O's or ten alm	GARDEN GROVE FIR Life Safety & Hazardous Mat 11301 Acacia Parkway, Garc Bus 714-741-5600	erials Disclosure	e Program 2842	File # Fire District Inspector Next Insp	2214 FPB \$	Shift N 12	
Occupant or DB,	A TIME WARNER COMMUNICAT	IONS		Business	Tel	714 903-	8375
Address			Suite		Zip	9	2841
Business Own	er TIME WARNER CABLE				Tel		
Emergency Contac			714.620	-4193	Tel	714-903-	1151
	B Load	Sprinklers F/P/N	5 yr	. Cert. 2	/ 2015	Haz Mat	N
Fire Permits 7910	35 FLAM/COMB OUT/ABOVE +	60 GAL, 801031 H	AZARDOUS MATER	RIALS - use, h	andling or	storage,	
An inspection at th ASSEMBLY OCCUP Post maximum of Remove combuse Remove storage SIGNS Provide address Provide hazardo EXITS Provide/maintain Remove exit obs Provide/maintain Remove locks, of Remove exit obs Provide/maintain Remove obstruct FIRE PROTECTION Provide outside for Provide outside for Service and tag of Hang extinguishe Clean filters, duct Service auto-exti 5 yr certification of MISCELLANEOUS Lower storage [Secure compres Post [] Busines NO VIOLATIONS ADDITIONAL VIOLA	e above location/occupany revea PANCIES ccupancy load sign (CFC 1004.3) tible decorative material (CFC 807. under stairway (CFC 315.2.4) visible from the street (CFC 505.1) ous materials warning signs (CFC 2) approved panic hardware (CFC 10 hains,bolts or bars from exit door (C struction (CFC 1003.6) n illuminated exit sign(s) (CFC 1011 facovit (nox Box (CFC 506.1) - wort watter apparatus access (CFC EQUIPMENT AND SYSTEMS guishers2A10BC40BCK (c extinguisher(s) (CFC 901.6) $Drspleter apparatus access (CFC)er(s) 3.5'-5' from floor (CFC 906.9)ts , hood above cooking surface (Clnguishing system semi-annually (Clon sprinkler/standpipe system (Title] 18" below sprinklers or [] 2' from csed gas cylinders (CFC 3003.5.3)s License [] Fire Department permit (CATIONS AND/OR NOTESTHONG TO A C A C - A C $	Ied the following v 1.2) 703.5) 08.1.10) CFC 1008.1.9) .1) T $Dock$, $S03.4$) (CFC 906.1) $ATCAL, I, AUL,$ FC 904.1) FC 904.1) FC 904.10 FC 904.11.6.2) 19, Sect. 904) ceiling (CFC 315.2.1) CFC 105.3.5)	iolations(s) : ELECTRICAL SAFE Discontinue use Keep 30" clear for (CFC 605.3) Provide/replace elec (CFC 605.1) HAZ-MAT SAFETY F Provide approved flammable liquids Provide approved flaumable liquids (HSC CHAPTER 6.95 S Failure to implement www.esubmit.ocgo Chemical inventory Failure to implement www.esubmit.ocgo Chemical inventory Site Map is incomp Failure to report a d inventory within 30 100% or mor Addition of a Change of b Failure to submit an NO VIOLATIONS	TY PRE-CAUT of extension co or access in fro etrical Cover PRE-CAUTION d cabinet if more s (CFC 3404.3. I safety contain 4.3.1) TERIALS DISC section 25404, it and/or electron v.com r is incomplete an esponse Plan is i y address Notific Employee Trainin lete or insufficien change in busine days of the follow e increase in the previously undis usiness name or elease or threate nnual certification	TIONS ords (CFC 60 nt of electric: Socket S re than 10 ga 4.3) her(s) for flan CLOSURE 25500 - 2557 nically submit nd/or requires nadequate any ation, Mitigati ng nt ss or chemica wing : quantity of a d sclosed materi r owner aclosed materi r owner and release MINOR VIO] CLASS I VIO] CLASS I VIO] CLASS I VIO	45.5) al panel] Power Str II. mable 20) a HMBP updating d/or on, 1 disclosed ma al LATION DLATION OLATION	
Jusiness representat	Ko C. Co. S.	agner		Date	8/12/1	3	
Inspector 2 Cleared $\frac{127}{2}$	Name/ ID #867 /3 Mailback card due louts\Forms\Lifesafety & HazMat Progra		e-inspection date <u>8 /2</u> 2013 8 17 -7		8/12/13 Final Notice	//_	

2012 HAZARDOUS MATERIALS BUSINESS PLAN UPDATE

Time Warner Cable Inc. 290 Harbor Drive Stamford, CT 06902

CA-892 <u>Headend / Call Center - Garden Grove (Time Warner Cable, Inc.)</u> (*Facility Name / ID*)

7441 Chapman Avenue

(Facility Address)

Garden Grove

(Facility City)

Orange

(Facility County)

POST THIS DOCUMENT ON-SITE SO IT WILL BE AVAILABLE IN THE EVENT OF GOVERNMENT AGENCY INSPECTION, SITE ASSESSMENT OR AUDIT.



1525 Faraday Avenue, Suite 290 ♦ Carlsbad, California 92008 ♦ 760.602.3839 Fax 760.602.3838

HAZARDOUS MATERIALS BUSINESS PLAN CERTIFICATION FORM

For Use by Unidocs Member Agencies or where approved by your Local Jurisdiction Authority Cited: Health and Safety Code §25503.3(c); 19 CCR §2729.5(c)

To:	Agency Name:	City of Garden	Grove Fire Department	- Hazardous Materials Devision	
-----	--------------	----------------	-----------------------	--------------------------------	--

Agency Mailing Address: 11301 Acacia Parkway

Garden Grove, CA 92842

Pursuant to Section 25503.3(c) of California Health and Safety Code (HSC), the Hazardous Materials Business Plan (HMBP) certification described below is hereby submitted for the following facility:

Facility Name: CA-892 Headend / Call Center - Garden Grove (Time Warner Cable, Inc.)

Facility Street Address: 7441 Chapman Av	venue	. (City: Garden Grove	
	V			

Date of Current HMBP: February 28, 2011

I certify that: (Check the appropriate box.)

☐ I have personally reviewed the Hazardous Materials Business Plan currently on file with your agency and certify that the HMBP is complete and accurate. *(See bottom of page for details.)* If this facility is subject to Federal Emergency Planning and Community Right to Know Act (EPCRA) reporting requirements, I have submitted the following documents with this Certification Form: Unified Program Consolidated Form (UPCF) Business Activities page; UPCF Business Owner/Operator Identification page with current signature and date; Hazardous Materials Inventory Statement page(s) with an original signature, photocopy of an original signature, or signature stamp on each page for all Extremely Hazardous Substances (EHS) handled at or above their Federal Threshold Planning Quantity (TPQ) or 500 pounds, whichever is less.

