CFATS Help Desk Web Form





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.

DHS Form 9010-1 Page 1



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

DHS Form 9010-1 Page 2



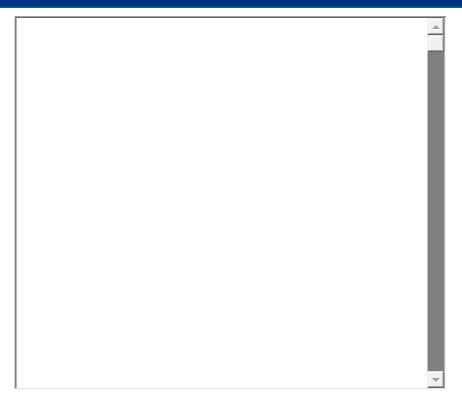
Submittal Form

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	

DHS Form 9010-1 Page 3

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.

DHS Form 9010-1 Page 4