



# 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: AMERICAN TIRE DEPOT  
Occupant or DBA: 7031 GARDEN GROVE  
Owner/Manager: [REDACTED]

Date: 5/20/13  
File No: 9099  
Phone: [REDACTED]

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

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

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

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

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

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

Additional Violations and/or Notes: NO MANAGER REVIEW ESUBMIT  
NEED SECONDARY CONTAINMENT FOR SS GALLON DRUM  
WRONG ADDRESS - SUBMIT 5850 GG BLVD

Responsible Party: [REDACTED] 5/20/13 Re-inspection Date: ✓

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

Fire Dept. Inspector: 2867 NGUYEN ID #: 5/20/13

Condition Upon Re-inspection: \_\_\_\_\_ Date: \_\_\_\_\_

**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS ACTIVITIES**

Page 1 of

**I. FACILITY IDENTIFICATION**

FACILITY ID # (Agency Use Only)	<b>F A 0 0 5 7 3 8 8</b>	EPA ID # (Hazardous Waste Only)	
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)			<b>AMERICAN TIRE DEPOT</b>
BUSINESS SITE ADDRESS			<b>7031 GARDEN GROVE BLVD</b>
BUSINESS SITE CITY	<b>GARDEN GROVE</b>	CA	ZIP CODE <b>92841</b>

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF....
<b>A. HAZARDOUS MATERIALS</b> Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES  HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
<b>B. REGULATED SUBSTANCES</b> Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	<input type="checkbox"/> YES  Coordinate with your local agency responsible for CalARP.
<b>C. UNDERGROUND STORAGE TANKS (USTs)</b> Own or operate underground storage tanks?	<input type="checkbox"/> YES  UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
<b>D. ABOVE GROUND PETROLEUM STORAGE</b> Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	<input type="checkbox"/> YES  NO FORM REQUIRED TO CUPAs
<b>E. HAZARDOUS WASTE</b> Generate hazardous waste?  Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?  Treat hazardous waste on-site?  Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?  Consolidate hazardous waste generated at a remote site?  Need to report the closure/removal of a tank that was classified AS hazardous waste and cleaned on-site?  Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.  Household Hazardous Waste (HHW) Collection site?	<input type="checkbox"/> YES  <input type="checkbox"/> YES  <input type="checkbox"/> YES  <input type="checkbox"/> YES  <input type="checkbox"/> YES  <input type="checkbox"/> YES  <input type="checkbox"/> YES  EPA ID NUMBER – provide at the top of this page  RECYCLABLE MATERIALS REPORT (one per recycler)  ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)  CERTIFICATION OF FINANCIAL ASSURANCE  REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION  HAZARDOUS WASTE TANK CLOSURE CERTIFICATION  Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.  See CUPA for required forms.

**F. LOCAL REQUIREMENTS**

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

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**UNIFIED PROGRAM CONSOLIDATED FORM**

**FACILITY INFORMATION**

**BUSINESS OWNER/OPERATOR IDENTIFICATION**

Page \_\_\_ of \_\_\_

**I. IDENTIFICATION**

FACILITY ID#		<b>FA0057388</b>	1 BEGINNING DATE		100	ENDING DATE		101	
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)					3	BUSINESS PHONE			102
<b>AMERICAN TIRE DEPOT</b>						<b>7148982696</b>			
BUSINESS SITE ADDRESS					103	BUSINESS FAX			102a
<b>7031 GARDEN GROVE BLVD</b>									
BUSINESS SITE CITY				104	CA	ZIP CODE	105	COUNTY	108
<b>GARDEN GROVE</b>						<b>92841</b>			
DUN & BRADSTREET				106	PRIMARY SIC	107	PRIMARY NAICS		107a
					<b>7538</b>				
BUSINESS MAILING ADDRESS									108a
<b>16201 COMMERCE BLVD</b>									
BUSINESS MAILING CITY					108b	STATE	108c	ZIP CODE	108d
<b>CERRITOS</b>						<b>CA</b>		<b>90703</b>	
BUSINESS OPERATOR NAME					109	BUSINESS OPERATOR PHONE			110
<b>Atv INC</b>						<b>5626773950</b>			

**II. BUSINESS OWNER**

OWNER NAME		111	OWNER PHONE		112			
[REDACTED]			[REDACTED]					
OWNER MAILING ADDRESS						113		
[REDACTED]								
OWNER MAILING CITY				114	STATE	115	ZIP CODE	116
[REDACTED]					<b>CA</b>		[REDACTED]	

**III. ENVIRONMENTAL CONTACT**

CONTACT NAME		117	CONTACT PHONE		118		
<b>Hrag Saboundjian</b>			<b>5626773950</b>				
CONTACT MAILING ADDRESS			119	CONTACT EMAIL		119a	
<b>16201 Commerce Way</b>				<b>hrag@atvtireinc.com</b>			
CONTACT MAILING CITY			120	STATE	121	ZIP CODE	122
<b>Cerritos</b>				<b>CA</b>		<b>90703</b>	

**-PRIMARY-**

**IV. EMERGENCY CONTACTS**

**-SECONDARY-**

NAME	123	NAME	128
[REDACTED]		[REDACTED]	
TITLE	124	TITLE	
<b>General Manager</b>		<b>President</b>	
BUSINESS PHONE	125	BUSINESS PHONE	
[REDACTED]		[REDACTED]	
24-HOUR PHONE	126	24-HOUR PHONE	
[REDACTED]		[REDACTED]	
CELL / PAGER #	127	CELL / PAGER #	
[REDACTED]		[REDACTED]	
EMAIL		EMAIL	
[REDACTED]		[REDACTED]	

*DECLINED  
- NEW MAP  
OBLIGATION  
  
FILE*

ADDITIONAL LOCALLY COLLECTED INFORMATION:

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

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE		DATE	134	NAME OF DOCUMENT PREPARER		135
<b>Hrag</b>				<b>Hrag Saboundjian</b>		
NAME OF SIGNER (print)		136	TITLE OF SIGNER		137	
<b>Hrag</b>			<b>Operations Manager</b>			

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD                       DELETE                       REVISE                      200                      Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3  
AMERICAN TIRE DEPOT

CHEMICAL LOCATION 201 CHEMICAL LOCATION CONFIDENTIAL EPCRA 202  
Back of shop are under mezanine  YES

FACILITY ID #    F    A    0    0    5    7    3    3    8    |    MAP# (optional) 203    GRID# (optional) 204

**II. CHEMICAL INFORMATION**

CHEMICAL NAME 205 TRADE SECRET  Yes 206  
Waste Oil 207 If Subject to EPCRA, refer to instructions

COMMON NAME 207 EHS\*  Yes 208  
Waste Oil

CAS# 209 \*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210  
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only)  a. PURE  b. MIXTURE  c. WASTE 211 RADIOACTIVE  Yes 212 CURIES 213

PHYSICAL STATE (Check one item only)  a. SOLID  b. LIQUID  c. GAS 214 LARGEST CONTAINER 215  
240.0

FED HAZARD CATEGORIES (Check all that apply)  a. FIRE  b. REACTIVE  c. PRESSURE RELEASE  d. ACUTE HEALTH  e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217 100.0    MAXIMUM DAILY AMOUNT 218 200.0    ANNUAL WASTE AMOUNT 219 860.0    STATE WASTE CODE 220

UNITS\* (Check one item only)  a. GALLONS  b. CUBIC FEET  c. POUNDS  d. TONS 221 DAYS ON SITE 222  
365.0  
\* If EHS, amount must be in pounds.

STORAGE CONTAINER  a. ABOVE GROUND TANK  e. PLASTIC/NONMETALLIC DRUM  i. FIBER DRUM  m. GLASS BOTTLE  q. RAIL CAR  
 b. UNDERGROUND TANK  f. CAN  j. BAG  n. PLASTIC BOTTLE  r. OTHER  
 c. TANK INSIDE BUILDING  g. CARBOY  k. BOX  o. TOTE BIN  
 d. STEEL DRUM  h. SILO  l. CYLINDER  p. TANK WAGON 223

STORAGE PRESSURE  a. AMBIENT  b. ABOVE AMBIENT  c. BELOW AMBIENT 224

STORAGE TEMPERATURE  a. AMBIENT  b. ABOVE AMBIENT  c. BELOW AMBIENT  d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only) *	EHS	CAS #
1 95.0 <span style="float: right;">226</span>	Petroleum Based lube oils <span style="float: right;">227</span>	<input type="checkbox"/> Yes <span style="float: right;">228</span>	64742650 <span style="float: right;">229</span>
2 5.0 <span style="float: right;">230</span>	sludge, water, debris <span style="float: right;">231</span>	<input type="checkbox"/> Yes <span style="float: right;">232</span>	<span style="float: right;">233</span>
3 <span style="float: right;">234</span>	<span style="float: right;">235</span>	<input type="checkbox"/> Yes <span style="float: right;">236</span>	<span style="float: right;">237</span>
4 <span style="float: right;">238</span>	<span style="float: right;">239</span>	<input type="checkbox"/> Yes <span style="float: right;">240</span>	<span style="float: right;">241</span>
5 <span style="float: right;">242</span>	<span style="float: right;">243</span>	<input type="checkbox"/> Yes <span style="float: right;">244</span>	<span style="float: right;">245</span>

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD                       DELETE                       REVISE                      200                      Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

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

AMERICAN TIRE DEPOT

CHEMICAL LOCATION 201      CHEMICAL LOCATION CONFIDENTIAL EPCRA 202  
Back of shop area under mezanine       YES

FACILITY ID #      F      A      0      0      5      7      3      3      8      1      MAP# (optional) 203      GRID# (optional) 204

**II. CHEMICAL INFORMATION**

CHEMICAL NAME 205      TRADE SECRET  Yes 206  
Waste Antifreeze      If Subject to EPCRA, refer to instructions

COMMON NAME 207      EHS\*  Yes 208

CAS# 209      \*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210  
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only)       a. PURE       b. MIXTURE       c. WASTE 211      RADIOACTIVE  Yes 212      CURIES 213

PHYSICAL STATE (Check one item only)       a. SOLID       b. LIQUID       c. GAS 214      LARGEST CONTAINER 215  
55.0

FED HAZARD CATEGORIES (Check all that apply) 216  
 a. FIRE       b. REACTIVE       c. PRESSURE RELEASE       d. ACUTE HEALTH       e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217      MAXIMUM DAILY AMOUNT 218      ANNUAL WASTE AMOUNT 219      STATE WASTE CODE 220  
25.0      55.0

UNITS\* (Check one item only)       a. GALLONS       b. CUBIC FEET       c. POUNDS       d. TONS 221      DAYS ON SITE: 222  
\* If EHS, amount must be in pounds      365.0

STORAGE CONTAINER 223  
 a. ABOVE GROUND TANK       e. PLASTIC/NONMETALLIC DRUM       i. FIBER DRUM       m. GLASS BOTTLE       q. RAIL CAR  
 b. UNDERGROUND TANK       f. CAN       j. BAG       n. PLASTIC BOTTLE       r. OTHER  
 c. TANK INSIDE BUILDING       g. CARBOY       k. BOX       o. TOTE BIN  
 d. STEEL DRUM       h. SILO       l. CYLINDER       p. TANK WAGON

STORAGE PRESSURE       a. AMBIENT       b. ABOVE AMBIENT       c. BELOW AMBIENT 224

STORAGE TEMPERATURE       a. AMBIENT       b. ABOVE AMBIENT       c. BELOW AMBIENT       d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 50.0 <span style="float:right">226</span>	Ethylene Glycol <span style="float:right">227</span>	<input type="checkbox"/> Yes <span style="float:right">228</span>	107211 <span style="float:right">229</span>
2 50.0 <span style="float:right">230</span>	water <span style="float:right">231</span>	<input type="checkbox"/> Yes <span style="float:right">232</span>	<span style="float:right">233</span>
3 <span style="float:right">234</span>	<span style="float:right">235</span>	<input type="checkbox"/> Yes <span style="float:right">236</span>	<span style="float:right">237</span>
4 <span style="float:right">238</span>	<span style="float:right">239</span>	<input type="checkbox"/> Yes <span style="float:right">240</span>	<span style="float:right">241</span>
5 <span style="float:right">242</span>	<span style="float:right">243</span>	<input type="checkbox"/> Yes <span style="float:right">244</span>	<span style="float:right">245</span>

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ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD                       DELETE                       REVISE                      200                      Page    of   

**I. FACILITY INFORMATION**

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) <span style="float:right">3</span>											
AMERICAN TIRE DEPOT											
CHEMICAL LOCATION <span style="float:right">201</span>					CHEMICAL LOCATION CONFIDENTIAL EPCRA <span style="float:right">202</span>						
Back of Garage area					<input type="checkbox"/> YES						
FACILITY ID #	F	A	0	0	5	7	3	3	8	MAP# (optional) <span style="float:right">203</span>	GRID# (optional) <span style="float:right">204</span>

**II. CHEMICAL INFORMATION**

CHEMICAL NAME <span style="float:right">205</span>					TRADE SECRET <input type="checkbox"/> Yes <span style="float:right">206</span>				
Lubricating Oils					If Subject to EPCRA, refer to instructions				
COMMON NAME <span style="float:right">207</span>					EHS* <input type="checkbox"/> Yes <span style="float:right">208</span>				
Engine Oil									
CAS# <span style="float:right">209</span>					*If EHS is "Yes", all amounts below must be in lbs.				
FIRE CODE HAZARD CLASSES (Complete if required by CUPA) <span style="float:right">210</span>									
Flammable Liquid, Class I-A (3.3 I-A)									
HAZARDOUS MATERIAL TYPE (Check one item only) <span style="float:right">211</span>					RADIOACTIVE <input type="checkbox"/> Yes <span style="float:right">212</span>		CURIES <span style="float:right">213</span>		
<input type="checkbox"/> a. PURE <input checked="" type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE									
PHYSICAL STATE (Check one item only) <span style="float:right">214</span>					LARGEST CONTAINER <span style="float:right">215</span>				
<input type="checkbox"/> a. SOLID <input checked="" type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS					240.0				
FED HAZARD CATEGORIES (Check all that apply) <span style="float:right">216</span>									
<input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH									
AVERAGE DAILY AMOUNT <span style="float:right">217</span>			MAXIMUM DAILY AMOUNT <span style="float:right">218</span>			ANNUAL WASTE AMOUNT <span style="float:right">219</span>		STATE WASTE CODE <span style="float:right">220</span>	
240.0			550.0			860.0			
UNITS* (Check one item only) <span style="float:right">221</span>							DAYS ON SITE: <span style="float:right">222</span>		
<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS							365.0		
*If EHS, amount must be in pounds.									
STORAGE CONTAINER <span style="float:right">223</span>									
<input checked="" type="checkbox"/> a. ABOVE GROUND TANK <input type="checkbox"/> e. PLASTIC/NONMETALLIC DRUM <input type="checkbox"/> i. FIBER DRUM <input type="checkbox"/> m. GLASS BOTTLE <input type="checkbox"/> q. RAIL CAR									
<input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> f. CAN <input type="checkbox"/> j. BAG <input type="checkbox"/> n. PLASTIC BOTTLE <input type="checkbox"/> r. OTHER									
<input type="checkbox"/> c. TANK INSIDE BUILDING <input type="checkbox"/> g. CARBOY <input type="checkbox"/> k. BOX <input type="checkbox"/> o. TOTE BIN									
<input checked="" type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> h. SILO <input type="checkbox"/> l. CYLINDER <input type="checkbox"/> p. TANK WAGON									
STORAGE PRESSURE <span style="float:right">224</span>									
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT									
STORAGE TEMPERATURE <span style="float:right">225</span>									
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC									
%WT		HAZARDOUS COMPONENT (For mixture or waste only)				EHS		CAS #	
1	48.0 <span style="float:right">226</span>	Petroleum Distillate-heavy fractions <span style="float:right">227</span>				<input type="checkbox"/> Yes <span style="float:right">228</span>			
2	48.0 <span style="float:right">230</span>	Petroleum Distillate- medium fractions <span style="float:right">231</span>				<input type="checkbox"/> Yes <span style="float:right">232</span>			
3	5.0 <span style="float:right">234</span>	Additives <span style="float:right">235</span>				<input type="checkbox"/> Yes <span style="float:right">236</span>			
4	<span style="float:right">238</span>	<span style="float:right">239</span>				<input type="checkbox"/> Yes <span style="float:right">240</span>			
5	<span style="float:right">242</span>	<span style="float:right">243</span>				<input type="checkbox"/> Yes <span style="float:right">244</span>			

