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Notice to Users: Although TRI-MEweb is used to collect data required on TRI reporting forms, the application also captures data provided to help populate the reporting forms. Such data may be used by EPA for any purpose (subject to Privacy Act and other protections).

Start Tour

Tasks You Can Quickly Start in TRI-MEweb

Use the links above to navigate through TRI-MEweb or use the dropdown below to get started:

I need to:

Notifications

- Browser Compatibility +
- Provide Access Key +

User Profile Edit

Name: [REDACTED]
CDX User ID: [REDACTED]
Email Address: [REDACTED]
Phone: [REDACTED]
CDX User Role: Preparer


Not Reporting?

You may provide EPA with optional information about changes to your facility as well as why your facility will not be filing one or more TRI forms for the current reporting year.

- 2203WTSTXX11MAI

Your RY 2020 Snapshot

All Facilities



13
in progress (13)

[Form Home](#)

What is new in TRI-MEweb?

- New information for RY 2020
- TRI-MEweb enhancements

Certain per- and polyfluoroalkyl substances (PFAS) were recently added to the TRI list. The PFAS additions are effective as of January 1, 2020. Reporting forms for these chemicals will be due to EPA by July 1, 2021, for calendar year 2020 data. Click here for more information.

A **new** icon will be displayed beside each new feature.

Release Trends

TEST (2203WTSTXX11MAI)

1

Section 4.1-4.2:

SECTION 4. FACILITY IDENTIFICATION			
	Facility or Establishment Name	TRI Facility ID Number	BIA Code
4.1	Physical Street Address	Mailing Address (if different from physical street address)	
	City/County/State/ZIP Code	City/State/ZIP Code	Country (Non-US)
4.2	This report contains information for: <u>Important</u> Check c or d if applicable) c. <input type="checkbox"/> A Federal Facility d. <input type="checkbox"/> GOCO		

Facility Information
Part 1

RY 2017
2017WKTHYZZEBRZ
Chlorine

4.1 - 4.5 Facility Name and Address [Need Reporting Help?](#)

TRIFID 2017WKTHYZZEBRZ	Facility Address 460 ELDEN ST HERNDON, VA 20170 Fairfax	BIA Code 037	Facility Type Neither	Edit
Facility Name KATHY ZEBRA Z FACILITY- TEST DATA UPDATED NOT CO-LOCATED FAC	Mailing Address Same as physical address	NAICS Code(s) 221112 (Primary) 924110 923120 325520 924120		

Section 4.3-4.4:

4.3	Technical Contact Name	Telephone Number (include area code and ext.)
	Email Address	
4.4	Public Contact Name	Telephone Number (include area code and ext.)
	Email Address	

TRI-ME WEB

My TRI Facility Management Forms Submission History Help

Part 1/4: Activities and Uses/Max On-site 5: On-site Releases 6: Off-site Transfers

Contact Information
Part I, Section 4.3 & 4.4

Select or enter a Technical Contact

Contact Name: KATHY HALE

Phone Number: 703-227-7398

Phone Ext:

Contact Email: KATHY.HALE@CGIFED

4.4 Public Contact Information [Need Reporting Help?](#)

Select or enter a Public Contact

Contact Name: [REDACTED]

Phone Number: [REDACTED]

Phone Ext: [REDACTED]

Contact Email: [REDACTED]

Section 4.5-4.6

4.5	NAICS Code(s) (6 digits)	Primary					
		a.	b.	c.	d.	e.	f.
4.6	Dun & Bradstreet Number(s) (9 digits)	a.					
		b.					

Facility Information

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017WKTHYZZEBRZ
Toluene

4.1 - 4.5 Facility Name and Address [Need Reporting Help?](#)

Facility Address BIA Code Facility Type
 Neither [Edit](#)

Facility Name: KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC
 Mailing Address: Same as physical address
 NAICS Code(s): 327910 (Primary)

4.6 Facility Dun & Bradstreet Number(s) [Need Reporting Help?](#)

Dun & Bradstreet Numbers Not Applicable [Edit](#)
 a:
 b:

Section 5: Parent Company

SECTION 5. PARENT COMPANY INFORMATION	
5.1	Name of U.S. Parent Company (for TRI Reporting purposes) <input type="text"/> No U.S. Parent Company <input type="checkbox"/> (for TRI Reporting purposes)
5.2	Parent Company's Dun & Bradstreet Number NA <input type="checkbox"/> <input type="text"/>

