Page _____ of _____ 3

BUSINESS INFORMATION

FACILITY # (Supplied by GGFD)	3 0 0 3 5	BEGINNING DATE	1	ENDING DATE	2
BUSINESS NAME	RPM ELECTRIC MOTORS INC.	OCT - 28 - 2010	4	NOV - 03 - 2010	5
BUSINESS SITE ADDRESS	11352 Westminister Ave				6
CITY	GARDEN GROVE	STATE	8	CA	9
DUN & BRADSTREET	11-505-7671	SIC CODE (4 DIGIT #)	11	7629	12
COUNTY	ORANGE	FIRE DISTRICT	92843		
BUSINESS OPERATOR NAME	CHRISTIAN VILEH'S.	OPERATOR'S PHONE	[REDACTED]		

BUSINESS OWNER

OWNER NAME	BON PHAM	OWNER PHONE	17
OWNER MAILING ADDRESS	8981 Acacia Ave.	Cell 714-488-8125	18
CITY	Garden Grove	STATE	20
		CA	21
		ZIP	92841

ENVIRONMENTAL CONTACT

CONTACT NAME	BE PHAM	CONTACT PHONE	23
CONTACT MAILING ADDRESS	11352 Westminister Ave.	714-721-2176	24
CITY	Garden Grove	STATE	26
		CA	27
		ZIP	92843

PRIMARY

EMERGENCY CONTACTS

SECONDARY

NAME	28	NAME	33
BON PHAM		Christian or Phillipe.	
TITLE	29	TITLE	34
Owner / president.		Manager / Foreman.	
BUSINESS PHONE	30	BUSINESS PHONE	35
(714) 638-4174		(714) 638-4174	
24-HR. PHONE	31	24-HR. PHONE	36
[REDACTED]		[REDACTED]	
PAGER #	32	PAGER #	37
cell [REDACTED]		[REDACTED]	

ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIBE THE TYPE OF BUSINESS OPERATION:	38	TOTAL # OF EMPLOYEES	39
ELECTRIC APPARATUS SALE, REWIND, REPAIR - SVE		07	
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)	40	ATTENTION	41
PROPERTY OWNER NAME	42	ADDRESS	43
BA NGUYEN		11341 Westminister, GG, CA 92841	
		PHONE	44
		(714) 554-7245	
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)	47	NAME OF DOCUMENT PREPARER (print)	49
TITLE OF SIGNER	48	TITLE OF DOCUMENT PREPARER	50

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM**

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities

Employee Evacuation and Staging Areas:

1. The type of alarm signal that will be used to initiate an evacuation at the facility (vocal, paging system, manual alarm, etc.).

Audible Alarm

2. All employees shall be trained to evacuate the facility through at least one exit. Alternate exit routes shall be designated if available.
3. Staging areas shall be designated for all employees. Staging areas will be the location that all employees shall report to in the event of an emergency.

One person shall be designated to account for all personnel at the staging area. That person will be responsible for meeting the incoming Fire units and reporting the conditions known about the incident.

The Staging area is at the following location as shown on your site plan map:

South Parking lot.

Employee Responsibilities:

At least one employee shall be responsible for the following minimum requirements in the event of an emergency response by the Fire Department.

1. Notify employees. Initiate evacuation procedures.
2. Notify the Garden Grove Fire Department. Dial 911.
3. Try to identify the nature of the incident.
4. Report to the staging area and account for evacuated employees.
5. Report to the incoming fire units.
6. Activate any emergency mitigation procedures that area available at your business. (List below any mitigation procedures specific to your business, if any.)



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD

DELETE

REVISED 1

Page _____ of _____ 2

FACILITY ID#	3 0 0 3 5	38	BUSINESS NAME	RPM Electric Motors Inc
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I. FACILITY INFORMATION

CHEMICAL LOCATION	Out size / east.		
CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	MAP #	1
GRID #	6	7	K7

II. CHEMICAL INFORMATION

CHEMICAL NAME	Gun Washing Solvent	WASTE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
COMMON NAME	Gun Washing Solvent	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
CAS #	10	FIRE CODE HAZARD CLASSES (supplied by GGFD)	FLA 1B

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

AVERAGE DAILY AMOUNT	1/4 gal	MAXIMUM DAILY AMOUNT	30	ANNUAL WASTE AMOUNT	0	STATE WASTE CODE	22
UNITS	<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	DAYS ON SITE	365	LARGEST CONTAINER	55	25	

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

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
29	Toluene	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	108-88-3
29	Acetone	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	67-64-1
29	Laquer Diluent	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	64-742-89-8
29	Methyl Alcohol	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	67-56-1
29		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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.

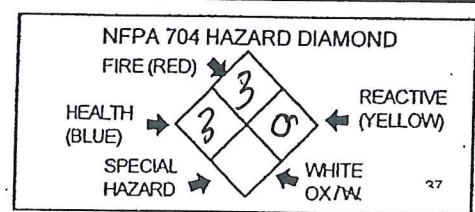
PLACARDING INFORMATION

UNDOT # WN 1263 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS Flammable Liquid 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



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1

Page _____ of _____ 2

FACILITY ID#	3 0 0 3 5	38	BUSINESS NAME	RPM Electric Motors Inc.	3
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I. FACILITY INFORMATION

CHEMICAL LOCATION	Center of Shop				4
CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5	MAP #	1	6
			GRID #	G4	7

II. CHEMICAL INFORMATION

CHEMICAL NAME	Acetylene - C ₂ H ₂	WASTE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11
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COMMON NAME	Acetylene	9	An EHS Chemical	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12
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CAS #	74-86-2	10	FIRE CODE HAZARD CLASSES (supplied by GGFD)	FLAM Gas.	13
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TYPE (Check one item only)	<input checked="" type="checkbox"/> a. PURE <input type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE	14	RADIOACTIVE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	15	CURIES	16
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PHYSICAL STATE (Check one item only)	<input type="checkbox"/> a. SOLID <input type="checkbox"/> b. LIQUID <input checked="" type="checkbox"/> c. GAS	17	FED HAZARD CATEGORIES	<input checked="" type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input checked="" type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH	18
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AVERAGE DAILY AMOUNT	10 ft ³	19	MAXIMUM DAILY AMOUNT	2,500 ft ³	20	ANNUAL WASTE AMOUNT	21	STATE WASTE CODE	22
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UNITS	<input type="checkbox"/> a. GALLONS <input checked="" type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	23	DAYS ON SITE	365	24	LARGEST CONTAINER	2 cylinders.	25
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STORAGE CONTAINER (Check all that apply)	<input type="checkbox"/> a. ABOVEGROUND TANK <input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> c. TANK INSIDE BLDG <input type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> e. PLASTIC DRUM <input type="checkbox"/> f. NONMETALLIC DRUM <input type="checkbox"/> g. METAL CONTAINER <input type="checkbox"/> h. CARBOY <input type="checkbox"/> i. VAT <input type="checkbox"/> j. FIBER DRUM <input type="checkbox"/> k. BAG(S) <input type="checkbox"/> l. BOX(S) <input checked="" type="checkbox"/> m. CYLINDER <input type="checkbox"/> n. GLASS CONTAINER <input type="checkbox"/> o. PLASTIC CONTAINER <input type="checkbox"/> p. IN MACH OR EQUIP <input type="checkbox"/> q. TANK WAGON <input type="checkbox"/> r. RAIL CAR <input type="checkbox"/> s. TOTE BIN <input type="checkbox"/> t. OTHER	26
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STORAGE PRESSURE	<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT	27
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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
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%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 94	29 Acetylene	30 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	31 74-86-2
2	29	30 <input type="checkbox"/> Yes <input type="checkbox"/> No	31
3	29	30 <input type="checkbox"/> Yes <input type="checkbox"/> No	31
4	29	30 <input type="checkbox"/> Yes <input type="checkbox"/> No	31
5	29	30 <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.