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION <span style="float:right">246</span>									

If EPCRA, Please Sign Here

Asterisks (\*) indicate required fields

**I. General**

Business Name\* AMERICAN TIRE DEPOT +

Site Address 7031 GARDEN GROVE BLVD +

Business Site Address 2 FA0057388 +

BEP Preparer\* Hrag

Submission Requirement  Initial  3 Year Renewal  Update

**II. Notification**

Your business is required by State Law to provide immediate notification of any release or threatened release of a hazardous material to (1) Local emergency response personnel (2) The Office of Emergency Services (OES), and (3) this Agency (Orange County Healthcare Agency)

If you have a **FIRE / PARAMEDICS / POLICE - Phone: 911** release or threatened release of hazardous materials, immediately call\* **California Emergency Management Agency: (800) 852-7550 or (916) 262-1621**

911 Responsibility\* Store Manager

List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous materials.

Hospital / Clinic\* Mission Palms Healthcare Center

Address\* 240 Hospital Cir,

City\* Westminster

Zip Code\* 92683

Phone\* (714) 892-6686

Does your business have a private on-site emergency response team  Yes

If yes, describe what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials.

[Empty text box for describing emergency response policies and procedures]

Briefly describe your business's standard operation procedure in the event of a release or threatened release of a hazardous material:

**a. Prevention** (prevent the hazard) - Describe the kinds of hazards associated with the materials present at your facility. Issues for discussion may include safety, storage, and containment procedures.

Hazards are potential spills, fire or exposure to automotive fluids, such as engine oil, transmission fluid, brake fluids.

**b. Mitigation**(reduce the hazard) - Describe what is done to lessen the harm or damage to person(s), property, or the environment and prevent what has occurred from getting worse or spreading. What is your immediate response to a spill, fire, explosion, or airborne release at your business.

Spills of small amounts will be cleaned with shop rags.

Larger spills are immediately contained with berms of absorbent materials.

Fire / explosion would require immediate 911 call and evacuation. Use fire extinguishers where appropriate.

**c.Abatement** (remove the hazard) - Describe what you would do to stop and remove the hazard. How do you handle the complete process of stopping a release, clean-up and disposing of released materials at your facility? What aspects of the response are beyond your ability and need to be handled by others?

Spills will be contained with absorbent perimeter dykes then absorbent material will be used to soak spilled material.

Cleanup would include putting soiled material into leak proof specially marked containers.

Disposal would be contracted to our waste material hauler for proper disposal.

**d. Evacuation** - Describe how you will immediately notify and evacuate your facility. What communication or alarms are used? How will you operate during a power failure? Also specify emergency exits, alternatives and staging area.

Notification will be done by intercom or loud voice in the event of equipment failure.

Showroom / Office area evacuation would be through 2 exit doors, shop area employees have multiple exit routes.

Staging and assembly area is designated to be the west end of parking lot to allow easy access to emergency vehicles.

**e. BEP Copies** - Your Business is required by State Law to keep a copy of this business plan, including the chemical inventory and Site Map. Describe where copies will be located at your business. Where will other copies be maintained?

Office area of store and the record maintenance at corporate office.

**f. Other Records** - Describe where other records required by this plan are kept, such as employee training records (including drills), release reports, persons responsible for maintenance / safety records and emergency phone lists.



Office area of store and record maintenance at corporate at:

16201 Commerce way  
Cerritos, CA 90703

### III. Employee Training Program

**Employee Training** - Describe the training your business conducts for all employees in safety procedures in the event of a release or threatened release of hazardous materials. The business plan shall include a training program which is reasonable and appropriate for the size of the business and the nature of the hazardous materials handled. By law, this training shall include but not be limited to the following: immediate notification to the administering agency (Orange County Healthcare Agency), procedures for the mitigation of a release and evacuation plans and procedures, new employee training, annual training, periodic courses and familiarization with Emergency Plans and procedure of this Business Emergency Plan.

Employees are trained in the following areas:

- Familiarity with all plans and procedures specified in the Contingency Plan.
- Methods for safe handling of hazardous materials.
- Safety procedures in the event of a release or threatened release of a hazardous material.
- Use of emergency response equipment and supplies under the control of the business.
- Procedures for coordination with local emergency response organizations.

TRAINING Is PROVIDED:

- Initially for all new employees within six months of start of employment.

**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS ACTIVITIES**

**I. FACILITY IDENTIFICATION**

FACILITY ID # (Agency Use Only)	<b>F A 0 0 2 6 5 8 4</b>	EPA ID # (Hazardous Waste Only)	<b>CAL000220180</b>
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	<b>AMERICAN TIRE DEPOT &amp; ATV INC</b>		
BUSINESS SITE ADDRESS	<b>13692 HARBOR BLVD</b>		
BUSINESS SITE CITY	<b>GARDEN GROVE</b>	CA	ZIP CODE <b>92843</b>

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF....
<b>A. HAZARDOUS MATERIALS</b> Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
<b>B. REGULATED SUBSTANCES</b> Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	<input type="checkbox"/> YES Coordinate with your local agency responsible for CalARP.
<b>C. UNDERGROUND STORAGE TANKS (USTs)</b> Own or operate underground storage tanks?	<input type="checkbox"/> YES UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
<b>D. ABOVE GROUND PETROLEUM STORAGE</b> Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	<input type="checkbox"/> YES NO FORM REQUIRED TO CUPAs
<b>E. HAZARDOUS WASTE</b> Generate hazardous waste?  Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?  Treat hazardous waste on-site?  Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?  Consolidate hazardous waste generated at a remote site?  Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?  Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.  Household Hazardous Waste (HHW) Collection site?	<input checked="" type="checkbox"/> YES EPA ID NUMBER – provide at the top of this page  <input type="checkbox"/> YES RECYCLABLE MATERIALS REPORT (one per recycler)  <input type="checkbox"/> YES ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)  <input type="checkbox"/> YES CERTIFICATION OF FINANCIAL ASSURANCE  <input type="checkbox"/> YES REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION  <input type="checkbox"/> YES HAZARDOUS WASTE TANK CLOSURE CERTIFICATION  <input type="checkbox"/> YES Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.  <input type="checkbox"/> YES See CUPA for required forms.

**F. LOCAL REQUIREMENTS**

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

*DECLINED  
- NEW MAP*

**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS ACTIVITIES**

Page 1 of

**I. FACILITY IDENTIFICATION**

FACILITY ID # (Agency Use Only)	<b>F A 0 0 2 6 5 8 4</b>	<sup>1</sup>	EPA ID # (Hazardous Waste Only)	<sup>2</sup>
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)			<b>AMERICAN TIRE DEPOT &amp; ATV INC</b>	<sup>3</sup>
BUSINESS SITE ADDRESS				<sup>103</sup>
<b>13692 HARBOR BLVD</b>				
BUSINESS SITE CITY	<b>GARDEN GROVE</b>	<sup>104</sup>	CA	ZIP CODE <b>92843</b> <sup>105</sup>

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF....
<b>A. HAZARDOUS MATERIALS</b> Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
<b>B. REGULATED SUBSTANCES</b> Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	<input type="checkbox"/> YES Coordinate with your local agency responsible for CalARP.
<b>C. UNDERGROUND STORAGE TANKS (USTs)</b> Own or operate underground storage tanks?	<input type="checkbox"/> YES UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
<b>D. ABOVE GROUND PETROLEUM STORAGE</b> Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	<input type="checkbox"/> YES NO FORM REQUIRED TO CUPAs
<b>E. HAZARDOUS WASTE</b> Generate hazardous waste?  Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?  Treat hazardous waste on-site?  Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?  Consolidate hazardous waste generated at a remote site?  Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?  Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.  Household Hazardous Waste (HHW) Collection site?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> YES EPA ID NUMBER – provide at the top of this page  RECYCLABLE MATERIALS REPORT (one per recycler)  ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)  CERTIFICATION OF FINANCIAL ASSURANCE  REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION  HAZARDOUS WASTE TANK CLOSURE CERTIFICATION  Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.  See CUPA for required forms.

**F. LOCAL REQUIREMENTS**

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

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**UNIFIED PROGRAM CONSOLIDATED FORM**

**FACILITY INFORMATION**

**BUSINESS OWNER/OPERATOR IDENTIFICATION**

Page \_\_\_ of \_\_\_

**I. IDENTIFICATION**

FACILITY ID#		FA0026584			1 BEGINNING DATE		100 ENDING DATE		101	
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)						3 BUSINESS PHONE				102
AMERICAN TIRE DEPOT & ATV INC						7146389401				
BUSINESS SITE ADDRESS						103 BUSINESS FAX				102a
13692 HARBOR BLVD						7146383983				
BUSINESS SITE CITY				104	CA	ZIP CODE		105	COUNTY	108
GARDEN GROVE						92843				
DUN & BRADSTREET						106 PRIMARY SIC		107	PRIMARY NAICS	107a
						7538				
BUSINESS MAILING ADDRESS										108a
16201 COMMERCE WAY										
BUSINESS MAILING CITY						108b	STATE	108c	ZIP CODE	108d
CERRITOS							CA		90703	
BUSINESS OPERATOR NAME						BUSINESS OPERATOR PHONE				110
ATV INC						5626773950				

**II. BUSINESS OWNER**

OWNER NAME						111 OWNER PHONE				112
ATV INC						5626773950				
OWNER MAILING ADDRESS										113
16201 COMMERCE										
OWNER MAILING CITY						114	STATE	115	ZIP CODE	116
CERRITOS							CA		90703	

**III. ENVIRONMENTAL CONTACT**

CONTACT NAME						117 CONTACT PHONE				118
Hrag Saboundjian						5626773950				
CONTACT MAILING ADDRESS						119 CONTACT EMAIL				119a
16201 Commerce Way						hrag@atvtireinc.com				
CONTACT MAILING CITY						120	STATE	121	ZIP CODE	122
Cerritos							CA		90703	

**-PRIMARY-**

**IV. EMERGENCY CONTACTS**

**-SECONDARY-**

NAME						123 NAME				128
[REDACTED]						[REDACTED]				
TITLE						124 TITLE				129
General Manager						President				
BUSINESS PHONE						125 BUSINESS PHONE				130
[REDACTED]						[REDACTED]				
24-HOUR PHONE						126 24-HOUR PHONE				131
[REDACTED]						[REDACTED]				
CELL / PAGER #						127 CELL / PAGER #				132
[REDACTED]						[REDACTED]				
EMAIL						EMAIL				

ADDITIONAL LOCALLY COLLECTED INFORMATION:

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

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE				DATE		134 NAME OF DOCUMENT PREPARER		135
Ara Tchaghlissian						Hrag Saboundjian		
NAME OF SIGNER (print)				136		TITLE OF SIGNER		137
Ara Tchaghlissian						President		

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD       DELETE       REVISE      200      Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) <span style="float:right">3</span>		
AMERICAN TIRE DEPOT & ATV INC		
CHEMICAL LOCATION <span style="float:right">201</span>	CHEMICAL LOCATION CONFIDENTIAL EPCRA <span style="float:right">202</span>	
North East corner of building	<input type="checkbox"/> YES	
FACILITY ID #	MAP# (optional) <span style="float:right">203</span>	GRID# (optional) <span style="float:right">204</span>
F    A    0    0    2    6    5    3    4    1		

**II. CHEMICAL INFORMATION**

CHEMICAL NAME <span style="float:right">205</span>	TRADE SECRET <input type="checkbox"/> Yes <span style="float:right">206</span>		
Waste oils	If Subject to EPCRA, refer to instructions		
COMMON NAME <span style="float:right">207</span>	EHS* <input type="checkbox"/> Yes <span style="float:right">208</span>		
Waste oils			
CAS# <span style="float:right">209</span>	*If EHS is "Yes", all amounts below must be in lbs.		
FIRE CODE HAZARD CLASSES (Complete if required by CUPA) <span style="float:right">210</span>			
Flammable Liquid, Class I-A (3.3 I-A)			
HAZARDOUS MATERIAL TYPE (Check one item only) <span style="float:right">211</span>	RADIOACTIVE <input type="checkbox"/> Yes <span style="float:right">212</span>	CURIES <span style="float:right">213</span>	
<input type="checkbox"/> a. PURE <input checked="" type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE			
PHYSICAL STATE (Check one item only) <span style="float:right">214</span>	LARGEST CONTAINER <span style="float:right">215</span>		
<input type="checkbox"/> a. SOLID <input checked="" type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS	240.0		
FED HAZARD CATEGORIES (Check all that apply) <span style="float:right">216</span>			
<input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH			
AVERAGE DAILY AMOUNT <span style="float:right">217</span>	MAXIMUM DAILY AMOUNT <span style="float:right">218</span>	ANNUAL WASTE AMOUNT <span style="float:right">219</span> STATE WASTE CODE <span style="float:right">220</span>	
100.0	240.0	670.0	
UNITS* (Check one item only) <span style="float:right">221</span>	DAYS ON SITE: <span style="float:right">222</span>		
<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	365.0		
* If EHS, amount must be in pounds.			
STORAGE CONTAINER <span style="float:right">223</span>			
<input checked="" type="checkbox"/> a. ABOVE GROUND TANK <input type="checkbox"/> e. PLASTIC/NONMETALLIC DRUM <input type="checkbox"/> i. FIBER DRUM <input type="checkbox"/> m. GLASS BOTTLE <input type="checkbox"/> q. RAIL CAR <input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> f. CAN <input type="checkbox"/> j. BAG <input type="checkbox"/> n. PLASTIC BOTTLE <input type="checkbox"/> r. OTHER <input type="checkbox"/> c. TANK INSIDE BUILDING <input type="checkbox"/> g. CARBOY <input type="checkbox"/> k. BOX <input type="checkbox"/> o. TOTE BIN <input type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> h. SILO <input type="checkbox"/> l. CYLINDER <input type="checkbox"/> p. TANK WAGON			
STORAGE PRESSURE <span style="float:right">224</span>			
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT			
STORAGE TEMPERATURE <span style="float:right">225</span>			
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC			
%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 95.0 <span style="float:right">226</span>	Petroleum based lube oils <span style="float:right">227</span>	<input type="checkbox"/> Yes <span style="float:right">228</span>	64742650 <span style="float:right">229</span>
2 5.0 <span style="float:right">230</span>	sludge, water, debris <span style="float:right">231</span>	<input type="checkbox"/> Yes <span style="float:right">232</span>	<span style="float:right">233</span>
3 <span style="float:right">234</span>	<span style="float:right">235</span>	<input type="checkbox"/> Yes <span style="float:right">236</span>	<span style="float:right">237</span>
4 <span style="float:right">238</span>	<span style="float:right">239</span>	<input type="checkbox"/> Yes <span style="float:right">240</span>	<span style="float:right">241</span>
5 <span style="float:right">242</span>	<span style="float:right">243</span>	<input type="checkbox"/> Yes <span style="float:right">244</span>	<span style="float:right">245</span>