5. Parent Company Name Information [Need Reporting Help?](#)

No U.S. Parent Company (for TRI reporting purposes) [Edit](#)

5.1 Parent Company Name:

 Parent Company not listed
 Enter Parent Company Name (if not listed above):

5.2 Parent Company's Dun & Bradstreet Number: Parent Company Dun & Bradstreet Number Not Applicable

Part II: Section 3.1-3.3

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY (Important: Check all that apply.)			
3.1	Manufacture the toxic chemical:	3.2	Process the toxic chemical:
a. <input type="checkbox"/> Produce b. <input type="checkbox"/> Import			3.3
If Produce or Import c. <input type="checkbox"/> For on-site use/processing d. <input type="checkbox"/> For sale/distribution e. <input type="checkbox"/> As a byproduct f. <input type="checkbox"/> As an impurity	a. <input type="checkbox"/> As a reactant b. <input type="checkbox"/> As a formulation component c. <input type="checkbox"/> As an article component d. <input type="checkbox"/> Repackaging e. <input type="checkbox"/> As an impurity f. <input type="checkbox"/> Recycling	Enter 4-digit code(s) from instruction package <input type="text"/>	a. <input type="checkbox"/> As a chemical processing aid b. <input type="checkbox"/> As a manufacturing aid c. <input type="checkbox"/> Ancillary or other use
		Enter 4-digit code(s) from instruction package <input type="text"/>	Enter 4-digit code(s) from instruction package <input type="text"/>

Activities and Uses / Max On-site

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017WKTHYZZEBRZ
Toluene

3.2 Process

Did your facility process Toluene in Reporting Year 2019? Yes:

Was Toluene processed as a **reactant** in Reporting Year 2019? Yes:

Was Toluene processed as a **formulation component** in Reporting Year 2019? Yes:

Sub-uses: You must select at least one applicable code (select all that apply) [GuideME](#) [Learn More](#)

P202 - Dyes

Was Toluene processed as an **article component** in Reporting Year 2019? Yes:

Was Toluene processed **during repackaging** in Reporting Year 2019? Yes:

Part II: Section 1

FORM R		TRI Facility ID Number
Part II. CHEMICAL-SPECIFIC INFORMATION		Toxic Chemical, Category, or Generic Name
SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you are reporting a mixture component in Section 2 below.)		
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)	
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)	
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)	

Add Form(s)

Facility: 2017WKTHYZZEBRZ - KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC

Enter the chemical name below for which you would like to create forms to search the list of TRI-listed chemicals. If you would like to include chemical synonyms in your search, please check **Search by chemical synonyms** before you enter the chemical name. You may enter generic chemical names separately by checking **Add generic chemicals**. When complete, click the **Add Form(s)** button to create forms for the TRI-listed and generic chemicals specified

Select or enter a chemical or CAS/Category#

Search by chemical synonyms

Add generic chemicals

Add Form(s)

Cancel

This is done using a pop-up widget

Part II Section 2.1 Mixtures

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1.)	
2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

Add generic chemicals

Enter the generic chemical name(s) for which you would like to create forms and click the **Add Chemical to List** button for each chemical entered. Do not use this screen if you know the identity of the TRI-listed chemical. Enter a generic chemical name in this section only if the following three conditions apply:

1. You determine that the mixture contains an EPCRA Section 313 chemical but the only identity you have for that chemical is a generic name;
2. You know either the specific concentration of that EPCRA Section 313 chemical component or a maximum or average concentration level; and
3. You multiply the concentration level by the annual amount of the whole mixture processed (or otherwise used) and determine that you meet the processing (or otherwise use) threshold for that single, generically identified, mixture component.

Any generic chemicals reported in the prior year will be listed and selectable within the drop-down menu below.

Enter Generic Chemical: [Add Chemical to List](#) [Need Help?](#)

The following Generic Chemical(s) will be added:

Select a generic chemical or enter one above.

Add Form(s)

Cancel

Part II Section 4.1

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

41 (Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE

Activities And Uses / Max On-site

RY 2017
2017WKTHYZZEBRZ
Chlorine

4. Max On-Site [Need Reporting Help?](#)

Select the code (see below) that indicates the maximum quantity of the EPCRA Section 313 chemical (e.g., in storage tanks, process vessels, on-site shipping containers, or in wastes generated) at your facility at any time during the calendar year, in pounds. Note that this quantity consists of the total amount of the chemical on-site at any one time, not simply the amount manufactured, processed, or otherwise used. When reporting for the dioxins and dioxin-like compounds category, note the weight range is in grams. The facility must aggregate all quantities of the toxic chemical to determine the maximum total amount present at the entire facility at one time.

