

CFATS Help Desk Web Form



Homeland
Security



1. Privacy Act Statement

Authority: 5 U.S. C. § 301 and 44 U.S.C. § 3101 authorize the collection of this information.

Purpose: DHS will use this information to confirm your user role and respond to your questions.

Routine Use: This information may be disclosed as generally permitted under 5 U.S.C. §552a(b) of the Privacy Act of 1974, as amended. This includes using the information, as necessary and authorized by the routine uses published in DHS/ALL-002 - Department of Homeland Security (DHS) Mailing and Other Lists System of Records (November 25, 2008, 73 FR 71659).

Disclosure: Furnishing this information is voluntary; however failure to provide any of the information requested may prevent the Chemical Facility Anti-Terrorism Standards (CFATS) Help Desk from providing assistance or answering your questions.

2. Paperwork Reduction Act Statement

In accordance with the Paperwork Reduction Act, no one is required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) Control Number. The valid OMB Control Number for this information collection is 1670-0007. The time required to complete this information collection is estimated to average .17 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

3. CFATS Help Desk Web Form

In order to expedite the handling of your request, please provide the following information. We are required to input the information requested prior to providing an answer to questions that are received at the helpdesk for tracking purposes only.

If you are a covered facility, please provide your facility ID. If you have completed the registration process but do not know your coverage status, please include the registration form ID number that may be found in the registration email or on the printed form located below the barcode.



The information collected is secured as required by the Department of Homeland Security and cannot be accessed by any outside sources.



Submittal Form

Facility Name 35418501282000

First Name 35418710243000

Last Name 35418909788000

Phone Number 35419104080000

Fax Number 35419628366000

Facility Address (Street) 35420102844000

Facility Address (City, ST Zip) 35420331521000

Email Address 35421004160000

Re-enter Email Address for Confirmation 35421215484000

Registered CSAT User 35421414059000 --

Facility ID (if applicable) 36335412761904

User Registration (if applicable) 35420504898000

Brief description of question or issue

35421601790000



0 of 4000

* Fields with a red label are required.

Submit	Cancel
---------------	---------------

Should you need further assistance, please contact the CSAT helpdesk at 866-323-2957 and someone will be able to help you.