

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 abovementioned 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,

Thanh Nguyen

Fire Captain/Senior Fire Protection Specialist

Violation List for RPM ELECTRIC MOTORS 11352 WESTMINSTER Ave

| Date Issued | Date Cleared | Code i | 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). |

| 213 RPM | ELECTRIC MOTORS | | | | | STMINSTER A y Amount | ve Not Use | d/Used |
|---------------|--------------------|----------|---------------------|-----|---|-------------------------|---------------|----------|
| Common Name | RESIN B7-606 | | | | | 75 Gallons | [-1 | |
| Chemical Name | SOLVENTLESS RESIN | ١ | | Мар | 1 | Grid I-2 | Delete _ | _ Modify |
| Cas # | 131-17-9 | Location | REAR OF SHOP AREA | | | | | |
| Common Name | SAFETY-KLEEN 105 | | X. | | | 35 Gallons | [Person | |
| Chemical Name | SOLVENT - SAFETY K | CLEEN | | Мар | 1 | Grid K-4 | Delete _ | _ Modify |
| Cas # | · · · · | Location | OUTSIDE - EAST WALL | | | | | e . |
| Common Name | CHLORINATED HYDR | OCARBO | N | | | 5 Pounds | Proj | |
| Chemical Name | METHYLENE CHLORI | DE | | Map | 1 | Grid K-7 | Delete _ | _ Modify |
| Cas # | 75-09-2 | Location | OUTSIDE - EAST WALL | | | | | |
| Common Name | ACETYLENE | | | | 2 | 200 Cubic Fee | | |
| Chemical Name | ACETYLENE | | | Мар | 1 | Grid G-4 | Delete _ | Modify |
| Cas # | 74-86-2 | Location | WORKSHOP AREA | | | | | |
| Common Name | WASTE OIL | | | | | 55 Gallons | [7] | |
| Chemical Name | WASTE OIL | | | Мар | 1 | Grid K-7 | Delete _ | Modify |
| Cas # | 64742-54-7 | Location | OUTSIDE - EAST WALL | | | 9 | | 41 |
| Common Name | GUN WASH SOLVENT | | | | | 55 Gallons | [] | |
| Chemical Name | SOLVENT, GUN WASH | 1 | * 9 | Мар | 1 | Grid K-7 | Delete | Modify |
| Cas # | | Location | OUTSIDE - EAST WALL | | | | | |
| Common Name | OXYGEN | | | | 2 | 200 Cubic Fee | | |
| Chemical Name | OXYGEN | | | Мар | 1 | Grid G-4 | Delete | Modify |
| Cas # | 7782-44-7 | Location | WORKSHOP AREA | | | | | |

| Date Archive | d 01/07/2003 |
|---------------------|--------------|
|---------------------|--------------|

District 2722

Dba · RPM ELECTRIC MOTOR

Complex

Address

11352

WESTMINSTER

AVE

92843

Business Information

Business License No. 122112
Dunn and Bradstreet Sic CodeFax
E-Mail
Business Owner Name BON PHAM Home Phone

Construction Information

Construction type-Occupany group- F2 Occupany 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

Daumita

| 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

| File#_ | 213 | |
|---------------|--------|--|
| Fire District | 2722 | |
| Inspector_ | | |
| Next. Insp_ | 9/2012 | |

| 11301 Acada Parkway, Garden G | |
|--|---|
| Bus 714-741-5600 Fax 714-74 | 1-5640 Next. Insp 9/2013 |
| Occupant or DBA LPM Elz tric Moto Address 11352 Dzstwingtz Business Owner Row Phair Emergency Contact Boy Phair | Aur Suite Zip 92843 Tel 714 638-4174 Tel 714 721-2176 |
| Group Load Sprinklers I | F/P/N5-Year Cert/ Haz-Mat |
| Fire Permits: Hot Work, Hazarlous M | atzsia 13 |
| An inspection at the above location/occupancy 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 □2410BC □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.) Secure compressed gas cylinders (CFC 3003.5.3) Post □Business License □Fire Dept. Permit (CFC 105.3.5) | 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 |
| NO VIOLATIONS | ☐ CLASS I VIOLATION ☐ CLASS II VIOLATION ☐ CLASS II VIOLATION |
| ADDITIONAL VIOLATIONS AND/ OR NOTES: Business Representative Signature: | Date: |
| Inspector Name/ID#: 9461 Whitakes | Date: 7/23/7013 |
| Cleared / / Mailback Card Due Re-Inspect | on Date <u> </u> |





CITY OF GARDEN GROVE FIRE DEPARTMENT 11301 Acacia Parkway, Garden Grove, CA 92842 (714) 741-5

(714) 741-5600 (714) 741-5636

Hazardous Materials Business Information Form

| | Page of |
|---|---|
| FACILITY # 3 0 0 3 5 (Supplied by GGFD) | BEGINNING DATE OCT - 28 - 2010 BEGINNING DATE 1 ENDING DATE 2010 |
| BUSINESS SITE ADDRESS | TWC. 4 BUSINESS PHONE TUL- 638-4174 |
| CITY GARDEN GROVE | 2 AV& 7 STATE 8 ZIP 92843 |
| DUN & BRADSTREET 11 - 505 - 76 71 COUNTY | 10 SIC CODE (4 DIGIT #) 7629 11 FIRE DISTRICT 12 |
| ORANGE | 13 |
| BUSINESS OPERATOR NAME Christian Vilel | |
| OWNER NAME | ESS OWNER |
| OWNER MAILING ADDRESS 8981 A Cacia AUC. | 16 OWNER PHONE 714-590-1465 714-488-812518 |
| Garden Cillove | 19 STATE 20 ZIP 92841 21 |
| CONTACT NAME DE PHAM | ENTAL CONTACT 22 CONTACT PHONE 23 |
| contact mailing address 11352 Westminter Av | 714.7212176 |
| Garden Grove | 25 STATE 26 ZIP 92843 27 |
| | CY CONTACTS SECONDARY |
| NAME BON PHAM | 8 NAME Christian or Phillipe. 33 |
| Owner 1 president. | |
| BUSINESS PHONE (714) 638-4174 | (74) 638-4174 |
| 24-HR. PHONE | CITY AND |
| PAGER# | |
| DESCRIBE THE TYPE OF BUSINESS OPERATION: | COLLECTED INFORMATION 38 TOTAL # OF EMPLOYEES 39 |
| ELECTRIC APPAROTUS SALe BILLING ADDRESS (IF DIFFERENT FROM ABOVE) | REWIND, REPAIR -SUE 07 |
| PROPERTY OWNER NAME ADDRESS 12 ADDRESS 1541 | Westminter, GG, CA 928413 PHONE 714) 554-72454 |
| lave personally examined and am lamiliar with the information sup | ible for obtaining the information, I certify under penalty of law that I mitted and believe the information is true, accurate, and complete. |
| SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE | 45 DATE 46 |
| IAME OF SIGNER (print) 47 | NAME OF DOCUMENT PREPARER (print 49 |
| ITLE OF SIGNER 48 | TITLE OF DOCUMENT PREPARER 50 |

GARDEN GROVE FIRE DEPARTMENT HAZARDOUS MATERIALS DISCLOSURE PROGRAM

BUSINESS EMERGENCY PLAN

Personnel Emergency Notifications and Responsibilities

| Emp | loyee | Evacuation | and | Staging | Areas: |
|-----|-------|------------|-----|---------|--------|
| | | | | | |

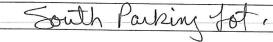
| 1. | The type | of | alarm | signal | that | will | be | used | to | initiate | an | evacuation | at | the |
|----|--------------|------|----------|----------|-------|------|------|-------|------|----------|----|------------|----|-----|
| | facility (vo | ocal | l, pagir | ig syste | em, n | nanu | al a | larm, | 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:



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.

| Activate | any | emerge | ncy r | nitigation | procedures | that | area | available | at | your |
|----------|------|-----------|-------|------------|---------------------------|------|----------|-----------|--------|-------|
| business | . (L | ist belov | v any | mitigatio | n [†] procedures | spec | cific to | your bu | ısines | s, if |
| any.) | | | | | | ē. | | | | , |
| | | | | | | | | | 0.5 | |
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| TAIL TO THE TAIL THE THE TAIL THE THE T | |
|--|---|
| ☐ ADD ☐ DELETE ☐ REVISED 1 | Page of |
| FACILITY ID# 3 0 0 3 5 38 BUSIN | ESS NAME DONA Electric Matters |
| I. FACILI | RPM ELECTRIC MOTORS INC |
| CHEMICAL LOCATION | |
| CONFIDENTIAL LOCATION TO VOTE TO MARKET | • |
| EPCRA LT TES LX NO 3 MAP # | 6 GRID# K.7 |
| | AL INFORMATION |
| CHEMICAL NAME GRUN Warding Solvent | WASTE |
| COMMON NAME GUN Washing Solven | 9 An EHS Chemical Yes X No 12 |
| CAS# 10 FIRE CODE HAZ ARD CLASSES (supplie | TLA 18 |
| TYPE (Check one item only) a. PURE b. MIXTURE c. WASTE | 14 RADIOACTIVE Yes No 15 CURIES 16 |
| PHYSICAL STATE (Check one item only) | FED HAZARD A. FIRE D. REACTIVE C. PRESSURE RELEASE 18 |
| | d. ACUTE HEALTH |
| AVERAGE DAILY AMOUNT 30 | ANNUAL WASTE AMOUNT C 21 STATE WASTE CODE 22 |
| UNITS a. GALLONS b. CUBIC FEET 23 DAYS ON SITE c. POUNDS d. TONS | 24 LARGEST CONTAINER 25 |
| *If EHS, amount must be in pounds. | 365 |
| STORAGE CONTAINER Check all that apply) a. ABOVEGROUND TANK e. PLASTIC DRUM b. UNDERGROUND TANK f. NONMETALLIC DRU | ☐ i. VAT ☐ m CYLINDER ☐ q. TANK WAGON 26 M ☐ I. FIBER DRUM ☐ n. GLASS CONTAINER ☐ r. RAIL CAR |
| ☐ c. TANK INSIDE BLDG ☐ g. METAL CONTAINER ☐ d STEEL DRUM ☐ h. CARBOY | ☐ I. BAG(S) ☐ 0 PLASTIC CONTAINER ☐ S. TOTE BIN ☐ I. BOX(S) ☐ p. IN MACH OR EQUIP ☐ t. OTHER |
| STORAGE PRESSURE | |
| STORAGE TEMPERATURE | |
| %WT HAZARDOUS COMPONENT (For mixtur | e or waste only) EHS CAS # |
| 1 29 Toluene | 30 \square Yes \square No 31 $ 08 - 88 - 2 $ 32 |
| 2 29 Acetone | \square Yes \square No \square 67 - \square 32 |
| 3 29 Laeguer Diluent | 30 Yes XNo 31 64742-89-832 |
| 4 29 Methyl Aleohol | 30 Yes \$1.00 31 (7 <1 -1 32 |
| 5 29 | 30 |
| If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% | |
| PLACARDING | SINFORMATION |
| UNDOT# 110 1263 | NFPA 704 HAZARD DIAMOND |
| Refer to shipping papers or MSDS | FIRE (RED) REACTIVE |
| DOT HAZARD CLASS <u>Flammable Liquic</u> | HEALTH → 3 Or ← (YELLOW) |
| EPCRA 口YES XINO | SPECIAL WHITE OX/M 37 |
| | 35 |
| X | MAKE AS MANY COPIES OF CHEMICAL |
| Li ONA, i lease sign Here | 36 INVENTORY FORM AS NEEDED |