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION <span style="float:right">246</span>

If EPCRA, Please Sign Here

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD

DELETE

REVISE

200

Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

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

AMERICAN TIRE DEPOT & ATV INC

CHEMICAL LOCATION 201

North East wall corner of building

CHEMICAL LOCATION CONFIDENTIAL EPCRA 202

YES

FACILITY ID#

F A 0 0 2 6 5 B 4

MAP# (optional) 203

GRID# (optional) 204

**II. CHEMICAL INFORMATION**

CHEMICAL NAME 205

Lubricating oils

TRADE SECRET  Yes 206

If Subject to EPCRA, refer to instructions

COMMON NAME 207

Engine oil

EHS\*  Yes 208

CAS# 209

\*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210

Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) 211

a. PURE  b. MIXTURE  c. WASTE

RADIOACTIVE  Yes 212

CURIES 213

PHYSICAL STATE (Check one item only) 214

a. SOLID  b. LIQUID  c. GAS

LARGEST CONTAINER 215

240.0

FED HAZARD CATEGORIES (Check all that apply) 216

a. FIRE  b. REACTIVE  c. PRESSURE RELEASE  d. ACUTE HEALTH  e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217

100.0

MAXIMUM DAILY AMOUNT 218

325.0

ANNUAL WASTE AMOUNT 219

670.0

STATE WASTE CODE 220

UNITS\* (Check one item only) 221

a. GALLONS  b. CUBIC FEET  c. POUNDS  d. TONS

\* If EHS, amount must be in pounds.

DAYS ON SITE: 222

365.0

STORAGE CONTAINER 223

a. ABOVE GROUND TANK  e. PLASTIC/NONMETALLIC DRUM  i. FIBER DRUM  m. GLASS BOTTLE  q. RAIL CAR  
 b. UNDERGROUND TANK  f. CAN  j. BAG  n. PLASTIC BOTTLE  r. OTHER  
 c. TANK INSIDE BUILDING  g. CARBOY  k. BOX  o. TOTE BIN  
 d. STEEL DRUM  h. SILO  l. CYLINDER  p. TANK WAGON

STORAGE PRESSURE 224

a. AMBIENT  b. ABOVE AMBIENT  c. BELOW AMBIENT

STORAGE TEMPERATURE 225

a. AMBIENT  b. ABOVE AMBIENT  c. BELOW AMBIENT  d. CRYOGENIC

%WT

HAZARDOUS COMPONENT (For mixture or waste only)

EHS

CAS #

1 48.0 226

Petroleum Distillate - heavy fractions 227

Yes 228

64742650 229

2 48.0 230

Petroleum Distillate - Medium Fractions 231

Yes 232

233

3 5.0 234

Additives 235

Yes 236

237

4 238

239

Yes 240

241

5 242

243

Yes 244

245

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

**UNIFIED PROGRAM CONSOLIDATED FORM**  
**HAZARDOUS MATERIALS**  
**HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD           DELETE           REVISE          200          Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3		
AMERICAN TIRE DEPOT & ATV INC		
CHEMICAL LOCATION 201	CHEMICAL LOCATION CONFIDENTIAL EPCRA 202	
East Shop area between bay doors	<input type="checkbox"/> YES	
FACILITY ID #	MAP# (optional) 203	GRID# (optional) 204
F	A	0 0 2 6 5 3 4

**II. CHEMICAL INFORMATION**

CHEMICAL NAME 205	TRADE SECRET <input type="checkbox"/> Yes 206
Waste antifreeze	If Subject to EPCRA, refer to instructions
COMMON NAME 207	EHS* <input type="checkbox"/> Yes 208
waste antifreeze	
CAS# 209	*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210
Flammable Liquid, Class I-A (3.3 I-A)

HAZARDOUS MATERIAL TYPE (Check one item only) 211	RADIOACTIVE <input type="checkbox"/> Yes 212	CURIES 213
<input type="checkbox"/> a. PURE <input checked="" type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE		

PHYSICAL STATE (Check one item only) 214	LARGEST CONTAINER 215
<input type="checkbox"/> a. SOLID <input checked="" type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS	55.0

FED HAZARD CATEGORIES (Check all that apply) 216
<input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
25.0	55.0	110.0	

UNITS* (Check one item only) 221	DAYS ON SITE: 222
<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS * If EHS, amount must be in pounds	365.0

STORAGE CONTAINER 223
<input type="checkbox"/> a. ABOVE GROUND TANK <input type="checkbox"/> e. PLASTIC/NONMETALLIC DRUM <input type="checkbox"/> i. FIBER DRUM <input type="checkbox"/> m. GLASS BOTTLE <input type="checkbox"/> q. RAIL CAR <input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> f. CAN <input type="checkbox"/> j. BAG <input type="checkbox"/> n. PLASTIC BOTTLE <input type="checkbox"/> r. OTHER <input type="checkbox"/> c. TANK INSIDE BUILDING <input type="checkbox"/> g. CARBOY <input type="checkbox"/> k. BOX <input type="checkbox"/> o. TOTE BIN <input checked="" type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> h. SILO <input type="checkbox"/> l. CYLINDER <input type="checkbox"/> p. TANK WAGON

STORAGE PRESSURE 224
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT

STORAGE TEMPERATURE 225
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 50.0 226	Ethylene Glycol 227	<input type="checkbox"/> Yes 228	107211 229
2 50.0 230	water 231	<input type="checkbox"/> Yes 232	
3 234		<input type="checkbox"/> Yes 236	
4 238		<input type="checkbox"/> Yes 240	
5 242		<input type="checkbox"/> Yes 244	

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here

Asterisks (\*) indicate required fields

**I. General**

Business Name\* AMERICAN TIRE DEPOT & ATV INC +

Site Address 13692 HARBOR BLVD +

Business Site Address 2 FA0026584 +

BEP Preparer\* [Redacted]

Submission Requirement  Initial  3 Year Renewal  Update

**II. Notification**

Your business is required by State Law to provide immediate notification of any release or threatened release of a hazardous material to (1) Local emergency response personnel (2) The Office of Emergency Services (OES), and (3) this Agency (Orange County Healthcare Agency)

If you have a release or threatened release of hazardous materials, immediately call\* **FIRE / PARAMEDICS / POLICE - Phone: 911**  
**California Emergency Management Agency: (800) 852-7550 or (916) 262-1621**

911 Responsibility\* Store Manager

List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous materials.

Hospital / Clinic\* UC Irvine Medical Center

Address\* 101 The City Drive South

City\* Orange

Zip Code\* 92868

Phone\* (714) 456-7890

Does your business have a private on-site emergency response team  Yes

If yes, describe what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials.

[Empty text box for describing emergency response policies and procedures]

Briefly describe your business's standard operation procedure in the event of a release or threatened release of a hazardous material:

**a. Prevention** (prevent the hazard) - Describe the kinds of hazards associated with the materials present at your facility. Issues for discussion may include safety, storage, and containment procedures.



Hazards are potential spills, fire or exposure to automotive fluids, such as engine oil, transmission and brake fluids.

**b. Mitigation**(reduce the hazard) - Describe what is done to lessen the harm or damage to person(s), property, or the environment and prevent what has occurred from getting worse or spreading. What is your immediate response to a spill, fire, explosion, or airborne release at your business.

Spills of small amounts will be cleaned with shop rags.

Larger spills are immediately contained with berms of absorbent materials.

Fire / explosion would require immediate 911 call and evacuation. Use fire extinguishers where appropriate.

**c. Abatement** (remove the hazard) - Describe what you would do to stop and remove the hazard. How do you handle the complete process of stopping a release, clean-up and disposing of released materials at your facility? What aspects of the response are beyond your ability and need to be handled by others?

Spills will be contained with absorbent perimeter dykes then absorbent material will be used to soak spilled material.

Cleanup would include putting soiled material into leak proof specially marked containers.

Disposal would be contracted to our waste material hauler for proper disposal.

**d. Evacuation** - Describe how you will immediately notify and evacuate your facility. What communication or alarms are used? How will you operate during a power failure? Also specify emergency exits, alternatives and staging area.

Notification will be done by intercom or loud voice in the event of equipment failure.

Showroom / Office area evacuation would be through 2 exit doors, shop area employees have multiple exit routes.

Staging and assembly area is designated to be the East end of parking lot to allow easy access to emergency vehicles.

**e. BEP Copies** - Your Business is required by State Law to keep a copy of this business plan, including the chemical inventory and Site Map. Describe where copies will be located at your business. Where will other copies be maintained?

Office area of store and the record maintenance at corporate office.

**f. Other Records** - Describe where other records required by this plan are kept, such as employee training records (including drills), release reports, persons responsible for maintenance / safety records and emergency phone lists.

Office area of store and record maintenance at corporate at:

16201 Commerce Way  
Cerritos, CA 90703

### III. Employee Training Program

**Employee Training** - Describe the training your business conducts for all employees in safety procedures in the event of a release or threatened release of hazardous materials. The business plan shall include a training program which is reasonable and appropriate for the size of the business and the nature of the hazardous materials handled. By law, this training shall include but not be limited to the following: immediate notification to the administering agency (Orange County Healthcare Agency), procedures for the mitigation of a release and evacuation plans and procedures, new employee training, annual training, periodic courses and familiarization with Emergency Plans and procedure of this Business Emergency Plan.

Employees are trained in the following areas:

- Familiarity with all plans and procedures specified in the Contingency Plan.
- Methods for safe handling of hazardous materials.
- Safety procedures in the event of a release or threatened release of a hazardous material.
- Use of emergency response equipment and supplies under the control of the business.
- Procedures for coordination with local emergency response organizations.

TRAINING Is PROVIDED:

- Initially for all new employees within six months of start of employment.

**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS ACTIVITIES**

Page 1 of

**I. FACILITY IDENTIFICATION**

FACILITY ID # (Agency Use Only)	<b>F A 0 0 3 6 0 8 2</b>	<sup>1</sup>	EPA ID # (Hazardous Waste Only)	<sup>2</sup>
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)			<b>FAIRVIEW U-HAUL</b>	<sup>3</sup>
BUSINESS SITE ADDRESS			<b>13042 FAIRVIEW ST</b>	<sup>103</sup>
BUSINESS SITE CITY	<b>GARDEN GROVE</b>	<sup>104</sup>	CA	ZIP CODE <b>92842</b> <sup>105</sup>

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF....
<b>A. HAZARDOUS MATERIALS</b> Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION
<b>B. REGULATED SUBSTANCES</b> Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release prevention Program (CalARP)?	<input type="checkbox"/> YES Coordinate with your local agency responsible for CalARP.
<b>C. UNDERGROUND STORAGE TANKS (USTs)</b> Own or operate underground storage tanks?	<input type="checkbox"/> YES UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B)
<b>D. ABOVE GROUND PETROLEUM STORAGE</b> Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.	<input type="checkbox"/> YES NO FORM REQUIRED TO CUPAs
<b>E. HAZARDOUS WASTE</b> Generate hazardous waste?  Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?  Treat hazardous waste on-site?  Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?  Consolidate hazardous waste generated at a remote site?  Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?  Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.  Household Hazardous Waste (HHW) Collection site?	<input type="checkbox"/> YES EPA ID NUMBER – provide at the top of this page  <input type="checkbox"/> YES RECYCLABLE MATERIALS REPORT (one per recycler)  <input type="checkbox"/> YES ON-SITE HAZARDOUS WASTE TREATMENT – FACILITY ON-SITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit)  <input type="checkbox"/> YES CERTIFICATION OF FINANCIAL ASSURANCE  <input type="checkbox"/> YES REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION  <input type="checkbox"/> YES HAZARDOUS WASTE TANK CLOSURE CERTIFICATION  <input type="checkbox"/> YES Obtain federal EPA ID Number, file Biennial Report (EPA Form 8700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.  <input type="checkbox"/> YES See CUPA for required forms.