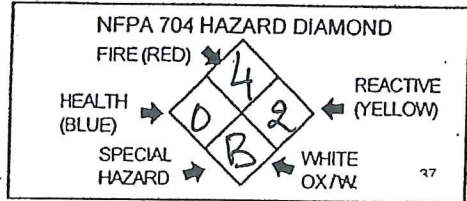
PLACARDING INFORMATION

UNDOT # DN 1001 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 2.1 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



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1

Page _____ of _____ 2

FACILITY ID#	3 0 0 3 5	38	BUSINESS NAME	RPM. ELECTRIC MOTORS INC	3
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I. FACILITY INFORMATION

CHEMICAL LOCATION	Center Work Shop.	4
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CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5	MAP #	1	6	GRID #	G4	7
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II. CHEMICAL INFORMATION

CHEMICAL NAME	Oxygen	WASTE	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11
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COMMON NAME	Oxygen	9	An EHS Chemical	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12
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CAS #	7782-44-7	10	FIRE CODE HAZARD CLASSES (supplied by GGFD)	OXYDIZER	13
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TYPE (Check one item only)	<input checked="" type="checkbox"/> a. PURE <input type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE	14	RADIOACTIVE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	15	CURIES	16
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PHYSICAL STATE (Check one item only)	<input type="checkbox"/> a. SOLID <input type="checkbox"/> b. LIQUID <input checked="" type="checkbox"/> c. GAS	17	FED HAZARD CATEGORIES	<input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input checked="" type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH	18
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AVERAGE DAILY AMOUNT	3 FT ³	19	MAXIMUM DAILY AMOUNT	8	20	ANNUAL WASTE AMOUNT	0	21	STATE WASTE CODE	22
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UNITS	<input type="checkbox"/> a. GALLONS <input checked="" type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	23	DAYS ON SITE	365	24	LARGEST CONTAINER	25
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STORAGE CONTAINER (Check all that apply)	<input type="checkbox"/> a. ABOVEGROUND TANK <input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> c. TANK INSIDE BLDG <input type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> e. PLASTIC DRUM <input type="checkbox"/> f. NONMETALLIC DRUM <input type="checkbox"/> g. METAL CONTAINER <input type="checkbox"/> h. CARBOY <input type="checkbox"/> i. VAT <input type="checkbox"/> j. FIBER DRUM <input type="checkbox"/> k. BAG(S) <input type="checkbox"/> l. BOX(S) <input checked="" type="checkbox"/> m. CYLINDER <input type="checkbox"/> n. GLASS CONTAINER <input type="checkbox"/> o. PLASTIC CONTAINER <input type="checkbox"/> p. IN MACH OR EQUIP <input type="checkbox"/> q. TANK WAGON <input type="checkbox"/> r. RAIL CAR <input type="checkbox"/> s. TOTE BIN <input type="checkbox"/> t. OTHER	26
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STORAGE PRESSURE	<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT	27
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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
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%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	GAS #
1 99	Oxygen, Compressed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7782-44-7 ³²
2 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	32
3 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	32
4 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	32
5 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	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.

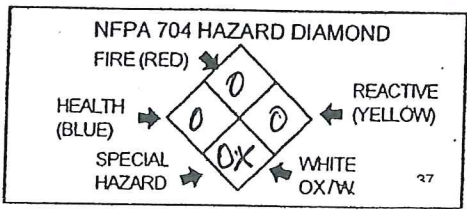
PLACARDING INFORMATION

UNDOT # UN 1072 33
Refer to shipping papers or MSDS

DOT HAZARD CLASS 2.2 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



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1

Page _____ of _____ 2

FACILITY ID#	3 0 0 3 5	38	BUSINESS NAME	RPM Electric Motors Inc.	3
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I. FACILITY INFORMATION

CHEMICAL LOCATION	Rear of Shop.				4
CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5	MAP #	1	6
			GRID #	I2	7

II. CHEMICAL INFORMATION

CHEMICAL NAME	RESIN	WASTE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11
COMMON NAME		* If EPCRA see instructions		9	An EHS Chemical	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12
CAS #		FIRE CODE HAZARD CLASSES (supplied by GGFD)		10	*If EHS is "Yes", all amounts must be LBS		

TYPE (Check one item only)	<input type="checkbox"/> a. PURE <input checked="" type="checkbox"/> b. MIXTURE <input 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 type="checkbox"/> a. SOLID <input checked="" 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 <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH	18			

AVERAGE DAILY AMOUNT	10	19	MAXIMUM DAILY AMOUNT	20	ANNUAL WASTE AMOUNT	0	21	STATE WASTE CODE	22
UNITS	<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	23	DAYS ON SITE	365	24	LARGEST CONTAINER	75 gal	25	

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

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	31
2	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	31
3	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	31
4	29	<input type="checkbox"/> Yes <input type="checkbox"/> No	31
5	29	<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.

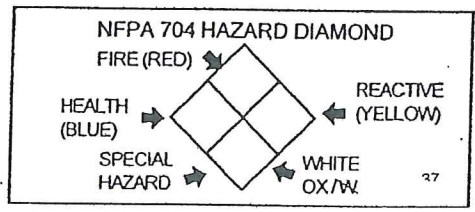
PLACARDING INFORMATION

UNDOT # _____ 33
 Refer to shipping papers or MSDS

DOT HAZARD CLASS RESIN SOLUTION 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



HAZARDOUS MATERIALS INVENTORY FORM

FORM 3

ADD DELETE REVISED 1

Page _____ of _____ 2

FACILITY ID#	3 0 0 3 5	38	BUSINESS NAME	RPM Electric Motors Inc.	3
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I. FACILITY INFORMATION

CHEMICAL LOCATION	OUT SIDE EAST				4
CONFIDENTIAL LOCATION EPCRA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5	MAP #	1	6
			GRID #	K7	7

II. CHEMICAL INFORMATION

CHEMICAL NAME	Waste Oil	WASTE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8	TRADE SECRET	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11
COMMON NAME	Waste oil	* If EPCRA see instructions		9	An EHS Chemical	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12
CAS #	64742-54-7	FIRE CODE HAZARD CLASSES (supplied by GGFD)		10	* If EHS is "Yes", all amounts must be LBS		13

COMBUSTIBLE.

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 type="checkbox"/> a. SOLID <input checked="" type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS	17	FED HAZARD CATEGORIES	<input checked="" type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH	18		

AVERAGE DAILY AMOUNT	2 gal	19	MAXIMUM DAILY AMOUNT	50 gal	20	ANNUAL WASTE AMOUNT	75 gal	21	STATE WASTE CODE	26177	22
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UNITS	<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	23	DAYS ON SITE	364	24	LARGEST CONTAINER	55 gal.	25
-------	---	----	--------------	-----	----	-------------------	---------	----

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

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	Petroleum Distillates.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	64742-54-7
2 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	
3 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	
4 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	
5 29		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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.

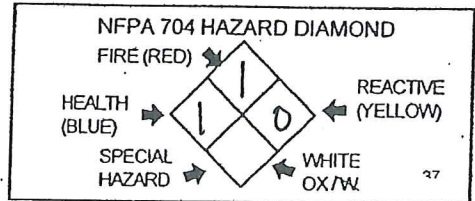
PLACARDING INFORMATION

UNDOT # UN 1270 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



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

CUPA

FACILITY INFORMATION

BUSINESS ACTIVITIES

Page 1 of 1

I. FACILITY IDENTIFICATION

FACILITY ID# 3 0 0 3 5 1. EPA ID # (Hazardous Waste Only) 2.
 CAL 000026177

BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) 3.
 RIM Electric

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...

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 <input type="checkbox"/> NO 4. ✓ 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 5. ✓ UST FACILITY (Formerly SWRCB Form A) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 6. ✓ UST TANK (one page per tank) (Formerly Form B) ✓ UST FACILITY ✓ UST TANK (one per tank) ✓ UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C)
3. Need to report closing a UST?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 7. ✓ 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. ✓ 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?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 9. ✓ EPA ID NUMBER - provide at the top of this page <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 10. ✓ RECYCLABLE MATERIALS REPORT (one per recycler)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)? 5. Consolidate hazardous waste generated at a remove site?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 11. ✓ ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772) ✓ ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)
6. Need to report the closure/removal of a tank that was classified waste and cleaned onsite?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 12. ✓ CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 13. ✓ REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)
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 14. ✓ HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 15. ✓ REGULATED SUBSTANCE REPORTING FORM (Orange County CUPA)



11225 Mulberry Ave., Fontana, CA 92337
CAR000148296

WORK ORDER / INVOICE

Date	Order No.
3/18/10	1348

BILL TO RPM Electric
11352 Westminister Ave.
Garden Grove, CA 92683
Contact: Boe
Phone: 714-638-4174 Fax:
E-Mail:

PICK UP LOCATION Consolidated Manifest
Contact:
Phone: Cell:
EPA #: CAL000026177

P.O. #	Terms	Rep.	Manifest #	Profile #
	<u>C.O.D.</u>	<u>CS</u>	<u>0066584800JK</u>	
DESCRIPTION				
Non-Rcra Hazardous Waste, Liquids (Waste Oil, CA 221):				
<u>est. 55 gal. drums</u>				
Non-Rcra Hazardous Waste, Liquids (Anti-Freeze, CA 134):				
Used Oil Filters:				
Non-Hazardous Waste: Solids / Liquids / Clarifier				
Non-Rcra Hazardous Waste: Solids / Liquids				
RQ Hazardous Waste: Solids / Liquids				
Supplies: Drums: 85 gal. / 55 gal. / 30 gal. / 5 gal. / Blk Liner Size: 20 Cu. Yd / 40 Cu. Yd / Cu. Yd. Box / Cu. Yd. Super Sack				
Transportation Charges: 120B / 70B / Van / Roll Off / Box Van				
Transportation: On Site Turn:				
Empty Drum Removal / Solid SurCharge				
Tanker Washout / Lab Analysis				
Technician:				
Roll Off Bln Rental: 20 Cu. Yd. / 40 Cu. Yd.				
Serial #:				
Labels: Hazardous / Non-Hazardous / DOT:				
Other: <u>Service charge</u>				