Revisions to the Hazardous Materials Business Plan are necessary. The HMBP as revised is complete and accurate and is being implemented. A copy of the revisions has been electronically submitted or is enclosed with this Certification along with a signed UPCF Business Owner/Operator Identification page and UPCF Business Activities page if the HMBP revision include changes to the Hazardous Materials Inventory Statement.

OWNER/OPERATOR CERTIFICATION: I hereby certify under penalty of law that, based upon my inquiry of those individuals responsible for obtaining the information reported above, I believe that the submitted information is true, accurate, and complete. I understand that a revised HMBP must be submitted within 30 days of any change in this facility's storage or handling of hazardous materials that would require updating of the HMBP.

		afer, Agent for Time Warner	·	
Name of Owner/Operator (Print):	Cable	Title	e: Compliance Specia	alist
Phone: (760) 602-3839	Signature:	(And	Date:	2/28/12

By checking the upper box on this form, you are certifying that:

• The information contained in the HMBP most recently submitted is complete, accurate, and up-to-date; and

• There has been no change in the quantity of any hazardous material as reported in the most recently submitted Hazardous Materials Inventory forms; and

- The facility has not begun handling any hazardous material in a HMBP reportable quantity that is not currently listed in the Hazardous Materials Inventory; and
- The most recently submitted HMBP contains the information required by Section 11022 of Title 42 of the United States Code; and
- There have been no substantial changes in the facility's operations that would require revision of the current HMBP.

E C	Garden Grove, CA 92842	CUPA FACILITY INFORMATIO
132	(714) 741-5636 BUSINE	SS ACTIVITIES Page 1 of
	I. FACILITY	INFORMATION
FAC	CILITY ID# 3 0 0 3 5	1. EPA ID # (Hazardous Waste Only) 2
	SINESS NAME (Same as FACILITY NAME or DBA-Doing Business As A-892 Headend / Call Center - Garde	
		ES DECLARATION
		ES to any part of this list, vner/Operator Identification page.
	Does your facility	If Yes, please complete these pages of the UPCF
Α.	HAZARDOUS MATERIALS	
	Have on site (for any purpose) hazardous materials at o above 55 gallons for liquids, 500 pounds for solids, or 20 cubic feet for compressed gases (include liquids in AST and USTs); or the applicable Federal threshold quantity fo an extremely hazardous substance specified in 40 CFR Par 355, Appendix A or B; or handle radiological materials i quantities for which an emergency plan is require pursuant to 10 CFR Parts 30, 40 or 70?	CHEMICAL DESCRIPTION (Form3)
в.	UNDERGROUND STORAGE TANKS (USTs)	
1.	Own or operate underground storage tanks?	YES ✓NO 5. ✓ UST FACILITY (Formerly SWRCB Form A) ✓ UST TANK (one page per tank)(Formerly Form B)
2.	Intent to upgrade existing or install new USTs?	YES ♥NO 6. ✓ UST FACILITY ✓ UST TANK (one per tank) ✓ UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank)(Former Form C)
3.	Need to report closing a UST?	YES NO 7. V UST TANK (closure portion-one page per tank)
c.	ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)	
1.	 Own or operate ASTs above these thresholds: any tank capacity is greater than 660 gallons, or the total aggregate capacity for the entire facility (ASTs, drums and portable containers) greater than 1,320 gallons? 	YES INO 8. V NO FORM REQUIRED TO CUPAS
D.	HAZARDOUS WASTE	
1. 2.	Generate hazardous waste? Recycle more than 100 kg/month of excluded or exempte recyclable materials (per HSC §25143.2)?	Image: YES ✓ NO 9. ✓ EPA ID #-provide at the top of this page Image: YES ✓ NO 10. ✓ RECYCLABLE MATERIALS REPORT (one per recycler)
3.	Treat hazardous waste on site?	YES INO 11. ✓ ONSITE HAZARDOUS WASTE TREATMENT – FACILITY (Formerly DTSC Forms 1772) ✓ ONSITE HAZARDOUS WASTE TREATMENT – UNIT (one page per unit) (Formerly DTSC Forms 1772A,B,C,D and L)
4.	Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)?	
5.	Consolidate hazardous waste generated at a remove site?	YES ✓ NO 13. ✓ REMOVE WASTE/CONSOLIDATION SIT ANNUAL NOTIFICATION (Formerly DTSC Form 1196)
6.	Need to report the closure/removal of a tank that wa classified waste and cleaned onsite?	
Ε.	LOCAL REQUIREMENTS	
	Cal-ARP: California Accidental Release Prevention Program H&SC Chapter 6.95, Article 2, §25531 et seq - Stationary Source with more than a Threshold Quantity of a Regulated Substance in a Process	f YES ☑NO 15. ✓ REGULATED SUBSTANCE REPORTING FORM (Orange County CUPA)
CUP	PA bus act form rev (Haz Mat Manual) 6/8	



CITY OF GARDEN GROVE FIRE DEPARTMENT

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

Hazardous Materials Business Information Form

			Pag	ge 1 of	1 з
BU	SINESS IN	FORMATION			
FACILITY # 3 0 0 3 5 (Supplied by GGFD)		BEGINNING DATE 01/01/2012	1	ENDING DATE 12/31/2012	2
BUSINESS NAME CA-892 Headend / Call Center - Garden Grove (Time W	/arner Cable.	Inc.)	4	BUSINESS PHONE (714) 903-8375	5
BUSINESS SITE ADDRESS 7441 Chapman Avenue		,	æ	()	6
CITY GARDEN GROVE	8	7	STATE 8 CA	ZIP 92841	9
DUN & BRADSTREET 78-417-4976		10 SIC CODE (4 DIGIT # 4841	¥) 11	FIRE DISTRICT Garden Grove	12
COUNTY	2	•			13
BUSINESS OPERATOR NAME Time Warner Cable, Inc.		14	OPERATOR'S PH (714) 903-837		15
	BUSINES	SOWNER			
OWNER NAME Time Warner Cable, Inc.			16	OWNER PHONE (704) 731-3976	17
OWNER MAILING ADDRESS 7820 Crescent Executive Drive				×.	18
CITY Charlotte		19	STATE 20 NC	ZIP 28217	21
ENV	IRONMEN	TAL CONTACT			
CONTACT NAME Steve Reisner	1		22	CONTACT PHONE (704) 731-3976	23
CONTACT MAILING ADDRESS 7820 Crescent Executive Drive	×			.	24
CITY Charlotte	с.	25	STATE 26 NC	ZIP 28217	27
We have a first we have been a set and any other set of the set of	IERGENC	Y CONTACTS		SECONDARY	
NAME Jason Whelchel	28	NAME Regional Network Ope	erations Center		33
TITLE Manager, Engineering Ops	29	TITLE Regional Network Ope		47	34
BUSINESS PHONE (714) 903-8449	30	BUSINESS PHONE (888) 766-2521 x1			35
24-HR. PHONE (951) 232-6315	31	24-HR. PHONE (888) 766-2521 x1			36
PAGER #	32	PAGER #			37
ADDITIONAL LC	CALLY CO	DLLECTED INFOR	MATION		
DESCRIBE THE TYPE OF BUSINESS OPERATION: Telecommunications			38	TOTAL # OF EMPLOYEES	S 39
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)			40	ATTENTION	41
PROPERTY OWNER NAME 42 ADD	DRESS		43	PHONE	44
Certification : Based on my inquiry of those individua have personally examined and am familiar with the info	als responsib rmation subr	le for obtaining the info	ormation, I ce Iformation is ti	rtify under penalty rue, accurate, and c	of law that I complete.
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESE			45	DATE 28/1	46
NAME OF SIGNER (print) Lesley Schafer, Agent for Time Warner Cable, Inc.	47	NAME OF DOCUMENT PRI ARCADIS U.S., Inc.	EPARER (print	· /· · · ·	49
TITLE OF SIGNER Compliance Specialist	. 48	TITLE OF DOCUMENT PRE	EPARER	_	50
Business Info Form 1 – 03/06/03					5