**F. LOCAL REQUIREMENTS**

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

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**UNIFIED PROGRAM CONSOLIDATED FORM**

**FACILITY INFORMATION**

**BUSINESS OWNER/OPERATOR IDENTIFICATION**

Page \_\_\_ of \_\_\_

**I. IDENTIFICATION**

FACILITY ID#	<b>FA0036082</b>	BEGINNING DATE	<b>05/28/2013</b>	ENDING DATE	<b>05/31/2014</b>
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)			BUSINESS PHONE		
<b>FAIRVIEW U-HAUL</b>			<b>7149710222</b>		
BUSINESS SITE ADDRESS			BUSINESS FAX		
<b>13042 FAIRVIEW ST</b>			<b>7148714263</b>		
BUSINESS SITE CITY	STATE	ZIP CODE	COUNTY		
<b>GARDEN GROVE</b>	<b>CA</b>	<b>92842</b>			
DUN & BRADSTREET	PRIMARY SIC	PRIMARY NAICS			
<b>194730412</b>	<b>7513</b>	<b>532120</b>			
BUSINESS MAILING ADDRESS					
<b>920 W COMMONWEALTH AVE</b>					
BUSINESS MAILING CITY	STATE	ZIP CODE			
<b>FULLERTON</b>	<b>CA</b>	<b>92832</b>			
BUSINESS OPERATOR NAME			BUSINESS OPERATOR PHONE		
<b>U-Haul Moving &amp; Storage at Fairview</b>			<b>7149710222</b>		

**II. BUSINESS OWNER**

OWNER NAME	OWNER PHONE
<b>UHAUL COMPANY OF CA INC</b>	<b>7145254701</b>
OWNER MAILING ADDRESS	
<b>920 COMMONWEALTH AVE</b>	
OWNER MAILING CITY	STATE ZIP CODE
<b>FULLERTON</b>	<b>CA 92832</b>

**III. ENVIRONMENTAL CONTACT**

CONTACT NAME	CONTACT PHONE
<b>Brandon Williams</b>	<b>7145254701</b>
CONTACT MAILING ADDRESS	CONTACT EMAIL
<b>920 W. Commonwealth Ave</b>	<b>715_president@uhaul.com</b>
CONTACT MAILING CITY	STATE ZIP CODE
<b>Fullerton</b>	<b>CA 92832</b>

**-PRIMARY-**

**IV. EMERGENCY CONTACTS**

**-SECONDARY-**

NAME	TITLE	BUSINESS PHONE	24-HOUR PHONE	CELL / PAGER #	EMAIL
[REDACTED]	<b>Marketing Company President</b>	<b>7145254701</b>	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	<b>Shop Manager</b>	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

ADDITIONAL LOCALLY COLLECTED INFORMATION:

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

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE	NAME OF DOCUMENT PREPARER
<b>Brandon Williams</b>		<b>Luisa Guerra</b>
NAME OF SIGNER (print)	TITLE OF SIGNER	
<b>Brandon Williams</b>	<b>Marketing Company President</b>	

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS MATERIALS  
HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION**

(one page per material per building or area)

ADD       DELETE       REVISE      200      Page \_\_\_ of \_\_\_

**I. FACILITY INFORMATION**

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) <span style="float:right">3</span>	
FAIRVIEW U-HAUL	
CHEMICAL LOCATION <span style="float:right">201</span>	CHEMICAL LOCATION CONFIDENTIAL EPCRA <span style="float:right">202</span>
Along Fairview St. in front of entrance	<input type="checkbox"/> YES
FACILITY ID #    F    A    0    0    3    6    0    8    2    1	MAP# (optional) <span style="float:right">203</span> GRID# (optional) <span style="float:right">204</span>

**II. CHEMICAL INFORMATION**

CHEMICAL NAME <span style="float:right">205</span>	TRADE SECRET <input type="checkbox"/> Yes <span style="float:right">206</span>		
Propane	<small>If Subject to EPCRA, refer to instructions</small>		
COMMON NAME <span style="float:right">207</span>	EHS* <input type="checkbox"/> Yes <span style="float:right">208</span>		
Odorized Propane			
CAS# <span style="float:right">209</span>	*If EHS is "Yes", all amounts below must be in lbs.		
74-98-6			
FIRE CODE HAZARD CLASSES (Complete if required by CUPA) <span style="float:right">210</span>			
Flammable Liquefied Gas (3.2)			
HAZARDOUS MATERIAL TYPE (Check one item only) <span style="float:right">211</span>	RADIOACTIVE <input type="checkbox"/> Yes <span style="float:right">212</span> CURIES <span style="float:right">213</span>		
<input type="checkbox"/> a. PURE <input checked="" type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE			
PHYSICAL STATE (Check one item only) <span style="float:right">214</span>	LARGEST CONTAINER <span style="float:right">215</span>		
<input type="checkbox"/> a. SOLID <input checked="" type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS	1150.0		
FED HAZARD CATEGORIES (Check all that apply) <span style="float:right">216</span>			
<input checked="" type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input checked="" type="checkbox"/> c. PRESSURE RELEASE <input checked="" type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH			
AVERAGE DAILY AMOUNT <span style="float:right">217</span>	MAXIMUM DAILY AMOUNT <span style="float:right">218</span> ANNUAL WASTE AMOUNT <span style="float:right">219</span> STATE WASTE CODE <span style="float:right">220</span>		
500.0	920.0		
UNITS* (Check one item only) <span style="float:right">221</span>	DAYS ON SITE: <span style="float:right">222</span>		
<input checked="" type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS	365.0		
* If EHS, amount must be in pounds.			
STORAGE CONTAINER <span style="float:right">223</span>			
<input checked="" type="checkbox"/> a. ABOVE GROUND TANK <input type="checkbox"/> e. PLASTIC/NONMETALLIC DRUM <input type="checkbox"/> i. FIBER DRUM <input type="checkbox"/> m. GLASS BOTTLE <input type="checkbox"/> q. RAIL CAR			
<input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> f. CAN <input type="checkbox"/> j. BAG <input type="checkbox"/> n. PLASTIC BOTTLE <input type="checkbox"/> r. OTHER			
<input type="checkbox"/> c. TANK INSIDE BUILDING <input type="checkbox"/> g. CARBOY <input type="checkbox"/> k. BOX <input type="checkbox"/> o. TOTE BIN			
<input type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> h. SILO <input type="checkbox"/> l. CYLINDER <input type="checkbox"/> p. TANK WAGON			
STORAGE PRESSURE <span style="float:right">224</span>			
<input type="checkbox"/> a. AMBIENT <input checked="" type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT			
STORAGE TEMPERATURE <span style="float:right">225</span>			
<input checked="" type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC			
%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 87.51 <span style="float:right">226</span>	Propane <span style="float:right">227</span>	<input type="checkbox"/> Yes <span style="float:right">228</span>	74-98-6 <span style="float:right">229</span>
2 7.0 <span style="float:right">230</span>	Ethane <span style="float:right">231</span>	<input type="checkbox"/> Yes <span style="float:right">232</span>	74-84-0 <span style="float:right">233</span>
3 5.0 <span style="float:right">234</span>	Propylene <span style="float:right">235</span>	<input type="checkbox"/> Yes <span style="float:right">236</span>	115-07-01 <span style="float:right">237</span>
4 2.5 <span style="float:right">238</span>	Butanes <span style="float:right">239</span>	<input type="checkbox"/> Yes <span style="float:right">240</span>	106-97-8 <span style="float:right">241</span>
5 0.0 <span style="float:right">242</span>	Ethyl Mercapten <span style="float:right">243</span>	<input type="checkbox"/> Yes <span style="float:right">244</span>	75-08-01 <span style="float:right">245</span>

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.

ADDITIONAL LOCALLY COLLECTED INFORMATION <span style="float:right">246</span>

If EPCRA, Please Sign Here

Asterisks (\*) indicate required fields

Business Name FAIRVIEW U-HAUL \*

Facility ID FA0036082 \*

Site Address 13042 FAIRVIEW ST \*

City\* GARDEN GROVE \*

Zip Code 92842 \*

**THE FOLLOWING FORM IS FOR USE IN THE EVENT OF AN ACTUAL OR THREATENING HAZARDOUS MATERIALS EMERGENCY.**

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.

**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.).

Verbal, cell phone, radios

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:

Primary-Fairview St. sidewalk on the south corner of the property. Secondary-Nort

Your business is required by State law (CFC 8001.3.2) to retain a copy of this entire Hazardous Materials Disclosure information, including the Business Plan, chemical inventory, material safety data sheets and site maps, for review by Fire Department personnel. State where your disclosure and Emergency Business Plan will be kept.

Hazardous Materials Business Plan binder next to permits bulletin board near GM's

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

**Employee Responsibilities:**

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

1. Notify employees. Initiate evacuation procedures.
2. Notify the Garden Grove Fire Department. Dial 911.
3. Try to identify the nature of the incident.

4. Report to the staging area and account for evacuated employees.
5. Report to the incoming fire units.
6. Activate any emergency mitigation procedures that are available at your business. (List below any mitigation procedures specific to your business, if any.)

Center Manager or Marketing Company President

---

### Training Requirements:

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

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

---

### Emergency Notifications

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

### Required Notifications

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

Agency	Phone Numbers
Garden Grove Fire Department, Police, Paramedics	911
Office of Emergency Services (OES)	(800) 852-7550 or (916) 427-4341
National Response Center	(800) 424-8802

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### 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:

Drum storage and/or above ground tank storage areas:

- Isolation and separation of incompatible materials.
- Diking areas to contain spills.
- Storage on paved ground.

Compressed and/or cryogenic gas storage areas:

- Cylinder stored upright and secured.
- Isolation and/or separation of incompatible cylinders (oxygen and flammable gases, etc.).

General

- Safe work practices are exercised in daily routines.
- Employees who handle hazardous materials are properly trained.
- Material Safety Data Sheets (MSDS) readily available for each hazardous material on the premises.

- Labeling of all materials and storage areas with the product name and hazards associated with the product (drums, piping, tanks, etc.).
- Posting of "No Smoking" signs where appropriate.



# GARDEN GROVE



## FIRE DEPARTMENT

### HAZARDOUS MATERIALS DISCLOSURE PROGRAM

#### REPORTING FORMS PACKET

**SHORT VERSION**

FOR OFFICIAL USE ONLY	
FACILITY ID NO.	<u>9099</u>
BUSINESS NAME	<u>American Tire Depot</u>
BUSINESS ADDRESS	<u>7031 Garden Grove Blvd</u>
APPROVED BY	<u>G</u> DATE <u>3/24/11</u>
NEW BUSINESS	<input type="checkbox"/> YES <input type="checkbox"/> NO UPDATE _____
PICK	<input type="checkbox"/> 4D <input type="checkbox"/> BUSLIST <input type="checkbox"/> CALARP: <input type="checkbox"/> CUPA: <input type="checkbox"/> GIS <input type="checkbox"/>
FEE	_____



# CITY OF GARDEN GROVE FIRE DEPARTMENT

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

FORM 1

## Hazardous Materials Business Information Form

Page \_\_\_ of \_\_\_ 3

### BUSINESS INFORMATION

FACILITY # (Supplied by GGFD)	3 0 0 3 5	BEGINNING DATE	1	ENDING DATE	2
BUSINESS NAME	AMERICAN TIRE DEPOT "GORDON TIRE"			BUSINESS PHONE	5
BUSINESS SITE ADDRESS					6
7031 GARDEN GROVE BLVD					
CITY	GARDEN GROVE	7	STATE	CA	8
DUN & BRADSTREET	10	SIC CODE (4 DIGIT #)	11	FIRE DISTRICT	12
COUNTY	ORANGE				13
BUSINESS OPERATOR NAME	14	OPERATOR'S PHONE	15		

### BUSINESS OWNER

OWNER NAME	A.T.U.	16	OWNER PHONE	(562) 677-3950	17
OWNER MAILING ADDRESS					18
16201 Commerce Blvd					
CITY	CERRITOS	19	STATE	CA	20
ZIP					21
90703					

### ENVIRONMENTAL CONTACT

CONTACT NAME	22	CONTACT PHONE	23		
CONTACT MAILING ADDRESS					24
CITY					25
STATE					26
ZIP					27

### PRIMARY

### EMERGENCY CONTACTS

### SECONDARY

NAME	[REDACTED]	28	NAME	[REDACTED]	33
TITLE	STORE MANAGER	29	TITLE	District Manager	34
BUSINESS PHONE	(714) 898-2696	30	BUSINESS PHONE	[REDACTED]	35
24-HR. PHONE	[REDACTED]	31	24-HR. PHONE	[REDACTED]	36
PAGER #	N/A	32	PAGER #	[REDACTED]	37

### ADDITIONAL LOCALLY COLLECTED INFORMATION

DESCRIBE THE TYPE OF BUSINESS OPERATION:	Tires, Service	38	TOTAL # OF EMPLOYEES	5 to 6	39
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)	40			ATTENTION	41
PROPERTY OWNER NAME	A.T.U.	42	ADDRESS	16201 Commerce Blvd	43
PHONE					44
(562) 677-3950					

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

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	[REDACTED]	45	DATE	3-14-11	46
NAME OF SIGNER (print)	[REDACTED]	47	NAME OF DOCUMENT PREPARER (print)	49	
TITLE OF SIGNER	Store Manager	48	TITLE OF DOCUMENT PREPARER	50	

**UNIFIED PROGRAM CONSOLIDATED FORM**

**FACILITY INFORMATION**

**BUSINESS ACTIVITIES**

Page 1 of \_\_\_\_\_

I. FACILITY IDENTIFICATION											
FACILITY ID#										1. EPA ID # (Hazardous Waste Only)	2.

3. BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As)	3.
<p style="font-size: 1.2em; margin: 0;"><b>GORDON TIRE CO. INC.</b></p>	

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF...	
<p><b>A. HAZARDOUS MATERIALS</b></p> <p>Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?</p>	<p><input checked="" type="checkbox"/> YES   <input type="checkbox"/> NO   4.</p>	<p><input checked="" type="checkbox"/> HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (OES 2731)</p>
<p><b>B. UNDERGROUND STORAGE TANKS (USTs)</b></p> <p>1. Own or operate underground storage tanks?</p> <p>2. Intent to upgrade existing or install new USTs?</p> <p>3. Need to report closing a UST?</p>	<p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   5.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   6.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   7.</p>	<p><input checked="" type="checkbox"/> UST FACILITY (Formerly SWRCB Form A)</p> <p><input checked="" type="checkbox"/> UST TANK (one page per tank) (Formerly Form B)</p> <p><input checked="" type="checkbox"/> UST FACILITY</p> <p><input checked="" type="checkbox"/> UST TANK (one per tank)</p> <p><input checked="" type="checkbox"/> UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C)</p> <p><input checked="" type="checkbox"/> UST TANK (closure portion-one page per tank)</p>
<p><b>C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)</b></p> <p>Own or operate ASTs above these thresholds:</p> <ul style="list-style-type: none"> <li>- any tank capacity is greater than 660 gallons, or</li> <li>- the total aggregate capacity for the entire facility (ASTs, drums and portable containers) greater than 1,320 gallons?</li> </ul>	<p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   8.</p>	<p><input checked="" type="checkbox"/> NO FORM REQUIRED TO CUPAS</p>
<p><b>D. HAZARDOUS WASTE</b></p> <p>1. Generate hazardous waste?</p> <p>2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)?</p> <p>3. Treat hazardous waste on site?</p> <p>4. Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)?</p> <p>5. Consolidate hazardous waste generated at a remove site?</p> <p>6. Need to report the closure/removal of a tank that was classified waste and cleaned onsite?</p>	<p><input checked="" type="checkbox"/> YES   <input type="checkbox"/> NO   9.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   10.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   11.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   12.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   13.</p> <p><input type="checkbox"/> YES   <input checked="" type="checkbox"/> NO   14.</p>	<p><input checked="" type="checkbox"/> EPA ID NUMBER - provide at the top of this page</p> <p><input checked="" type="checkbox"/> RECYCLABLE MATERIALS REPORT (one per recycler)</p> <p><input checked="" type="checkbox"/> ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772)</p> <p><input checked="" type="checkbox"/> ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)</p> <p><input checked="" type="checkbox"/> CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232)</p> <p><input checked="" type="checkbox"/> REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)</p> <p><input checked="" type="checkbox"/> HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)</p>

<p><b>E. LOCAL REQUIREMENTS</b></p> <p align="center">(You may also be required to provide additional information by your CUPA or local agency.)</p>	15.
--	-----

**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.)

VOCAL

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.

FRONT PARKING LOT GRID E 6

Employee Responsibilities:

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

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

N/A

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

***BUSINESS EMERGENCY PLAN***

Personnel Emergency Notifications and Responsibilities

Prevention

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

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

Consideration shall include:

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

# GARDEN GROVE FIRE DEPARTMENT

## BUSINESS EMERGENCY PLAN

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

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

Your business is required by State law 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.