Ch # 9662

Energy Surcharge	<u>10.00</u>
Sales Tax	
Total	<u>95.00</u>

- American Oil Company 13740 Saticoy St. Van Nuys, CA 91402 EPA #CAD981427669
- AIS Filters 15131 E. Clark Ave. Industry, CA 91745 EPA #CAL000097432
- DK Environmental 3650 E. 26th St. Vernon, CA 90023 EPA #CAT080033681
- Western Environmental 62-150 Genu Welmas Dr. Mecca, CA 92254 EPA #CAR000157206
- S.R.E.S. 11225 Mulberry Ave. Fontana, CA 92337 EPA# CAR000148296
- Filter Recycling 180 W. Monte Ave. Rialto, CA 92316 EPA #CAD982444481
- Crosby & Overton 1610 W. 17th St. Long Beach, CA 90813 EPA #CAD028409019
- AA Sydcot, LLC 1925 S. Factor Ave. Yuma, AZ 85365 EPA #AZR000501510
- Siemens Water Techn. 5375 S. Boyle Ave. Los Angeles, CA 90023 EPA #CAD097030993
- I.P.C.I. 4343 Kennedy Ave. East Chicago, IN 46312 IND000646943

Notes: ADVANCED ENVIRONMENTAL 13579 WILKINSON AVE FONTANA CALIF 92335 (909) 356-9025. EPA # CAL000026177

Past due invoices are subject to an 18% per year or 1.5% per month interest rate. It is the responsibility of the waste generator to correctly identify the chemical composition of each pickup. If material is rejected by the disposal site because chemical contents have been incorrectly identified the law requires that it be returned to the generator all transportation charges and testing charges to be the generator's responsibility. In the event of any litigation arising from this agreement, the prevailing party shall be entitled to reasonable attorney's fees, expenses, and cost. Generator certifies that it has established a program to reduce the volume or quantity & toxicity of the hazardous waste to the degree determined by generator to be economically practicable. Per California Health and Safety Code Section 25290.9, Starlite hereby advises customer that customer's shipment of used oil may be transported to a facility that is required to comply with federal regulations applicable to management of used oil, but that is not required to comply with the more stringent requirements applicable to hazardous waste management facilities. California facilities that handle or process used oil are required to meet those more stringent requirements, and some out-of-state facilities that process used oil also meet those requirements. These include more stringent leak detection and prevention requirements, engineering certifications of tank integrity, and financial assurances for closure and accidental release. It is lawful to send used oil to out-of-state facilities that comply only with federal used oil management standards and not these more stringent requirements. This notification is for information purposes only.

Driver: Sam Rodriguez Date: 3-19-10 Generator: [Signature] Date: 3-19-10

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM**

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities (Continued)

Training Requirements

State law requires training of employees where the business uses, handles or stores hazardous materials.

Employee training provided on:

- Appointment of person/persons on site who are trained in key role positions. Emergency coordinator, evacuation coordinators, staging area supervisors and documenting officers.
- Procedures to follow during a release or threatened release of a hazardous material (evacuation to staging areas).
- Information contained in material safety data sheets.
- Warning labels/placards.
- Safe work practices.
- Use of on-site emergency equipment and supplies.
- Use and location of personal protective equipment.
- Any chemical, hazardous material or substance that could be encountered in his/her work area.
- On site alarm system for evacuation.
- Discuss possible release of hazardous materials scenario.

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 Office of Emergency Services (OES)	911 (800) 852-7550 or (916) 427-4341
National Response Center	(800) 424-8802

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM**

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities (Continued)

Prevention

All materials are stored, used and handled within the guidelines of the Uniform Fire Code, N.F.P.A. standards, California Administrative Code, Titles 19 and 20.

This section is meant to initiate a Prevention Plan at your business and to assist in preventing a release, or threatened release, of a hazardous material. In the spaces provided, place a checkmark by the preventive actions which have been initiated by your business to abate hazards relating to hazardous material handling, use of storage.

Consideration shall include:

1. Drum storage and/or above ground tank storage areas:
 - a. Isolation and separation of incompatible materials.
 - b. Diking areas to contain spills.
 - c. Storage on paved ground.
2. Compressed and/or cryogenic gas storage areas:
 - a. Cylinder stored upright and secured.
 - b. Isolation and/or separation of incompatible cylinders (oxygen and flammable gases, etc.).
3. General:
 - a. Safe work practices are exercised in daily routines.
 - b. Employees who handle hazardous materials are properly trained.
 - c. Material Safety Data Sheets (MSDS) readily available for each hazardous material on the premises.
 - d. Labeling of all materials and storage areas with the product name and hazards associated with the product (drums, piping, tanks, etc.).
 - e. Uniform Fire Code (UFC) requires separation between outside hazardous material storage area or tanks and combustible materials (wood, bush, etc.).
 - f. Posting of "No Smoking" signs where appropriate.

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.

Your business is required by State law (CFC 8001.3.2) to retain a copy of this entire Hazardous Materials Disclosure information, including the 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: _____

Be Thu Pham

Name: _____

BE PHAM

Title: _____

Secretary

Date: _____

10-2-10

①



GARDEN GROVE FIRE DEPARTMENT
ENVIRONMENTAL PROTECTION SECTION
11301 Acacia Parkway
Garden Grove, CA 92840
Business: 714 741-5600 Haz Mat: 714 741-5636

Hazardous Materials Business Emergency Plan And
Inventory Certification Statement

Business Name: RPM ELECTRIC MOTORS INC Telephone: (714) 638-4174
Site Address: 11352 WESTMINSTER AVE. Zip Code: 92843

The California Health & Safety Code, Division 20, Chapter 6.95, Section 25505(c) and Section 25503.3(c) provide the following:

A business that handles hazardous materials shall review AND certify their Hazardous Materials Business Emergency Plan (HMBEP) once every three years from the date of acceptance by the Garden Grove Fire Department. A business may comply with the annual chemical inventory reporting requirement by submitting a certification statement to the Garden Grove Fire Department. **A business may not utilize this certification to meet the annual inventory submission requirements of the Emergency Planning and Community Right to Know Act (Section 11022, Title 42, United States Code).**

Note: A business may comply with the annual inventory reporting requirements using this certification statement if both of the following apply:

1. The business has previously filed an inventory reporting form and;
2. The business attests to the following:
 - ~~The information contained in the annual inventory form most recently submitted to the Garden Grove Fire Department is complete, accurate, and up to date.~~
 - There has been no change in the quantity of any hazardous material as reported in the most recently submitted annual inventory form.
 - No hazardous material subject to the inventory requirements is being handled that is not listed on the most recently submitted annual inventory form.

THIS IS TO CERTIFY THAT THE HMBEP AND/OR CHEMICAL INVENTORY HAS BEEN REVIEWED.
(Please check applicable boxes.)

- No changes are required to the HMBEP submitted to the Garden Grove Fire Department.
- All the necessary changes/revisions have been made to the HMBEP. The changes/revisions are attached to this certification.
- No changes are required to the chemical inventory that was previously on file with the Garden Grove Fire Department.
- All the necessary changes/revisions have been made to the chemical inventory. The changes/revisions are attached to this certification.

AS AN AUTHORIZED REPRESENTATIVE, 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.

Print Name Nhat Mai Signature Nhat
Job Title Office Manager Date 06/26/07
Fire Department Inspector M. KORDICH ID # 3307



Hazardous Material Disclosure

Business Information / Chemical Inventory / Business Emergency Plan



GARDEN GROVE FIRE DEPARTMENT
 11301 Acacia parkway
 Garden Grove, CA 92840
 Bus. (714) 741-5600 Fax (714) 741-5640
 Hazardous Materials Coordinator
 (714) 741-5636

Address: 11352 WESTMINSTER AVE.
 Occupant or DBA: RPM ELECTRIC MOTORS INC.
 Owner/Manager: NAT MAI

Date: 06-26-07
 File No: 213
 Phone: (714) 638-4174

California Health and Safety Code, Section 6.95, you are required to properly complete the Business Emergency Plan (BMP) packet. You are required to return the BEP packet, Hazardous Materials Disclosure Forms, and all material safety data sheets within fifteen (15) days to the Garden Grove Fire Department. HazMat Coord. (714) 741-5636

An inspection at the above location/occupancy revealed the following violation(s):

Violation(s): CA Health and Safety Code Chapter 6.95, Article 1 and Title 19, §2729 et seq., California Code of Regulations (CCR)

- Complete Hazardous Materials Disclosure packet, HSC Chapter 6.95, Title 19 Div 2 Chapter 3, CFC 8001.3.2
- Failure to submit a Business Emergency Plan. [HSC 25505(a)(1)]; CFC 8001.3.2
- Failure to review and/or revise the Business Emergency Plan as required [HSC 25505(b)&(c)]
- Chemical inventory is incomplete and/or requires update. [HSC 25509]
- The Emergency Response Plan is inadequate and/or does not address the following issues and shall be immediately revised and resubmitted: [HSC 25504(b)&(c)]
 - Notification Procedures
 - Mitigation Procedures
 - Evacuation Procedures
 - Employee Training
- Business Owner/Operator page is incomplete or needs to be updated. [HSC 25509]
- Failure to provide name, title, and 24-hour number of emergency contact(s). [HSC 25509(a)(7)]
- Site Map is incomplete or insufficient. [HSC 25509]
- Failure to report a release or threatened release. [HSC 25507]
- Failure to report a change in business or chemical inventory within 30 days of the following event(s): [HSC 25510]
 - 100% or more increase in the quantity of a disclosed material
 - Addition of a previously undisclosed material
 - Change in business address
 - Change in business ownership
 - Change of business name
 - Other (See comments below):

Violation(s): California Fire Code 2001, Articles 79 & 80, Title 19 Part 9, California Code of Regulations (CCR)

- Provide for secondary containment for hazardous materials liquids and solids (CFC 8003.1.3.3)
- Provide spill control for hazardous materials liquids (CFC 8003.1.3.2)
- Provide approved cabinet if more than 10 gallons of flammable liquids (CFC 7902.5)
- Provide placarding and signs (NFPA 704, CFC Article 79 §7901.9, Article 80 §8001.7-8)
- No Violations Found

Additional Violations and/or Notes:

Responsible Party: nat Re-inspection Date: _____

The above are violations of California law and require immediate correction. Failure to correct violations is subject to civil penalties.

