

U.S. Environmental Protection Agency

Stratospheric Ozone Protection Program

Class II Producer Quarterly Report (Sec 82.24)

Version 1.0

Last Updated: April 2018



Proceed to Section 1

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 on the Summary tab 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 spreadsheets.

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 #5900-202

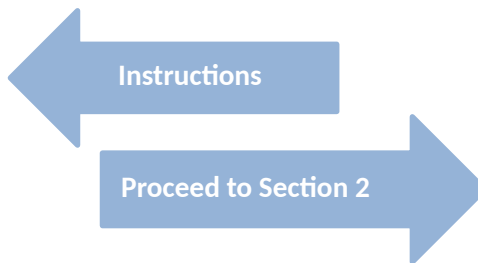
OMB Control Number: 2060-0498

Expiration Date: 4/30/2019

U.S. Environmental Protection Agency

Class II Producer Quarterly Report

Date Prepared: 1/20/2021



Section 1: Report Identification Information

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

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



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Reference List

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. When copying and pasting data into the form, please ensure consistency with the formatting of the list below.

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				
HCFC-21	HCFC-124a	HCFC-142b	HCFC-231	HCFC-251
HCFC-22	HCFC-131	HCFC-151	HCFC-232	HCFC-252
HCFC-31	HCFC-132b	HCFC-221	HCFC-233	HCFC-253
HCFC-121	HCFC-133a	HCFC-222	HCFC-234	HCFC-261
HCFC-122	HCFC-141	HCFC-223	HCFC-235	HCFC-262
HCFC-123	HCFC-141a	HCFC-224	HCFC-241	HCFC-271
HCFC-123a	HCFC-141b	HCFC-225ca	HCFC-242	
HCFC-123b	HCFC-142	HCFC-225cb	HCFC-243	
HCFC-124	HCFC-142a	HCFC-226	HCFC-244	