GRID L 5

OFFICE FILING CABINET

**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: Alan Gordon  
NAME: ALAN GORDON  
TITLE: PRES.  
DATE: 4-5-00

CALIFORNIA CHEMICAL INVENTORY FORM - DESCRIPTION PAGE

(1)  ADD  DELETE  REVISE  NO CHANGE

PAGE (2)  OF 3)

BUSINESS NAME (4) GORDON TIRE CO.  
CHEMICAL LOCATION (Address, Area, Building, etc.) (5) 7031 GARDEN GROVE BLVD  
MAP # (if more than one) (6) GRID # (7) I5

CHEMICAL NAME (8) WASTE OIL TRADE SECRET (11)  Y  N  
COMMON NAME (9) WASTE OIL AHM / \*EHS (12)  Y  N  
CAS # (10) 64742-54-7 \*IF EHS BOX IS "Y" ALL AMOUNTS MUST BE IN LBS  
FIRE CODE HAZARD CLASSES\* (13) CIB

\*COMPLETE BLOCK (13) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

TYPE (14)  PURE  MIXTURE  WASTE CHECK IF RADIOACTIVE (15)  (16)   
PHYSICAL STATE (17)  SOLID  LIQUID  GAS CURIES

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

STATE WASTE CODE (19) 221 UNITS (22)  GAL  CU FT MAX DAILY AMT (23) 220  
DAYS ON SITE (20) 365 \*If EHS, amounts must be in lbs. AVG DAILY AMT (24) 110  
LARGEST CONTAINER (21) 220 ANNUAL WASTE AMT (25) 880

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

PRESSURE STORAGE (27)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT

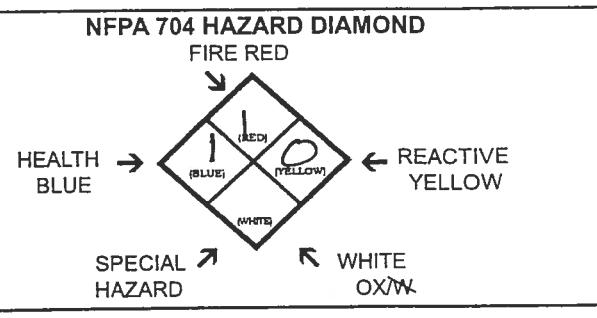
STORAGE TEMPERATURE (28)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT  CRYOGENIC

(29) % WT  
1. 95  
2.  
3.

(30) HAZARDOUS COMPONENTS	(31) EHS/AHM	(32) CAS #
PETROLEUM DISTILLATES	<input type="checkbox"/> Y <input type="checkbox"/> N	64742-54-7
	<input type="checkbox"/> Y <input type="checkbox"/> N	
	<input type="checkbox"/> Y <input type="checkbox"/> N	

(33) ADDITIONAL LOCALLY COLLECTED INFORMATION  
\*COMPLETE BLOCK (33) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

NFPA CLASSIFICATION  
UN/DOT # 1270 Refer to shipping papers or MSDS  
DOT HAZARD CLASS 9 Refer to shipping papers or MSDS  
UFC HAZARD CLASS P3



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED



# Material Safety Data Sheet

Page 1 of 7

## 1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

USED MOTOR OIL

PRODUCT NUMBER(S): CPS224500

### COMPANY IDENTIFICATION

Chevron USA Products Company  
Environmental, Safety, and Health  
Room 2900  
575 Market St.  
San Francisco, CA 94105-2856

### EMERGENCY TELEPHONE NUMBERS

HEALTH (24 hr): (800)231-0623 or  
(510)231-0623 (International)  
TRANSPORTATION (24 hr): CHEMTREC  
(800)424-9300 or (202)483-7616

PRODUCT INFORMATION: MSDS Requests: (800) 228-3500  
Environmental, Safety, & Health Info: (415) 894-1899  
Product Information: (800) 582-3835

## 2. COMPOSITION/INFORMATION ON INGREDIENTS

100.0 % USED MOTOR OIL

CONTAINING

COMPONENTS

AMOUNT

LIMIT/QTY

AGENCY/TYPE

MOTOR OIL, USED

100.0%

### COMPOSITION COMMENT:

All the components of this material are on the Toxic Substances Control Act Chemical Substances Inventory.

TLV - Threshold Limit Value  
STEL - Short-term Exposure Limit  
RQ - Reportable Quantity  
C - Ceiling Limit  
A1-5 - Appendix A Categories

TWA - Time Weighted Average  
TPQ - Threshold Planning Quantity  
PEL - Permissible Exposure Limit  
CAS - Chemical Abstract Service Number  
( ) - Change Has Been Proposed

Revision Number: 6

Revision Date: 03/15/94

MSDS Number: 001793



USED MOTOR OIL

3. HAZARDS IDENTIFICATION

\*\*\*\*\* EMERGENCY OVERVIEW \*\*\*\*\*

Dark brown to black liquid.

- USED MOTOR OIL HAS CAUSED CANCER IN LABORATORY ANIMALS
- PROLONGED INHALATION OF VAPOR MAY BE HARMFUL
- KEEP OUT OF REACH OF CHILDREN

\*\*\*\*\*

POTENTIAL HEALTH EFFECTS

EYE:

This substance is not expected to cause prolonged or significant eye irritation.

SKIN:

This substance is not expected to cause prolonged or significant skin irritation. If absorbed through the skin, this substance is considered practically non-toxic to internal organs. Read the Toxicology Information section (11) of this document for more information.

INGESTION:

If swallowed, this substance is considered practically non-toxic to internal organs.

INHALATION:

Prolonged breathing of aerosol can cause respiratory irritation.

SIGNS AND SYMPTOMS OF EXPOSURE:

INHALATION: Respiratory tract irritation may include, but may not be limited to, one or more of the following: nasal discharge, sore throat, coughing, bronchitis, pulmonary edema and difficulty in breathing.

4. FIRST AID MEASURES

EYE:

No first aid procedures are required. However, as a precaution flush eyes with fresh water for 15 minutes. Remove contact lenses if worn.

SKIN:

Remove contaminated clothing. Wash skin thoroughly with soap and water. See a doctor if any signs or symptoms described in this document occur. Discard contaminated non-waterproof shoes and boots. Wash contaminated clothing.

INGESTION:

If swallowed, give water or milk to drink and telephone for medical advice. Consult medical personnel before inducing vomiting. If medical advice cannot be obtained, then take the person and product container to the nearest medical emergency treatment center or hospital.

INHALATION:

If respiratory discomfort or irritation occurs, move the person to fresh air. See a doctor if discomfort or irritation continues.

USED MOTOR OIL

## 5. FIRE FIGHTING MEASURES

### FLAMMABLE PROPERTIES

FLASH POINT: NDA

AUTOIGNITION: NDA

FLAMMABILITY LIMITS (% by volume in air): Lower: NDA Upper: NDA

### EXTINGUISHING MEDIA:

CO<sub>2</sub>, dry chemical, foam and water fog.

NFPA RATINGS: Health 1; Flammability 1; Reactivity 0.

### FIRE FIGHTING INSTRUCTIONS:

For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment. This may include self-contained breathing apparatus to protect against the hazardous effects of normal products of combustion or oxygen deficiency. Read the entire document.

### COMBUSTION PRODUCTS:

Normal combustion forms carbon dioxide, water vapor and may produce oxides of sulfur, nitrogen and phosphorous. Incomplete combustion can produce carbon monoxide.

## 6. ACCIDENTAL RELEASE MEASURES

CHEMTREC EMERGENCY NUMBER (24 hr): (800)424-9300 or (202)483-7616

### ACCIDENTAL RELEASE MEASURES:

This material is considered to be a water pollutant and releases of this product should be prevented from contaminating soil and water and from entering drainage and sewer systems.

U.S.A. regulations require reporting spills of this material that could reach any surface waters. The toll free number for the U.S. Coast Guard National Response Center is (800) 424-8802.

Stop the source of the leak or release. Clean up releases as soon as possible, observing precautions in Exposure Controls/Personal Protection. Contain liquid to prevent further contamination of soil, surface water or groundwater. Clean up small spills using appropriate techniques such as sorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Follow prescribed procedures for reporting and responding to larger releases.

## 7. HANDLING AND STORAGE

### HANDLING AND STORAGE:

No data available.

USED MOTOR OIL

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## 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

---

### PERSONAL PROTECTIVE EQUIPMENT

#### EYE/FACE PROTECTION:

No special eye protection is usually necessary.

#### SKIN PROTECTION:

Avoid contact with skin or clothing. Skin contact should be minimized by wearing protective clothing including gloves.

#### RESPIRATORY PROTECTION:

Unless ventilation is adequate to keep airborne concentrations below recommended exposure standards, approved respiratory protection should be worn.

#### ENGINEERING CONTROLS:

Use adequate ventilation to keep the airborne concentrations of this material below the recommended exposure standard.

---

## 9. PHYSICAL AND CHEMICAL PROPERTIES

---

### PHYSICAL DESCRIPTION:

Dark brown to black liquid.

pH:	NDA
VAPOR PRESSURE:	NDA
VAPOR DENSITY	
(AIR=1):	NDA
BOILING POINT:	NDA
FREEZING POINT:	NDA
MELTING POINT:	NDA
SOLUBILITY:	Soluble in petroleum solvents.
SPECIFIC GRAVITY:	NDA
DENSITY:	NDA
EVAPORATION RATE:	NDA
PERCENT VOLATILE	
(VOL):	NDA

---

## 10. STABILITY AND REACTIVITY

---

### HAZARDOUS DECOMPOSITION PRODUCTS:

NDA

### CHEMICAL STABILITY:

Stable.

### CONDITIONS TO AVOID:

No data available.

### INCOMPATIBILITY WITH OTHER MATERIALS:

May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.

### HAZARDOUS POLYMERIZATION:

Polymerization will not occur.

---

USED MOTOR OIL

## 11. TOXICOLOGICAL INFORMATION

### EYE EFFECTS:

The Draize Eye Irritation Score (range, 0-110) in rabbits is 1.33/110.

### SKIN EFFECTS:

The Draize Skin Primary Irritation Score (range, 0-8) for a 4-hour exposure (rabbits) is 0.46. The dermal LD50 in rabbits is greater than 5 ml/kg.

### ACUTE ORAL EFFECTS:

The oral LD50 in rats is > 25 ml/kg.

### ACUTE INHALATION EFFECTS:

No product toxicology data available. The hazard evaluation was based on data from similar materials.

### ADDITIONAL TOXICOLOGY INFORMATION:

In laboratory tests sponsored by the American Petroleum Institute (API), mice developed skin cancer following repeated application of and continuous skin exposure to used motor oils with no effort made to remove oil between applications. Brief or intermittent skin contact with used motor oils is not expected to have serious effects if the material is thoroughly removed by washing with soap and water. While skin cancer is unlikely to occur in humans from the handling of used motor oil, skin contact should be reduced to a minimum by following the precautions outlined in this MSDS.

This product gave positive results in the following mutagen testing assays: Ames assay.

## 12. ECOLOGICAL INFORMATION

### ECOTOXICITY:

No data available.

### ENVIRONMENTAL FATE:

No data available.

## 13. DISPOSAL CONSIDERATIONS

### DISPOSAL CONSIDERATIONS:

Used oil collection services and collection centers can safely receive used motor oil for recycling or disposal. Some service stations, automotive service centers, and retailers provide used motor oil collection facilities.

Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods.

**14. TRANSPORT INFORMATION**

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT SHIPPING NAME: NOT DESIGNATED AS A HAZARDOUS MATERIAL BY THE  
FEDERAL DOT

DOT HAZARD CLASS: NOT APPLICABLE

DOT IDENTIFICATION NUMBER: NOT APPLICABLE

DOT PACKING GROUP: NOT APPLICABLE

**15. REGULATORY INFORMATION**

SARA 311 CATEGORIES:

1. Immediate (Acute) Health Effects:	NO
2. Delayed (Chronic) Health Effects:	YES
3. Fire Hazard:	NO
4. Sudden Release of Pressure Hazard:	NO
5. Reactivity Hazard:	NO

## REGULATORY LISTS SEARCHED:

01=SARA 313	11=NJ RTK	22=TSCA Sect 5(a)(2)
02=MASS RTK	12=CERCLA 302.4	23=TSCA Sect 6
03=NTP Carcinogen	13=MN RTK	24=TSCA Sect 12(b)
04=CA Prop 65-Carcin	14=ACGIH TWA	25=TSCA Sect 8(a)
05=CA Prop 65-Repro Tox	15=ACGIH STEL	26=TSCA Sect 8(d)
06=IARC Group 1	16=ACGIH Calc TLV	27=TSCA Sect 4(a)
07=IARC Group 2A	17=OSHA PEL	28=Canadian WHMIS
08=IARC Group 2B	18=DOT Marine Pollutant	29=OSHA CEILING
09=SARA 302/304	19=Chevron TWA	30=Chevron STEL
10=PA RTK	20=EPA Carcinogen	

None of the components of this material are found on the regulatory lists indicated.

**16. OTHER INFORMATION**

NFPA RATINGS: Health 1; Flammability 1; Reactivity 0; (Least-0, Slight-1, Moderate-2, High-3, Extreme-4). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

## REVISION STATEMENT:

This Material Safety Data Sheet has been revised to comply with the

USED MOTOR OIL

ANSI Z400.1 Standard. Changes have also been made throughout this MSDS. Please read the entire document.

\*\*\*\*\*

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modification of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.