Fire Dept. Inspector: M. KORDICH ID #: 3307
 Condition Upon Re-inspection: _____ Date: _____

GARDEN GROVE



FIRE DEPARTMENT

HAZARDOUS MATERIALS DISCLOSURE PROGRAM

REPORTING FORMS PACKET PART 1

FOR OFFICIAL USE ONLY

APPROVED BY: J. Hays DATE: 1/29/2002

NEW BUSINESS EXISTING UPDATE

FEE: (1) 2 3 4 5 6

OWNERSHIP CHANGE _____

ADDRESS CHANGE: _____

TIER II FAC: CON: BUS LIST: PICK:

40:



CITY OF GARDEN GROVE, FIRE DEPARTMENT

11301 ACACIA PARKWAY, GARDEN GROVE, CALIFORNIA 92842

(714) 741-5600

(714) 741-5636

HAZARDOUS MATERIALS BUSINESS INFORMATION FORM

FORM 1

BUSINESS INFORMATION

2722

(3) Page 1 of ___

FACILITY #	3 0 0 3 5	213	BEGINNING DATE (1)	12/10/01	ENDING DATE (2)	12/31/01
BUSINESS NAME (4)	RPM Electric Motors		BUSINESS PHONE (5)	(714) 638-4174		
SITE ADDRESS (6)	11352 Westminster					
CITY (7)	GARDEN GROVE	STATE (8)	CA	ZIP (9)	92843	
DUN & BRADSTREET (10)	11-505-7671 CDR		SIC CODE (4 DIGIT #) (11)	7629		
COUNTY	ORANGE					
OPERATOR NAME (12)	Bon Pham		OPERATOR PHONE (13)			

BUSINESS OWNER INFORMATION

OWNER NAME (14)	Bon Pham	OWNER PHONE (15)	(714) 590-1465			
OWNER MAILING ADDRESS (16)	8981 Acacia					
CITY (17)	Garden Grove	STATE (18)	CA	ZIP (19)	92841	

ENVIRONMENTAL CONTACT

CONTACT NAME (20)	Be Pham	CONTACT PHONE (21)	(714) 638-4174			
MAILING ADDRESS (22)	11352 Westminster					
CITY (23)	Garden Grove	STATE (24)	CA	ZIP (25)	92843	

Primary

EMERGENCY CONTACTS

Secondary

NAME (26)	Bon Pham	NAME (31)	Nancy/David Lee		
TITLE (27)	owner	TITLE (32)	(in-laws)		
BUSINESS PHONE (28)	(714) 638-4174	BUSINESS PHONE (33)	(714) 554-7245		
24-HOUR PHONE (29)	(714) 590-1465	24-HOUR PHONE (34)	(714) 551-6994 cell		
PAGER # (30)	(714) 485-8125 cell	PAGER # (35)	(714) 903-6775 (home)		

(36)

ADDITIONAL LOCALLY COLLECTED INFORMATION

- A. Type of Business Operation electric apparatus sales, service & repair
- B. Hours of Business Operation 7:30 am to 4:00pm Monday - Friday
- C. Total Number of Employees 10
- D. Property Owner Name Ba Nguyen Address 11541 Westminster Avenue
- E. Schools, hospitals within 1,000 ft. of business property Y N Garden Grove, CA 92843

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 (37) DESIGNATED REPRESENTATIVE	DATE (38)	SIGNATURE OF DOCUMENT PREPARER (41)
<i>Be Pham</i>	12/21/01	<i>Greta R Elliot</i>
NAME OF SIGNER (print) (39)	NAME OF DOCUMENT PREPARER (print) (42)	
BE PHAM office manager	Greta R Elliot	
TITLE OF SIGNER (print) (40)	TITLE OF DOCUMENT PREPARER (print) (43)	
	secretary	



DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

(2) PAGE ____ OF ____

BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **OUTSIDE / EAST**
 (Address, Area, Building, etc.) **11352 Westmister Blvd.**

MAP # (if more than one) (6) **1** GRID# (FROM MAP) (7) **K4**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Safety-Kleen 105 Solvent**

COMMON NAME (9) **Safety-Kleen**

CAS# (10) **Mixture**

FIRE CODE HAZARD CLASSES (13) **combustible liq C II**
COMBUSTIBLE
Irritant

TRADE SECRET (11) YES NO
 *IF EPCRA SEE INSTRUCTIONS

AN EHS CHEMICAL (12) YES NO
 *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

FACILITY ID# (36) **300035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) UNITS (22) GAL CU FT LBS TONS

DAYS ON SITE (20) **365** *If EHS, amounts must be in lbs.

RADIOACTIVE (15) YES NO CURIES

LARGEST CONTAINER (21) **35 gal**

MAX DAILY AMT (23) **35**

AVG DAILY AMT (24) **35**

ANNUAL WASTE AMT (25) **0**

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK/WAGON
 UNDER GROUND TANK CARBOY CYLINDER RAIL CAR
 TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN
 STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other
 PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

STORAGE TEMPERATURE (28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

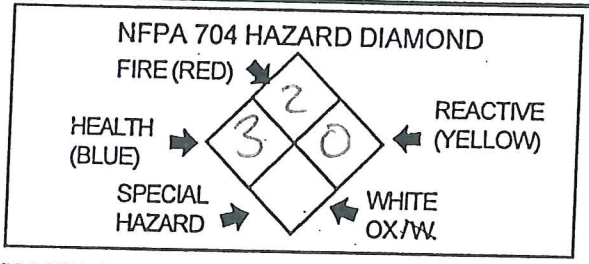
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS#
(1)	Petroleum Distillates,	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	64742-47-8
(2)	Hydrotreated light	<input type="checkbox"/> YES <input type="checkbox"/> NO	
(3)	Perchloroethylene	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	127-18-4
(4)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UNDOT# _____ Refer to shipping papers or MSDS

DOT HAZARD CLASS **3** Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____
 (35) If EPCRA, Please Sign Here

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Stability	Unstable		Conditions to Avoid
	Stable	X	Heat, sparks, flame and fire.

Incompatibility (Materials to Avoid)

Strong oxidizing agents.

Hazardous Decomposition or Byproducts

Normally none; however, incomplete burning may yield carbon monoxide.

Hazardous Polymerization	May Occur		Conditions to Avoid
	Will Not Occur	X	N/A

Section VI—Health Hazard Data

Route(s) of Entry:	Inhalation? Yes.	Skin? Yes.	Ingestion? Yes.
--------------------	---------------------	---------------	--------------------

Health Hazards (Acute and Chronic)

SKIN: Can cause drying of skin. Eyes: Severe irritant. Inhalation: Excessive inhalation can cause headache, dizziness and nausea. Ingestion: Harmful or fatal if swallowed.

Carcinogenicity:	NTP? Not listed.	IARC Monographs? Not listed.	OSHA Regulated? No.
------------------	---------------------	---------------------------------	------------------------

Not a known or suspected carcinogen.

Signs and Symptoms of Exposure

Drying of skin, eye irritation, headache, dizziness, nausea.

Medical Conditions

Generally Aggravated by Exposure Unknown.

Emergency and First Aid Procedures

SKIN: Wash with soap and water. Eyes: Irrigate with water. Inhalation: Remove to fresh air source and call a physician. Ingestion: DO NOT induce vomiting. Call a physician.

Section VII—Precautions for Safe Handling and Use

Steps to Be Taken in Case Material is Released or Spilled

Catch and collect for recovery as soon as possible. Avoid exposure to sparks, fire, flame, hot surface.

Waste Disposal Method

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

Precautions to Be Taken in Handling and Storing

Combustible. Keep away from heat, sparks, flame. Use with adequate ventilation. Avoid long and repeated contact with skin. If clothes are inadvertently saturated with solvent - DO NOT SMOKE. Remove the solvent saturated clothes immediately to avoid skin rash. Keep away from ignition sources. Keep out of reach of children.

Section VIII—Control Measures

Respiratory Protection (Specify Type)

Self-contained breathing apparatus for concentrations above TLV limits.

Ventilation	Local Exhaust Normal room ventilation.	Special None.
	Mechanical (General) None.	Other None.

Protective Gloves In case of prolonged contact, wear rubber gloves.	Eye Protection Yes - Eyeglasses, safety glasses.
--	---

Other Protective Clothing or Equipment

N/A

Work/Hygeianic Practices

Do not smoke while using this solvent.