| ADD | DELETE | REVISED 1 | | | | | Page | of | Production | _ : |
|---------------------------------------|---|---|------------------------|-------------|------------------|------------------------------------|------------------------|--|------------|-----|
| FACILITY ID# 3 0 0 | 3 5 | 38 BUSII | NESS NAME | RPI | n Ele | ectric | Mo | ्रिकाड | INC. | |
| NEW TENE | | I. FACILI | TY INFORMA | ATION | | | | | | |
| CHEMICAL LOCATION | Penter of | Sho | P | | | | | | | 4 |
| CONFIDENTIAL LOCATION EPCRA | Yes | No 5 MAP# | , | | 6 | GRID# | G | 4 | | 7 |
| | | II. CHEMIC | CAL INFORM | ATION | | | | | | |
| CHEMICAL NAME A CE | tylene - C | 249 | WA | ASTE _ | Yes 8 | | | Yes | ⊠ No | 11 |
| COMMON NAME | ylene | | L, | | 9 | | CRA see ins hemical | Yes | ₩ No | 12 |
| CAS# | | ZARD CLASSES (supplie | ed by GGFD) | -104 | 0 | V | "Yes", all am | ounts must be | LBS | 13 |
| TYPE (Check one item only) | PURE THE WATER | | | ACTIVE | | | | | | |
| PHYSICAL STATE a. | | C. WASTE | FED HAZARD | T | | No 1 | | | | 16 |
| (Check one item only) | | (c. GAS 17 | CATEGORIES | a. FIF | RE L b. | REACTIVE | _ | RESSURE RE | | 18 |
| AVERAGE DAILY 10 FT | 3 19 MAXIMUM DAILY AMOUNT | 2,500 fr3 | 20 ANNUAL WAS | STE AMOUNT | • | 21 STA | TE WASTE | CODE | | 22 |
| UNITS a. GALLONS c. POUNDS | b. CUBIC FEET 23 | DAYS ON SITE | - 0 - | | 24 LAF | RGEST CONT | | 0. | , | 25 |
| *If EHS, amount must be | in pounds. | | 365 | | | | 20 | Ylino | ter. | |
| (Check all that apply) | D. UNDERGROUND TANK C. TANK INSIDE BLDG | e. PLASTIC DRUM f. NONMETALLIC DRU g. METAL CONTAINER | R BAG(| S) | _ | NDER SS CONTAINI TIC CONTAIN | R 🔲 | q. TANK WA r. RAIL CAR s. TOTE BIN | | 26 |
| STORAGE PRESSURE | STEEL DRUM | h. CARBOY | ☐ I. BOX(| | | ACH OR EQU | IP 🗌 | t. OTHER | | |
| STORAGE TEMPERATURE | a. AMBIENT | b. ABOVE | | | BELOW AMBI | | | | | 27 |
| %WT | HAZARDOUS COMPO | | | | BELOW AMBI | EHS | d. CR | VER XIVE II | 0.4 | 28 |
| | \ | or and the second | re or waste only | 30 | ☐ Yes | | 31 - | CA | » # | |
| 2 29 | Acetylone | | | | ☐ Yes | No No | | 14 - 86 |)-2 | 32 |
| 3 29 | | · | | | Yes | □ No | 31 | | | 32 |
| 4 29 | | · · · · · · · · · · · · · · · · · · · | | | ☐ Yes | □ No | | | | 32 |
| 5 29 | | 2 | | | Yes | □ No | 31 | *************************************** | | 32 |
| If more hazardous components are pres | ent at greater than 1% by weight if | non-carcinogenic, or 0.19 | % by weight if carcin | | | □ No | 31 | reguland Inform | totlon | 32 |
| | | PLACARDIN | | | | or paper o | splaing are i | equired intolli | auoji, | |
| 1() #TODNL | 1 100 1 | | | Γ | NEO | A 704 HAZ | ADD DIA | | | |
| | er to shipping papers or | MSDS | - ³³ | ľ | | (RED) | ARD DIAI | MOND | | |
| OOT HAZARD CLASS _ | Refer to shipping par | nova or MCDC | 34 | | HEALTH (BLUE) | +0 | 2 | REACTIVE | | |
| EPCRA □ YES 🕵 NO | voice to suithfuld bat | DEIS OF IMISTIZ | 35 | | SPEC HAZA | | OX. | | | |
| x | | | 47945 | 1.7 A 1.2 P | | IV 005:- | 00-5 | | | |
| | PCRA, Please Sign H | ere | 36 | | VENTOR | | | HEMICAL DED | | |



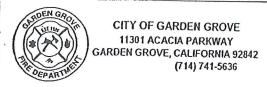
| ADD | DELETE REVIS | ED 1 | | | Page | e o | f |
|--------------------------------------|--|-----------------------------|-------------|---------------------|----------------------------|-----------------------|---------|
| FACILITY ID# 3 0 | 0 3 5 | BUSINESS NAME | Q.P.M | T-P-A | Taie M | lo Tors | TAIR |
| | l. | | MATION | · Cust | into in | 10 1012 | TNO. |
| CHEMICAL LOCATION | Center Work | Shap. | | | | | |
| CONFIDENTIAL LOCATION EPCRA | Yes No 5 | | 1 | 6 | GRID# | 0.1 | |
| EFGRA | STRANKER WEST WARREN FOR THE PARTY OF THE PA | I HEMICAL INFOI | I MATION | | | G4 | |
| CHEMICAL NAME | | | | Yes 8 | TRADE SECRE | т П., | ``\``` |
| COMMON NAME |)Xygen | | | | | Yes ee instructions | [∑ No 1 |
| \Box | Xugen | | | 9 | An EHS Chemica | L les | ☑ No 12 |
| CAS# 7782- | 10 FIRE CODE HAZARD CLASSE | S (supplied by GGFD) | OVI | Dize | | all amounts must be | LBS 13 |
| 12.1.22 | | WASTE 14 RA | DIOACTIVE | | | URIES | 16 |
| PHYSICAL STATE (Check one item only) | a. SOLID Db. LIQUID 🔀 c. GAS | 17 FED HAZAR CATEGORIE | | | | c. PRESSURE RI | |
| | | | | ACUTE HEALTH | | e. CHRONIC HEA | |
| AVERAGE DAILY 3 | F#3 19 MAXIMUM DAILY 8 | 20 ANNUAL | WASTE AMOU | NT O | 21 STATE WA | ASTE CODE | 22 |
| UNITS a. GALLONS c. POUNDS | b. CUBIC FEET 23 DAYS ON S | 711 | | 24 LARG | GEST CONTAINER | <u> </u> | 25 |
| *If EHS, amount mus | t be in pounds. | 365 | | | ***** | | |
| (Check all that apply) | b. UNDERGROUND TANK f. NONMETAL | LIC DRUM | BER DRUM | | CONTAINER | ☐ q. TANK WA | |
| | ☐ c. TANK INSIDE BLDG ☐ g. METAL CO ☐ h. CARBOY | NTAINER I. B. | | o Plasti | C CONTAINER CH OR EQUIP | s. TOTE BIN | |
| STORAGE TEMPERATURE | | . ABOVE AMBIENT | | . BELOW AMBIEN | IT | | 27 |
| %WT | | . ABOVE AMBIENT | | . BELOW AMBIEN | т 🗆 а | . CRYOGENIC | 28 |
| 1 9 9 29 | HAZARDOUS COMPONENT (Fo | r mixture or waste o | nly) | E | HS | CA | S# |
| 2 29 | Oxygen, Compre | ssed | 30 | ☐ Yes | X No 31 | 7782. | 44-732 |
| 3 29 | 1 | | 30 | | ☐ No 31 | | 32 |
| 4 29 | | | 30 | ☐ Yes [| ☐ No 31 | | 32 |
| 5 29 | | | 30 | ☐ Yes [| ☐ No 31 | | 32 |
| | present at greater than 1% by weight if non-carcinogen. | ic. or 0.1% by weight if an | 30 | ☐ Yes [|] No 31 | | 32 |
| | PLACA | RDING INFORM | ATION | cn additional sheet | s of paper capturing | g the required inforn | iation. |
| UNDOT# | JN 1072 | | Γ | NEOA | 7041147400 | DIAMOND | |
| R | JN 1072 efer to shipping papers or MSDS | 33 | | FIRE (R | 704 HAZARD ED) | DIAMOND | . |
| OOT HAZARD CLASS | 2,2 | 34 | | HEALTH | 0 X 0 | REACTIVE (YELLÓW | |
| | Refer to shipping papers or MSI | DS | | (BLUE) SPECIA | | , WHITE | , |
| EPCRA DYES DAN | 0 | 35 | .[_ | HAZAR | | OX/W 3 | |
| х | 4 | | MAK | E AS MANY | COPIES OF | - CHEMICAL | |
| | FEPCRA, Please Sign Here | 36 | | | FORM AS N | | |



| T. A. | | | | |
|--|--|----------------------|---|--|
| ☐ ADD | DELETE REVISED 1 | | Pag | e of |
| FACILITY ID# 3 0 0 | 38 BUS | INESS NAME RPI | VI Electric N | loTors INC. |
| | I. FACIL | ITY INFORMATION | 1 Ocemer | 1010 -1100 |
| CHEMICAL LOCATION | hear of Shop | | | |
| CONFIDENTIAL LOCATION EPCRA | ☐ Yes No 5 MAP | # 1 | 6 GRID# | I2 7 |
| 学 人名英格兰 | II. CHEM | CAL INFORMATION | | 200 |
| CHEMICAL NAME | N | WASTE | Yes 8 TRADE SECRE | T ☐ Yes ☒ No 11 |
| COMMON NAME | | | 9 An EHS Chemic | see instructions cal ☐ Yes 🖾 No 12 |
| CAS# | 10 FIRE CODE HAZARD CLASSES (supp | ied by GGFD) | *If EHS is *Yes* | , all amounts must be LBS |
| TYPE (Check one item only) | PURE D. MIXTURE . c. WASTE | = 14 RADIOACTIVE | Yes X No 15 | CURIES 16 |
| PHYSICAL STATE (Check one item only) | SOLID (2) b. LIQUID (c. GAS 17 | FED HAZARD Da | | c. PRESSURE RELEASE 18 |
| (Check one tiem only) | | CATEGORIES | | e. CHRONIC HEALTH |
| AVERAGE DAILY 10 | 19 MAXIMUM DAILY 20 | 20 ANNUAL WASTE AMOL | JNT O 21 STATE W | ASTE CODE 22 |
| UNITS a. GALLONS c. POUNDS | b. CUBIC FEET 23 DAYS ON SITE | ~ C C | 24 LARGEST CONTAINE | R 25 |
| *If EHS, amount must be | | 565 | | 15 gul |
| (Check all that apply) | a. ABOVEGROUND TANK D. UNDERGROUND TANK D. TANK INSIDE BLDG G. METAL CONTAINE g. METAL CONTAINE | R 🔲 I. BAG(S) | ☐ m CYLINDER ☐ n. GLASS CONTAINER ☐ o PLASTIC CONTAINER | ☐ q. TANK WAGON 26 ☐ r. RAIL CAR ☐ s. TOTE BIN |
| STORAGE PRESSURE | STEEL DRUM . CARBOY | I. BOX(S) | p. IN MACH OR EQUIP | t. OTHER |
| STORAGE TEMPERATURE | | | c. BELOW AMBIENT | 27 |
| %WT | HAZARDOUS COMPONENT (For mixt | | EHS | d. CRYOGENIC 28 CAS # |
| 1 29 | | 30 | ☐ Yes ☐ No 31 | 32 |
| 2 29 | | 30 | ☐ Yes ☐ No 31 | 32 |
| 3 29 | The state of the s | 30 | ☐ Yes ☐ No 31 | 32 |
| 4 29 | and the second | 30 | ☐ Yes ☐ No 31 | 32 |
| 5 29 | | 30 | ☐ Yes ☐ No 31 | 32 |
| If more hazardous components are pres | ent at greater than 1% by weight if non-carcinogenic, or 0.7 | | | |
| | PLACARDIN | IG INFORMATION | | |
| UNDOT# | i i | _ 33 | NFPA 704 HAZARD | DIAMOND |
| | er to shipping papers or MSDS | | FIRE (RED) | REACTIVE |
| DOT HAZARD CLASS | RESIN SOLUTION Refer to shipping papers or MSDS | 34 | HEALTH (BLUE) | (YELLOW) |
| EPCRA YES NO | Present to Grindhand hahers of MODO | | SPECIAL HAZARD | WHITE OX/W. 27 |
| ************************************** | | 35 | | |
| X | PCRA, Please Sign Here | | CE AS MANY COPIES O INVENTORY FORM AS | |
| | | | | |