CALIFORNIA CHEMICAL INVENTORY FORM - DESCRIPTION PAGE

(1)  ADD  DELETE  REVISE  NO CHANGE

PAGE (2)  OF 3)

BUSINESS NAME (4) GORDON TIRE CO.  
CHEMICAL LOCATION (5) 7031 GARDEN GROVE BLVD  
MAP # (if more than one) (6) GRID # (7) I5

CHEMICAL NAME (8) HIGH PERFORMANCE SYNTHETIC S/W/O TRADE SECRET (11)  Y  N  
COMMON NAME (9) SYNTHETIC LUBRICATING OIL AHM / \*EHS (12)  Y  N  
CAS # (10) MIXTURE 104742-65-0 \*IF EHS BOX IS "Y" ALL AMOUNTS MUST BE IN LBS  
FIRE CODE HAZARD CLASSES\* (13) CII B

\*COMPLETE BLOCK (13) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

TYPE (14)  PURE  MIXTURE  WASTE CHECK IF RADIOACTIVE (15)  (16)   
PHYSICAL STATE (17)  SOLID  LIQUID  GAS CURIES

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

STATE WASTE CODE (19) N/A UNITS (22)  GAL  CU FT  LBS  TONS MAX DAILY AMT (23) 220  
DAYS ON SITE (20) 365 \*If EHS, amounts must be in lbs. AVG DAILY AMT (24) 110  
LARGEST CONTAINER (21) 220 ANNUAL WASTE AMT (25) 880

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

PRESSURE STORAGE (27)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT

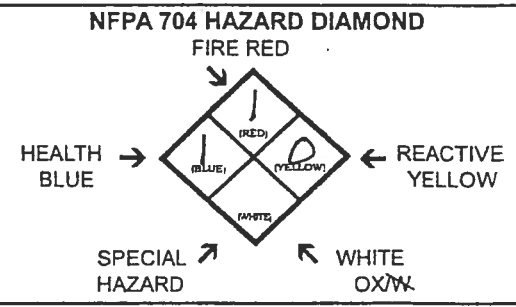
STORAGE TEMPERATURE (28)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT  CRYOGENIC

(29) % WT (30) HAZARDOUS COMPONENTS (31) EHS/AHM (32) CAS #

1.	NEW OIL	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	104742-65-0
2.		<input type="checkbox"/> Y <input type="checkbox"/> N	
3.		<input type="checkbox"/> Y <input type="checkbox"/> N	

(33) ADDITIONAL LOCALLY COLLECTED INFORMATION \*COMPLETE BLOCK (33) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

NFPA CLASSIFICATION  
UN/DOT # 1270 Refer to shipping papers or MSDS  
DOT HAZARD CLASS P3 9 Refer to shipping papers or MSDS  
UFC HAZARD CLASS P3



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 001  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Material Identity

Product Name: HIGH PERFORMANCE SYNTHETIC 5W-30  
General or Generic ID: SYNTHETIC LUBRICATING OIL

Company

The Valvoline Company  
P.O. Box 14000  
Lexington, KY 40512

Telephone Numbers

Emergency: 1-800-274-5263  
Information: 1-606-357-7847

2. COMPOSITION/INFORMATION ON INGREDIENTS

Ingredient(s)	CAS Number	% (by weight)
DETERGENT/DISPERSANT ENGINE OIL PACKAGE		14.0- 24.0

3. HAZARDS IDENTIFICATION

Potential Health Effects

Eye

Exposure is not expected to cause eye irritation or injury.

Skin

Exposure may cause mild skin irritation. Prolonged or repeated exposure may dry the skin. Symptoms may include redness, burning, drying and cracking, and skin burns. Pre-existing skin disorders may be aggravated by exposure to this material.

Swallowing

Single dose oral toxicity is low. Swallowing small amounts during normal handling is not likely to cause harmful effects; swallowing large amounts may be harmful.

Inhalation

Exposure is possible under certain conditions of handling and use (for example, during heating, spraying, or stirring). Symptoms are more typically seen at air concentrations exceeding the recommended exposure limits.

Symptoms of Exposure

gastrointestinal irritation (nausea, vomiting, diarrhea), irritation (nose, throat, respiratory tract) (pre-existing lung disorders, e.g. asthma-like conditions, may be aggravated by exposure to this material), abdominal pain.

Target Organ Effects

No data

Developmental Information

No data



# MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 002  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

## HIGH PERFORMANCE SYNTHETIC 5W-30

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### Cancer Information

Used motor oil has been shown to cause skin cancer in laboratory animals continually exposed by repeated applications. Avoid prolonged or repeated skin contact.

### Other Health Effects

No data

### Primary Route(s) of Entry

No data

---

## 4. FIRST AID MEASURES

### Eyes

If symptoms develop, move individual away from exposure and into fresh air. Flush eyes gently with water while holding eyelids apart. If symptoms persist or there is any visual difficulty, seek medical attention.

### Skin

Remove contaminated clothing. Wash exposed area with soap and water. If symptoms persist, seek medical attention. Launder clothing before reuse.

### Swallowing

Do not induce vomiting. Give one glass of milk or water, and get medical attention immediately. If possible, do not leave victim unattended.

### Inhalation

If symptoms develop, immediately move individual away from exposure and into fresh air. Seek immediate medical attention; keep person warm and quiet. If person is not breathing, begin artificial respiration. If breathing is difficult, administer oxygen.

### Note to Physicians

No data

---

## 5. FIRE FIGHTING MEASURES

### Flash Point

425.0 F (218.3 C) COC

### Explosive Limit

No data

### Autoignition Temperature

No data

### Hazardous Products of Combustion

May form: carbon dioxide and carbon monoxide, oxides of sulfur, nitrogen and phosphorus, various hydrocarbons.

### Fire and Explosion Hazards

Never use welding or cutting torch on or near drum (even empty) because product (even just residue) can ignite explosively. Dense smoke may be generated while burning.

Continued On Next Page

# MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 003

Date Prepared: 02/10/95

Date Printed: 06/29/96

MSDS No: 0252918-002.009

## HIGH PERFORMANCE SYNTHETIC 5W-30

---

### Extinguishing Media

regular foam, carbon dioxide, dry chemical.

### Fire Fighting Instructions

Water or foam may cause frothing which can be violent and possibly endanger the life of the firefighter. Wear a self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode with appropriate turn-out gear and chemical resistant personal protective equipment. Refer to the personal protective equipment section of this MSDS.

### NFPA Rating

Health - 1, Flammability - 1, Reactivity - 0

---

## 6. ACCIDENTAL RELEASE MEASURES

### Small Spill

Absorb liquid on vermiculite, floor absorbent or other absorbent material.

### Large Spill

Prevent run-off to sewers, streams or other bodies of water. If run-off occurs, notify proper authorities as required, that a spill has occurred. 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.

---

## 7. HANDLING AND STORAGE

### Handling

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.

### Storage

Not applicable

---

## 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

### Eye Protection

Not required under normal conditions of use. However, if misting or splashing conditions exist, then safety glasses or chemical splash goggles are advised.

### Skin Protection

Not normally required. However, wear resistant gloves such as nitrile rubber to prevent irritation which may result from prolonged or repeated skin contact with product., Wear normal work clothing covering arms and legs..

### Respiratory Protections

Not required under normal conditions of use. However, if oil mists are generated above recommended PEL/TLV of 5 mg/m<sup>3</sup>, then a NIOSH/MSHA approved respirator is advised in absence of proper environmental control. (Consult your industrial hygienist.)

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 004  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

---

Engineering Controls

Not required under normal conditions of use. However, if unusual operating conditions exist, then provide sufficient mechanical (general and/or local exhaust) ventilation to maintain exposure below PEL/TLV (s).

Exposure Guidelines

Component  
-----

DETERGENT/DISPERSANT ENGINE OIL PACKAGE  
No exposure limits established

---

9. PHYSICAL AND CHEMICAL PROPERTIES

Boiling Point

(for component) 707.0 - 941.0 F (375.0 - 505.0 C) @ 760.00 mmHg

Vapor Pressure

(for component) < 1.000 mmHg @ 68.00 F

Specific Vapor Density

< 1.000 @ AIR=1

Specific Gravity

.844 @ 60.00 F

Liquid Density

7.037 lbs/gal @ 60.00 F  
.844 kg/l @ 15.60 C

Percent Volatiles (Including Water)

No data

Evaporation Rate

SLOWER THAN ETHYL ETHER

Appearance

No data

State

LIQUID

Physical Form

No data

Color

CLEAR AND BRIGHT

Odor

No data

pH

Not applicable

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 005  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

---

10. STABILITY AND REACTIVITY

Hazardous Polymerization

Product will not undergo hazardous polymerization.

Hazardous Decomposition

May form: carbon dioxide and carbon monoxide, oxides of sulfur, nitrogen and phosphorus, various hydrocarbons.

Chemical Stability

Stable.

Incompatibility

Avoid contact with: strong oxidizing agents.

---

11. TOXICOLOGICAL INFORMATION

No data

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12. ECOLOGICAL INFORMATION

No data

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13. DISPOSAL CONSIDERATION

Waste Management Information

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

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14. TRANSPORT INFORMATION

DOT Information - 49 CFR 172.101

DOT Description:  
Not Regulated

Container/Mode:  
CASES/SURFACE - NO EXEMPTIONS

NOS Component:  
None

RQ (Reportable Quantity) - 49 CFR 172.101

Not applicable

---

15. REGULATORY INFORMATION

US Federal Regulations

TSCA (Toxic Substances Control Act) Status

TSCA (UNITED STATES) The intentional ingredients of this product are listed.

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 006  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

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CERCLA RQ - 40 CFR 302.4  
None

SARA 302 Components - 40 CFR 355 Appendix A  
None

Section 311/312 Hazard Class - 40 CFR 370.2  
Immediate(X) Delayed(X) Fire( ) Reactive( ) Sudden Release of  
Pressure( )

SARA 313 Components - 40 CFR 372.65  
None

International Regulations  
Inventory Status  
Not determined

State and Local Regulations  
California Proposition 65  
None

---

16. OTHER INFORMATION

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.



# 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: 7031 Garden Grove Blvd  
Occupant or DBA: Garden Tire Co.  
Owner/Manager: [REDACTED]

Date: 3/2/09  
File No: 400 8866  
Phone: [REDACTED]

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

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

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

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

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

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

Additional Violations and/or Notes:

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Responsible Party: [REDACTED]

Re-inspection Date: 3/2/09

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

Fire Dept. Inspector: R. Walden

ID #: 3703

Condition Upon Re-inspection:

Date:

# GARDEN GROVE

Old Packet  
X  
Old Owner



## FIRE DEPARTMENT

## HAZARDOUS MATERIALS DISCLOSURE PROGRAM

### REPORTING FORMS PACKET: PART 1

**FOR OFFICIAL USE ONLY**

APPROVED BY: SHIRLEY DATE: 4-6-00

NEW BUSINESS  EXISTING  UPDATE

FEE: ① 2 3 4 5 6

OWNERSHIP CHANGE: \_\_\_\_\_

ADDRESS CHANGE: \_\_\_\_\_

TIER II: \_\_\_\_\_ FAC: \_\_\_\_\_ CON. \_\_\_\_\_ BUS LIST: \_\_\_\_\_ PICK:



# CITY OF GARDEN GROVE, FIRE DEPARTMENT

11301 ACACIA PARKWAY, GARDEN GROVE, CALIFORNIA 92842

(714) 741-5600

(714) 741-5636

## HAZARDOUS MATERIALS BUSINESS INFORMATION FORM

FORM 1

### BUSINESS INFORMATION

CALENDAR YEAR BEGINNING (1)	June 1	ENDING (2)	MAY 31	(3) PAGE 1 OF	
BUSINESS NAME (4)	GORDON TIRE Co. INC.		BUSINESS PHONE: (5)	898-2696	
SITE ADDRESS (6)	7031 GARDEN GROVE BLVD				
CITY (7)	GARDEN GROVE	STATE (8)	CA	ZIP (9)	92841
DUN & BRADSTREET (OPTIONAL) OPERATOR NAME (10) (12)		SIC CODE (4 DIGIT #) (11)	7538		
		OPERATOR PHONE (13)			

### OWNER INFORMATION

OWNER NAME (14)	[REDACTED]	OWNER PHONE (15)	714 898-2696		
OWNER MAILING ADDRESS (16)	7031 GARDEN GROVE BLVD				
CITY (17)	GARDEN GROVE	STATE (18)	CA	ZIP (19)	92841

### ENVIRONMENTAL CONTACT

CONTACT NAME (20)	[REDACTED]	CONTACT PHONE (21)	[REDACTED]		
MAILING ADDRESS (22)					
CITY (23)		STATE (24)		ZIP (25)	

### Primary

### EMERGENCY CONTACTS

### Secondary

NAME: (26)	[REDACTED]	NAME: (31)			
TITLE: (27)	OWNER	TITLE: (32)			
BUSINESS PHONE: (28)	714 898-2696	BUSINESS PHONE: (33)			
24-HOUR PHONE: (29)		24-HOUR PHONE: (34)			
PAGER #: (30)		PAGER #: (35)			

### ACUTELY HAZARDOUS MATERIALS (AHM) / EXTREMELY HAZARDOUS SUBSTANCE (EHS)

ON SITE AHM/EHS (36)  Yes  No If yes, and above Threshold Planning Quantities, attach a sheet of paper with a general description of the process and principal equipment.

### (37) ADDITIONAL LOCALLY COLLECTED INFORMATION

A. Type of Business Operation	TIRE STORE	G. Underground Storage Tanks	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
B. Hours of Business Operation	7:30 - 5:30	H. Above ground Tank over 660 gal.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
C. Total Number of Employees	6		
D. Property Owner Name	[REDACTED]	Address	7031 GARDEN GROVE BLVD
E. Schools, hospitals within 1,000 ft. of business property		Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	
F. EPA I.D. Number			

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

Print Name of Document Preparer (38)	[REDACTED]	Date (40)	4-5-00
Signature of Owner/Operator (39)	[REDACTED]		



CALIFORNIA CHEMICAL INVENTORY FORM - DESCRIPTION PAGE

(1)  ADD  DELETE  REVISE  NO CHANGE

PAGE (2)  OF 3)

BUSINESS NAME (4) GORDON TIRE CO.  
CHEMICAL LOCATION (Address, Area, Building, etc.) (5) 7031 GARDEN GROVE BLDG.  
MAP # (if more than one) (6) GRID # (7) I5

CHEMICAL NAME (8) WASTE OIL TRADE SECRET (11)  Y  N  
COMMON NAME (9) WASTE OIL AHM / \*EHS (12)  Y  N  
CAS # (10) 64742-54-7 \*IF EHS BOX IS "Y" ALL AMOUNTS MUST BE IN LBS  
FIRE CODE HAZARD CLASSES\* (13) C II B

\*COMPLETE BLOCK (13) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

TYPE (14)  PURE  MIXTURE  WASTE CHECK IF RADIOACTIVE (15)  (16)   
PHYSICAL STATE (17)  SOLID  LIQUID  GAS CURIES

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

STATE WASTE CODE (19) 221 UNITS (22)  GAL  CU FT  LBS  TONS MAX DAILY AMT (23) 220  
DAYS ON SITE (20) 365 \*If EHS, amounts must be in lbs. AVG DAILY AMT (24) 110  
LARGEST CONTAINER (21) 220 ANNUAL WASTE AMT (25) 880

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

PRESSURE STORAGE (27)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT

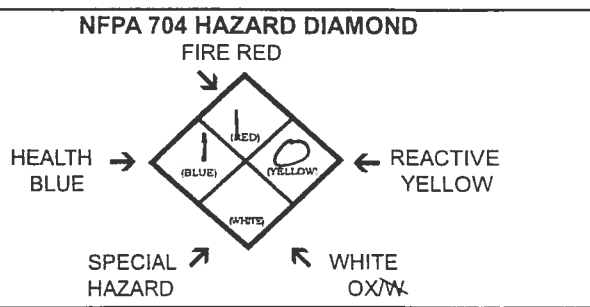
STORAGE TEMPERATURE (28)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT  CRYOGENIC

(29) % WT (30) HAZARDOUS COMPONENTS (31) EHS/AHM (32) CAS #

1. 95	PETROLEUM DISTILLATES	<input type="checkbox"/> Y <input type="checkbox"/> N	64742-54-7
2.		<input type="checkbox"/> Y <input type="checkbox"/> N	
3.		<input type="checkbox"/> Y <input type="checkbox"/> N	

(33) ADDITIONAL LOCALLY COLLECTED INFORMATION  
\*COMPLETE BLOCK (33) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

NFPA CLASSIFICATION  
UN/DOT # 1270 Refer to shipping papers or MSDS  
DOT HAZARD CLASS 9 Refer to shipping papers or MSDS  
UFC HAZARD CLASS P3



MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED



# Material Safety Data Sheet

Page 1 of 7

## 1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

### USED MOTOR OIL

PRODUCT NUMBER(S): CPS224500

### COMPANY IDENTIFICATION

Chevron USA Products Company  
Environmental, Safety, and Health  
Room 2900  
575 Market St.  
San Francisco, CA 94105-2856

### EMERGENCY TELEPHONE NUMBERS

HEALTH (24 hr): (800)231-0623 or  
(510)231-0623 (International)  
TRANSPORTATION (24 hr): CHEMTREC  
(800)424-9300 or (202)483-7616

PRODUCT INFORMATION: MSDS Requests: (800) 228-3500  
Environmental, Safety, & Health Info: (415) 894-1899  
Product Information: (800) 582-3835

## 2. COMPOSITION/INFORMATION ON INGREDIENTS

100.0 % USED MOTOR OIL

### CONTAINING

### COMPONENTS

AMOUNT

LIMIT/QTY

AGENCY/TYPE

MOTOR OIL, USED

100.0%

### COMPOSITION COMMENT:

All the components of this material are on the Toxic Substances Control Act Chemical Substances Inventory.