FORM 1

HA	ZA	RDC)US	MAT	ERIAL	SI	INVEN	TOR	Y	FOF	RM

	HAZARDOU	JS MATE	RIALS IN	VENTOF		M FORM 3	
ADD		1			Page	1 _{of} 3	2
FACILITY 3 0 0 3 5	38	BUSINESS N		ter - Garden G	Grove (Time V	Varner Cable, Inc.)	3
	I. F	ACILITY INFO					
CHEMICAL LOCATION Headend							4
CONFIDENTIAL LOCATION EPCRA	Yes 🗸 No 5	MAP #	£	6 GF	RID #	÷	7
	II. C	HEMICAL INF	ORMATION				
CHEMICAL NAME			WASTE		ADE SECRET	Yes Vo	11
	đ			⁹ An	EHS Chemical	Yes No	12
Lead / Acid Batteries	FIRE CODE HAZARD CLA	SSES (supplied by	y GGFD)	*lf	EHS is "Yes", a	Il amounts must be LBS	13
οnoπ · · · ·	Corrosive					C	
TYPE (Check one item only) a. PURE	b. MIXTUREc. W	VASTE 14 F	RADIOACTIVE	Yes 🖌 No		IES n/a	16
Check one item only	✓ b. LIQUIDc. GAS	¹⁷ FED HA CATEG				PRESSURE RELEASE	18
AVERAGE DAILY 19 AMOUNT 123.77	MAXIMUM DAILY AMOUNT 123.77		NUAL WASTE DUNT n/a	21	STATE WAS CODE n/a		22
UNITS d. GALLONS	b. CUBIC FEET	23 DAYS	ON SITE	24	LARGEST CO	DNTAINER	25
*If EHS, amount must be in pound a. ABOVEGROUN a. ABOVEGROUN b. UNDERGROUN (Check all that apply) d STEEL DRUM	D TANK e. PLASTIC DI D TANK f. NONMETAL		i. VAT I. FIBER DRUM I. BAG(S) I. BOX(S)	● PLASTIC	ER CONTAINER CONTAINER I OR EQUIP	q. TANK WAGON r. RAIL CAR s. TOTE BIN t. OTHER Batteri	26 es
	a. AMBIENT	b. ABOVE AMB	·	BELOW AMBIE			27
STORAGE TEMPERATURE	a. AMBIENT	b. ABOVE AMB	IENT C.	BELOW AMBIE	NT	d. CRYOGENIC	28
%WT HAZA	RDOUS COMPONENT (For mixture or w	aste only)	EH	IS	CAS #	
¹ 40 ²⁹ Sulfuric Aci	d		30	✓ Yes	No 31	7664-93-9	32
2 29	Y		30	Yes	No 31		32
3 29			30	Yes	No 31		32
4 29			30	Yes	No 31	<i>1</i> 7	32
5 29			30	Yes	No 31		32
If more hazardous components an additional sheets of paper capture	e present at greater than	1% by weight in	f non-carcinogen	ic, or 0.1% by	weight if car	cinogenic, attach	
authonal sheets of paper cuptur	School of the school of the school of the		FORMATION				
UNDOT # 1830 Refer to s	hipping papers or MSDS	33	ſ		704 HAZARD	REACTIVE	
	er to shipping papers or			(BLUE) SPECK HAZAF		WHITE OX/W	
EPCRA VES NO		35	МА	KE AS MAN	Y COPIES O	OF CHEMICAL	
haz inven (form 3)	A, Please Sign Here	36		INVENTOR	Y FORM AS	NEEDED	

HAZ	ARDOUS MATERIALS	INVENTORY FORM	
	✓ REVISED 1	Page <u>2</u> of <u>3</u>	2
FACILITY 3 0 0 3 5	38 BUSINESS NAME	Center - Garden Grove (Time Warner Cable, Inc.)	3
	I. FACILITY INFORMATION		
CHEMICAL LOCATION Outside by Diesel	Generator		4
CONFIDENTIAL LOCATION Yes	✓ No 5 MAP #	6 GRID #	7
	II. CHEMICAL INFORMATION		
CHEMICAL NAME	WASTE	Yes 8 TRADE SECRET Yes 🗸 No	11
Petroleum hydrocarbons		If EPCRA see instructions	- 10
Diesel Fuel			12
CAS# 10 FIRE COD	E HAZARD CLASSES (supplied by GGFD)	*If EHS is "Yes", all amounts must be LBS	13
	ustible liquid, Class II		
TYPE (Check one item only) a. PURE b. MIXT		Yes ✓ No 15 CURIES n/a	16
Check one item only)		FIRE b. REACTIVE c. PRESSURE RELEASE ACUTE HEALTH Image: Chronic Health	18
AVERAGE DAILY 19 MAXIMUM DA AMOUNT 1000 AMOUNT 10		21 STATE WASTE CODE n/a	22
	IBIC FEET 23 DAYS ON SITE	24 LARGEST CONTAINER	25
c. POUNDS d. TC *If EHS, amount must be in pounds.	^{NNS} 365	1000	
a. ABOVEGROUND TANK	e. PLASTIC DRUM	m CYLINDER q. TANK WAGON	26
STORAGE CONTAINER b. UNDERGROUND TANK	f. NONMETALLIC DRUM	M 🔲 n. GLASS CONTAINER 🔤 r. RAIL CAR	
(Check all that apply) c. TANK INSIDE BLDG	g. METAL CONTAINER I. BAG(S)	O PLASTIC CONTAINER S. TOTE BIN	
d STEEL DRUM	h. CARBOY	p. IN MACH OR EQUIP t. OTHER	_
STORAGE PRESSURE	b. ABOVE AMBIENT	c. BELOW AMBIENT	27 28
STORAGE TEMPERATURE✓ a. AMBIENT%WTHAZARDOUS CO	MPONENT (For mixture or waste only)	EHS CAS #	20
1 29		30 Yes No 31	32
2 29		30 Yes No 31	32
3 29	а 1	30 Yes No 31	32
4 29		30 Yes No 31	32
5 29		30 Yes No 31	32
If more hazardous components are present at additional sheets of paper capturing the requi	greater than 1% by weight if non-carcino	genic, or 0.1% by weight if carcinogenic, attach	
additional sheets of paper capturing the requi		Ν	
		NFPA 704 HAZARD DIAMOND	10.00
UNDOT # 1978 Refer to shipping pap	33 ors or MSDS	FIRE (RED)	
· · ·	a		
DOT HAZARD CLASS <u>3</u>	34	(BLUE) SPECIAL WHITE	5
	ng papers or MSDS 35	HAZARD WHITE	
х		MAKE AS MANY COPIES OF CHEMICAL	
If EPCRA, Please S		INVENTORY FORM AS NEEDED	
haz inven (form 3)			