Calculation Example

Calculation Example for a Chemical in a Mixture or Trade Name Production

Max On-site:

Part II Section 5.1-5.2 Point and Non-point Emissions

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE

		A. Total Release (pounds/year*) (Enter a range code** or estimate)	B. Basis of Estimate (Enter code)	C. Percent from Stormwater
5.1	Fugitive or non-point air emissions	NA <input type="checkbox"/>		
5.2	Stack or point air emissions	NA <input type="checkbox"/>		

On-site Releases and Disposal

RY
2017WKTHYZZE
Chk

Form R, Part II, Section 5 [Need Reporting Help?](#)

Hover your cursor over the [?](#) icon for more information. Enter data using detailed worksheet.

Form Section	<input type="checkbox"/> Not Applicable	Total Quantity (lbs) ?	Numeric Basis ?	Basis of Estimate ?
Air Releases				
Section 5.1: Fugitive or Non-Point Air Emissions ?	<input type="checkbox"/>	1,000 <input type="text"/> or Select a Range Code ?		E2 - Emission Factor, S... ?
Section 5.2: Stack or Point Air Emissions ?	<input type="checkbox"/>	1,000 <input type="text"/> or Select a Range Code ?		C - Mass Balance ?

Part II Section 5.3: Water Bodies

5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA <input type="checkbox"/>			
5.3.1	Stream or Water Body Name	Reach Code (optional)			
5.3.2					

If additional pages of Part II, Section 3.2 and 3.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 3.2 and 3.3 page number in this box (Example: 1, 2, 3, etc.)

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box (Example: 1, 2, 3, etc.)

EPA form 9350-1 (Rev. 09/2017). Previous editions are obsolete. *For Dioxin or Dioxin-like compounds, report in grams/year.
**Range Codes: A= 1-10 pounds; B=11-499 pounds; C= 500-999 pounds.

Water Bodies

Form R, Part II, Section 5.3 [Need Reporting Help?](#)

In this section, you will need to report estimates of the quantities of the toxic chemical to which your facility directly discharges in to receiving streams or water bodies. Release stormwater runoff are also reportable. If you have previously entered data, it is summarized below.

If these types of releases are not applicable, select the box below.

Not Applicable (Should I report zero instead of Not Applicable?)

[Add a water body](#)

Stream or Water Body Name	Reach Code (optional)	Total Quantity (lbs) ?	Numeric Basis ?	Basis of Estimate Code ?	% from Stormwater ?
Unnamed water body	02070008000593	<input type="text"/> or Select a Range... ?		Select a Basis of Estim... ?	<input type="checkbox"/> NA
SUGARLAND RUN	02070008000275	2,000 <input type="text"/> or Select a Range... ?		C - Mass Balance ?	<input checked="" type="checkbox"/> NA

Part II Section 5.4-5.5 Land Releases

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (continued)			
	NA	A. Total Release (pounds/year*) (Enter a range code** or estimate)	B. Basis of Estimate (Enter code)
5.4-5.5	Disposal to land on-site		
5.4.1	Class I Underground Injection Wells	<input type="checkbox"/>	
5.4.2	Class II-V Underground Injection Wells	<input type="checkbox"/>	
5.5.1A	RCRA Subtitle C landfills	<input type="checkbox"/>	
5.5.1B	Other landfills	<input type="checkbox"/>	
5.5.2	Land treatment/application farming	<input type="checkbox"/>	
5.5.3A	RCRA Subtitle C surface impoundments	<input type="checkbox"/>	
5.5.3B	Other surface impoundments	<input type="checkbox"/>	
5.5.4	Other disposal	<input type="checkbox"/>	

Part II Section 5.5 Waste Rock

5.5.4	Other disposal	<input checked="" type="checkbox"/>	
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Optional Waste Rock Piles Information
 You may check this box if your Section 5.5 quantities include "waste rock piles" Enter quantity of "waste rock piles" (pounds/year)

Part II Section 6.1 POTW Releases

SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS			
6.1	DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)	NA	<input type="checkbox"/>
6.1	POTW Name		
POTW Address			
City	County	State	ZIP
A. Quantity Transferred to this POTW (pounds/year*) (Enter range code** or estimate)		B. Basis of Estimate (Enter code)	C. Disposal/Treatment (Enter code)
1.		1.	1. PW
2.		2.	2. PW
3.		3.	3. PW