| | CPART | | | | | | | | | | | | | | |
|-----------|-------------------------------------|------------------------|--------------------|---------------|-----------------------------|-------------|---------------------------|------------|---------------|---------------------|---|---------------|----------------------------|--------|-----|
| | | ADD | DE | LETE | X REVISE | D 1 | | | | | ı | Page | of | | |
| | FACILITY ID# 3 | 0 0 | 3 5 | TII | 38 | BUSIN | ESS NAME | ρΩ | 111 | 100 | 70' A | 7014 | E-00 = | T 110 | |
| | | 3876 | | | l. F | ACILI | TY INFO | RMATION | IM G | uci | MIC | MINI | TORS : | LNU | 0 |
| Ī | CHEMICAL LOCATIO | | - h | | | | | | | | | | | | |
| - | | On. | t Sidi | E E | east | | | | | | | | | | |
| | CONFIDENTIAL LOC EPCRA | ATION | | Yes | No 5 | MAP# | | l | | 6 (| GRID# | k | 7 | | - |
| | | | | | II. CI | HEMIC | AL INFO | RMATIO | N | | | | | | |
| | CHEMICAL NAME | 111 | este | Oi | 1 | | | WASTE | Yes | 8 7 | RADE SE | CRET | Yes | Mo ⊠ | 11 |
| F | COMMON NAME | 2.0 | | | | | | | | 9 ^ | | RA see in | structions | | |
| | | W | aste | or i | | | | | | 1 ^ | n EHS Ch | | Yes | ⊠ No | 12 |
| 1 | CAS#647 | 42-5 | 74-10 FIR | E CODE HA | ZARD CLASSES | S (supplied | by GGFD) | CN | MBU. | | | (CO , UII UI) | nounts must be | 100 | 13 |
| 1 | TYPE (Check one item onl | y) a. Pl | JRE b. | MIXTURE | ⊠ c. | WASTE | 14 R | ADIOACTIVE | Yes | N 🔯 | | CURIE | S | | 16 |
| | PHYSICAL STATE Check one item only) | a. So | DLID 🔀 b. | LIQUID | C. GAS | 17 | FED HAZAI | RD a | | □ b. RE/ | | Пс | PRESSURE RE | I EASE | 18 |
| Ľ | oneth one Rem Only) | 8 | | | | | CATEGORI | E3 / | ACUTE HE | | | _ | CHRONIC HEA | | |
| | VERAGE DAILY MOUNT | 2 gal | 19 MAXIMU AMOUN | JM DAILY T | 50 9 | al 20 | ANNUAL | | | | STAT | | CODE OL | 1 77 | 22 |
| U | NITS 🔊 a. GAL | LONS [| b. CUBIC FEET | | DAYS ON SI | | | | 75 Q | LARGES | T CONTA | | 261 | . // | 25 |
| L | e. POU | NDS ount must be in | d. TONS pounds, | | | - | 364 | | | | ., | | gol. | | 23 |
| | TORAGE CONTAINER | | ABOVEGROUND T | | e. PLASTIC D | | ☐ i. \ | | | CYLINDE | | | q. TANK WA | GON | 26 |
| - | | C. ¬ | FANK INSIDE BLD | G 🔲 | f. NONMETAL g. METAL COM | NTAINER | [] I. E | | ∐ n. | GLASS CO | ONTAINEF CONTAINE | R | r. RAIL CAR s. TOTE BIN | | |
| ST | ORAGE PRESSURE | 1 1/4(0) | a. AMBIEN | | h. CARBOY | | I. E | | | IN MACH | OR EQUIP | | t. OTHER | | |
| ST | ORAGE TEMPERATU | JRE | a. AMBIEN | | | | AMBIENT AMBIENT | | c. BELOW | | | | | | 27 |
| | %WT | 60 | AZARDOUS | | | | | | c. BELOW | | 10 mg | d. CR | YOGENIC | | 28 |
| 1 | 29 | 0 | 1 1 | | ~ | 1 1 | - L | 30 | | EHS | | | CA | | |
| 2 | 29 | Pe | elno bei | sm | <u> </u> | 116 | Wes. | | ☐ Yes | | | | 04742 | -54- | /32 |
| 3 | 29 | | | | | | | 30 | ☐ Yes | | | 31 | | | 32 |
| 4 | 29 | | | | | | | 30 | ☐ Yes | <u> </u> | No 3 | 11 | | | 32 |
| - | | | | | | | | 30 | ☐Yes | | No 3 | 1 | | | 32 |
| 5 If m | 29 | ants are process | | | | | | 30 | ☐ Yes | 1 | | | | | 32 |
| | ore hazardous compon | ents are present | at greater than 1% | by weight if | | | by weight if ca INFORN | | tach addition | al sheets of | paper cap | turing the | required inform | ation. | |
| | | Dr | 1 107 | | B CLASA | Monito | | IATION | | | | | | | |
| UN | IDOT# | | $\sqrt{127}$ | | MCDC | | 33 | | | NFPA 70 IRE (RED | | RD DIA | MOND | | |
| | ~ | | o ompping p | apers or | MODO | | | | HEAL. | | | λ | REACTIVE | | |
| DC | T HAZARD CL | | Refer to ship | ping pan | ere or Mer | 18 | 34 | | (BLUE | = - | $^{\uparrow}$ X | V | (YELLOW |) . | |
| ΕP | CRA □ YES | Øио | 10 0/11p | ring pap | OF WICE | 0 | .12 | | F | PECIAL IAZARD | | OX OX | | , | |
| | | が | | | | | 35 | | | | | | | | |
| | х | lf FPi | CRA, Please | Sign II. | 0.50 | | 36 | MA | | | | | HEMICAL | | |
| | | 27 1427 | , i icase | Jigii He | ei e | | 50 | | INVENT | ORY F | ORM A | S NEE | DED | | |



CUPA

BUSINESS ACTIVITIES

| . FACILITY | PageJ of | |
|--|--|----------|
| | TY IDENTIFICATION 1. EPA ID # (Hazardous Waste Only) | |
| FACILITY ID# 3 0 5 0 3 5 | CAL 000 0 26 177 | 2. |
| BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Busine | ss As) | 3. |
| RM Electric. | | Ο. |
| | ITIES DECLARATION | er kicht |
| A COUNTY OF THE PROPERTY AND A COUNTY OF THE PROPERTY OF THE P | YES to any part of this list, | |
| please submit the Business | Owner/Operator Identification page. | |
| Does your facility | | |
| A. HAZARDOUS MATERIALS | If Yes, please complete these pages of the UPCF | |
| Have on site (for any purpose) hazardous materials at or above 5 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 ubstance specified in 40 CFR Part 355, Appendix A or B; or handly radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70? | CHEMICAL DESCRIPTION (Form 3) | |
| B. UNDERGROUND STORAGE TANKS (USTs) | | \dashv |
| Own or operate underground storage tanks? | YES NO 5. ✓ UST FACILITY (Formerly SWRCB Form A) | |
| 2. Intent to upgrade existing or install new USTs? | ✓ UST TANK (one page per tank) (Formerly Form B) YES NO 6. ✓ UST FACILITY | |
| · | ✓ UST TANK (one per tank) | 1 |
| | ✓ UST INSTALLATION - CERTIFICATE OF | + |
| | COMPLIANCE (one page per tank) (Formerly Form C) | 1 |
| Need to report closing a UST? ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs) | YES NO 7. J UST TANK (closure portion-one page per tank) | 1 |
| Own or operate ASTs above these thresholds: | | 7 |
| any tank capacity is greater than 660 gallons, or the total aggregate capacity for the entire facility (ASTs, drums and | YES NO 8. NO FORM REQUIRED TO CUPAS | |
| portable containers) greater than 1,320 gallons? HAZARDOUS WASTE | | ŀ |
| Generate hazardous waste? | YES ☐ NO 9. ✓ EPA ID NUMBER - provide at the top of this page | |
| Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)? | YES NO 10. ✓ RECYCLABLE MATERIALS REPORT (one per recycler) | |
| Treat hazardous waste on site? | ☐ YES ☐ NO 11. ✓ ONSITE HAZARDOUS WASTE | |
| | TREATMENT - FACILITY | |
| | (Formerly DTSC Forms 1772) | ı |
| | ✓ ONSITE HAZARDOUS WASTE | |
| | TREATMENT - UNIT (one page per unit) | |
| Treatment subject to financial assurance requirements (for Permit by | (Formerly DTSC Forms 1772A,B,C,D and L) ☐ YES NO 12. ✓ CERTIFICATION OF FINANCIAL | |
| Rule and Condition Authorization)? | ASSURANCE (Formerly DTSC Form 1232) | |
| Consolidate hazardous waste generated at a remove site? | YES NO 13. REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC | |
| Need to report the closure/removal of a tank that was classified waste and cleaned onsite? | YES MNO 14. ✓ HAZARDOUS WASTE TANK CLOSURE | |
| LOCAL REQUIREMENTS | CERTIFICATION (Formerly DTSC Form 1249) | |
| occuapier 6.95, Article 2, §25531 et seq | YES (NO 15. ✓ REGULATED SUBSTANCE REPORTING FORM (Orange County CUPA) | |
| Stationary Source with more than a Threshold Quantity of a Regulated Substance in a Process | | |



11225 Mulberry Ave., Fontana, CA 92337 CAR000148296

| WORK ORDER / INVOICE | | | | | |
|----------------------|-----------|--|--|--|--|
| Date | Order No. | | | | |
| 3/18/10 | 1348 | | | | |

| | | | 2/10 | 1,0 | |
|--------|--|--|----------------|-----------|-------------------|
| | BILL TORPM FLOOR-Tric | <u>PICK UP LOC</u> ATION | | McCor | solidated Manifes |
| | 11352 Wortminster Ave. | | | • | |
| | Garden Grove. (A 92683 | | | | |
| | Contact: Po Q | Contact: | | | 1, |
| | Phone: 714-638-4174 Fax: | Phone: | Cell: | | |
| | E-Mall: | EPA#: CAL COM | | | **** |
| | P.O. # Terms Pop | | 0261 | 7 [| |
| | P.O. # Terms | Manifest # (5058480) | ON le | ofile# | - |
| | DESCRIPTION | 712 711 1100 | Qiv. | RATE | AIVOUNT |
| | Non-Rcra Hazardous Waste, Liquids (Waste Oil, CA 221): | or Olms | | - | |
| | Milli-rieeze, CA 134); | O The state of the | | | - |
| | Used Oil Filters: | | | | |
| ÷. | .Non-Hazardous Waste: Sollds / Liquids / Clarifler | | | | - |
| : | Non-Rcra Hazardous Waste: Solids / Llqulds | | - | | |
| | RQ Hazardous Waste: Solids / Liquids | | - | | |
| | Supplies: Drums: 85 gal. / 55 gal. / 30 gal. / 5 gal. / Bln Liner Size: 20 Cu. Yd / | | - | • | |
| : | 40 Cu. Yd / Cu. Yd. Box / Cu. Yd. Super Sack Transportation Charges: 1208 / 70B / Van / Roll Off / Box Van | | | | |
| . | Transportation: On Site Tirne: | Stop: | | | |
| 1 | Empty Drum Removal / Solid SurCharge | Stop: | # 966 | 2 | |
| , | Tanker Washout / Lab Analysis | | | | |
| 5 | 1 y' | | | | |
| N | Technician: Start: | Stop; | | • • | |
| | Roll Off Bin Rental: 20 Cu. Yd. / 40 Cu. Yd. Serial #: Start Date: | Stop Date: | | | |
| | Labels: Hazardous / Non-Hazardous / DOT: | Stop Date; | | | |
| 1 | Other: Dorwiel Charal | | | - | |
| _ | American Oil Company II at Seller | | Energy St | rcharge | 85 |
| | 13740 Saticoy St. 15131 E. Clark Ave. 3650 E. 26 th St. 62-150 C | rn Environmental FI S.R.E.S. Senu Welmas Dr. 11225 Mulberry Av | e. (2) | 010 | 10.00 |
| 1 | EPA #CAD981427669 EPA #CAL000097432 EPA #CAT080033681 EPA #CA | CA 92254 Fontana, CA 9233 R000157206 EPA# CAR00014829 | 96 | | |
| | 180 W. Monte Ave. 1610 W. 17 th St. 1925 S, Factor Ave. 5375 | ns Water Tech. [] P.C.I. 5. Boyle Ave. 4343 Kennedy Ave. | Total | | 95, 20 |
| | EPA #CAD982444481 EPA #CAD028409019 EPA #AZR000501510 EPA r | 1881es, CA 90023 East Chicago, IN 4631: CAD097030993 IND000646943 | 1 | | |
| Not | 65: ADVANTED FOR PONTONHONIA 1357 | a Wilnuftiram au | e Ford | +(`,) &\\ | Calif |
| Past | due involces are subject to an 18% per your or 1.5% per month Interest rate. It is the responsible | | | | |
| In cal | the state of the first of the f | may be alle weste unnorator to correct. Id | 16 . ala a ala | | |

It is the responsibility in the waste generator to correctly identify the chemical composition of each pickup. If material series 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 aconomically practicable. To comply with the program of used oil, but that is not required to comply with the more stringent requirements applicable to the degree determined by generator to be aconomically practicable.

per California Habith and Salety Code Section 25290.9, Starlite hereby advises customer that customer's shipment of used oil must be transported to a facility that is required to comply with federal name or process used oil are required to meet those 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. California facilities that leak detection and provention 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 compily only with federal used oil management standards and not these more stringent requirements. This notification is for information purpose only.

