



HAZARDOUS MATERIALS REPORTING HANDBOOK

“Protecting Your Future”



Fire Prevention Bureau
4814 Henry St., Norton Shores, MI. 49441
Phone: 231-799-6809
www.nortonshores.org

"Protecting Your Future"

Dear Business Owner,

The Michigan Occupational Safety and Health Administration (MIOSHA) Act 154 of 1974 requires each fire chief prepare information on facilities within their jurisdiction in regards to hazardous chemicals. **ALL BUSINESSES ARE REQUIRED TO COMPLETE THIS INFORMATION – EVEN IF YOUR REPORTABLE QUANTITIES ARE ZERO.**

To assist our department in fulfilling the requirements please complete the forms listed in the Hazardous Material Reporting Packet and return each year between January 1 and March 1 with information reported from the previous year.

REQUIRED FORMS FOR ALL BUSINESSES

1) HAZARDOUS MATERIALS INVENTORY STATEMENT (HMIS)

- a. IF YOU DO NOT HAVE REPORTABLE QUANTITIES – Complete the yellow section of the Hazardous Material Inventory Statement and check the box labeled "No Reportable Quantities."
- b. IF YOU HAVE REPORTABLE QUANTITIES – Complete the yellow section of the Hazardous Material Inventory Statement and check the box labeled "USER or PRODUCER" at the top of the form.

2) EMERGENCY CONTACT FORM – In the event of an after-hours emergency this information will be used to contact your company representative.

3) FLOOR PLANS

****NOTE THE NEEDED INFORMATION ON THE SAMPLE FLOOR PLAN****

- a. IF YOU DO NOT HAVE REPORTABLE QUANTITIES – Create a floor plan of your facility. An electronic PDF version is preferred, but a hand drawing is acceptable.
- b. IF YOU DO HAVE REPORTABLE QUANTITIES – An electronic PDF version is required marking the locations of the hazardous materials.

Floor plans are important for the life safety of employees, public and first responders.

RETURNING FORMS

If compliance is not met this information will be given MIOSHA for further enforcement. It's also advised to keep this information on file to reference for future updates. Forms can be returned two ways:

1. Email to nsfd.fireprevention@mcd911.net
2. Mail: Fire Prevention Bureau
4814 Henry Street
Norton Shores, MI 49441

If you have questions regarding any of these forms, please contact the Norton Shores Fire Prevention Bureau at 231-799-6809 or the email listed above.

If there are any changes to the information prior to the next requested update it is your responsibility to resubmit the information at that time.

We thank you for your cooperation and look forward to hearing from you.

Protecting Your Future,

A handwritten signature in black ink, appearing to read "Derek Hall". The signature is written in a cursive style with a large initial "D" and "H".

Derek Hall
Fire Marshal
Norton Shores Fire Department

EMERGENCY CONTACT FORM

Information contained on this form is for Official Use Only
and is NOT FOR PUBLIC EYES

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

PRIMARY EMERGENCY CONTACT PERSON (During & ***AFTER*** Hours):

NAME: _____

TITLE: _____

HM ADDRESS: _____

HM PHN: _____ WK PHN: _____

CELL: _____ OTHER: _____

SECONDARY EMERGENCY CONTACT PERSON (During & ***AFTER*** Hours):

NAME: _____

TITLE: _____

HM ADDRESS: _____

HM PHN: _____ WK PHN: _____

CELL: _____ OTHER: _____

CONTINGENT EMERGENCY CONTACT PERSON (During & ***AFTER*** Hours):

NAME: _____

TITLE: _____

HM ADDRESS: _____

HM PHN: _____ WK PHN: _____

CELL: _____ OTHER: _____

CHECK ALL THAT APPLY:

Have Lock Box Have Monitored Fire Alarm Have Monitored Fire Suppression

(Add additional sheets if you would like to add additional people to this list.)

NORTON SHORES FIRE DEPARTMENT HAZARDOUS
MATERIALS INVENTORY STATEMENT

**THIS PDF MUST BE
SAVED TO YOUR
COMPUTER BEFORE
YOU SUBMIT FORM**

DATE INFO ENTERED:		INFO EXPIRES:		REPORT INFORMATION EXPIRES: 3 YEARS AFTER SUBMITTAL
INFO ENTERED BY / CONTACT PERSON:			DAYTIME CONTACT PHONE:	
CONTACT PERSON E-MAIL ADDRESS:			P.F. #:	—
FACILITY NAME:			FACILITY ADDRESS:	
FACILITY PHONE:			FACILITY FAX:	