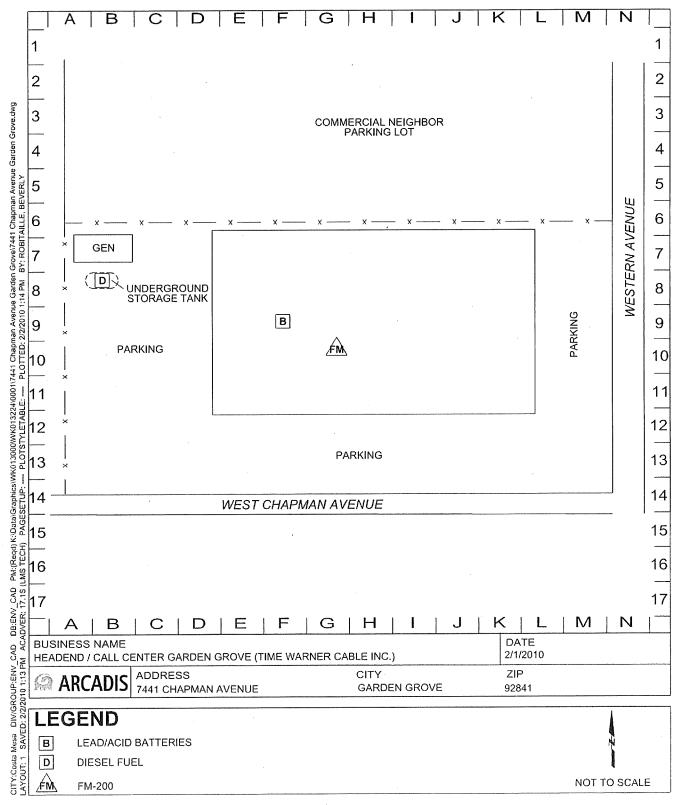
HAZARDOUS MA	TERIALS INVENTORY FORM FORM 3
	Page <u>3</u> of <u>3</u> ²
	3 2 Headend / Call Center - Garden Grove (Time Warner Cable, Inc.)
I. FACILITY	INFORMATION
CHEMICAL LOCATION In hub room	4
CONFIDENTIAL LOCATION Yes V No 5 MAP #	6 GRID # 7
	INFORMATION
CHEMICAL NAME Bromotrifluoromethane	WASTE Yes 8 TRADE SECRET Yes Volume No 11
COMMON NAME	9 An EHS Chemical Yes 🗸 No 12
Halon CAS # 10 FIRE CODE HAZARD CLASSES (suppl	*If EHS is "Yes", all amounts must be LBS
75-63-8	
TYPE (Check one item only)	4 RADIOACTIVE Yes V No 15 CURIES n/a 16
	D HAZARD a. FIRE b. REACTIVE Image: c. PRESSURE RELEASE 18 Integories d. ACUTE HEALTH e. CHRONIC HEALTH 18
AVERAGE DAILY19MAXIMUM DAILY20AMOUNT193AMOUNT193	ANNUAL WASTE 21 STATE WASTE 22 AMOUNT n/a CODE n/a
	AYS ON SITE 24 LARGEST CONTAINER 25
*If EHS, amount must be in pounds.	365 193
a. ABOVEGROUND TANK e. PLASTIC DRUM	i. VAT ✓ m CYLINDER _ q. TANK WAGON 26
that apply) d. TREE DRUM h. CARBOY	
STORAGE PRESSURE a. AMBIENT Jb. ABOVE	AMBIENT C. BELOW AMBIENT 27
STORAGE TEMPERATURE 🖌 a. AMBIENT b. ABOVE	And the second appropriate the second s
%WT HAZARDOUS COMPONENT (For mixture	
1 29	30 Yes No 31 32
2 29	30 Yes No 31 32
3 29	30 Yes No 31 32
4 29	30 Yes No 31 32
5 29	30 Yes No 31 32
If more hazardous components are present at greater than 1% by weig additional sheets of paper capturing the required information.	ht if non-carcinogenic, or 0.1% by weight if carcinogenic, attach
教育的 法认为不可能的 化合成分子 化分子分子 化分子化合物 化合物 医白垩球 化结晶的 医中心性的 埃爾爾 网络拉林美国	INFORMATION
UNDOT # 1009	33 NFPA 704 HAZARD DIAMOND
Refer to shipping papers or MSDS	FIRE (RED) REACTIVE
DOT HAZARD CLASS 2.2	34 HEALTH (BLUE) (YELLOW)
Refer to shipping papers or MSDS	35
	MAKE AS MANY CODIES OF CHEMICAL
X If EPCRA, Please Sign Here	³⁶ MAKE AS MANY COPIES OF CHEMICAL INVENTORY FORM AS NEEDED
haz inven (form 3)	