TLV - Threshold Limit Value  
STEL - Short-term Exposure Limit  
RQ - Reportable Quantity  
C - Ceiling Limit  
A1-5 - Appendix A Categories

TWA - Time Weighted Average  
TPQ - Threshold Planning Quantity  
PEL - Permissible Exposure Limit  
CAS - Chemical Abstract Service Number  
( ) - Change Has Been Proposed

Revision Number: 6

Revision Date: 03/15/94

MSDS Number: 001793

USED MOTOR OIL

3. HAZARDS IDENTIFICATION

\*\*\*\*\* EMERGENCY OVERVIEW \*\*\*\*\*

Dark brown to black liquid.

- USED MOTOR OIL HAS CAUSED CANCER IN LABORATORY ANIMALS
- PROLONGED INHALATION OF VAPOR MAY BE HARMFUL
- KEEP OUT OF REACH OF CHILDREN

\*\*\*\*\*

POTENTIAL HEALTH EFFECTS

EYE:

This substance is not expected to cause prolonged or significant eye irritation.

SKIN:

This substance is not expected to cause prolonged or significant skin irritation. If absorbed through the skin, this substance is considered practically non-toxic to internal organs. Read the Toxicology Information section (11) of this document for more information.

INGESTION:

If swallowed, this substance is considered practically non-toxic to internal organs.

INHALATION:

Prolonged breathing of aerosol can cause respiratory irritation.

SIGNS AND SYMPTOMS OF EXPOSURE:

INHALATION: Respiratory tract irritation may include, but may not be limited to, one or more of the following: nasal discharge, sore throat, coughing, bronchitis, pulmonary edema and difficulty in breathing.

4. FIRST AID MEASURES

EYE:

No first aid procedures are required. However, as a precaution flush eyes with fresh water for 15 minutes. Remove contact lenses if worn.

SKIN:

Remove contaminated clothing. Wash skin thoroughly with soap and water. See a doctor if any signs or symptoms described in this document occur. Discard contaminated non-waterproof shoes and boots. Wash contaminated clothing.

INGESTION:

If swallowed, give water or milk to drink and telephone for medical advice. Consult medical personnel before inducing vomiting. If medical advice cannot be obtained, then take the person and product container to the nearest medical emergency treatment center or hospital.

INHALATION:

If respiratory discomfort or irritation occurs, move the person to fresh air. See a doctor if discomfort or irritation continues.

USED MOTOR OIL

---

## 5. FIRE FIGHTING MEASURES

---

### FLAMMABLE PROPERTIES

FLASH POINT: NDA

AUTOIGNITION: NDA

FLAMMABILITY LIMITS (% by volume in air): Lower: NDA Upper: NDA

### EXTINGUISHING MEDIA:

CO<sub>2</sub>, dry chemical, foam and water fog.

NFPA RATINGS: Health 1; Flammability 1; Reactivity 0.

### FIRE FIGHTING INSTRUCTIONS:

For fires involving this material, do not enter any enclosed or confined fire space without proper protective equipment. This may include self-contained breathing apparatus to protect against the hazardous effects of normal products of combustion or oxygen deficiency. Read the entire document.

### COMBUSTION PRODUCTS:

Normal combustion forms carbon dioxide, water vapor and may produce oxides of sulfur, nitrogen and phosphorous. Incomplete combustion can produce carbon monoxide.

---

## 6. ACCIDENTAL RELEASE MEASURES

---

CHEMTREC EMERGENCY NUMBER (24 hr): (800)424-9300 or (202)483-7616

### ACCIDENTAL RELEASE MEASURES:

This material is considered to be a water pollutant and releases of this product should be prevented from contaminating soil and water and from entering drainage and sewer systems.

U.S.A. regulations require reporting spills of this material that could reach any surface waters. The toll free number for the U.S. Coast Guard National Response Center is (800) 424-8802.

Stop the source of the leak or release. Clean up releases as soon as possible, observing precautions in Exposure Controls/Personal Protection. Contain liquid to prevent further contamination of soil, surface water or groundwater. Clean up small spills using appropriate techniques such as sorbent materials or pumping. Where feasible and appropriate, remove contaminated soil. Follow prescribed procedures for reporting and responding to larger releases.

---

## 7. HANDLING AND STORAGE

---

### HANDLING AND STORAGE:

No data available.

USED MOTOR OIL

---

## 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

---

### PERSONAL PROTECTIVE EQUIPMENT

#### EYE/FACE PROTECTION:

No special eye protection is usually necessary.

#### SKIN PROTECTION:

Avoid contact with skin or clothing. Skin contact should be minimized by wearing protective clothing including gloves.

#### RESPIRATORY PROTECTION:

Unless ventilation is adequate to keep airborne concentrations below recommended exposure standards, approved respiratory protection should be worn.

#### ENGINEERING CONTROLS:

Use adequate ventilation to keep the airborne concentrations of this material below the recommended exposure standard.

---

## 9. PHYSICAL AND CHEMICAL PROPERTIES

---

### PHYSICAL DESCRIPTION:

Dark brown to black liquid.

pH: NDA

VAPOR PRESSURE: NDA

VAPOR DENSITY

(AIR=1): NDA

BOILING POINT: NDA

FREEZING POINT: NDA

MELTING POINT: NDA

SOLUBILITY: Soluble in petroleum solvents.

SPECIFIC GRAVITY: NDA

DENSITY: NDA

EVAPORATION RATE: NDA

PERCENT VOLATILE

(VOL): NDA

---

## 10. STABILITY AND REACTIVITY

---

### HAZARDOUS DECOMPOSITION PRODUCTS:

NDA

### CHEMICAL STABILITY:

Stable.

### CONDITIONS TO AVOID:

No data available.

### INCOMPATIBILITY WITH OTHER MATERIALS:

May react with strong oxidizing agents, such as chlorates, nitrates, peroxides, etc.

### HAZARDOUS POLYMERIZATION:

Polymerization will not occur.

---

USED MOTOR OIL

---

## 11. TOXICOLOGICAL INFORMATION

---

### EYE EFFECTS:

The Draize Eye Irritation Score (range, 0-110) in rabbits is 1.33/110.

### SKIN EFFECTS:

The Draize Skin Primary Irritation Score (range, 0-8) for a 4-hour exposure (rabbits) is 0.46. The dermal LD50 in rabbits is greater than 5 ml/kg.

### ACUTE ORAL EFFECTS:

The oral LD50 in rats is > 25 ml/kg.

### ACUTE INHALATION EFFECTS:

No product toxicology data available. The hazard evaluation was based on data from similar materials.

### ADDITIONAL TOXICOLOGY INFORMATION:

In laboratory tests sponsored by the American Petroleum Institute (API), mice developed skin cancer following repeated application of and continuous skin exposure to used motor oils with no effort made to remove oil between applications. Brief or intermittent skin contact with used motor oils is not expected to have serious effects if the material is thoroughly removed by washing with soap and water. While skin cancer is unlikely to occur in humans from the handling of used motor oil, skin contact should be reduced to a minimum by following the precautions outlined in this MSDS.

This product gave positive results in the following mutagen testing assays: Ames assay.

---

## 12. ECOLOGICAL INFORMATION

---

### ECOTOXICITY:

No data available.

### ENVIRONMENTAL FATE:

No data available.

---

## 13. DISPOSAL CONSIDERATIONS

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### DISPOSAL CONSIDERATIONS:

Used oil collection services and collection centers can safely receive used motor oil for recycling or disposal. Some service stations, automotive service centers, and retailers provide used motor oil collection facilities.

Place contaminated materials in containers and dispose of in a manner consistent with applicable regulations. Contact your sales representative or local environmental or health authorities for approved disposal or recycling methods.

---

**14. TRANSPORT INFORMATION**

The description shown may not apply to all shipping situations. Consult 49CFR, or appropriate Dangerous Goods Regulations, for additional description requirements (e.g., technical name) and mode-specific or quantity-specific shipping requirements.

DOT SHIPPING NAME: NOT DESIGNATED AS A HAZARDOUS MATERIAL BY THE  
FEDERAL DOT

DOT HAZARD CLASS: NOT APPLICABLE

DOT IDENTIFICATION NUMBER: NOT APPLICABLE

DOT PACKING GROUP: NOT APPLICABLE

**15. REGULATORY INFORMATION**

SARA 311 CATEGORIES:

1. Immediate (Acute) Health Effects:	NO
2. Delayed (Chronic) Health Effects:	YES
3. Fire Hazard:	NO
4. Sudden Release of Pressure Hazard:	NO
5. Reactivity Hazard:	NO

## REGULATORY LISTS SEARCHED:

01=SARA 313	11=NJ RTK	22=TSCA Sect 5(a)(2)
02=MASS RTK	12=CERCLA 302.4	23=TSCA Sect 6
03=NTP Carcinogen	13=MN RTK	24=TSCA Sect 12(b)
04=CA Prop 65-Carcin	14=ACGIH TWA	25=TSCA Sect 8(a)
05=CA Prop 65-Repro Tox	15=ACGIH STEL	26=TSCA Sect 8(d)
06=IARC Group 1	16=ACGIH Calc TLV	27=TSCA Sect 4(a)
07=IARC Group 2A	17=OSHA PEL	28=Canadian WHMIS
08=IARC Group 2B	18=DOT Marine Pollutant	29=OSHA CEILING
09=SARA 302/304	19=Chevron TWA	30=Chevron STEL
10=PA RTK	20=EPA Carcinogen	

None of the components of this material are found on the regulatory lists indicated.

**16. OTHER INFORMATION**

NFPA RATINGS: Health 1; Flammability 1; Reactivity 0; (Least-0, Slight-1, Moderate-2, High-3, Extreme-4). These values are obtained using the guidelines or published evaluations prepared by the National Fire Protection Association (NFPA) or the National Paint and Coating Association (for HMIS ratings).

## REVISION STATEMENT:

This Material Safety Data Sheet has been revised to comply with the

USED MOTOR OIL

ANSI Z400.1 Standard. Changes have also been made throughout this MSDS. Please read the entire document.

\*\*\*\*\*

The above information is based on the data of which we are aware and is believed to be correct as of the date hereof. Since this information may be applied under conditions beyond our control and with which we may be unfamiliar and since data made available subsequent to the date hereof may suggest modification of the information, we do not assume any responsibility for the results of its use. This information is furnished upon condition that the person receiving it shall make his own determination of the suitability of the material for his particular purpose.



CALIFORNIA CHEMICAL INVENTORY FORM - DESCRIPTION PAGE

(1)  ADD  DELETE  REVISE  NO CHANGE

PAGE (2)  OF 3)

BUSINESS NAME (4) GORDON TIRE CO.

CHEMICAL LOCATION (Address, Area, Building, etc.) (5) 7031 GARDEN GROVE BLVD.

MAP # (if more than one) (6)  GRID # (7) I5

CHEMICAL NAME (8) HIGH PERFORMANCE SYNTHETIC S/W/O TRADE SECRET (11)  Y  N

COMMON NAME (9) SYNTHETIC LUBRICATING OIL AHM / \*EHS (12)  Y  N

CAS # (10) MIXTURE 64742-65-0 \*IF EHS BOX IS "Y" ALL AMOUNTS MUST BE IN LBS

N FIRE CODE HAZARD CLASSES\* (13) III B

\*COMPLETE BLOCK (13) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

TYPE (14)  PURE  MIXTURE  WASTE CHECK IF RADIOACTIVE (15)  (16)

PHYSICAL STATE (17)  SOLID  LIQUID  GAS CURIES

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

N STATE WASTE CODE (19) N/A UNITS (22)  GAL  CU FT  LBS  TONS MAX DAILY AMT (23) 220

DAYS ON SITE (20) 365 \*If EHS, amounts must be in lbs. AVG DAILY AMT (24) 110

LARGEST CONTAINER (21) 220 ANNUAL WASTE AMT (25) 880

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

PRESSURE STORAGE (27)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT

STORAGE TEMPERATURE (28)  AMBIENT  ABOVE AMBIENT  BELOW AMBIENT  CRYOGENIC

(29) % WT	(30) HAZARDOUS COMPONENTS	(31) EHS/AHM	(32) CAS #
1.	<u>NEW OIL</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<u>64742-65-0</u>
2.		<input type="checkbox"/> Y <input type="checkbox"/> N	
3.		<input type="checkbox"/> Y <input type="checkbox"/> N	

(33) ADDITIONAL LOCALLY COLLECTED INFORMATION \*COMPLETE BLOCK (33) IF REQUESTED BY THE LOCAL FIRE CHIEF - REFER TO INSTRUCTIONS.

NFPA CLASSIFICATION

UN/DOT # 1270 Refer to shipping papers or MSDS

DOT HAZARD CLASS P3 9 Refer to shipping papers or MSDS

UFC HAZARD CLASS P3

NFPA 704 HAZARD DIAMOND

HEALTH BLUE → (1) (RED) (1) (YELLOW) (0) ← REACTIVE YELLOW

SPECIAL HAZARD ↗ (WHITE) ↖ WHITE OX/W.

MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED

# MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 001  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

## 1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

### Material Identity

Product Name: HIGH PERFORMANCE SYNTHETIC 5W-30  
General or Generic ID: SYNTHETIC LUBRICATING OIL

### Company

The Valvoline Company  
P.O. Box 14000  
Lexington, KY 40512

### Telephone Numbers

Emergency: 1-800-274-5263  
Information: 1-606-357-7847

## 2. COMPOSITION/INFORMATION ON INGREDIENTS

Ingredient(s)	CAS Number	% (by weight)
DETERGENT/DISPERSANT ENGINE OIL PACKAGE		14.0- 24.0

## 3. HAZARDS IDENTIFICATION

### Potential Health Effects

#### Eye

Exposure is not expected to cause eye irritation or injury.