HMIS Document Version: <i>October 2014</i>	If you have <i>No Reportable Quantities</i> , place an "X" in this box:		WE are a USER	WE are a PRODUCER	
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							NFPA 704 (No. 1-4)			REPORTABLE QUANTITIES AMOUNT ON SITE			PHYSICAL STATE OF MATERIAL						INSIDE / OUTSIDE / BOTH <small>(IDENTIFY LOCATIONS ON SITE DRAWING)</small>	
CHEMICAL NAME	TRADE NAME	FD HAZ CLASS.	E H S	DOT UN/NA No.	C.A.S. NO.		H	F	R	GALS	LBS	CU. FT	L I Q	S O L	G A S	G R A N	P W D R	C R Y O		

Name of Business
Address

"Sample Floor Plan"

Nearby St.

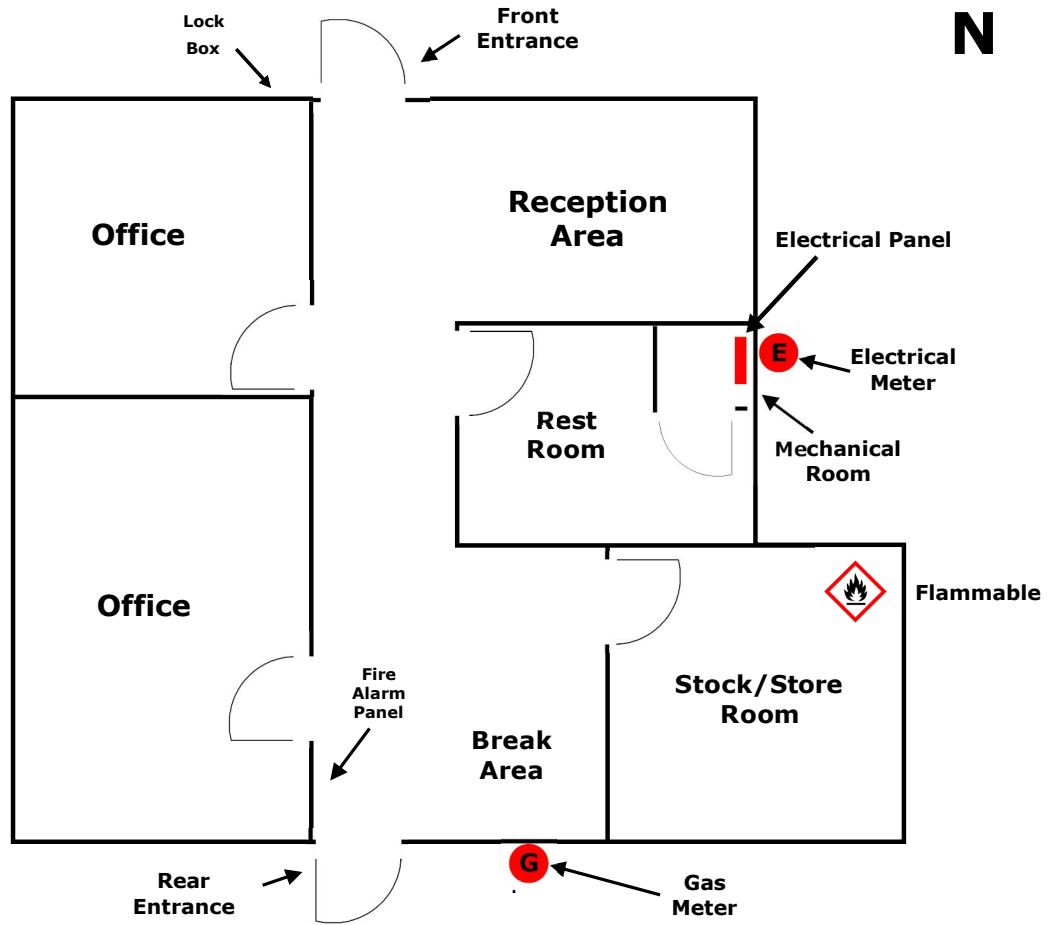


Must Have on drawings:

- Electrical meter & panel
- Gas meter
- Mechanical room location
- Name & address of business
- Floor for each floor of building
- North Orientation
- Nearby Street

ADDITIONAL IF APPLY

- Lock Box Location
- Sprinkler System and Valves
- Fire Alarm Panel
- Fire Department Connection
- HAZARDOUS Materials Location



**If you have reportable quantities,
an electronic PDF is required.
If you have any questions, please
contact our office at 231-799-6809.**

Drawn By:
John Smith
231 555 5555
Jan. 1, 20XX