HAZARDOUS MA	ATERIALS INVENTORY FORM
ADD DELETE REVISED 1	Page <u>6</u> of <u>8</u> ²
FACILITY 2 0 0 2 5 38 BUSIN	IESS NAME 3 dend/Call Center - Garden Grove (Time Warner Cable, Inc.)
I. FACILIT	Y INFORMATION
CHEMICAL LOCATION Within Generator Unit	4
CONFIDENTIAL LOCATION Yes V No 5 MAP #	6 GRID # 7
CHEMICAL NAME Lead	WASTE Yes 8 TRADE SECRET Yes No 11
COMMON NAME Delete	9 An EHS Chemical Yes 🖌 No 12
Battery Electrode Delete CAS # 10 FIRE CODE HAZARD CLASSES (supplementation of the second secon	*If EHS is "Yes", all amounts must be LBS
7439-92-1 Toxic Solid	
TYPE (Check one item only) a. PURE b. MIXTURE c. WASTE	14 RADIOACTIVE Yes V No 15 CURIES 16
	FED HAZARD a. FIRE b. REACTIVE c. PRESSURE RELEASE 18 CATEGORIES d. ACUTE HEALTH Image: Chronic Health Image: Chronic Health Image: Chronic Health 18
AVERAGE DAILY 19 MAXIMUM DAILY 20 AMOUNT 2,624 AMOUNT 2,624 20	ANNUAL WASTE 21 STATE WASTE 22 AMOUNT N/A CODE 22
UNITS a. GALLONS b. CUBIC FEET 23	DAYS ON SITE 24 LARGEST CONTAINER 25
↓ c. POUNDS d. TONS *If EHS, amount must be in pounds.	365 3.39
STORAGE	i. VAT m CYLINDER q. TANK WAGON 26
(check an that apply) c. TANK INSIDE BLDG g. METAL CONTAINER d STEEL DRUM h. CARBOY	I. BAG(S) ○ PLASTIC CONTAINER S. TOTE BIN I. BOX(S) P. IN MACH OR EQUIP ✓ t. OTHER <u>Battery</u>
	E AMBIENT C. BELOW AMBIENT 27
STORAGE TEMPERATURE a. AMBIENT b. ABOV	E AMBIENT . BELOW AMBIENT . d. CRYOGENIC 28
%WT HAZARDOUS COMPONENT (For mixtu	re or waste only) EHS CAS #
1 29	30 Yes No 31 32
2 29	30 Yes No 31 32
3 29	30 Yes No 31 32
4 29	30 Yes No 31 32
5 29	30 Yes No 31 32
If more hazardous components are present at greater than 1% by we additional sheets of paper capturing the required information.	eight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach
PLACARDIN	IG INFORMATION
UNDOT # _ 1794	- 33 NFPA 704 HAZARD DIAMOND
Refer to shipping papers or MSDS	HEALTH
DOT HAZARD CLASS Class 6 Division 1	- ³⁴ (BLUE)
Refer to shipping papers or MSDS	SPECIAL HAZARD WHITE OX/WZ
	MAKE AS MANY COPIES OF CHEMICAL
X If EPCRA, Please Sign Here	³⁶ INVENTORY FORM AS NEEDED
haz inven (form 3)	

HAZARDOUS MA	ATERIALS INVENTORY FORM
ADD X DELETE REVISED 1 FACILITY 3 0 0 3 5	Page <u>7</u> of <u>8</u> 2 IESS NAME 3
Head	dend/Call Center - Garden Grove (Time Warner Cable, Inc.)
	(INFORMATION
Within battery units in headend are	ea.
CONFIDENTIAL LOCATION Yes V No 5 MAP #	6 GRID # 7
II. CHEMICA	
CHEMICAL NAME	WASTE Yes 8 TRADE SECRET Yes 🖌 No 11
	9 An EHS Chemical / Yes No 12
Battery Electrolyte Delete	* An Eris Chemical Tes 12
CAS # 10 FIRE CODE HAZARD CLASSES (sup 7664-93-9	
TYPE (Check one item only) a. PURE b. MIXTURE c. WASTE	14 RADIOACTIVE Yes V No 15 CURIES N/A 16
	ED HAZARD a. FIRE V b. REACTIVE c. PRESSURE RELEASE 18
	ATEGORIES d. ACUTE HEALTH e. CHRONIC HEALTH
AVERAGE DAILY 19 MAXIMUM DAILY 20 AMOUNT 576 AMOUNT 576	ANNUAL WASTE 21 STATE WASTE 22 AMOUNT N/A CODE 22
UNITS a. GALLONS b. CUBIC FEET 23	DAYS ON SITE 24 LARGEST CONTAINER 25
d. TONS If EHS, amount must be in pounds.	365 14.4
STORAGE . ABOVEGROUND TANK . e. PLASTIC DRUM	i. VAT m CYLINDER q. TANK WAGON 26
(that apply) c. TANK INSIDE BLDG g. METAL CONTAINER d STEEL DRUM h. CARBOY	I. BAG(S) □ 0 PLASTIC CONTAINER S. TOTE BIN I. BOX(S) □ p. IN MACH OR EQUIP Vt. OTHER Battery
	E AMBIENT C. BELOW AMBIENT 27
STORAGE TEMPERATURE a. AMBIENT b. ABOVI	E AMBIENT c. BELOW AMBIENT d. CRYOGENIC 28
%WT HAZARDOUS COMPONENT (For mixtur	e or waste only) EHS CAS #
1 29	30 Yes No 31 32
2 29	30 Yes No 31 32
3 29	30 Yes No 31 32
4 29	30 Yes No 31 32
5 29	30 Yes No 31 32
If more hazardous components are present at greater than 1% by we additional sheets of paper capturing the required information.	ight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach
	G INFORMATION
UNDOT # 1830 Refer to shipping papers or MSDS	- 33 NFPA 704 HAZARD DIAMOND FIRE (RED)
	HEALTH
DOT HAZARD CLASS 8 Refer to shipping papers or MSDS	- ³⁴ (BLUE) SPECIAL WHITE
	HAZARD A VOX/WL
X If EPCRA, Please Sign Here	MAKE AS MANY COPIES OF CHEMICAL
haz inven (form 3)	

ORANGE COUNTY FIRE DEPARTMENT UNIFIED PROGRAM (UP) FORM CONSOLIDATED CONTINGENCY PLAN

Hazardous Materials Facility Site Map



Site map # 1



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

Hazardous Materials Business Emergency Plan And Inventory Certification Statement

Business Name:	Headend/Call Center - Garden Grove	Telephone: 714-903-8375
Site Address:	7441 Chapman Avenue	Zip Code: 92641

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

X 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.

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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 Lesley Schafer

Signature _____

Date

Job Title Senior Staff Engineer - LFR, Inc.

Yellow Copy-Retain for Business Records

White Copy - Return to Garden Grove Fire Department HMBEP certification. doc



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

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Print Name Shane Noreen

Job TitleProject Engineer - ARCADIS c/o TWC, Inc.

Date _

Signature

White Copy – Return to Garden Grove Fire Department HMBEP certification. doc Yellow Copy - Retain for Business Records

02-28-11

2010 HAZARDOUS MATERIALS BUSINESS PLAN UPDATE

Time Warner Cable Inc. 290 Harbor Drive Stamford, CT 06902

Headend/Call Center - Garden Grove (Time Warner Cable, Inc.)