SAFETY-KLEEN CORP.

777 Big Timber Rd.

Elgin, IL 60123



IDENTITY (As Used on Label and List)

Safety-Kleen 105 Solvent-MS #5617

Note: Blank spaces are not permitted. If any item is not applicable, or no information is available, the space must be marked to indicate that.

Section I

Manufacturer's Name Safety-Kleen Corporation	Emergency Telephone Number 312/697-8460
Address (Number, Street, City, State, and ZIP Code) 777 Big Timber Road	Telephone Number for Information 312/697-8460
Elgin, Illinois 60123	Date Prepared 09/12/86 Revised 05/26/87, 09/23/87, 10/06/88, 10/20/88
	Signature of Preparer (optional)

Section II--Hazardous Ingredients/Identity Information

Hazardous Components (Specific Chemical Identity; Common Name(s))	CAS No.	OSHA PEL	ACGIH TLV	Other Limits Recommended	% (optional)
Mineral Spirits	8032-32-4	500 ppm	100 ppm	N/A	99.9+
Dye	N/A	Unknown	Unknown	unk.	0.003
Anti-Static Agent	N/A	Unknown	Unknown	100 est.	1 ppm

Section III--Physical/Chemical Characteristics

Boiling Point (°F)	310-400	Specific Gravity (H ₂ O = 1)	0.775-0.795
Vapor Pressure (mm Hg.) @ 68°F (20°C)	2	Melting Point	N/A
Vapor Density (AIR = 1)	4.9	Evaporation Rate (Toluene = 1)	0.2
Solubility in Water Negligible.		VOC	795g./L

Appearance and Odor

Clear green liquid with characteristic hydrocarbon odor.

Section IV--Fire and Explosion Hazard Data

Flash Point (Method Used) 105 °F TCC	Flammable Limits	LEL 0.7	UEL 6.0
Extinguishing Media CO ₂ , foam, dry chemical, water (mist only)			
Special Fire Fighting Procedures None.			

Reactivity and Explosion Hazards

None.



DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

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BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **11352 Westminster Blvd** *OUTSIDE EAST*

MAP # (if more than one) (6) **1**

GRID# (FROM MAP) (7) **K7**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Waste Oil**

COMMON NAME (9) **Waste Oil**

CAS# (10) **Mixture 64742-54-7**

FIRE CODE HAZARD CLASSES (13) **Combustible**

TRADE SECRET (11) YES NO
*IF EPCRA SEE INSTRUCTIONS

AN EHS CHEMICAL (12) YES NO
*IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

(36) FACILITY ID# **300035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) **26177** UNITS (22) GAL CUFT LBS TONS

DAYS ON SITE (20) **364** *If EHS, amounts must be in lbs.

RADIOACTIVE (15) YES NO CURIES

LARGEST CONTAINER (21) **55 gal**

MAX DAILY AMT (23) **55**

AVG DAILY AMT (24) **3 gal**

ANNUAL WASTE AMT (25) **50 gal**

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK WAGON
 UNDER GROUND TANK CARBOY CYLINDER RAIL CAR
 TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN
 STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other
 PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

STORAGE TEMPERATURE (28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

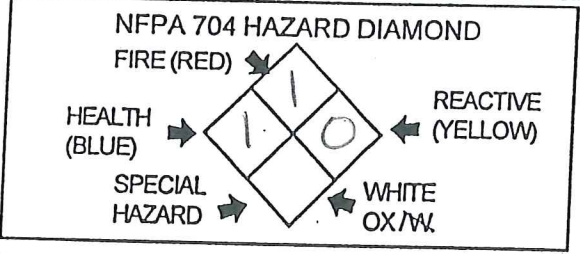
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS#
(1)	Petroleum Distillates	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	64742-54-7
(2)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(3)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(4)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UN/DOT# **UN1270**
Refer to shipping papers or MSDS

DOT HAZARD CLASS **3**
Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____
 (35) If EPCRA, Please Sign Here

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DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

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BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **11352 Westminster Blvd.** (5) CONFIDENTIAL LOCATION EPCRA YES NO

MAP # (if more than one) (6) _____ GRID# (FROM MAP) (7) **I2**

CHEMICAL NAME (8) **Resin B7-606**

COMMON NAME (9) **Solventless Resin**

CAS# (10) _____

FIRE CODE (11) **131-17-9, 80-43-3**

HAZARD CLASSES (13) _____

TRADE SECRET (11) YES NO
 *IF EPCRA SEE INSTRUCTIONS

ANEHS CHEMICAL (12) YES NO
 *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

(36) FACILITY ID# **300035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) _____ UNITS (22) GAL CU FT LBS TONS

DAYS ON SITE (20) **365** *If EHS, amounts must be in lbs.

RADIOACTIVE (15) YES NO CURIES _____

LARGEST CONTAINER (21) **55 gal tank**

MAX DAILY AMT (23) **75**

AVG DAILY AMT (24) **50 gal**

ANNUAL WASTE AMT (25) **0**

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK/WAGON
 UNDER GROUND TANK CARBOY CYLINDER RAIL CAR
 TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN
 STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other
 PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

STORAGE TEMPERATURE (28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

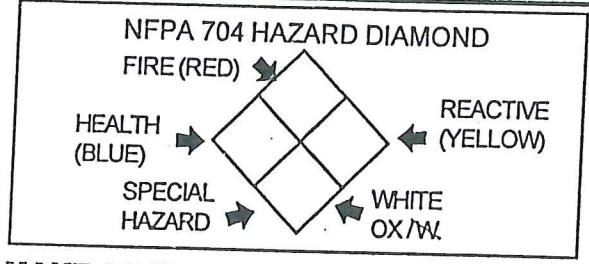
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS#
(1) 40	Diallyl Phthalate	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	131-17-9
(2) 1	Dicumyl Peroxide	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	80-43-3
(3)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(4)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UN/ DOT# _____ Refer to shipping papers or MSDS

DOT HAZARD CLASS **Resin solution** Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____ (35) If EPCRA, Please Sign Here

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DESCRIPTION PAGE

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BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **OUT-SIDE EAST**
 (Address, Area, Building, etc.) **11352 Westminster Blvd.**

MAP # (if more than one) (6) _____

GRID# (FROM MAP) (7) **K7**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Methylene Chloride**

COMMON NAME (9) _____

CAS# (10) **Chlorinated Hydrocarbon**

FIRE CODE (11) **75-09-2**

HAZARD CLASSES (13) **Flam liq, Corrosive**

TRADE SECRET (11) YES NO
 *IF EPCRA SEE INSTRUCTIONS

AN EHS CHEMICAL (12) YES NO
 *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

FACILITY ID# (36) **300035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) _____

DAYS ON SITE (20) **365**

RADIOACTIVE (15) YES NO CURIES _____

LARGEST CONTAINER (21) **5 gal can**

UNITS (22) GAL CUFT LBS TONS

MAX DAILY AMT (23) **500 ppm**

AVG DAILY AMT (24) **10 ppm**

ANNUAL WASTE AMT (25) **0**

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK/WAGON
 UNDER GROUND TANK CARBOY CYLINDER RAIL CAR
 TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN
 STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other
 PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

STORAGE TEMPERATURE (28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

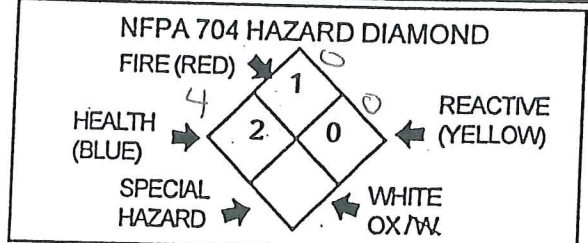
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS #
(1) 100	Methylene Chloride	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	75-09-2
(2)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(3)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(4)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UN/DO# **ORM-A-1593**
 Refer to shipping papers or MSDS

DOT HAZARD CLASS **8**
 Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____
 (35) If EPCRA, Please Sign Here

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**MATERIAL SAFETY
DATA SHEET**

Ashland Chemical Company

DIVISION OF ASHLAND OIL, INC.

P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 889-3333

24-HOUR EMERGENCY TELEPHONE (606) 324-1133



000731

METHYLENE CHLORIDE INDUST GRD

Page: 1

THIS MSDS COMPLIES WITH 29 CFR 1910.1200 (THE HAZARD COMMUNICATION STANDARD)

Product Name: METHYLENE CHLORIDE INDUST GRD
CAS NUMBER: 75-09-2

05 50 033 2617430-

Data Sheet No: 0003736-006
Prepared: 10/14/88
Supersedes: 03/04/86

DIXCO
847 SOUTH EAST STREET
ANAHEIM CA 92805

PRODUCT: 3590000
INVOICE: 912528
INVOICE DATE: 11/12/88
TO: DIXCO
847 SOUTH EAST STREET
ANAHEIM CA 92805

ATTN: PLANT MGR./SAFETY DIR.

