Phoenix Fire Department - Fire Prevention Section

HMIS - Hazardous Material Inventory Statement (Part-2)

Page #_____of_____

Business Name: _____ **Address:** _____ **Store #:** _____ **Date:** _____

Complete By: _____ **Telephone:** _____

On-Site Generator(s) – If Yes, Fuel Qty (US Gal.): _____ Number of Tanks _____ **Fuel Type:** _____

On-Site Fire Pump(s) – If Yes, Fuel Qty (US Gal.): _____ Number of Tanks _____ **Fuel Type:** _____

① Indoor Storage	Outdoor Storage	② Chemical or Trade Name	③ Conc. %	④ CAS Number	⑤ PFC Hazard Classification	⑥ Physical State	⑦ Total Amt on Property	⑧ NFPA 704 RATING			⑨ Tank(s) (Above Ground Only)	Mark an "X" on all lines with chemicals listed as trade secrets in accordance with FOIA Exemption #4
Checkmark Type						List: (Solid, Liquid or Gas)	List: (Pounds, Gallons or Cubic ft).	H	F	R	Enter Number	

Insert additional PDF pages as needed.