

# ONTARIO FIRE DEPARTMENT

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BUREAU of FIRE PREVENTION

D. A. B.#

Plan Check #

415 East " B' Street, Ontario, CA 91764 (909) 395-2029 FAX (909) 395-2585

FOR APPLICATION OF THE  
UNIFORM FIRE CODE

PROJECT/BUSINESS NAME

PHONE

PROJECT ADDRESS

MANAGER/CONTACT PERSON

FAX

PHONE

ATTACH M.S.D.S SHEETS HERE

Condition		Storage			Use - Closed Systems			Use - Open Systems	
Material	Class	Solid Lbs. (Cu. Ft.)	Liquid Gallons (Lbs.)	Gas (Cu. Ft.)	Solid Lbs. (Cu. Ft.)	Liquid Gallons (Lbs.)	Gas (Cu. Ft.)	Solid Lbs. (Cu. Ft.)	Liquid Gallons (Lbs.)
Combustible Liquid	II								
	III-A								
	III-B								
Comb. dust/1000 cu. ft.									
Combustible Fiber (loose) (baled)									
Cryogenic, Flammable or Oxidizing									
Explosives									
Flammable Solid									
Flammable Gas (gaseous) (liquefied)									
Flammable Liquid	I-A								
	I-B								
	I-C								
Combination 1-A,B,C									
Organic Peroxide unclassified detonatable									
Organic Peroxide	I								
	II								
	III								
	IV								
	V								
Oxidizer	4								
	3								
	2								
	1								
Oxidizer - Gas (gaseous) (liquefied)									
Pyrophoric									
Unstable (reactive)	4								
	3								
	2								
	1								
Water Reactive	3								
	2								
	1								
Corrosives									
Highly Toxics									
Irritants									
Sensitizers									
Other Health Hazards									
Toxics									

List separately, on the reverse side, any hazardous materials indicated above.

Show maximum quantities in use or storage.

# ONTARIO FIRE DEPARTMENT HAZARDOUS MATERIALS INFORMATION

## HAZARDOUS MATERIALS INFORMATION

**PAGE 2 OF 2**

Overall size of building	SQ/FT
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Number of control areas within the building \_\_\_\_\_ (Maximum of 2 for retail and wholesale stores - 4 otherwise)

Multi-tenant building? Y/N \_\_\_\_\_ Total number of tenants in building \_\_\_\_\_

### Control Area #1

Occupancy Classification \_\_\_\_\_

Size            SQ/FT

Sprinklered? Y/N \_\_\_\_\_

## Control Area #2

### Occupancy Classification

Size \_\_\_\_\_ SQ/FT

Sprinklered? Y/N \_\_\_\_\_

### Control Area #3

### Occupancy Classification

Size	SQ/FT
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Sprinklered? Y/N

### Control Area #4

### Occupancy Classification

Size            SQ/FT

Sprinklered? Y/N

[illegible]

I hereby certify that the use, storage or process of hazardous materials in this building or premises will be limited to quantity as indicated above. Under penalty of perjury, all information supplied in this survey is true and correct to the best of my knowledge, and I have read and understand this survey in its entirety.

Print Building Owner or Occupant Name

Phone #

Building Owner or Occupant Signature

Date \_\_\_\_\_

CITY PERSONNEL USE ONLY

HAZ MAT Inspector Reviewing Form

Date \_\_\_\_\_

Occupancy Classification\_\_\_\_\_

DEHS Action Required? \_\_\_\_\_

REV. 12-01