SECTION I - PRODUCT IDENTIFICATION

General or Generic ID: CHLORINATED HYDROCARBON

DOT Hazard Classification: ORM-A

SECTION II - COMPONENTS

IF PRESENT, IARC, NTP AND OSHA CARCINOGENS ARE IDENTIFIED IN THIS SECTION
SEE DEFINITION PAGE FOR CLARIFICATION

INGREDIENT	% (by WT)	PEL	TLV	Note
METHYLENE CHLORIDE CAS #: 75-09-2	100 Identified as a CARCINOGEN by IARC	500 PPM	100 PPM	(1)

Notes:

(1) THE OSHA ACCEPTABLE CEILING CONCENTRATION IS 1000 PPM. THE ACCEPTABLE MAXIMUM PEAK ABOVE THE ACCEPTANCE CEILING CONCENTRATION FOR AN 8-HOUR SHIFT IS 2000 PPM FOR A MAXIMUM DURATION OF 5 MINUTES IN ANY 2 HOURS. NIOSH RECOMMENDS A LIMIT OF 75 PPM, 8-HOUR TWA; 500 PPM 15 MINUTE CEILING.

SECTION III - PHYSICAL DATA

Boiling Point	for PRODUCT	102.90 - 104.70 Deg F (39.38 - 40.38 Deg C) a 760.00 mm Hg
Vapor Pressure	for PRODUCT	a 355.00 mm Hg (68.00 Deg F 20.00 Deg C)
Specific Vapor Density	AIR = 1	2.9
Specific Gravity		1.318 - 1.322 a 77.00 Deg F (25.00 Deg C)
Percent Volatiles		100.00%
Evaporation Rate	(ETHYL ETHER = 1)	1.80

SECTION IV - FIRE AND EXPLOSION INFORMATION

FLASH POINT NOT APPLICABLE

EXPLOSIVE LIMIT (PRODUCT) LOWER - 13.0% UPPER - 23.0%

EXTINGUISHING MEDIA: WATER FOG OR CARBON DIOXIDE OR DRY CHEMICAL

HAZARDOUS DECOMPOSITION PRODUCTS: MAY FORM TOXIC MATERIALS: , CARBON DIOXIDE AND CARBON MONOXIDE, HYDROGEN CHLORIDE, PHOSGENE

FIREFIGHTING PROCEDURES: WEAR SELF-CONTAINED BREATHING APPARATUS WITH A FULL FACEPIECE OPERATED IN THE POSITIVE PRESSURE DEMAND MODE WHEN FIGHTING FIRES.

SPECIAL FIRE & EXPLOSION HAZARDS: NOT APPLICABLE

NFPA CODES: HEALTH- 2 FLAMMABILITY- 1 REACTIVITY- 0

SECTION V - HEALTH HAZARD DATA

PERMISSIBLE EXPOSURE LEVEL 500 PPM

THRESHOLD LIMIT VALUE 100 PPM

EFFECTS OF ACUTE OVEREXPOSURE: FOR PRODUCT

EYES - CAN CAUSE IRRITATION.

SKIN - CAN CAUSE IRRITATION.

BREATHING - EXCESSIVE INHALATION OF VAPORS CAN CAUSE NASAL AND RESPIRATORY IRRITATION, CENTRAL NERVOUS SYSTEM EFFECTS INCLUDING DIZZINESS, WEAKNESS, FATIGUE, NAUSEA, HEADACHE AND POSSIBLE UNCONSCIOUSNESS, AND EVEN DEATH.

SWALLOWING - CAN CAUSE GASTROINTESTINAL IRRITATION, NAUSEA, VOMITING, AND DIARRHEA.

FIRST AID:

IF ON SKIN: THOROUGHLY WASH EXPOSED AREA WITH SOAP AND WATER. REMOVE CONTAMINATED CLOTHING. LAUNDRER CONTAMINATED CLOTHING BEFORE RE-USE.

**MATERIAL SAFETY
DATA SHEET**

Ashland Chemical Company

DIVISION OF ASHLAND OIL, INC.

P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 889-3333

24-HOUR EMERGENCY TELEPHONE (606) 324-1133



000731

METHYLENE CHLORIDE INDUST GRD

Page: 2

SECTION V-HEALTH HAZARD DATA (Continued)

IF IN EYES: FLUSH WITH LARGE AMOUNTS OF WATER, LIFTING UPPER AND LOWER LIDS OCCASIONALLY, GET MEDICAL ATTENTION.

IF SWALLOWED: DO NOT INDUCE VOMITING. IMMEDIATELY DRINK TWO GLASSES OF WATER. NEVER GIVE ANYTHING BY MOUTH TO AN UNCONSCIOUS PERSON. CALL PHYSICIAN OR TRANSPORT TO AN EMERGENCY FACILITY.

IF BREATHED: IF AFFECTED, REMOVE INDIVIDUAL TO FRESH AIR. IF BREATHING IS DIFFICULT, ADMINISTER OXYGEN. IF BREATHING HAS STOPPED GIVE ARTIFICIAL RESPIRATION. KEEP PERSON WARM, QUIET AND GET MEDICAL ATTENTION.

DO NOT GIVE STIMULANTS. EPINEPHRINE OR EPHEDRINE MAY ADVERSELY AFFECT THE HEART WITH FATAL RESULTS.

PRIMARY ROUTE(S) OF ENTRY:

INHALATION, SKIN CONTACT

EFFECTS OF CHRONIC OVEREXPOSURE: FOR PRODUCT

OVEREXPOSURE TO METHYLENE CHLORIDE CAN RAISE THE LEVEL OF CARBON MONOXIDE IN THE BLOOD CAUSING CARDIOVASCULAR STRESS. METHYLENE CHLORIDE IS LISTED AS A POTENTIAL CARCINOGEN (2B) BY IARC. RESULTS OF LABORATORY ANIMAL TESTS SHOW THAT METHYLENE CHLORIDE PRODUCED: BENIGN TUMORS IN RATS EXPOSED TO 500 PPM; CANCER IN RATS AND MICE EXPOSED TO 1500 PPM AND HIGHER, BUT NOT IN HAMSTERS. IT INCREASED THE RATE OF SPONTANEOUSLY OCCURRING MALIGNANT TUMORS IN THE B6C3F1 MOUSE. EPIDEMIOLOGY STUDIES FAILED TO SHOW A TUMORIGENIC RESPONSE IN PLANT WORKERS. METHYLENE CHLORIDE IS NOT BELIEVED TO POSE A MEASURABLE CANCER RISK TO MAN WHEN HANDLED AS RECOMMENDED. LABORATORY ANIMAL STUDIES TO EVALUATE POTENTIAL BIRTH DEFECTS AND EFFECTS ON REPRODUCTION SHOW: A LOW DEGREE OF MATERNAL AND EMBRYOTOXICITY AT 4500 PPM; NO TERATOLOGICAL EFFECTS AND NO EFFECTS ON REPRODUCTION AT CONCENTRATIONS OF 4500 AND 1225 PPM.

OVEREXPOSURE TO THIS MATERIAL (OR ITS COMPONENTS) HAS APPARENTLY BEEN FOUND TO CAUSE THE FOLLOWING EFFECTS IN LABORATORY ANIMALS: LIVER ABNORMALITIES, LUNG DAMAGE

SECTION VI-REACTIVITY DATA

HAZARDOUS POLYMERIZATION: CANNOT OCCUR

STABILITY: STABLE

INCOMPATIBILITY: AVOID CONTACT WITH: ALUMINUM

SECTION VII-SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED:

SMALL SPILL: ABSORB LIQUID ON PAPER, VERMICULITE, FLOOR ABSORBENT, OR OTHER ABSORBENT MATERIAL AND TRANSFER TO HOOD.

LARGE SPILL: PERSONS NOT WEARING PROTECTIVE EQUIPMENT SHOULD BE EXCLUDED FROM AREA OF SPILL UNTIL CLEAN-UP HAS BEEN COMPLETED. STOP SPILL AT SOURCE, DIKE AREA OF SPILL TO PREVENT SPREADING, PUMP LIQUID TO SALVAGE TANK. REMAINING LIQUID MAY BE TAKEN UP ON SAND, CLAY, EARTH, FLOOR ABSORBENT, OR OTHER ABSORBENT MATERIAL AND SHOVELED INTO CONTAINERS.

WASTE DISPOSAL METHOD:

SMALL SPILL: ALLOW VOLATILE PORTION TO EVAPORATE IN HOOD. ALLOW SUFFICIENT TIME FOR VAPORS TO COMPLETELY CLEAR HOOD DUCT WORK. DISPOSE OF REMAINING MATERIAL IN ACCORDANCE WITH APPLICABLE REGULATIONS.

LARGE SPILL: DESTROY BY LIQUID INCINERATION WITH OFF-GAS SCRUBBER.

CONTAMINATED ABSORBENT MAY BE DEPOSITED IN A LANDFILL IN ACCORDANCE WITH LOCAL, STATE AND FEDERAL REGULATIONS.