Driver: XIMI Cocking

Date:3-19-10

Generator:

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.

| Agency Garden Grove Fire Department, Police, Paramedics Office of Emergency Services (OES) | Phone Numbers 911 |
|--|-------------------------------------|
| National Response Center | (800) 852-7550 or (916) 427-4341 |
| Madorial 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. | |
| | b. | Diking areas to contain spills. |
| | C. | Storage on paved ground. |
| 2. | Compre | essed 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.

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

6. A 100% increase in the quantity of a previously disclosed hazardous material.

| | inventory, material safety data sheets and site maps, for review by Fire Departmen personnel. State where your disclosure and Emergency Business Plan will be kept. |
|-----|---|
| T | Jan |
| | |
| L | |
| | Show location on site map also using symbol in the legend. |
| Ī | 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 rue and correct to the best of my knowledge. |
| | Signature: Le llu phon |
| | Name: PH AW |
| | Title: Secretary |
| | Date: |
| HAZ | Z BUS DISCL SHORT VER |



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.

| Site Address: 11351 WESTMINSTER AVE. Zip Code: 92843 |
|---|
| The California Health & Safety Code, Division 20, Chapter 6.95, Section 25505(c) and Section 25503.3(c) provide following: |
| A business that handles hazardous materials shall review AND certify their Hazardous Materials Busine Emergency Plan (HMBEP) once every three years from the date of acceptance by the Garden Grove Fi Department. A business may comply with the annual chemical inventory reporting requirement by submitting certification statement to the Garden Grove Fire Department. A business may not utilize this certification to methe 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 both of the following apply: |
| The business has previously filed an inventory reporting form and; 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 mos 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 c hanges 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 what |
| Job Title Office Manager Date 06/26/07 |
| Fire Department InspectorM. KOR DICH ID# |
| White Copy – Return to Garden Grove Fire Department HMBEP certification. doc Yellow Copy – Retain for Business Records |



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 WEST MINSTER AUF | Date: <u>06-26-07</u> File No: 213 |
|--|---|
| Occupant or DBA: RPM ELECTRIC MOTORS INC. Owner/Manager: WAT MAI | / ne no |
| | Phone: (714) (638-417 |
| California Health and Safety Code, Section 6.95, you are required to properly complete required to return the BEP packet, Hazardous Materials Disclosure Forms, and all | |
| required to return the BEP packet, Hazardous Materials Disclosure Forms, and all Garden Grove Fire Department. HazMat Coord. (714) 741-5636 | material safety data sheets within fifteen (15) days to the |
| An inspection at the above location/occupancy revealed the following viola | |
| Violation(s): CA Health and Safety Code Chapter 6.05 Agriculture | tion(s): |
| Violation(s): CA Health and Safety Code Chapter 6.95, Article 1 and Title 19, §272 Complete Hazardous Materials Disclosure packet, HSC Chapter 6.95, Title 19 Div 2 Ch Failure to submit a Business Emergency Plan, (HSC 25505(a)44), 655, and 655, a | 9 et seq., California Code of Regulations (CCR) |
| Failure to submit a Business Emergency Plan. [HSC 25505(a)(1)]; CFC 8001.3.2 | apter 3, CFC 8001.3.2 |
| Chemical inventory is incomplete and/or required and/or required the fitting and the fitting a | o)&(c)] |
| The Emergency Response Plan is inadequate and/or does not address the following in Notification Procedures | issues and all the source |
| Notification Procedures | issues and snall be immediately revised and resubmitted: |
| ☐ Mitigation Procedures | |
| Evacuation Procedures | |
| ☐ Employee Training ☐ Business Owner/Operator page is in a control. | • |
| 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] Site Map is incomplete or insufficient. [HSC 25509] | |
| | 9(a)(7)] |
| Hallure to report a release or threatened release. TUCO assess | |
| 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 | g event(s): [HSC 25510] |
| Addition of a previously undisclosed material | |
| ☐ Change in business address ☐ Change in business ownership | 9 |
| ☐ Change of business name | - |
| Other (See comments below): | |
| Violation(s): California Fire Code 2001, Articles 79 & 80, Title 19 Part 9, California Cod | de of Regulations (COD) |
| | 3.3) |
| Provide spill control for hazardous materials liquids and solids (CFC 8003.1. Provide approved cabinet if more than 10 gallons of flammable liquids (CFC 7902.5) Provide placarding and signs (NEDA 704.050 styles of the placarding and solids (CFC 7902.5) | |
| | |
| | |
| Additional Violations and/or Notes: | |
| | |
| | |
| | |
| | |
| Responsible Party: | |
| Re-inspecti | ion Date: |
| The above are violations of California law and require immediate correction. Failure to c | orrect violations is subject to civil penalties. |
| ID# | 33 ₀ 7 |
| Condition Upon Re-inspection: | |
| | Date: |
| F5-4308.doc (05/06) | |

GARDEN GROVE



FIRE DEPARTMENT

HAZARDOUS MATERIALS DISCLOSURE PROGRAM

REPORTING FORMS PACKET PART 1

| FOR OFFICIAL USE ONLY | |
|-----------------------------------|------|
| APPROVED BY: DATE: 1/25/200 | ح. |
| NEW BUSINESS EXISTING X UPDATE X | |
| FEE: 1 2 3 4 5 6 | |
| OWNERSHIP CHANGE | |
| ADDRESS CHANGE: | |
| TIER II FAC: CON: BUS LIST: PICK: | 40:X |
| | |

CORDEN GROZA

CITY OF GARDEN GROVE, FIRE DEPARTMENT

11301 ACACIA PARKWAY, GARDEN GROVE, CALIFORNIA 92842 (714) 741-5600 (714) 741-5636 HAZARDOUS MATERIALS BUSINESS INFORMATION FORM

| DEPARTME | BUSINESS INFORMATION 2722 (3) Page 1 of | |
|--|--|--|
| FACILITY# 3 0 0 3 5 | BEGINNING DATE (1) ENDING DATE (2) 12/31/01 | |
| BUSINESS NAME (4) RPM Elect: | ric Motors BUSINESS PHONE (5) (714)638-4174 | |
| SITE ADDRESS (6) 11352 Wes | | |
| CITY (7) GARDEN GROV | /E STATE (8) CA ZIP (9) 92843 | |
| | 7671 CDR SIC CODE (4 DIGIT #) (11) 7629 | |
| COUNTY ORANGE | | |
| OPERATOR NAME (12) Bon Pham | OPERATOR PHONE (13) | |
| BL | JSINESS OWNER INFORMATION | |
| OWNER NAME (14) Bon Pham | OWNER PHONE (15) (714) 590-1465 | |
| OWNER MAILING ADDRESS (16) | 3981 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 We | estminster | |
| CITY (23) Garden Grove | STATE (24) CA ZIP (25) 92843 | |
| Primary | EMERGENCY CONTACTS Secondary | |
| NAME (26) Bon Pham | NAME (31) Nancy/David Lee | |
| Don Than | Nancy/David Lee | |
| TITLE (27) owner | TITLE (32) Nancy/David Lee (in-laws) | |
| TITLE (27) owner BUSINESS PHONE (28) (714)638- | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 | |
| TITLE (27) | TITLE (32) (in-laws) BUSINESS PHONE (33) (714) 554-7245 24-HOUR PHONE (34) (714) 381-6694 (61) | |
| TITLE (27) | TITLE (32) (in-laws) BUSINESS PHONE (33) (714) 554-7245 24-HOUR PHONE (34) (714) 381-6984 (35) PAGER # (35) (714) 903-6775 (home) | |
| TITLE (27) | TITLE (32) (in-laws) BUSINESS PHONE (33) (714) 554-7245 24-HOUR PHONE (34) (714) 381-6984 (25) | |
| TITLE (27) | TITLE (32) (in-laws) BUSINESS PHONE (33) (714) 554-7245 24-HOUR PHONE (34) (714),381 6994 PAGER # (35) (714) 903-6775 (home) L LOCALLY COLLECTED INFORMATION | |
| TITLE (27) | TITLE (32) (in-laws) BUSINESS PHONE (33) (714) 554-7245 24-HOUR PHONE (34) (714) 381-6984 (35) PAGER # (35) (714) 903-6775 (home) | |
| Owner BUSINESS PHONE (28) (714)638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 483–8125 c (36) ADDITIONAL A. Type of Business Operation electric B. Hours of Business Operation 7:30 ar C. Total Number of Employees 10 | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER# (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday | |
| Owner BUSINESS PHONE (28) (714)638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 488–8125 co (36) ADDITIONAL A. Type of Business Operation electrical B. Hours of Business Operation 7:30 ar C. Total Number of Employees 10 D. Property Owner Name Ba Nguy | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER# (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address 11541 Westminster Avenue | |
| Owner BUSINESS PHONE (28) (714)638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 483–8125 c (36) ADDITIONAL A. Type of Business Operation electric B. Hours of Business Operation 7:30 ar C. Total Number of Employees 10 | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER# (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address 11541 Westminster Avenue | |
| Owner BUSINESS PHONE (28) (714) 638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 488–8125 c (36) ADDITIONAL A. Type of Business Operation electrical electric | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER# (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address 11541 Westminster Avenue | |
| Owner BUSINESS PHONE (28) (714) 638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 488–8125 c (36) ADDITIONAL A. Type of Business Operation electrical electric | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER # (35) LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address Address 11541 Westminster Avenue Garden Grove, CA 92843 duals responsible for obtaining the information, I certify under penalty of law that I have remation submitted and believe the information is true, accurate, and complete. DATE (38) SIGNATURE OF DOCUMENT PREPARED (41) | |
| Owner BUSINESS PHONE (28) (714)638– 24-HOUR PHONE (29) (714)590– PAGER # (30) (714)483–8125 of (36) A. Type of Business Operation electrical Phones of Business Operation 7:30 ard C. Total Number of Employees 10 D. Property Owner Name Ba Nguy E. Schools, hospitals within 1,000 ft. of business Operation: Based on my inquiry of those individual personally examined and am familiar with the information of the serion of th | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER # (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address Address 11541 Westminster Avenue ness property N M Garden Grove, CA 92843 duals responsible for obtaining the information, I certify under penalty of law that I have rmation submitted and believe the information is true, accurate, and complete. DATE (38) SIGNATURE OF DOCUMENT PREPARED (41) 12210 SIGNATURE OF DOCUMENT PREPARED (41) | |
| Owner BUSINESS PHONE (28) (714) 638– 24-HOUR PHONE (29) (714) 590 PAGER # (30) (714) 590 ADDITIONAL A. Type of Business Operation electr: B. Hours of Business Operation 7:30 ar C. Total Number of Employees 10 D. Property Owner Name Ba Nguy E. Schools, hospitals within 1,000 ft. of business Operation: Based on my inquiry of those individual personally examined and am familiar with the information of the control of the c | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER # (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address 11541 Westminster Avenue ness property Y N Garden Grove, CA 92843 duals responsible for obtaining the information, I certify under penalty of law that I have remain submitted and believe the information is true, accurate, and complete. DATE (38) SIGNATURE OF DOCUMENT PREPARER (41) NAME OF DOCUMENT PREPARER (print) (42) | |
| Owner BUSINESS PHONE (28) (714) 638– 24-HOUR PHONE (29) (714) 590 PAGER # (30) (714) 590 ADDITIONAL A. Type of Business Operation electr: B. Hours of Business Operation 7:30 ar C. Total Number of Employees 10 D. Property Owner Name Ba Nguy E. Schools, hospitals within 1,000 ft. of business Operation: Based on my inquiry of those individual personally examined and am familiar with the information of the control of the c | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER # (35) L LOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair m to 4:00pm Monday - Friday yen Address 11541 Westminster Avenue ness property Y N S Garden Grove, CA 92843 duals responsible for obtaining the information, I certify under penalty of law that I have rmation submitted and believe the information is true, accurate, and complete. DATE (38) SIGNATURE OF DOCUMENT PREPARER (print) (42) | |
| Owner BUSINESS PHONE (28) (714) 638– 24-HOUR PHONE (29) (714) 590– PAGER # (30) (714) 483–8125 of (36) A. Type of Business Operation electr: B. Hours of Business Operation 7:30 ard C. Total Number of Employees 10 D. Property Owner Name Ba Nguy E. Schools, hospitals within 1,000 ft. of busing the control of the control | TITLE (32) (in-laws) BUSINESS PHONE (33) (714)554-7245 24-HOUR PHONE (34) PAGER # (35) LLOCALLY COLLECTED INFORMATION ic apparatis sales, service & repair to 4:00pm Monday - Friday yen Address Address 11541 Westminster Avenue ness property N M Garden Grove, CA 92843 duals responsible for obtaining the information, I certify under penalty of law that I have remation submitted and believe the information is true, accurate, and complete. DATE (38) SIGNATURE OF DOCUMENT PREPARER (print) (42) NAME OF DOCUMENT PREPARER (print) (42) Greta L IoL | |