(Facility Name / ID)

7441 Chapman Avenue

(Facility Address)

Garden Grove

(Facility City)

Orange

(Facility County)

POST THIS DOCUMENT ON-SITE SO IT WILL BE AVAILABLE IN THE EVENT OF GOVERNMENT AGENCY INSPECTION, SITE ASSESSMENT OR AUDIT.



3150 Bristol Street, Suite 250 ♦ Costa Mesa, California 92626-7324 ♦ 714-444-0111 Fax 714-444-0117

	Garden Grove, CA 92842		ATION
~	BUSINES	S ACTIVITIES	1 of _ 8
	I. FACILITY	INFORMATION	<u> </u>
FAG	CILITY ID# 3 0 0 3 5	1. EPA ID # (Hazardous Waste Only)	2.
	SINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) eadend/Call Center - Garden Grove (T	ime Warner Cable, Inc.)	3.
	II. ACTIVITIE NOTE: If you check YE	S DECLARATION ES to any part of this list, ner/Operator Identification page.	
	Does your facility	If Yes, please complete these pages of the UPCF	
Α.	HAZARDOUS MATERIALS		
	Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	YES ☐ NO 4. ✓ HAZARDOUS MATERIALS INVENT CHEMICAL DESCRIPTION (Form3	
в.	UNDERGROUND STORAGE TANKS (USTs)		
1.	Own or operate underground storage tanks?	YES ✓NO 5. ✓ UST FACILITY (Formerly SWRCB For ✓ UST TANK (one page per tank)(Form Form B)	
2.	Intent to upgrade existing or install new USTs?	YES ▼NO 6. VIST FACILITY VUST TANK (one per tank) VUST INSTALLATION – CERTIFICA COMPLIANCE (one page per tank)(F Form C)	
3.	Need to report closing a UST?	YES INO 7. VUST TÁNK (closure portion-one page tank)	e per
C.	ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)		
1.	Own or operate ASTs above these thresholds: - any tank capacity is greater than 660 gallons, or - the total aggregate capacity for the entire facility (ASTs, drums and portable containers) greater than 1,320 gallons?	YES INO 8. ✓ NO FORM REQUIRED TO CUPAS	
D.	HAZARDOUS WASTE		
1. 2.	Generate hazardous waste? Recycle more than 100 kg/month of excluded or exempted	YES ✓ NO 9. ✓ EPA ID #-provide at the top of th YES ✓ NO 10. ✓ RECYCLABLE MATERIALS REPORT per recycler)	
3.	recyclable materials (per HSC §25143.2)? Treat hazardous waste on site?	 YES ✓ NO 11. ✓ ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Forms 1772) ✓ ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per (Formerly DTSC Forms 1772A,B,C,D a 	
4.	Treatment subject to financial assurance requirements (for Permit by Rule and Condition Authorization)?	YES ✓ NO 12. ✓ CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1	1232)
5.	Consolidate hazardous waste generated at a remove site?	YES	DTSC
6.	Need to report the closure/removal of a tank that was classified waste and cleaned onsite?	YES ✓ NO 14. ✓ HAZARDOUS WASTE TANK CLOSE CERTIFICATION (Formerly DTSC Fo 1249)	
Ε.	LOCAL REQUIREMENTS		
	Cal-ARP: California Accidental Release Prevention Program H&SC Chapter 6.95, Article 2, §25531 et seq - Stationary Source with more than a Threshold Quantity of a Regulated Substance in a Process	YES ▼NO 15. V REGULATED SUBSTANCE REPORT FORM (Orange County CUPA)	TING

CUPA bus act form rev (Haz Mat Manual) 6/8



CITY OF GARDEN GROVE FIRE DEPARTMENT

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

Hazardous Materials Business Information Form

	Page	2 of 8 3
BUSINESS II	IFORMATION	
FACILITY # 3 0 0 3 5 (Supplied by GGFD) 3 0 0 3 5	BEGINNING DATE 1 EN	DING DATE 2 2/31/2010
BUSINESS NAME Headend/Call Center - Garden Grove (Time Warner Cable, Inc.)	20. 10.50(20)	SINESS PHONE 5 14-903-8375
BUSINESS SITE ADDRESS 7441 Chapan		6
CITY GARDEN GROVE	7 STATE 8 ZIP CA 9	9 92641S
DUN & BRADSTREET 78-417-4976		RE DISTRICT 12 Garden Grove
COUNTY		13
BUSINESS OPERATOR NAME Time Warner Cable, Inc.	14 OPERATOR'S PHONE 714-903-8375	15
BUSINES	SOWNER	
OWNER NAME Time Warner Cable, Inc.		/NER PHONE 17 3-328-0600
OWNER MAILING ADDRESS 290 Harbor Drive		18
CITY Stamford	19 STATE 20 ZIP CT 06	21 5902
ENVIRONMEN	TAL CONTACT	
CONTACT NAME Dale Bowles		NTACT PHONE 23 4-903-8375
CONTACT MAILING ADDRESS 7441 Chapman Avenue		24
CITY Garden Grove	25 STATE 26 ZIP CA 92	27 641
PRIMARY EMERGENC	Y CONTACTS SE	ECONDARY
NAME 28 Dale Bowles	NAME RNOC	33
TITLE 29 Manager, Network Ops.	TITLE Regional Network Operations Center	34
BUSINESS PHONE 30 714-903-8375	BUSINESS PHONE 888-766-2521 Option 1	35
24-HR. PHONE 31 714-412-8128	24-HR. PHONE 888-766-2521 Option 1	36
PAGER # 32 N/A	PAGER # N/A	37
	OLLECTED INFORMATION	
DESCRIBE THE TYPE OF BUSINESS OPERATION: Telecommunications	38 TO	TAL # OF EMPLOYEES 39
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)	40 AT	TENTION 41
PROPERTY OWNER NAME 42 ADDRESS	43 PH	ONE 44
Certification : Based on my inquiry of those individuals responsi have personally examined and am familiar with the information sub	ble for obtaining the information, I certify nitted and believe the information is true,	under penalty of law that I accurate, and complete.
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	45 DA	ATE 46 /26/2010
NAME OF SIGNER (print) 47	ARCADIS US, Inc.	49
Lesley Schafer - Ågent for Time Warner Cable, Inc. TITLE OF SIGNER 48 Staff Engineer - ARCADIS US, Inc.	TITLE OF DOCUMENT PREPARER Staff Engineer - ARCADIS US, Inc.	50

Business Info Form 1 – 03/06/03

FORM 1

Hazardous Materials Disclosure Program

Business Emergency Plan

EMERGENCY NOTIFICATIONS

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

REQUIRED NOTIFICATIONS

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

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
Individual(s) Responsible for Calling These Agencies	S
Dale Bowles	

Provide the following information when you call:

- Name of the person and business.
 - Headend/Call Center Garden Grove (Time Warner Cable, Inc.)
- Business street address.
 - o 7441 Chapman, Garden Grove
- Location of the incident.
- Type of incident (spill, gas release, etc.)
- The name(s) of the chemical substance(s) involved.
- The amount of the chemical substances involved.
- The extent of injuries, if any.
- Possible hazards to human health and/or the environment.
- Emergency call-back phone number (714) 412 -8128

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

To the North:	
Facility	Phone: ()
Facility	Phone: ()
To the South:	
Facility	Phone: ()
Facility	Phone: ()
To the East:	
Facility	Phone: ()
Facility	Phone: ()
To the West:	
Facility	Phone: ()
Facility	Phone: ()

OPTIONAL NOTIFICATIONS

1.	Hazardous Waste Contractor		
	Name:	()	
2.	Insurance Company		
	Name:	()	
3.	Poison Control Center - 24-Hour	1-(800) 876-4766	

EVACUATION PLANS AND PROCEDURES

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

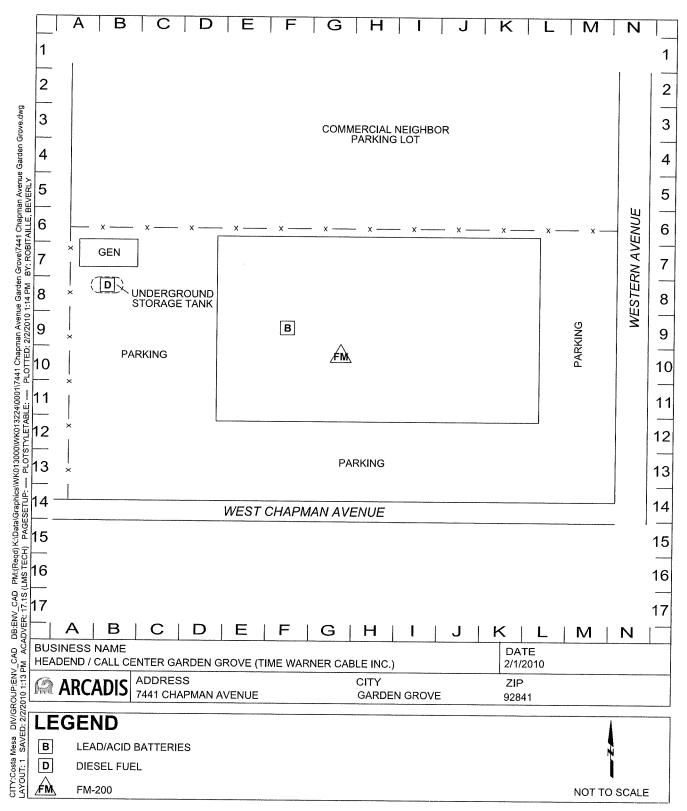
Emergency coordinators will notify facility employees of an emergency by verbal, telephone, intercom, portable radio, public address system or alarm system means. Employees will exit the nearest exterior door and meet at the staging area as shown in the attached in Site Map. Emergency Co-ordinators will be available at the staging area to assist emergency responders.

Evacuation Drills

Evacuation drills and records proving you have held such drills are required by California law. The drill record does NOT have to be provided to the Fire Department with this business plan, but shall be maintained for a period of three years and shall be available for review by Fire Department personnel. The record shall include the facilitator's name, title, facility location, date of drill, and the signature of the facilitator.

ORANGE COUNTY FIRE DEPARTMENT UNIFIED PROGRAM (UP) FORM CONSOLIDATED CONTINGENCY PLAN

Hazardous Materials Facility Site Map



Site map # 1

DEP	Stall		HAZA	ARDOUS	; MA .	FERIAL	.s II	VENT	ORY I	FORI	M For
	ARTME				1					Page	6 _{of}
FACILIT	Y 3 0 0	3 5		38	BUSINES Header	S NAME	er - Ga	rden Grove	(Time Wa		
		277.027.909				NFORMATI			(11110 114		bie, inc.)
CHEMIC	CAL LOCATION WI	thin Ger	nerator Ur	nit							
CONFID EPCRA	DENTIAL LOCATION		Yes 🗸	/ No 5 M/	AP #			6	GRID #		
				II. CHE	MICAL	INFORMAT	ION		1		·
снеміс Lead						WAST	E	Yes 8	TRADE SI	ECRET	Yes 🗸
	N NAME							9	If EPCRA		
Batt	ery Electrode	э						5	An EHS C		Yes 🗸
cas # 7439)-92-1	10	FIRE CODE H	AZARD CLASSES	S (supplie	d by GGFD)				105, 41	amounts must be
	heck one item only)	a. PURE			TE 14	RADIOACT	IVE Г	Yes 🗸	No 15	CURIE	s
	AL STATE	a. SOLID	b. LIQUID	c. GAS ¹	7 FED		a. Fli		REACTIVE	c. F	PRESSURE RELE
AVERAG AMOUNT			AXIMUM DAILY MOUNT 2,624				ΓΕ		21 STAT	E WAST	E
UNITS	a. GALLON	L	b. CUBIC			YS ON SITE	1		24 LARGE	E ST CON	
	c. POUND *If EHS, amount mus				3	65		-	3.		IT WALK
(Check all that apply) STORAG		L DRUM				I. BAG(S)					s. tote bin
STORAG	E TEMPERATURE		AMBIENT		BOVE AN			BELOW AM		d.	CRYOGENIC
	WT	HAZARD	OUS COMP	ONENT (For m	ixture or	waste only)			EHS	ليترسيسه	CAS #
%											
1	29						30	Yes	No	31	
2 %	29 29						30 30	Yes Yes	No	31 31	
1									No No		
1	29						30	Yes		31	