SECTION VIII-PROTECTIVE EQUIPMENT TO BE USED

RESPIRATORY PROTECTION: IF WORKPLACE EXPOSURE LIMIT(S) OF PRODUCT OR ANY COMPONENT IS EXCEEDED (SEE SECTION II), A NIOSH/MSHA APPROVED AIR SUPPLIED RESPIRATOR IS ADVISED IN ABSENCE OF PROPER ENVIRONMENTAL CONTROL. OSHA REGULATIONS ALSO PERMIT OTHER NIOSH/MSHA RESPIRATORS (NEGATIVE PRESSURE TYPE) UNDER SPECIFIED CONDITIONS (SEE YOUR SAFETY EQUIPMENT SUPPLIER). ENGINEERING OR ADMINISTRATIVE CONTROLS SHOULD BE IMPLEMENTED TO REDUCE EXPOSURE.

VENTILATION: PROVIDE SUFFICIENT MECHANICAL (GENERAL AND/OR LOCAL EXHAUST) VENTILATION TO MAINTAIN EXPOSURE BELOW TLV(S).

PROTECTIVE GLOVES: WEAR RESISTANT GLOVES SUCH AS: POLYVINYL ALCOHOL

EYE PROTECTION: CHEMICAL SPLASH GOGGLES IN COMPLIANCE WITH OSHA REGULATIONS ARE ADVISED; HOWEVER, OSHA REGULATIONS ALSO PERMIT OTHER TYPE SAFETY GLASSES. (CONSULT YOUR SAFETY EQUIPMENT SUPPLIER)

OTHER PROTECTIVE EQUIPMENT: TO PREVENT REPEATED OR PROLONGED SKIN CONTACT, WEAR IMPERVIOUS CLOTHING AND BOOTS.

SECTION IX-SPECIAL PRECAUTIONS OR OTHER COMMENTS

CONTAINERS OF THIS MATERIAL MAY BE HAZARDOUS WHEN EMPTIED. SINCE EMPTIED CONTAINERS RETAIN PRODUCT RESIDUES (VAPOR, LIQUID, AND/OR SOLID), ALL HAZARD PRECAUTIONS GIVEN IN THE DATA SHEET MUST BE OBSERVED.

THE INFORMATION ACCUMULATED HEREIN IS BELIEVED TO BE ACCURATE BUT IS NOT WARRANTED TO BE WHETHER ORIGINATING WITH THE COMPANY OR NOT. RECIPIENTS ARE ADVISED TO CONFIRM IN ADVANCE OF NEED THAT THE INFORMATION IS CURRENT, APPLICABLE, AND SUITABLE TO THEIR CIRCUMSTANCES.



DESCRIPTION PAGE

(1) ADD DELETE REVISE

(2) PAGE ____ OF ____

BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **Center Workshop**

MAP # (if more than one) (6) **11352 Westminster Blvd.**

GRID# (FROM MAP) (7) **G4**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Oxygen**

COMMON NAME (9) **Oxygen**

CAS# (10) **7782-44-7**

FIRE CODE (13) **7782-44-7**

HAZARD CLASSES (13) **Oxidizer**

TRADE SECRET (11) YES NO

*IF EPCRA SEE INSTRUCTIONS

ANEHS CHEMICAL (12) YES NO

*IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

(36) FACILITY ID# **30035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

RADIOACTIVE (15) YES NO CURIES

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) **365**

UNITS (22) GAL CUFT LBS TONS

MAX DAILY AMT (23) **12 g**

AVG DAILY AMT (24) **3 ft³**

ANNUAL WASTE AMT (25) **0**

DAYS ON SITE (20) **365**

*If EHS, amounts must be in lbs.

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK/WAGON

UNDER GROUND TANK CARBOY CYLINDER RAIL CAR

TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN

STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other

PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

STORAGE TEMPERATURE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

(28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

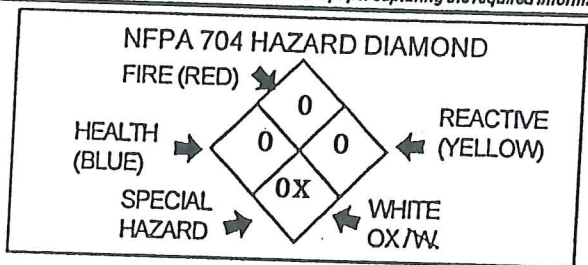
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS #
(1) 99	Oxygen, compressed	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	7782-44-7
(2)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(3)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(4)		<input type="checkbox"/> YES <input type="checkbox"/> NO	
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UNDOT# **UN 1072**
Refer to shipping papers or MSDS

DOT HAZARD CLASS **2.2**
Refer to shipping papers or MSDS



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

(34) EPCRA YES NO

X _____

(35) If EPCRA, Please Sign Here



DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

(2) PAGE ____ OF ____

BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **center workshop**

MAP # (if more than one) (6) **11352 Westminster Blvd.**

GRID# (FROM MAP) (7) **G4**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Acetylene - C₂H₂**

COMMON NAME (9) **Acetylene**

CAS# (10) **74-86-2**

FIRE CODE HAZARD CLASSES (13) **Flam gas**

TRADE SECRET (11) YES NO
 *IF EPCRA SEE INSTRUCTIONS

AN EHS CHEMICAL (12) YES NO
 *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

(36) FACILITY ID# **300035**

TYPE (14) PURE MIXTURE WASTE

PHYSICAL STATE (17) SOLID LIQUID GAS

RADIOACTIVE (15) YES NO CURIES

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) _____

UNITS (22) GAL CU FT LBS TONS

MAX DAILY AMT (23) **2,500 ft³**

AVG DAILY AMT (24) **10 ft³**

DAYS ON SITE (20) **365**

*If EHS, amounts must be in lbs.

ANNUAL WASTE AMT (25) _____

STORAGE CONTAINER (26)

ABOVE GROUND TANK CAN BOX(S) TANK WAGON

UNDER GROUND TANK CARBOY CYLINDER RAIL CAR

TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN

STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other

PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE TEMPERATURE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

(28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

(29) % WT

(1)	94
(2)	
(3)	
(4)	
(5)	

(30) HAZARDOUS COMPONENTS

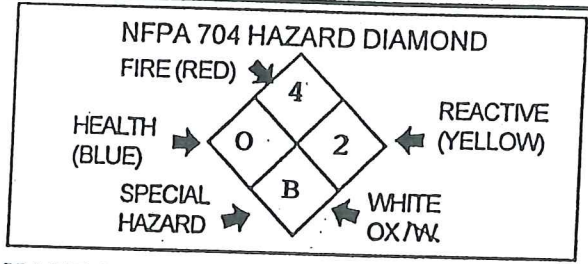
(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS #
Acetylene	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	74-86-2
	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UNDOT# **UN1001**
Refer to shipping papers or MSDS

DOT HAZARD CLASS **2.1**
Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____
(35) If EPCRA, Please Sign Here

MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED



DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

(2) PAGE ___ OF ___

BUSINESS NAME (3) **RPM Electric Motors**

CHEMICAL LOCATION (4) **OUTSIDE / EAST 11352 Westminster Blvd.**

MAP # (if more than one) (6) **1** GRID# (FROM MAP) (7) **K7**

(5) CONFIDENTIAL LOCATION EPCRA YES NO

CHEMICAL NAME (8) **Gun Washing Solvent**

COMMON NAME (9) **Gun Washing Solvent**

CAS# (10)

FIRE CODE HAZARD CLASSES (13) **Fla 1 B**

TRADE SECRET (11) YES NO
 *IF EPCRA SEE INSTRUCTIONS

ANEHS CHEMICAL (12) YES NO
 *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS

(36) FACILITY ID# **30035**

TYPE (14) PURE MIXTURE WASTE RADIOACTIVE (15) YES NO CURIES

PHYSICAL STATE (17) SOLID LIQUID GAS LARGEST CONTAINER (21) **55 gal**

FED HAZARD CATEGORIES (18) FIRE REACTIVE PRESSURE RELEASE ACUTE HEALTH CHRONIC HEALTH

STATE WASTE CODE (19) UNITS (22) GAL CU FT LBS TONS MAX DAILY AMT (23) **55**

DAYS ON SITE (20) **365** *If EHS, amounts must be in lbs. AVG DAILY AMT (24) **1/2 gal**

ANNUAL WASTE AMT (25) **0**

STORAGE CONTAINER (26) ABOVE GROUND TANK CAN BOX(S) TANK/WAGON
 UNDER GROUND TANK CARBOY CYLINDER RAIL CAR
 TANK INSIDE BUILDING SILO GLASS CONTAINER TOTE BIN
 STEEL DRUM FIBER DRUM PLASTIC CONTAINER Other
 PLASTIC/NONMETALLIC DRUM BAG(S) IN MACHINERY OR EQUIP.

PRESSURE STORAGE (27) AMBIENT ABOVE AMBIENT BELOW AMBIENT

STORAGE TEMPERATURE (28) AMBIENT ABOVE AMBIENT BELOW AMBIENT CRYOGENIC

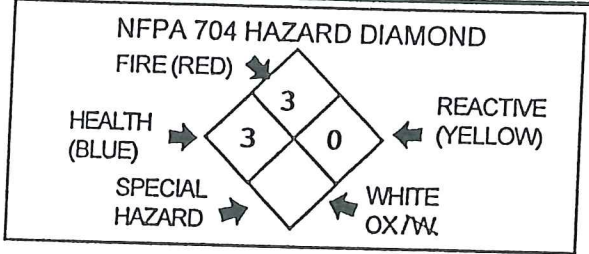
(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS	(32) CAS#
(1)	Toluene	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	108-88-3
(2)	Acetone	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	67-64-1
(3)	Lacquer Diluent	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	64742-89-8
(4)	Methyl Alcohol	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	67-56-1
(5)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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.