BUSINESS NAME

DESCRIPTION PAGE

RPM Electric Motors

FORM 3

| (1) 🛛 A[| DD QD | ELETE | REVISE |
|----------|-------|-------|--------|

CHEMICAL LOCATION

(3)

(2) PAGE__ OF

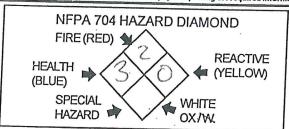
| CPAII! | CHEMICAL LOCATION (4) 11352 Westmiste | (5) CONFIDENTIAL LOCATION EPCRA DYES (3)NO |
|------------------------------|---|--|
| | MAP# (if more than one) (6) | GRID# (FROMMAP) (7) K4 |
| CHEMICAL NAME | (8) Safata Wi | 770478 |
| COMMON NAME | Safety-Kleen 105 Solvent (9) | TRADE SECRET (11) DYES ANO |
| CAS# | (10) Safety-Kleen | AN EHS CHEMICAL (12) ☐YES ■NO |
| FIRE CODE HAZARD CLASSES | (13) COMPOSTIBLE CT (36) FACILITYID# 3 | ALLAMOUNTS MUST BE LBS |
| TYPE | (14) OPURE CAMIXTURE OWASTE RADIOACTIVE | (15) QYES ONO CURIES |
| PHYSICAL STATE FED HAZARD | (17) OSOLID OXLIQUID OGAS LARGEST CO | NTAINER (21) 35 gal |
| CATEGORIES STATE WASTE | | DACUTE HEALTH DICHRONIC HEALTH |
| CODE | (19) UNITS (22) USAL UCUFT ULBS UTONS | MAX DAILY AMT (23) 35 |
| DAYSONSITE | (20) 365 *If EHS, amounts must be in lbs. | AVGDAILYAMT (24) 35 |
| STORAGE | QABOVE GROUND TANK QCAN DR | ANNUALWASTEAMT (25) |
| CONTAINER | (26) QUNDER GOUND TANK QCARBOY QC QTANK INSIDE BUILDING QSILO QG XOSTEEL DRUM | OX(S) UTANK WAGON YLINDER URAIL CAR LASS CONTAINER UTOTE BIN LASTIC CONTAINER U Other |
| PRESSURE STORAGE | TO A MOUTH TO THE TALLIC DRUM DBAG(S) DIN | MACHINERY OR EQUIP. |
| STORAGE | (27) AMBIENT DABOVEAMBIENT DBELOWAMBIEN | VT . |
| TEMPERATURE | (28) AMBIENT DABOVEAMBIENT DBELOWAMBIENT | DCRYOGENIC |
| (29) % WT | (30) HAZARDOUS COMPONETS | (31) EHS (32) CAS# |
| (1) | Petroleum Distillates, | QYES 10NO 64742-47-8 |
| (2) | Hydrotreated light | DYES DNO |
| (3) | Perchloroethylene | □YES ⊋NO 127-18-4 |
| (4) | | OYES ONO |
| (5) | | QYES QNO |
| (33) NFPA CLASSIFICATION | 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. |
| | | OF THE PARTY OF TH |

(33)

UN/DOT#. Refer to shipping papers or MSDS DOT HAZARD CLASS Refer to shipping papers or MSDS

(34) EPCRA □YES NO

(35) If EPCRA, Please Sign Here



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

5AFETY-KLEEN CORP. 777 Big Timber Rd. Elgin, IL 60123



IAN OZ Z

| IDENTITY (As Used on Lebel a | and List) | | Note: Flank see | A.A.A. starts on the second | | |
|--|--|--|--|--|--|--|
| Safety-Kleen 105 Solve | ot-MS #6617 | | Information | as ere not permit I is aveilable, the t | ted. If any item is r space must be mai | not applicable, of rked to indicate ti |
| Section I | | The state of the s | and formalish houses any agreement whitehold has | . B A A A A A A A. | A STATE OF THE PARTY OF THE PAR | |
| Manufacture 's Name | 1 | The Company of the Co | Emergency Tele | nhana Number | the - Audientical Statement Income 1 | Annual Section of Personal Per |
| Safety- een Corporatio | n | | \$12/697-8460 |) אויסיום ואניייספו | | |
| Add thes (Number, Street, City. | State, and ZIP Code) | Commence of the second | Telephone Numb | per for information | 11B-24 | |
| 777 Rig Timber Road | Management when the later on a second production of the later of | | 212/697-8460 | ; | | |
| Elgin, Illinois 60123 | | To be the bound | Date Prepared 0 Revised 05/2 | 9/13/86 6/87, 09/22/85 | 7, 10/06/88, 10 | 1/20/85 |
| | The second secon | - ryrkhod Historikasurr Joh Ar İs 😛 massasisin iştiri | Signature of Pre; | parer (optional) | 7 207 007 007 10 | 77 207 00 |
| Section II—Hazardous Ingr | edients/Identity Inf | formation | | - Andrewson | propriate and the second second second | |
| Hazairi. a Components (Specif | ic Chemical Identity, (| Common Name(s)) | OSHA PEL | ACGIH TLV | Other Limits Récommended | |
| Mineral Spirits | CAE No. 8032-3 | 2-4 | הקק 500 m | 100 ppm | N/A . | 99.9+ |
| Dye | M/A | | Unknown. | Unknown | unk. | 0.003 |
| Anti-Static Agent | N/A | | Unknown. | Unknown | 100 est. | l ppm |
| | | | | *************************************** | | |
| Million or a resolution of the state of the | | | The same of the sa | and the second s | of Landauminia of the own of the Contraction of the | CONTRACTOR OF THE PARTY OF THE |
| | - | | | The state of the s | AMA - er nga zi passati ankrejeni populači (Pilini prete Azio. "A. | · · · · · · · · · · · · · · · · · · · |
| | | | Service of the Property of the Parket of the | and the state of t | | |
| The state of the s | AND PERSONAL PROPERTY AND PERSONS ASSESSMENT OF PERSONS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT | -1404-00-00-4-A/ | | | | · · · · · · · · · · · · · · · · · · · |
| | 1 See - See | | | | | |
| | | | | | A STATE OF THE STA | |
| | | | · h | | ************************* | · |
| The state of the s | and the second s | | | The state of the last of the state of the st | | |
| The same of the sa | Name and Address of the Address of t | | alanta di Deputatori proprio della la supreggio proprio | | | , |
| Section III—Physical/Chemic | al Characteristics | And the second second second | | | | - |
| colling Point (°F) | | 310-400 | Specific Gravity (H | 20 m 1) | | 0.775~ |
| apor Pressure (mm Hg.) @ 68°F (20°C) | | 2 | Melting Point | | The state of the s | N/A |
| apor Density (AIR = 1) | | | Evaporation Rate | CANCELLO MAN PROPERTY. | THE RESIDENCE OF THE PARTY OF T | N/A |
| | | 4.9 | rabbiolion Late | (Toluene = | 11 | 0.2 |
| olupihty in Water | Andrewson of the second second | | | 170706116 4 | 4 / | 0.2 |
| Negligible. | | | VOC | | | 795g./L |
| ppearance and Odor | | International Company of the Company of the Company | TIME TO PARENT WAS ARREST TO THE PARENT OF T | PARA TORONTONIA PARA PROPERTURA POR LA CONTRACTOR DE LA C | | |
| Clear green liquid with c | haracteristic hyd | rocarbon oder. | | | | |
| ection IV—Fire and Explosi- | on Hazard Data | A Management of the | | | - Parlicina Hopping months of | 1/10/1/ |
| ash Point (Method Used) | | | lammable Limits | · | ILEL | TUEL |
| 105 °F TCC | | 1 | Tarringolo Circulo | | 0.7 | 5.0 |
| dinguishing Media | and the same of the same parties of the same of the sa | | | Andrew Co. Law Street Street, | | |
| Cay, foot, fry herical, | water (mist only) | | | | | |
| secial F E in the Protections | | | | The state of the s | | |
| None. | | | | | | |
| | | | | ALON DAMINING COMMISSION OF THE PERSON OF TH | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| us. Fand Expression Mazzin | دون د د د د د د د د د د د د د د د د د د | ******************* | | And the state of t | ************************************** | |
| NODE: | 3 | | | | | |
| Anter A | | | | | | |

| Stability | Unstable | | Conditions to Avoid | | ; | |
|---|--|-------------------|--|--|--|--------------|
| | Slable , | х | Heat, sparks, flame a | and fire. | | |
| Incompatability (Ma | | - | | A A | | |
| Strong oxidizi | ng acents. position or Byproduc | 10 | and the second s | *************************************** | | |
| | | | burning may yield carb | on monoxide. | | |
| Hazardous Polymerization | May Occur | | Conditions to Avoid | | | , |
| | Will Not Occur | х | A | | , | |
| Section VI-Hea | Ith Hazard Data | | | *** | | |
| Route(s) of Entry: | Inhalat Yes | | Skin Yes | | Ingestion? Yes. | |
| Health Hazards Ad | | P4 | | | Excessive inhalation can | |
| | | | | | | |
| cansa paggague | , disziness and | naus. | ea. Ingestion: mathin | I OI LECGI EL S | AGIIOFEUS | |
| | | | | | 00111 0 | |
| Carcinogenicity: | NTP? Not li | sted. | | Monographa? listed. | OSHA Regulated? No. | |
| | suspected carc. | inoge | 2. | | , t | |
| Signs and Symptom Drying of skin | | n, he | adache, dissiness, naus | ęą. | | |
| | | | | | | |
| Medical Conditions Generally Aggrevate | d by Exposure U | hnow | 3. | A A A A A A A A A A A A A A A A A A A | | |
| · · · · · · · · · · · · · · · · · · · | | | | A STATE OF THE STA | | |
| Emergency and Firs | i Aid Procedures | | | | The fresh air cource and | 1 |
| | | | | | n: Remove to fresh air source and | 4 |
| | | | NOT induce vomiting. C | all a physician | | |
| Section VII—Pred | | | | | | |
| Steps to Be Taken i | n Case Material is f ect for recovery | Release 7 28 9 | ed or Spilled soon as possible. Avoi | d exposure to a | parks, fire, flame, hot surface. | |
| | | ******** | - | | | |
| | | | | | | |
| Waste Disposal Met | họd | | | | · | |
| Dispose of in a | accordance with | сопра | any, local, state and for | ederal requiett | ens. | |
| Precautions to Be T | aken in Handling an | d Stor | ing | ti nancunta von | tilation Avoid long and remeater | |
| Combustible. | (eep away from) | eat, | sparks, liame. use WI | thing actions | tilation. Avoid long and repeated | nt |
| | | | | | DO NOT SMOKE. Remove the solver | |
| saturated clot! | nes immediately | to a | oid skin rash. Keep a | way from ignition | on sources. Keep out of reach of | |
| children. | | | | - | | |
| Section VIII—Cor | | | | | The state of the s | |
| Respiratory Protection | on (Specify Type) breathing appar | ratus | (or concentrations about | e TLV limits. | | |
| Ventilation | Loca' Exhaust Normal room | | | Special None. | and the second s | خو فىسىدارىپ |
| , | Mechanical (Gonore | | | Other None- | | , |
| Protective Glovés | None. | pred | contact, Wear Ev | a Protection | | |
| rubber gloves. | ru case or bfore | -11.A.z.n | | Yes - Eyegla | snes, safety glasses. | |
| Other Protective Clo | thing or Equipment | | | • | - | |
| N/A Work/Hygeienic Pra | clices | | | | · i | |
| Do not smoke wi | nile using this | 5017 | ent. | | | - |
| | | | | | | |