THE OEPARTMENT	-			FORM
FACILITY		1 BUSINESS NAME	Page 7 of	8
		Headend/Call Center - Garder	n Grove (Time Warner Cable, Inc.)	
CHEMICAL LOCATION		CILITY INFORMATION		
	Within battery units in headen	d area.		
CONFIDENTIAL LOCATIO	DN Yes 🗸 No 5 M	IAP #	6 GRID #	
	II. CHE	MICAL INFORMATION		
CHEMICAL NAME		WASTE Yes	8 TRADE SECRET Yes	V No
Sulfuric Acid			If EPCRA see instructions	
Battery Electro	blyte		⁹ An EHS Chemical 🖌 Yes	No
cas # 7664-93-9	10 FIRE CODE HAZARD CLASSE	S (supplied by GGFD)	*If EHS is "Yes", all amounts mus	t be LBS
TYPE (Check one item only)				
PHYSICAL STATE			es 🖌 № 15 CURIES N/A	
(Check one item only)		FED HAZARD a. FIRE CATEGORIES d. ACUTE	lana la contra la contra la contra la contra la contra de	
AVERAGE DAILY AMOUNT 576	19 MAXIMUM DAILY AMOUNT 576	20 ANNUAL WASTE AMOUNT N/A	21 STATE WASTE	
UNITS a. GAL	LONS b. CUBIC FEET	23 DAYS ON SITE	24 LARGEST CONTAINER	
×If EHS, amount	JNDS d. TONS must be in pounds.	365	14.4	
	BOVEGROUND TANK e. PLASTIC DRUM	i. VAT	m CYLINDER q. TANK V	WAGON
(Check all	NDERGROUND TANK		n. GLASS CONTAINER	٩R
	NK INSIDE BLDG g. METAL CONTAIN EEL DRUM h. CARBOY		PLASTIC CONTAINER s. TOTE E	
STORAGE PRESSURE			p. IN MACH OR EQUIP ↓ t. OTHER	
STORAGE TEMPERATURI	- 7		OW AMBIENT d. CRYOGENIC	
%WT	HAZARDOUS COMPONENT (For m	ixture or waste only)	EHS CAS	
1 29		30	Yes No 31	
2 29		30	Yes No 31	
3 29		30	Yes No 31	
4 29		30	Yes No 31	3
5 29		30	Yes No 31	3
If more hazardous com additional sheets of par	ponents are present at greater than 1% by per capturing the required information.	weight if non-carcinogenic, or	0.1% by weight if carcinogenic, atta	ch
		DING INFORMATION		
UNDOT # 1830				
	Refer to shipping papers or MSDS	33	NFPA 704 HAZARD DIAMOND	
DOT HAZARD CLASS	8	34 H		
	Refer to shipping papers or MSDS	°7 I (P	SPECIAL WHITE	
EPCRA YES NO		35	HAZARD A V OX/W	

FACI	ADD	DELETE REVISED 1			ORM :
ID#		5 38 BUS	SINESS NAME	Page <u>8</u> of	8
			adend/Call Center - Garden G	Grove (Time Warner Cable, Inc.)	
CHEN	ICAL LOCATION Within	Generator Unit			
CONF	DENTIAL LOCATION				
EPCR	4	Yes 🖌 No 5 MAP #		6 GRID #	
CHEM	CAL NAME	II. CHEMIC	AL INFORMATION		
Pet	oleum Hydrocarbon		WASTE Yes	8 TRADE SECRET Yes	V No
				9 An EUS Objections	
CAS #	sel Fuel #2			 9 An EHS Chemical Yes *If EHS is "Yes", all amounts must 	
	76-34-6	10 FIRE CODE HAZARD CLASSES (su Combustible Liquid	pplied by GGFD)	, an amounts must	LDE LBS
TYPE (Check one item only) 🚺 a. PU		14 RADIOACTIVE Yes	✓ No 15 CURIES N/A	
	AL STATE a. SOLI		FED HAZARD	b. REACTIVE C. PRESSURE RE	ELEASE
AVERA	GE DAILY 19		CATEGORIES d. ACUTE HE		
	T 1,000	AMOUNT 1,000	ANNUAL WASTE AMOUNT N/A	21 STATE WASTE CODE	
UNITS	a. GALLONS c. POUNDS	b. CUBIC FEET 23	DAYS ON SITE	24 LARGEST CONTAINER	
	*If EHS, amount must be in p	ounds.	365	150	
STORA				CYLINDER q. TANK W	/AGON
(Check a that appl				GLASS CONTAINER	R
		h. CARBOY		LASTIC CONTAINERS. TOTE BI	N
		a. AMBIENT b. ABOVE	AMBIENT C. BELOW		
I STODA/	E TEMPERATURE		EAMBIENT C. BELOW	AMBIENT d. CRYOGENIC	2
		DB OLIO - COLICIO			
	WT HAZA	RDOUS COMPONENT (For mixture	e or waste only)	EHS CAS	#
1	WT HAZA 29	RDOUS COMPONENT (For mixtur	e or waste only) 30 Ye		# 3
2	WT HAZA 29 29	RDOUS COMPONENT (For mixture	20	es No 31	
2 3	WT HAZA 29 29 29 29	RDOUS COMPONENT (For mixture	30 Ye	PS No 31	3
1 2 3 4	WT HAZA 29 29 29 29 29 29	RDOUS COMPONENT (For mixture	30 Ye	PS No 31 PS No 31 PS No 31	3
2 3 4 5	WT HAZA 29 29 29 29 29 29 29		30 Ye 30 Ye 30 Ye 30 Ye 30 Ye 30 Ye	PS No 31 PS No 31 PS No 31 PS No 31 S No 31	3
2 3 4 5	WT HAZA 29 29 29 29 29 29 29 29 29 29		30 Ye 30 Ye 30 Ye 30 Ye 30 Ye 30 Ye	PS No 31 PS No 31 PS No 31 PS No 31 S No 31	3
2 3 4 5	WT HAZA 29 29 29 29 29 29 29 29 29 29	e present at greater than 1% by weig ng the required information.	30 Ye 30 Ye	PS No 31 PS No 31 PS No 31 PS No 31 S No 31	3
1 2 3 4 5 <i>If more l</i> addition	WT HAZA 29 29 29 29 29 29 29 29 29 29	e present at greater than 1% by weig ng the required information.	30 Ye 30 Ye	95 No 31 96 No 31 97 No 31 96 by weight if carcinogenic, attace	3
2 3 4 5	WT HAZA 29 29 29 29 29 29 29 29 29 29	e present at greater than 1% by weig ng the required information.	30 Ye 30 N Sa N	PS No 31 PS No 31 PS No 31 PS No 31 S No 31	3
1 2 3 4 5 <i>If more I</i> addition	WT HAZA 29 29 29 29 29 29 29 29 29 29	re present at greater than 1% by weig ng the required information. PLACARDING	30 Ye HEALT HEALT	31 28 No 31 28 No 31 38 No 31 39 No 31 31 S S 32 S S 33 S S 34 S S 35 S S 36 S S 37 S S 38 S S 39 S S 30 S S	3
1 2 3 4 5 <i>If more l</i> addition UNDOT	WT HAZA 29 29 29 29 29 29 29 29 29 29	re present at greater than 1% by weig ng the required information. PLACARDING	30 Ye 30 Heat 10 HEALT (BLUE) (BLUE)	PS No 31 No 31 No 31 No 31 No 31 S No 31 S No 31 S No 31 S No 31 S No 31 S No 31 S PA 704 HAZARD DIAMOND RE (RED) H	3



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

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Print Name Lesley Schafer

Job Title Senior Staff Engineer - LFR, Inc.

Signature	Solle	afe
Date	2/25/09	

White Copy - Return to Garden Grove Fire Department HMBEP certification. doc

Yellow Copy - Retain for Business Records