(33) NFPA CLASSIFICATION

UNDOT# **UN1263**
Refer to shipping papers or MSDS

DOT HAZARD CLASS **Flammable Liquid**
Refer to shipping papers or MSDS



(34) EPCRA YES NO

X _____
(35) If EPCRA, Please Sign Here

MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

GARDEN GROVE



FIRE DEPARTMENT

HAZARDOUS MATERIALS DISCLOSURE PROGRAM

REPORTING FORMS PACKET: PART 2

BUSINESS EMERGENCY PLAN SHORT 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

All businesses using, handling or storing hazardous materials that are required to disclose must complete a Business Emergency Plan. The occupancy groups listed below will be permitted to complete a short version of the business plan. The completion of the short form shall be considered the application required in the Health and Safety Code, Title 20, Chapter 6.95, Section 25503.5.

The Chief of the Garden Grove Fire Department in the role of the Administering Agency, allows the following types of businesses to file the short version of the Business Emergency Plan.

1. Gasoline/Diesel service stations. S-3 occupancies.
2. Repair Garages. H-4 occupancies.
3. Dry Cleaners
4. Businesses, at the Fire Chief's discretion, with less than 10 employees and using materials that are not considered highly or acutely toxic.

The Fire Chief exempts the following portions from the business plan. These exemptions have been established because the materials used in the above-mentioned occupancies are common knowledge to first responding units. The materials pose no significant, unexpected hazard nor do they affect the ability of the administering agency to effectively respond to their release of a hazardous material, and that there are unusual circumstances justifying this exemption.

Exemptions

1. Detailed evacuation plans.
2. Detailed key employee responsibilities.
3. Training outline.
4. Detailed prevention outline.

The following Short Business Emergency Plan must be completed in order for the exemption to be granted.

GARDEN GROVE FIRE DEPARTMENT HAZARDOUS MATERIALS DISCLOSURE PROGRAM

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities

Training Requirements

State law requires training of employees where the business uses, handles or stores hazardous materials.

Employee training provided on:

- Appointment of person/persons on site who are trained in key role positions. Emergency coordinator, evacuation coordinators, staging area supervisors and documenting officers.
- Procedures to follow during a release or threatened release of a hazardous material (evacuation to staging areas).
- Information contained in material safety data sheets.
- Warning labels/placards.
- Safe work practices.
- Use of on site emergency equipment and supplies.
- Use and location of personal protective equipment.
- Any chemical, hazardous material or substance that could be encountered in his/her work area.
- On-site alarm system for evacuation.
- Discuss possible release of hazardous materials scenario.

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:

Agency

Phone Numbers

Garden Grove Fire Department, Police,
Paramedics

Office of Emergency Services (OES)

National Response Center

911

(800) 852-7550 OR (916) 427-4341

(800) 424-8802

**GARDEN GROVE FIRE DEPARTMENT
HAZARDOUS MATERIALS DISCLOSURE PROGRAM**

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities

Prevention

All materials are stored, used and handled within the guidelines of the Uniform Fire Code, N.F.P.A. standards, California Administrative Code, Titles 19 and 20.

This section is meant to initiate a Prevention Plan at your business and to assist in preventing a release, or threatened release, of a hazardous material. In the spaces provided, place a checkmark by the preventive actions which have been initiated by your business to abate hazards relating to hazardous material handling, use of storage.

Consideration shall include:

1. Drum storage and/or above ground tank storage areas:
 - a ___ Isolation and separation of incompatible materials
 - b ___ Diking areas to contain spills
 - c X Storage on paved ground
2. Compressed and/or cryogenic gas storage areas:
 - a X Cylinders stored upright and secured
 - b ___ Isolation and/or separation of incompatible cylinders (oxygen and flammable gases, etc.)
3. General:
 - a X Safe work practices are exercised in daily routines.
 - b X Employees who handle hazardous materials are properly trained.
 - c X Material Safety Data Sheets (MSDS) readily available for each hazardous material on the premises.
 - d X Labeling of all materials and storage areas with the product name and hazards associated with the product (drums, piping, tanks, etc.)
 - e X Uniform Fire Code (UFC) requires separation between outside hazardous material storage area or tanks and combustible materials (wood, bush, etc.)
 - f X Posting of "No Smoking" signs where appropriate.

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

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.

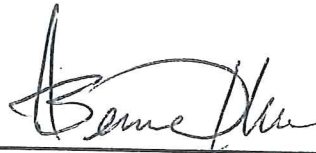
MSDS Station located in shop area right in front of double doors
going into the Offices.

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: _____

Bennie Pham

TITLE: _____

Manager

DATE: _____

12/21/01



**GARDEN GROVE FIRE DEPARTMENT
ENVIRONMENTAL PROTECTION SECTION**

11301 Acacia Parkway
Garden Grove, CA 92840
Business: 714 741-5600 Haz Mat: 714 741-5636

**Hazardous Materials Business Emergency Plan And
Inventory Certification Statement**

Business Name: RPM Electric Motors

Telephone: (714) 638-4174

Site Address: 11352 Westminster

Zip Code: 92843

The California Health & Safety Code, Division 20, Chapter 6.95, Section 25505(c) and Section 25503.3(c) provide the following:

A business that handles hazardous materials shall review AND certify their Hazardous Materials Business Emergency Plan (HMBEP) once every three years from the date of acceptance by the Garden Grove Fire Department. A business may comply with the annual chemical inventory reporting requirement by submitting a certification statement to the Garden Grove Fire Department. **A business may not utilize this certification to meet the annual inventory submission requirements of the Emergency Planning and Community Right to Know Act (Section 11022, Title 42, United States Code).**

Note: A business may comply with the annual inventory reporting requirements using this certification statement if both of the following apply:

1. The business has previously filed an inventory reporting form and;
2. The business attests to the following:
 - The information contained in the annual inventory form most recently submitted to the Garden Grove Fire Department is complete, accurate, and up to date.
 - There has been no change in the quantity of any hazardous material as reported in the most recently submitted annual inventory form.
 - No hazardous material subject to the inventory requirements is being handled that is not listed on the most recently submitted annual inventory form.

THIS IS TO CERTIFY THAT THE HMBEP AND/OR CHEMICAL INVENTORY HAS BEEN REVIEWED.
(Please check applicable boxes):

- No changes are required to the HMBEP submitted to the Garden Grove Fire Department.
- All the necessary changes/revisions have been made to the HMBEP. The changes/revisions are attached to this certification.
- No changes are required to the chemical inventory that was previously on file with the Garden Grove Fire Department.
- All the necessary changes/revisions have been made to the chemical inventory. The changes/revisions are attached to this certification.

AS AN AUTHORIZED REPRESENTATIVE, 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.

Print Name Be Pham

Signature *Be Pham*

Job Title Office Manager

Date 3/6/01

UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS ACTIVITIES

I. FACILITY IDENTIFICATION

FACILITY ID#	1. EPA ID # (Hazardous Waste Only)	
--------------	------------------------------------	--

BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) 3.

RPM Electric Motors

II. ACTIVITIES DECLARATION

**NOTE: If you check YES to any part of this list,
please submit the Business Owner/Operator Identification page (OES Form 2730)**

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?

YES NO

4.

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (OES 2731)

B. UNDERGROUND STORAGE TANKS (USTs)

1. Own or operate underground storage tanks?
2. Intent to upgrade existing or install new USTs?

YES NO

5.

UST FACILITY (Formerly SWRCB Form A)
 UST TANK (one page per tank) (Formerly Form B)

YES NO

6.

UST FACILITY
 UST TANK (one per tank)
 UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C)

3. Need to report closing a UST?

YES NO

7.

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?

YES NO

8.

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 remove site?
6. Need to report the closure/removal of a tank that was classified waste and cleaned onsite?

YES NO

9.

EPA ID NUMBER - provide at the top of this page

YES NO

10.

RECYCLABLE MATERIALS REPORT (one per recycler)

YES NO

11.

ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772)
 ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)

YES NO

12.

CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232)

YES NO

13.

REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)

YES NO

14.

HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)

E. LOCAL REQUIREMENTS

15.

(You may also be required to provide additional information by your CUPA or local agency.)



GARDEN GROVE FIRE DEPARTMENT
ENVIRONMENTAL PROTECTION SECTION

11301 Acacia Parkway
Garden Grove, CA 92840
Business: 714 741-5600 Haz Mat: 714 741-5636

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Inventory Certification Statement

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Telephone: (714) 638-4174

Site Address: 11352 Westminster Blvd.

Zip Code: 92843

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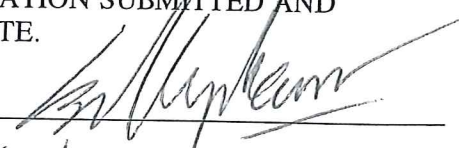
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Print Name Be Pham

Signature 

Job Title Office Manager

Date 5/3/00