SAFETY-KLEEN CORP. 777 Big Timber Rd. Elgin, IL 60123



| IDENTITY (As Used on Lebel and List) | | Information i | is available the en | d. If any item is not t ace must be marked | to indicate the |
|--|--|---|---------------------------------------|--|--------------------------------|
| Safety-Kleen 105 Solvent-M3 #6617 | in dina in a | S available, the op | | | |
| Section I | | Emergency Teleph | hana Mumber | Adams | |
| Manulacius 's Name Safety- Feen Corporation | | \$12/697-8460 | HOUR HADINGS | The state of the s | |
| Additions (Number, Street, City, State, and ZIP Code) | Telephone Numbe | er for Information | | | |
| 777 Big Timber Road | 312/697-8460 Date Prepared 09 | 117/06 | , | | |
| Elgin, Illinois 50123 | | Revised 05/26 | 5/87, 09/29/87, | 10/06/68, 10/20 | 0/88 |
| Bldin Million Police | ······································ | Signature of Preparent | arer (optional) | | |
| Section II—Hazardous Ingredients/Identity In | formation | | , , , , , , , , , , , , , , , , , , , | | |
| Hazard, is Components (Specific Chemical Identity; (| Common Name(s) | OSHA PEL | ACGIH TLV | Other Limits Recommended | % (option |
| Nineral Spirits CAS No. 8032-3 | 2-4 | 500 ppm | 100 ppm | N/A . | 99.9+ |
| Dve N/A | | Unknown: | Unknown | unk. | C.003 |
| Anti-Static Agent N/A | | Unknown | Unkhown | 100 est. | 1 ppm |
| | A.M.L | | | | |
| | | | | | |
| | 11 | | | | |
| | 2 | | | * | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | 3 | | | | 0.775c |
| Section III—Physical/Chemical Characteristi . Boiling Point | | Spesific Gravity (H | 1 ₂ O = 1) | | 0.775- 0.795 |
| Boiling Point (°F) Vapor Pressure (mm Hg.) | 310-400 | Specific Gravity (F | 1 ₂ 0 = 1) | | |
| Boiling Point | 310-400 | | 120 = 1) (Toluene = | 1) | 0,795 |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solubility in Water | 310-400 | Melting Point | | 1) | 0,795 N/A |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solubility in Water Necligible. | 310-400 | Melting Point Evaporation Rate | | - 1) | 0.795 N/A 0.2 |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solupility in Water Necligible. Appearance and Odor | 310-400 | Melting Point Evaporation Rate VOC | | 1) | 0.795 N/A 0.2 |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solubility in Water Negligible. Appearance and Odor Clear grown liquid with characteristic ! | 310-400 | Melting Point Evaporation Rate VOC | (Toluene = | | 0.795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) | 310-400 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0.795 N/A 0.2 795g./L |
| Poiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR=1) Solubility in Water Necligible. Appearance and Odor Clear green liquid with characteristic Section IV—Fire and Explosion Hezard Data Flash Point (Method Used) 105 °F TCC | 310-400 | Melting Point Evaporation Rate VOC | (Toluene = | | 0.795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) | 310-400 2 4.9 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0.795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solubility in Water Negligible. Appearance and Odor Clear green liquid with characteristic Section IV—Fire and Explosion Hazard Data Flash Point (Method Used) 105 °F TCC Extraguishing Media Clear form Cry chemical, water (mist on) "secial Form Cry Chemical, water (mist on) | 310-400 2 4.9 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0.795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR = 1) Solubility in Water Negligible. Appearance and Odor Clear green liquid with characteristic ! Section IV—Fire and Explosion Hazard Data Flash Point (Method Used) 105 °F TCC Extinguishing Media Clear, footh dry whemical, water (mist on) | 310-400 2 4.9 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0,795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR=1) Solubility in Water Negligible. Appearance and Odor Clear green liquid with characteristic Section IV—Fire and Explosion Hazard Data Flash Point (Method Used) 105 °F TCC Extreguishing Media Club form dry chemical, water (mist on) Decial Form, Presedures None. | 310-400 2 4.9 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0,795 N/A 0.2 795g./L |
| Boiling Point (°F) Vapor Pressure (mm Hg.) @ 68°F (20°C) Vapor Density (AIR=1) Solubility in Water Negligible. Appearance and Odor Clear green liquid with characteristic Section IV—Fire and Explosion Hazard Data Flash Point (Method Used) 105 °F TCC Extinguishing Media Clear foam dry chemical, water (mist on) Toecial For Expressives None | 310-400 2 4.9 | Melting Point Evaporation Rate VOC | (Toluene = | LEL | 0.795 N/A 0.2 795g./L |

DESCRIPTION PAGE

FURIVIS

BUSINESS NAME CHEMICAL LOCATION

(1) ADD DELETE REVISE

(3)

(2) PAGE OF

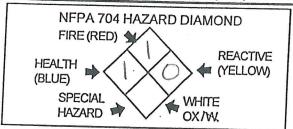
| COEPARTN | RPM Electric Motors | |
|----------------------------------|--|---------|
| | (4) 11352 Westminster Blvd (5) CONFIDENTIAL LOCATION (Address, Area, Building, etc.) | NC |
| | MAP # (if more than one) (6) GRID # (FROMMAP) (7) K.7. | <u></u> |
| CHEMICALNAME | (8) | |
| COMMON NAME | (9) Waste Oil TRADE SECRET (11) DYES ON (| 2 |
| CAS# | (10) Waste Oil ANEHSCHEMICAL (12) DYES XINC | |
| FIRE CODE | MIXTURE 67742-54-7 "IF EHS BOX IS "YES" ALL AMOUNTS MUST BE L'BS | |
| HAZARD CLASSES | (13) ComBustible (36) FACILITYID# 30 80 0 35 8 1 1. | |
| TYPE | RADIOACTIVE ASS. | 긔 |
| PHYSICALSTATE | UPURE OMIXTURE AWASTE | |
| FED HAZARD | (17) DSOLID DELIQUID DGAS LARGEST CONTAINER (21) 55 gal | 1 |
| CATEGORIES | (18) WIFIRE DREACTIVE OPRESSURE RELEASE DACUTE HEALTH DCHRONICHEALTH | 7 |
| STATEWASTE | TO THE STATE OF TH | 1 |
| CODE | (19) 26177 UNITS (22) GAL DCUFT MAX DAILY AMT (23) 55 | 1 |
| DAYSONSITE | (20) 364 *If EHS, amounts must be in lbs. AVG DAILY AMT. (24) | |
| | <u>3 qa1</u> | |
| STORAGE | OABOVE GROUND TANK OCAN OBOX(S) OTANK WAGON | |
| CONTAINER | (26) QUNDER GOUND TANK QCARBOY QCYLINDER DRAIL CAR | |
| | MISTEEL DRUM DEIBER DRUM DEIBE | |
| PRESSURE | QFIBER DRUM QPLASTIC CONTAINER QOTHER QUIP. | - |
| STORAGE | (27) MAMBIENT DABOVEAMBIENT DBELOWAMBIENT | |
| STORAGE TEMPERATURE | M AMDIEUT COMPANY | |
| 15.0 55-2 | (28) MAMBIENT DABOVE AMBIENT DELOW AMBIENT DCRYOGENIC | |
| (29) % WT | (30) HAZARDOUS COMPONETS (31) EHS (32) CAS# | |
| (1) | Petroleum Distillates DYES ENO 64742-54-7 | |
| (2) | DYES DNO | |
| (3) | DYES DNO | |
| (4) | QYES QNO | |
| (5) | DVC0 DV0 | |
| 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 CLASSIFICATIO | NFPA 704 HAZARD DIAMOND | |
| | I NETA (U4 MAZARI) DIAMOND | |

UNDOT# UN1270 Refer to shipping papers or MSDS DOT HAZARD CLASS

Refer to shipping papers or MSDS

(34) EPCRA □YES XNO

(35) If EPCRA, Please Sign Here



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DESCRIPTION PAGE

FORM 3

(1) ADD DELETE REVISE

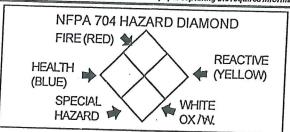
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| (3,100) | BUSINESS NAME (3) | |
|----------------------------------|---|--|
| DEPARTN | CHLIVICALLOCATION (4) | |
| | (Address, Area, Building, etc.) | er Blvd. (9) CONFIDENTIAL LOCATION EPCRA DYES DN |
| | MAP # (if more than one) (6) | GRID# (FROMMAP) (7) 12 |
| CHEMICAL NAME | (8) | |
| COMMONNAME | (9) Resin B7-606 | TRADE SECRET (11) DYES NO |
| CAS# | (10) Solventless Resin | AN EHS CHEMICAL (12) DYES DINC |
| FIRE CODE HAZARD CLASSES | 131-17-9, 80-43-3 | *IF EHS BOX IS "YES" ALL AMOUNTS MUST BE LBS |
| , and and obasses | (13) FACILITYID# 3 | 30億035億 |
| TYPE | (14) QPURE CMIXTURE DWASTE RADIOACTIVE | E (15) OYES ONO CURIES |
| PHYSICALSTATE | TIME COLL GIVASTE | NTAINER (21) 55 gal tank |
| FED HAZARD CATEGORIES | (10) DEIRE DREACTIVE DREESE | |
| STATEWASTE CODE | (19) UNITS (22) MGAL OCUFT | DACUTEHEALTH OCHRONICHEALTH |
| DAYS ON SITE | (20) 365 *If EHS, amounts must be in lbs. | MAX DAILY AMT (23) 75 AVG DAILY AMT (24) 50 72 |
| | | ANNUALWASTEAMT (25) . O |
| STORAGE CONTAINER | | OX(S) DTANKWAGON |
| 200 | USTEEL DRUM UFIBER DRUM UP | LASS CONTAINER DTOTE BIN |
| PRESSURE STORAGE | (27) MAMBIENT DABOVEAMBIENT DBELOWAMBIEN | MACHINERY OR EQUIP. |
| STORAGE TEMPERATURE | TO AMPLIANT DATE. | |
| (29) % WT | TAMBIENT GBELOW AMBIENT | CRYOGENIC |
| (1) 40 | (30) HAZARDOUS COMPONETS | (31) EHS (32) CAS# |
| (2) 1 | Diallyl Phthalate Dicumyl Peroxide | □YES NO 131-17-9 |
| (3) | - 20dmyl Feloxide | □YES 頭NO 80-43-3 |
| (4) | | DYES DNO |
| (5) | | DYES DNO |
| If more hazardous components are | present at greater than 1% by weight it non-carcinogenic, or 0.1% by weight it carcinogenic, attach | QYES QNO |
| (33) NFPA CLASSIFICATIO | | |
| | NFP/ | A 704 HAZARD DIAMOND |

UN/DOT# Refer to shipping papers or MSDS DOTHAZARD CLASS Resin solution
Refer to shipping papers or MSDS