#### Skin

Exposure may cause mild skin irritation. Prolonged or repeated exposure may dry the skin. Symptoms may include redness, burning, drying and cracking, and skin burns. Pre-existing skin disorders may be aggravated by exposure to this material.

#### Swallowing

Single dose oral toxicity is low. Swallowing small amounts during normal handling is not likely to cause harmful effects; swallowing large amounts may be harmful.

#### Inhalation

Exposure is possible under certain conditions of handling and use (for example, during heating, spraying, or stirring). Symptoms are more typically seen at air concentrations exceeding the recommended exposure limits.

#### Symptoms of Exposure

gastrointestinal irritation (nausea, vomiting, diarrhea), irritation (nose, throat, respiratory tract) (pre-existing lung disorders, e.g. asthma-like conditions, may be aggravated by exposure to this material), abdominal pain.

#### Target Organ Effects

No data

#### Developmental Information

No data

Continued On Next Page

# MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 002  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

## HIGH PERFORMANCE SYNTHETIC 5W-30

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### Cancer Information

Used motor oil has been shown to cause skin cancer in laboratory animals continually exposed by repeated applications. Avoid prolonged or repeated skin contact.

### Other Health Effects

No data

### Primary Route(s) of Entry

No data

---

## 4. FIRST AID MEASURES

### Eyes

If symptoms develop, move individual away from exposure and into fresh air. Flush eyes gently with water while holding eyelids apart. If symptoms persist or there is any visual difficulty, seek medical attention.

### Skin

Remove contaminated clothing. Wash exposed area with soap and water. If symptoms persist, seek medical attention. Launder clothing before reuse.

### Swallowing

Do not induce vomiting. Give one glass of milk or water, and get medical attention immediately. If possible, do not leave victim unattended.

### Inhalation

If symptoms develop, immediately move individual away from exposure and into fresh air. Seek immediate medical attention; keep person warm and quiet. If person is not breathing, begin artificial respiration. If breathing is difficult, administer oxygen.

### Note to Physicians

No data

---

## 5. FIRE FIGHTING MEASURES

### Flash Point

425.0 F (218.3 C) COC

### Explosive Limit

No data

### Autoignition Temperature

No data

### Hazardous Products of Combustion

May form: carbon dioxide and carbon monoxide, oxides of sulfur, nitrogen and phosphorus, various hydrocarbons.

### Fire and Explosion Hazards

Never use welding or cutting torch on or near drum (even empty) because product (even just residue) can ignite explosively. Dense smoke may be generated while burning.

Continued On Next Page

# MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 003

Date Prepared: 02/10/95

Date Printed: 06/29/96

MSDS No: 0252918-002.009

## HIGH PERFORMANCE SYNTHETIC 5W-30

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### Extinguishing Media

regular foam, carbon dioxide, dry chemical.

### Fire Fighting Instructions

Water or foam may cause frothing which can be violent and possibly endanger the life of the firefighter. Wear a self-contained breathing apparatus with a full facepiece operated in the positive pressure demand mode with appropriate turn-out gear and chemical resistant personal protective equipment. Refer to the personal protective equipment section of this MSDS.

### NFPA Rating

Health - 1, Flammability - 1, Reactivity - 0

---

## 6. ACCIDENTAL RELEASE MEASURES

### Small Spill

Absorb liquid on vermiculite, floor absorbent or other absorbent material.

### Large Spill

Prevent run-off to sewers, streams or other bodies of water. If run-off occurs, notify proper authorities as required, that a spill has occurred. 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.

---

## 7. HANDLING AND STORAGE

### Handling

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.

### Storage

Not applicable

---

## 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

### Eye Protection

Not required under normal conditions of use. However, if misting or splashing conditions exist, then safety glasses or chemical splash goggles are advised.

### Skin Protection

Not normally required. However, wear resistant gloves such as nitrile rubber to prevent irritation which may result from prolonged or repeated skin contact with product., Wear normal work clothing covering arms and legs..

### Respiratory Protections

Not required under normal conditions of use. However, if oil mists are generated above recommended PEL/TLV of 5 mg/m<sup>3</sup>, then a NIOSH/MSHA approved respirator is advised in absence of proper environmental control. (Consult your industrial hygienist.)

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 004  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

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Engineering Controls

Not required under normal conditions of use. However, if unusual operating conditions exist, then provide sufficient mechanical (general and/or local exhaust) ventilation to maintain exposure below PEL/TLV (s).

Exposure Guidelines

Component  
-----

DETERGENT/DISPERSANT ENGINE OIL PACKAGE  
No exposure limits established

---

9. PHYSICAL AND CHEMICAL PROPERTIES

Boiling Point

(for component) 707.0 - 941.0 F (375.0 - 505.0 C) @ 760.00 mmHg

Vapor Pressure

(for component) < 1.000 mmHg @ 68.00 F

Specific Vapor Density

< 1.000 @ AIR=1

Specific Gravity

.844 @ 60.00 F

Liquid Density

7.037 lbs/gal @ 60.00 F  
.844 kg/l @ 15.60 C

Percent Volatiles (Including Water)

No data

Evaporation Rate

SLOWER THAN ETHYL ETHER

Appearance

No data

State

LIQUID

Physical Form

No data

Color

CLEAR AND BRIGHT

Odor

No data

pH

Not applicable

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 005  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

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10. STABILITY AND REACTIVITY

Hazardous Polymerization

Product will not undergo hazardous polymerization.

Hazardous Decomposition

May form: carbon dioxide and carbon monoxide, oxides of sulfur, nitrogen and phosphorus, various hydrocarbons.

Chemical Stability

Stable.

Incompatibility

Avoid contact with: strong oxidizing agents.

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11. TOXICOLOGICAL INFORMATION

No data

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12. ECOLOGICAL INFORMATION

No data

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13. DISPOSAL CONSIDERATION

Waste Management Information

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

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14. TRANSPORT INFORMATION

DOT Information - 49 CFR 172.101

DOT Description:  
Not Regulated

Container/Mode:  
CASES/SURFACE - NO EXEMPTIONS

NOS Component:  
None

RQ (Reportable Quantity) - 49 CFR 172.101

Not applicable

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15. REGULATORY INFORMATION

US Federal Regulations

TSCA (Toxic Substances Control Act) Status

TSCA (UNITED STATES) The intentional ingredients of this product are listed.

Continued On Next Page

MATERIAL SAFETY DATA SHEET

The Valvoline Company

Page 006  
Date Prepared: 02/10/95  
Date Printed: 06/29/96  
MSDS No: 0252918-002.009

HIGH PERFORMANCE SYNTHETIC 5W-30

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CERCLA RQ - 40 CFR 302.4  
None

SARA 302 Components - 40 CFR 355 Appendix A  
None

Section 311/312 Hazard Class - 40 CFR 370.2  
Immediate(X) Delayed(X) Fire( ) Reactive( ) Sudden Release of  
Pressure( )

SARA 313 Components - 40 CFR 372.65  
None

International Regulations  
Inventory Status  
Not determined

State and Local Regulations  
California Proposition 65  
None

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16. OTHER INFORMATION

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.

**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.)

VOCAL

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.

FRONT PARKING LOT GARD E 6

Employee Responsibilities:

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

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

N/A



# GARDEN GROVE FIRE DEPARTMENT HAZARDOUS MATERIALS DISCLOSURE PROGRAM

## *BUSINESS EMERGENCY PLAN*

### Personnel Emergency Notifications and Responsibilities

#### Prevention

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

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

#### Consideration shall include:

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

# GARDEN GROVE FIRE DEPARTMENT

## BUSINESS EMERGENCY PLAN

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

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

Your business is required by State law 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.

GRID L 5

OFFICE FILING CABINET

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

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

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

SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

PRES.

4-5-00

**UNIFIED PROGRAM CONSOLIDATED FORM**

**FACILITY INFORMATION**

**BUSINESS ACTIVITIES**

Page 1 of \_\_\_\_\_

**I. FACILITY IDENTIFICATION**

FACILITY ID#	1. EPA ID # (Hazardous Waste Only)	2.
--------------	------------------------------------	----

BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) <b>GORDON TIRE CO. INC.</b>	3.
---	----

**II. ACTIVITIES DECLARATION**

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

Does your facility...	If Yes, please complete these pages of the UPCF...	
<b>A. HAZARDOUS MATERIALS</b> Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO    4.	<input checked="" type="checkbox"/> <b>HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (OES 2731)</b>
<b>B. UNDERGROUND STORAGE TANKS (USTs)</b> 1. Own or operate underground storage tanks? 2. Intent to upgrade existing or install new USTs? 3. Need to report closing a UST?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    5. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    6. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    7.	<input checked="" type="checkbox"/> <b>UST FACILITY (Formerly SWRCB Form A)</b> <input checked="" type="checkbox"/> <b>UST TANK (one page per tank) (Formerly Form B)</b> <input checked="" type="checkbox"/> <b>UST FACILITY</b> <input checked="" type="checkbox"/> <b>UST TANK (one per tank)</b> <input checked="" type="checkbox"/> <b>UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C)</b> <input checked="" type="checkbox"/> <b>UST TANK (closure portion-one page per tank)</b>
<b>C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)</b> Own or operate ASTs above these thresholds: - any tank capacity is greater than 660 gallons, or - the total aggregate capacity for the entire facility (ASTs, drums and portable containers) greater than 1,320 gallons?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    8.	<input checked="" type="checkbox"/> <b>NO FORM REQUIRED TO CUPAS</b>
<b>D. HAZARDOUS WASTE</b> 1. Generate hazardous waste? 2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)? 3. Treat hazardous waste on site? 4. Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)? 5. Consolidate hazardous waste generated at a remove site? 6. Need to report the closure/removal of a tank that was classified waste and cleaned onsite?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO    9. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    10. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    11. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    12. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    13. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    14.	<input checked="" type="checkbox"/> <b>EPA ID NUMBER - provide at the top of this page</b> <input checked="" type="checkbox"/> <b>RECYCLABLE MATERIALS REPORT (one per recycler)</b> <input checked="" type="checkbox"/> <b>ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772)</b> <input checked="" type="checkbox"/> <b>ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)</b> <input checked="" type="checkbox"/> <b>CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232)</b> <input checked="" type="checkbox"/> <b>REMOTE WASTE/CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)</b> <input checked="" type="checkbox"/> <b>HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)</b>
<b>E. LOCAL REQUIREMENTS</b>		15.

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



**GARDEN GROVE FIRE DEPARTMENT  
ENVIRONMENTAL PROTECTION SECTION**

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

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

Business Name: Garden Tire Co Telephone: (714) 898-2696  
Site Address: 7031 Garden Grove Zip Code: 92811

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

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

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

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

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

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

AS AN AUTHORIZED REPRESENTATIVE, I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BELIEVE THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE.

Print Name [Redacted]

Signature [Redacted]

Job Title Pres.

Date April 23, 2008



# 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: 7031 Garden Grove  
Occupant or DBA: Gordon Tire Co.  
Owner/Manager: [Redacted]

Date: 4/23/08  
File No: \_\_\_\_\_  
Phone: (714) 998-2696

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

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

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

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

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

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

Additional Violations and/or Notes:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Responsible Party: [Redacted] Re-inspection Date: \_\_\_\_\_

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

Fire Dept. Inspector: R. Walden ID #: 3710

Condition Upon Re-inspection: \_\_\_\_\_ Date: 4-23-08



# CITY OF GARDEN GROVE, FIRE DEPARTMENT

11301 ACACIA PARKWAY, GARDEN GROVE, CALIFORNIA 92842

(714) 741-5600

(714) 741-5636

## HAZARDOUS MATERIALS BUSINESS INFORMATION FORM

FORM 1

### BUSINESS INFORMATION

CALENDAR YEAR BEGINNING (1)	Jun 1	ENDING (2)	MAY 31	(3) PAGE 1 OF	
BUSINESS NAME (4)	GORDON TIRE Co. INC.		BUSINESS PHONE: (5)	898-2696	
SITE ADDRESS (6)	7031 GARDEN GROVE BLVD				
CITY (7)	GARDEN GROVE	STATE (8)	CA	ZIP (9)	92841
DUN & BRADSTREET (OPTIONAL) OPERATOR NAME (12)		SIC CODE (4 DIGIT #) (11)	7538		
		OPERATOR PHONE (13)			

### OWNER INFORMATION

OWNER NAME (14)	[REDACTED]	OWNER PHONE (15)	714 898-2696		
OWNER MAILING ADDRESS (16)	7031 GARDEN GROVE BLVD				
CITY (17)	GARDEN GROVE	STATE (18)	CA	ZIP (19)	92841

### ENVIRONMENTAL CONTACT

CONTACT NAME (20)	[REDACTED]	CONTACT PHONE (21)	[REDACTED]		
MAILING ADDRESS (22)					
CITY (23)		STATE (24)		ZIP (25)	

Primary

### EMERGENCY CONTACTS

Secondary

NAME: (26)	[REDACTED]	NAME: (31)	[REDACTED]
TITLE: (27)	OWNER	TITLE: (32)	Manager
BUSINESS PHONE: (28)	714 898-2696	BUSINESS PHONE: (33)	714-898-2696
24-HOUR PHONE: (29)	[REDACTED]	24-HOUR PHONE: (34)	[REDACTED]
PAGER #: (30)		PAGER #: (35)	

### ACUTELY HAZARDOUS MATERIALS (AHM) / EXTREMELY HAZARDOUS SUBSTANCE (EHS)

ON SITE AHM/EHS (36)  Yes  No If yes, and above Threshold Planning Quantities, attach a sheet of paper with a general description of the process and principal equipment.

### ADDITIONAL LOCALLY COLLECTED INFORMATION

A. Type of Business Operation	TIRE STORE	G. Underground Storage Tanks	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
B. Hours of Business Operation	7:30 - 5:30	H. Above ground Tank over 660 gal.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
C. Total Number of Employees	6		
D. Property Owner Name	[REDACTED]	Address	7031 GARDEN GROVE BLVD
E. Schools, hospitals within 1,000 ft. of business property			Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
F. EPA I.D. Number			

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

Print Name of Document Preparer (38)	[REDACTED]	Date (40)	4-5-00
Signature of Owner/Operator (39)	[REDACTED]		



**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: GORDON TIRE CO. Telephone: 714 898-2696  
Site Address: 7031 GARDEN GROVE Zip Code: 92841

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

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

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

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

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

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

AS AN AUTHORIZED REPRESENTATIVE, I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BELIEVE THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE.

Print Name [Redacted]  
Job Title Pres.

Signature [Redacted]  
Date 1-18-06



**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: GORDON TIRE CO INC

Telephone: 714 898-2696

Site Address: 7031 GARDEN GROVE BLVD

Zip Code: 92841

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Print Name [REDACTED]

Signature [REDACTED]

Job Title PRES

Date 6-26-01