Stratospheric Ozone Protection Program

Class I Producer Quarterly Report (Sec 82.13)

Version 1.0

Last Updated: April 2018



Instructions

Complete this form by filling in the data fields that are highlighted in blue. Guidance on how to complete individual data fields are provided in comment bubbles. Use the arrows to navigate between the tabs. Once completed, use the 'prepare submission' button in Section 3 to generate your CSV file.

Copying and Pasting Data: If data are pasted into this reporting form from another spreadsheet, the formatting of specific cells must be consistent with the requirements of the form in order to be accepted into EPA's ODS Tracking System. Refer to the Reference List to identify the valid naming scheme for specific cells are pasted into EPA's ODS Tracking System.

Report Submission: This Excel file, the generated CSV file, and all supporting attachments should be submitted to EPA through the Central Data Exchange (CDX). Refer to EPA's website for additional information on form submission:

https://www.epa.gov/ods-phaseout/ods-recordkeeping-and-reporting

All information submitted to EPA will be treated as confidential in accordance with 40 CFR Part 2, Subpart B, and will only be disclosed by the means set forth in the subpart.

The public reporting and recordkeeping burden for this collection of information is estimated to average 2 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Avenue NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

EPA Form #5900-151

OMB Control Number: 2060-0170 Expiration Date: 10/31/2018

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Date Prepared: 1/20/2021

Instructions Proceed to Section 2

Section 1: Report Identification Information

Complete all fields below. No fields may be left blank.

Company Name:	
Submission Type:	
Reporting Year:	
Reporting Quarter:	
Hoporting Quarters	

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Company Name:

Reporting Period: #NAME?

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Section 2: Production Data

In the table below, enter the quantity of each class I controlled substance that was produced during the reporting period. If no controlled substances were produced, the table may be left blank. As a reminder, **if material was produced for global lab, other essential uses (EU), second party transformation, or second party destruction**, a copy of the transformation verification, destruction verification, and/or essential use certification from each company for whom material was produced must be provided to EPA along with the submission of this report.

If copying and pasting data into the table, please refer to the Reference List and the accompanying instructions.

Name of the Class I Chemical Produced	Global Lab	Other EU	In-House Transformation	Second Party Transformation	In-House Destruction	Second Party Destruction	Gross Production
Selection	kg	kg	kg	kg	kg	kg	Autopopulated
CFC-113	1,500.00	0.00	200.00	100.00	0.00	0.00	1,200.00

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Company Name:

Reporting Period: #NAME?



Prepare Submission

Section 3: Shipment/Sales Data

Identify the recipient company(s) of the material produced for second party transformation, second party destruction, global lab, and/or other essential uses (EU), and the amount shipped to or purchased by each company during the quarter.

Note: Due to a potential time lag between the date of production and the date of shipment, it is recognized that for a given quarter the information in Section 3 may not match the information reported in Section 2 for second party transformation and second party destruction; however, it is expected that all material produced for second party transformation and second party destruction will eventually be shipped to a second party and must be reported as such in the applicable quarterly report.

If copying and pasting data into the table, please refer to the Reference List and the accompanying instructions.

As a reminder, a copy of the transformation verification, destruction verification, or essential use certification from each company for whom material was produced must be provided to EPA along with the submission of this report.

Chemical Name	Recipient Company Name	Quantity	Purpose
Selection	Text	kg	Selection
CFC-113	Company A	100.00	Transformation

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Reference List

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Chemical Name List: The table below lists the valid chemical names that may be used when entering data into Section 2 and Section 3 of this form.

Chemical Name					
CFC-12	CFC-114	CFC-214	Halon 1211	CH3CCL3	
CFC-13	CFC-115	CFC-215	Halon 1301	HBFCs	
CFC-111	CFC-211	CFC-216	Halon 2402		
CFC-112	CFC-212	CFC-217	СВМ		
CFC-113	CFC-213	Halon 1202	CCL4		

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