(34) EPCRA DYES ONO

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MATERIAL SAFETY DATA SHEET

RANBAR ELECTRICAL MATERIALS, INC. (ADOPTED FROM USDL FORM OSHA-20)

DATE OF PREPARATION: 5 MAY 98 · REV NO: 5

SECTION I - PRODUCT IDENTIFICATION

PRODUCT CLASS RESIN

TRADE NAME

SOLVENTLESS RESIN

PRODUCT NO. (W) PDS/M#

B7-606

MANUFACTURING DIVISION AND ADDRESS RANBAR ELECTRICAL MATERIALS, INC. ELECTRICAL MATERIALS DIVISION

RT 993

MANOR, PA 15665

EMERGENCY PHONE NUMBER: 800-424-9300 CHEMTREC PRODUCT INFO: 412-864-8200 RANBAR

SECTION II - HAZARDOUS INGREDIENTS

INGREDIENTS

CAS NUMBER

PERCENT BY WT

TLV

PEL

DIALLYL PHTHALATE DICUMYL PEROXIDE

131-17-9 80-43-3

30 - 40 1

*NF *NE

*NF *NE

*NE=NOT ESTABLISHED

SECTION III - PHYSICAL DATA

BOILING RANGE

% VOLATILE BY VOL

VAPOR DENSITY

EVAPORATION RATE (NBUAC = 1)

155-165 deg C/310-300 deg F

8.3

SPECIFIC GRAVITY

1.210

VAPOR PRESSURE (MM HG) 2.3 @150 deg C

APPEARANCE AMBER LIQUID

NIL

SOLUBILITY IN WATER

NEGLIGIBLE

SECTION IV - FIRE AND EXPLOSION DATA

FLASH POINT >300 DEG F /TCC

FLAMMABILITY LIMITS

METHOD USED

LEL -N/A UEL -N/A-

DOT CATEGORY: RESIN SOLUTION, NOT REGULATED

EXTINGUISHING MEDIA: Foam, carbon dioxide, dry chemical

SPECIAL FIRE FIGHTING PROCEDURES: Use self-contained breathing apparatus and protective clothing.

UNUSUAL FIRE AND EXPLOSION HAZARDS: Container may explode in extremely high heat. Use water to keep fire exposed container cool.

SECTION V - HEALTH HAZARD INFORMATIONON

EFFECTS OF OVEREXPOSURE:

EYES: May cause corneal burns.

INHALATION: May cause irritation upon inhalation.

EFFECTS OF CHRONIC OVEREXPOSURE: Human exposure information limited.

EMERGENCY AND FIRST AID PROCEDURES:

SKIN: Remove contaminated clothing and wash with soap and water. EYES: Flush with water for 15 minutes and get medical attention. INHALATION: Remove to fresh air. Get medical attention. CARCINOGENICITY CLASSIFICATION: NTP? NO; IARC? NO; OSHA? NO.

SECTION VI - REACTIVITY DATA

STABILITY: Stable

HAZARDOUS POLYMERIZATION: May occur at high temperature.

INCOMPATIBILITY:

MATERIAL TO AVOID: Strong oxidizing or alkalis.

Provided By Electrical Insulation Suppliers Inc.

| EST. 1926 | 1/10/ | DESCRI | PIIUN PAGE | | | |
|----------------------------------|------------|---|------------------------------------|------------------------------------|------------------|-------------------|
| | | (1) QADD QDELETE DERE | EVISE | (2) | PAGE | OF |
| 13/4 | (5) | BUSINESS NAME (3) | | | | |
| DEPART | | RPI | M Electric Mo | otors | | |
| | | Address, Area, Building, etc.) | B52 Westminst | er Blvd. | (5) CONFIDE | ENTIAL LOCATI |
| | | MAP # (if more than one) (6) | | GRID# (FROMMAP) (7) | K7 | D YES 図 |
| CHEMICAL NAME | (| | | 7 | - | |
| COMMON NAME | (9 | Methylene Chloride | | TRADE SECRE | T (11) | DYES OWN |
| CAS# | (1 | Chlorinated Hydroga | rbon | AN EHS CHEMI | | OYES ON |
| FIRE CODE | 1 | 75-09-2 | | *IFE | HS BOX IS " | YES" |
| HAZARD CLASSES | (13 | Flam lig Connosiv | (36) FACILITYID# 3 | 7 | 7 | |
| | | 0 | | 1979 | 11 | |
| TYPE | (14 | MPURE OMIXTURE OWASTE | RADIOACTIVE | (15) OY | ES ENO | CURIES |
| PHYSICAL STATE FED HAZARD | (17 | OSOLID ALIQUID OGAS | LARGEST CON | ITAINER (21) 5 | gal c | an |
| CATEGORIES | (18) | OXFIRE DREACTIVE OXPRES | SURE RELEASE O | ACUTE HEALTH | M CHRONI | ICHEALTH |
| STATEWASTE CODE | (19) | UNITS (22) GAL | DCUFT | | /AMT (23) | |
| DAYSONSITE | (20) | 365 *If EHS, amounts mus | 210110 | AVG DAILY | | 500 ppi |
| | | | | ANNUALWASTE | 1 | 10 pp |
| STORAGE CONTAINER | (26) | QABOVEGROUND TANK QUNDER GOUND TANK | CAN DBC | DX(S) | | WAGON |
| | (20) | O TANK INSIDE BUILDING | ISILO DGL | LINDER ASS CONTAINER | DRAIL | CAR . |
| PRESSURE | | DDI ACTICALCUM | THREK DKOW OFF | ASTIC CONTAINER MACHINERY OR EC | D Other | |
| STORAGE STORAGE | (27) | MAMBIENT DABOVEAMBIENT | O BELOW AMBIEN | | COII . | |
| TEMPERATURE | (28) | MAMBIENT DABOVEAMBIENT | OBELOW AMBIENT | □ CRYOGENIC | .] | |
| (29) % WT | r | (30) HAZARDOUS COMPO | NETS | (31) EHS | | |
| (1) 1 0 0 | | Methylene Chloride | | | (32) C | |
| (2) | | | | | 75-09 | -2 |
| (3) | L | | | | | |
| (4) | | | | | | |
| (5) | | | | DYES DNO | | |
| If more hazardous components are | present at | reater than 1% by weight if non-carcinogenic, or 0.1% b | y weight if carcinogenic, attach a | QYES QNO | pturing the requ | Ired Information. |
| (33) NFPA CLASSIFICATIO | NC. | | | 704 HAZARD DI | | |
| UN/DOT#ORM_A Refer to sh | ipoino na | 553 Ders or MSDS | | RED) | | |
| DOT HAZARD CLASS | . ,9 | **** | HEALTH (BLUE) | 2 0 | REACT (YELL) | |
| | Referto | nipping papers or MSDS | SPECI | AL XX | HITE | |
| (34) EPCRA DYES XNO | | | HAZAR | | X\M | |
| X(35) If EPC | PA DI | ase Sign Here | MAKE AS MA | NY COPIES OF | F CHEMI | CAL |
| (33) 11 EPC | na, Pl | ase Sign Here | MARMIO | RY FORM AS | NEEDED | ł. |

PAGE 14

6/2001 - GRAPHICS G:\FIRE\FORMS-CHEMICAL INVTRY FM

72-62-7820-01

Ashland Chemical Company DIVISION OF ASHLAND DIL, INC.

MATERIAL SAFETY DATA SHEET

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

24-HOUR EMERGENCY TELEPHONE (606) 324-1133

ATTENDED IN Ashland.

000731

METHYLENE CHLORIDE INDUST GRD

Page:

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

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

DIXCO 847 SOUTH EAST STREET ANAHEIM

CA 92805

05 50 033 2617430-

0003736-006

Data Sheet No: 0005/1 Supersedes: 03/04/86

PRODUCT: 3590000 912528 INVOICE: 912528 INVOICE DATE: 11/12/88

. ATTN: PLANT MGR./SAFETY DIR.

TO: DIXCO 847 SOUTH EAST STREET CA 92805

ASECTION ALERRODUCTATIO BNITH FLOATION AND ASSECTION AND ASSECTION AND ASSECTION AND ASSECTION A

General or Generic ID: CHLORINATED HYDROCARBON

DOT Hazard Classification: ORM-A

THE REPORT OF THE PROPERTY OF

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

INGREDIENT

% (by WT)

PEL

TLY

<u>Note</u>

METHYLENE CHLORIDE CAS #: 75-09-2

Identified as a CARCINOGEN by IARC 500 PPM 100 PPM

(1)

Notes:

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.

| The state of the s | SECI | IMION AUDICE EN VENCAL ADAMA | | |
|--|----------------|------------------------------|--------------------------|--|
| Boiling Point | for PRODUCT | • | 102.90 - 39.38 - a | 104.70 Deg F 40.38 Deg C) 760.00 mm Hg |
| Vapor Pressure | for PRODUCT | | 9(| 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 77.00 Deg F 25.00 Deg C) |
| Percent Volatiles | | | | 100.00% |
| Evaporation Rate | (ETHYL ETHER = | 1) | | 1.80 |

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

HEALTH- 2

FLAMMABILITY- 1

PPM

REACTIVITY- 0

上海上海中海海岸海岸海岸海岸海岸路SECTITION参V是HEALINTH澳HAZARD塑DATIAW海湾沿岸海滨

PERMISSIBLE EXPOSURE LEVEL

500

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:

I SKIN: THOROUGHLY WASH EXPOSED AREA WITH SOAP AND WATER. REMOVE CONTAMINATED CLOTHING. LAUNDER CONTAMINATED CLOTHING BEFORE RE-USE.

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CONTINUED ON PAGE: 2

72-62-7820-01

MATERIAL SAFETY DATA SHEET

ASMERIA CHERNEEL COMPANY DIVISION OF ASHLAND OIL, INC.

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24-HOUR EMERGENCY TELEPHONE (606) 324-1133

Ashland,

000731

METHYLENE CHLORIDE INDUST GRD

Page: 2

SECTION AVEHEALITH MHAZARD ATTAM ((Containued))

- 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 CARCINGGEN (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

HAZARDOUS POLYMERIZATION: CANNOT OCCUR

STABILITY: STABLE

INCOMPATIBILITY: AVOID CONTACT WITH:, ALUMINUM

AND THE RESIDENCE OF THE PROPERTY OF THE PROPE

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.

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

FYE 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.

A TANK A

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.

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PAGE 14

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INVENTORY FORM AS NEEDED

DESCRIPTION PAGE **FURIM 3** (1) ADD DELETE REVISE (2) PAGE OF **BUSINESS NAME** (3)RPM Electric Motors **CHEMICAL LOCATION** (4)center WORKSHOP (5) CONFIDENTIAL LOCATION (Address, Area, Building, etc.) 11352 Westminster Blvd **EPCRA** O YES NO MAP # (if more than one) (6)GRID# (FROMMAP) G4 CHEMICAL NAME (8)Acetylene - C,H, TRADE SECRET □YES NO (11)COMMONNAME "IF EPCRA SEE INSTRUCTIONS (9)AN EHS CHEMICAL (12) Acetylene DYES YNO CAS# (10)74-86-2 "IF EHS BOX IS "YES" **FIRE CODE** ALL AMOUNTS MUST BE L'BS HAZARD CLASSES (13)Am gas (36) FACILITYID# 3 0 0 5 TYPE RADIOACTIVE (14)**E**PURE CURIES OMIXTURE OWASTE PHYSICAL STATE (17)LARGEST CONTAINER (21) OSOLID QLIQUID 145 ft³ **GAS FED HAZARD CATEGORIES W**FIRE DREACTIVE (18)**MPRESSURE RELEASE** DACUTEHEALTH DCHRONICHEALTH STATEWASTE **QGAL** CODE CKCUFT **UNITS (22)** (19)MAX DAILY AMT (23) QLBS DTONS 2,500 f DAYSONSITE *If EHS, amounts must be in lbs. (20)365 AVG DAILY AMT (24) 10 ft³ ANNUALWASTEAMT (25) STORAGE **DABOVE GROUND TANK** DCAN DBOX(S) CONTAINER O UNDER GOUND TANK **DTANK WAGON** (26)**CARBOY X**OCYLINDER O TANK INSIDE BUILDING **DRAIL CAR DSILO DGLASS CONTAINER OSTEEL DRUM OTOTE BIN** O FIBER DRUM **OPLASTIC CONTAINER** OPLASTIC/NONMETALLIC DRUM □ Other PRESSURE DBAG(S) DIN MACHINERY OR EQUIP. STORAGE (27)**CX**AMBIENT **DABOVE AMBIENT** O BELOW AMBIENT STORAGE **TEMPERATURE CX**AMBIENT DABOVEAMBIENT (28)**DBELOW AMBIENT OCRYOGENIC** (29) % WT (30) HAZARDOUS COMPONETS (31) EHS (32) CAS# (1) 94 Acetylene DYES NO 74-86-2 (2)DYES DNO (3)DYES DNO (4)**QYES** DNO (5)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 NFPA 704 HAZARD DIAMOND UN/DOT# UN1001 FIRE (RED) Refer to shipping papers or MSDS REACTIVE HEALTH DOTHAZARD CLASS (YELLOW) Refer to shipping papers or MSDS

(34) EPCRA DYES ONO

(35) If EPCRA, Please Sign Here

(BLUE) B SPECIAL WHITE HAZARD OXIM

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PAGE 14

6/2001 - GRAPHICS G:\FIRE\FORMS-CHEMICAL INVTRY FM

3

DESCRIPTION PAGE (1) ADD DELETE REVISE (2) PAGE **BUSINESS NAME** (3)RPM Electric Motors 11352 Westminster Blvd. **CHEMICAL LOCATION** (4)(5) CONFIDENTIAL LOCATION EPCRA ☐ YES TO NO (Address, Area, Building, etc.) MAP # (if more than one) (6)GRID# (FROMMAP) K7. (7)

| OUTHER | | | | |
|----------------------------------|--------------------|--|--|---------------------------------------|
| CHEMICAL NAM | E (8 | Gun Washing Solvent | TRADE SECRE | T (11) DV50 50 |
| COMMONNAME | (9 | | "IF EPCRA SEE INST | RUCTIONS |
| CAS# | (10 | Gun Washing Solvent | AN EHS CHEMI | CAL (12) DYES CAN |
| FIRE CODE HAZARD CLASSE | ES (13 | | *IF E ALL AMO | EHS BOX IS "YES" DUNTS MUST BE LBS |
| | (10) | FACILITYID# 3 | 0 8 0 3 5 | . 数 |
| TYPE | (14) | QPURE CAMIXTURE DWASTE | (15) QY | ES MO CURIES |
| PHYSICALSTATE | (17) | □PURE ØMIXTURE □WASTE □SOLID ØLIQUID □GAS LARGEST COI | - X | gal |
| FED HAZARD CATEGORIES | (18) | MEIRE DREACTIVE BROWN | | |
| STATEWASTE CODE | (19) | UNITS (22) AGAL OCUFT | MAX DAILY | CHRONICHEALTH |
| DAYS ON SITE | (20) | 365 *If EHS, amounts must be in lbs. | AVG DAILY | 133 |
| | | | ANNUALWASTE | 1,2 941 |
| STORAGE CONTAINER PRESSURE | (26) | OTANKINSIDE BUILDING STEEL DRUM OFIBER DRUM OFITER DRU | OX(S) YLINDER -ASS CONTAINER -ASTIC CONTAINER | DTANKWAGON DRAILCAR DTOTE BIN |
| STORAGE | (27) | MAMBIENT DABOVEAMBIENT DBELOWAMBIEN | MACHINERY OR EC | NUIP. |
| STORAGE TEMPERATURE | (28) | MAMBIENT DABOVEAMBIENT DBELOWAMBIENT | | <u> </u> |
| (29) % WT | | (30) HAZARDOUS COMPONETS | (31) EHS | (32) 64 6 # |
| (1) | - | Toluene | DYES DANO | (32) CAS# 108-88-3 |
| (2) | - | Acetone | DYES MINO | 67-64-1 |
| (3) | - | Lacquer Diluent | DYES DINO | 64742-89-8 |
| (4) | _ | Methyl Alcohol | DYES TINO | 67-56-1 |
| (5) If more hazardous components | s are present at o | Wedler than 1% by weight if any | QYES QNO | |
| (33) NFPA CLASSIFICA | MOIT | realer than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach | additional sheets of paper ca | pturing the required Information. |

(33) NFPA CLASSIFICATION

UNDOT# UN1263

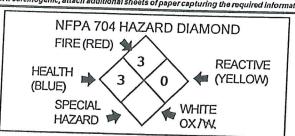
Refer to shipping papers or MSDS

DOTHAZARDCLASS Flammable Liquid

Refer to shipping papers or MSDS

(34) EPCRA DYES ONO

(35) If EPCRA, Please Sign Here



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FORM 3

OF

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

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.)

paging system

- 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.

west end of 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.
- Activate any emergency mitigation procedures that are available at your business. (List below any mitigation procedures specific to your business, if any.)

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

Agency

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

| | 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

f__**X**_

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.

| <u>C</u> | onsidera | ation shall include: | | | | |
|----------|--|---|--|--|--|--|
| 1 | Drun | Drum storage and/or above ground tank storage areas: | | | | |
| | a | | | | | |
| | b | Diking areas to contain spills | | | | |
| | cX_ | 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. | Gener | al: | | | | |
| | a <u>X</u> | Safe work practices are exercised in daily routines. | | | | |
| | b_ <u>X</u> _ | Employees who handle hazardous materials are properly trained. | | | | |
| | c_ <u>X</u> _ | 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.) | | | | |
| | еХ | Uniform Fire Code (UFC) requires separation between outside hazardous material storage area or tanks and combustible materials (wood, bush, etc.) | | | | |

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: Bernie 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 |
| A business that handles hazardous materials shal Emergency Plan (HMBEP) once every three year Department. A business may comply with the annu- certification statement to the Garden Grove Fire Department. | Chapter 6.95, Section 25505(c) and Section 25503.3(c) provided review AND certify their Hazardous Materials Business from the date of acceptance by the Garden Grove Fire all chemical inventory reporting requirement by submitting a rement. A business may not utilize this certification to meet the Emergency Planning and Community Right to Know |
| Note: A business may comply with the annual inventional both of the following apply: | tory reporting requirements using this certification statement if |
| The business has previously filed an inventory repo The business attests to the following: The information contained in the annual inventory | offory form most recently submitted to the Conden Conner E |
| There has been no change in the quantity of submitted annual inventory form. | of any hazardous material as reported in the most recently requirements is being handled that is not listed on the most |
| | OR CHEMICAL INVENTORY HAS BEEN REVIEWED. |
| No changes are required to the HMBEP submitted to | the Garden Grove Fire Department. |
| All the necessary changes/revisions have been n attached to this certification. | nade to the HMBEP. The changes/revisions are |
| No changes are required to the chemical inventory Fire Department. | that was previously on file with the Garden Grove |
| All the necessary changes/revisions have been made are attached to this certification. | e to the chemical inventory. The changes/revisions |
| AS AN AUTHORIZED REPRESENTATIVE, I CEIPERSONALLY EXAMINED AND AM FAMILIAR WIBELIEVE THE INFORMATION IS TRUE, ACCURATE | E. AND COMPLETE |
| Print Name_Be Pham | Signature Be Chupham Data 3/6/01 |
| Job Title Office Manager | Data 2/6/01 |

UNIFIED PROGRAM CONSOLIDATED FORM

FACILITY INFORMATION

BUSINESS ACTIVITIES

| | | | | Page 1 of | | | | |
|---|----------------------------|--|-----------|---|--|--|--|--|
| FACILITY ID# | | | | | | | | |
| | |) # (Haza | ardous | s Waste Only) | | | | |
| BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Busine | ess As) | | | | | | | |
| RPM Electric Motors | | | | | | | | |
| | II. ACTIVITIES DECLARATION | | | | | | | |
| NOTE: If you check \ | ES to a | ny par | t of | this list, | | | | |
| please submit the Business Owner/Op Does your facility | erator lo | lentific | catio | on page (OES Form 2730) | | | | |
| A. HAZARDOUS MATERIALS | | If Yes, | pleas | se complete these pages of the UPCF | | | | |
| Have on site (for any purpose) hazardous materials at or above gallons for liquids, 500 pounds for solids, or 200 cubic feet from 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 hand radiological materials in quantities for which an emergency plan required pursuant to 10 CFR Parts 30, 40 or 70? B. UNDERGROUND STORAGE TANKS (USTs) | or ne us | S X NO | О . | 4. HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (OES 2731) | | | | |
| B. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks? | YES | ⊠ NO |) 5 | UST FACILITY (Formerly SWRCB Form A) | | | | |
| Intent to upgrade existing or install new USTs? | ☐ YES | K 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 | | | | |
| 3. Need to report closing a UST? | ☐ YES | NO X | 7. | Form C) | | | | |
| C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs) | | ٠.٠٠ لــــــــــــــــــــــــــــــــــ | | TANK (closure portion-one page per tank) | | | | |
| 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? HAZARDOUS WASTE | YES | ⊠ NO | 8. | ✓ NO FORM REQUIRED TO CUPAS | | | | |
| Generate hazardous waste? Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)? | ☐ YES | NO X | 9. 10. | ✓ EPA ID NUMBER - provide at the top of this page ✓ RECYCLABLE MATERIALS REPORT (one per recycler) | | | | |
| . Treat hazardous waste on site? | ☐ YES | ⊠ NO | 11. | ✓ ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772) ✓ ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) | | | | |
| Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)? | YES | X NO | 12. | (Formerly DTSC Forms 1772A,B,C,D and L) ✓ CERTIFICATION OF FINANCIAL ASSUBANCE (Formerly DTSC) | | | | |
| Consolidate hazardous waste generated at a remove site? | YES | X NO | 13. | ASSURANCE (Formerly DTSC Form 1232) ✓ REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC | | | | |
| Need to report the closure/removal of a tank that was classified waste and cleaned onsite? | YES [| X NO | 14. | Form 1196) ✓ HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249) | | | | |
| LOCAL REQUIREMENTS | | | | 15. | | | | |
| (You may also be required to provide additional | al information | n by your | CUP | | | | | |



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 | ŗ | Telephone: | (714)638-4174 |
|--|--|---|---|--|
| Site Address: | 11352 Westminster Blvd. | | Zip Code: _ | |
| A business that h Emergency Plan (l Department. A bu certification stateme the annual inventor | Ith & Safety Code, Division 20, Chap andles hazardous materials shall re HMBEP) once every three years fr siness may comply with the annual on to the Garden Grove Fire Departments ory submission requirements of the Title 42, United States Code). | oter 6.95, Section 255 Eview AND certify from the date of acceptance inventory research. | 05(c) and So their Hazar eptance by porting requ | dous Materials Business the Garden Grove Fire airement by submitting a |
| Note: A business method both of the following | nay comply with the annual inventory apply: | reporting requiremen | ts using this | certification statement if |
| 2. The business atte | previously filed an inventory reporting sts to the following: | | | |
| • There has b | tion contained in the annual inventory s complete, accurate, and up to date. een no change in the quantity of an accurate inventory of an accurate inventory of an accurate inventory of an accurate the second seco | | | |
| No hazardou | nual inventory form. s material subject to the inventory reconstructed annual inventory form. | | | |
| THIS IS TO CERTI (Please check applical | FY THAT THE HMBEP AND/OR ble boxes): | CHEMICAL INVEN | ITORY HA | S BEEN REVIEWED. |
| No changes are re | equired to the HMBEP submitted to the | Garden Grove Fire D | epartment. | |
| All the necessary attached to this cer | changes/revisions have been made rtification. | to the HMBEP. | The change | s/ievisions are |
| No changes are re Fire Department. | equired to the chemical inventory that | t was previously on f | ile with the | Garden Grove |
| All the necessary are attached to this | changes/revisions have been made to certification. | the chemical inventor | ry. The cha | anges/revisions |
| PERSONALLI EXAM | ED REPRESENTATIVE, I CERTII MINED AND AM FAMILIAR WITH RMATION IS TRUE, ACCURATE, A | THE INFORMATION | TY OF L | TED AND |
| Print Name Be Pha | m | Signature | 3//M | New |
| Ioh Title Office | Managa | Du 5/2/ | an | |