On-site Releases and Disposal

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Form R, Part II, Section 5 [Need Reporting Help?](#)

Emissions Select a Range Code C - Mass Balance

Land Releases

Section 5.4.1: On-site Underground Injection: Class I Wells	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.4.2: On-site Underground Injection: Class II-V Wells	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.5.1A: On-site Landfills: RCRA Subtitle C	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.5.1B: On-site Landfills: Other	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.5.2: On-site Land Treatment and Application Farming	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.5.3A: On-site Surface Impoundments: RCRA Subtitle C	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...
Section 5.5.3B: On-site Surface Impoundments: Other	<input checked="" type="checkbox"/> NA	<input type="text"/> or <input type="text"/>	Select a Basis of Estim...

On-site Releases and Disposal

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017

Form R, Part II, Section 5 [Need Reporting Help?](#)

Section 5.5.4: Other On-Site Disposal NA or Select a Basis of Est...

A facility that manages waste rock piles may elect to indicate that at least some of the quantities entered above for Section 5.5 were managed in waste rock piles.
 Select the checkbox if you would like to indicate that quantities reported in Section 5.5 were managed in waste rock piles.

You may provide the quantity of the chemical that was managed in waste rock piles. This quantity may not be greater than the sum of the quantities provided above. Note that code reporting the numeric basis indicated above is used to calculate the sum.

Sum of Reported 5.5 Quantities:

You may provide additional optional information related to waste rock pile quantities in the box below.

Disposal Releases for Waste Rock Piles

Waste Rock releases

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS NA

6.2. Off-Site EPA Identification Number (RCRA ID No.)

Off-Site Location Name:

Off-Site Address:

City	County	State	ZIP	Country (non-US)
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Is this location under control of reporting facility or parent company? Yes No

EPA form 9350 -1 (Rev. 09/2017). Previous editions are obsolete.

*For Dioxin or Dioxin-like compounds, report in grams/year.
**Range Codes: A= 1-10 pounds; B= 11-499 pounds; C= 500-999 pounds.

Part II Section 6.2 Off-site Transfer Locations

POTW

Form R, Part II, Section 6.1 [Need Reporting Help?](#) RY 20
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Select a location:

POTW Name	Address
<input type="checkbox"/> GUNSTON ELEMENTARY SCHOOL	10100 GUNSTON RD, LORTON, VA 22079
<input type="checkbox"/> MONTGOMERY COUNTY STORM WATER	225 ROCKVILLE PIKE, SUITE 120, ROCKVILLE, MD 20850-4101
<input type="checkbox"/> New potw with tab And other	1334 test lane, herndon, VA 20170
<input type="checkbox"/> SENECA WASTEWATER TREATMENT PLANT	3750 PLANT ROAD, EAGAN, MN 55122-1004
<input type="checkbox"/> WESTMINSTER WWTP	1161 OLD NEW WINDSOR PIKE, WESTMINSTER, MD 21158

[Add Selected](#)

[Add a new POTW](#) [New POTW](#)

Share percentage distribution values with EPA (optional)

Name: LEESBURG WATER POLLUTION [Edit POTW](#)

Address: 1391 EAST MARKET STREET, LEESBURG, VA 20176-4451

County: Loudoun [Remove POTW](#)

Total Quantity (lbs)	Basis Of Estimate	Numeric Basis	Transfer Type	Delete
10 or Select a Range...	E1 - Emission Factor, Published		P33 - Sludge to disposal	Delete
230 or Select a Range...	E1 - Emission Factor, Published		P36 - Other or Unknown Disposal	Delete
760 or Select a Range...	E1 - Emission Factor, Published		P39 - Experimental and Estimated Treatment Data	Delete

Off-site Transfer

Form R, Part II, Section 6.2 [Need Reporting Help?](#) RY 2017
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Location(s) added successfully.

Please indicate how much of this TRI chemical was transferred off-site to other locations during this reporting year. Click Add a new location to get started if you have not previously added any off-site transfer locations.

Not Applicable (Should I report zero instead of Not Applicable?)

Choose a location:

Location Name	Address
<input type="checkbox"/> New off with tab And other	133 test lane, herndon, VA 20170
<input type="checkbox"/> STAR ENTERPRISE	1131 ELDEN ST, HERNDON, VA 20170
<input type="checkbox"/> TRADEBE TREATMENT & RECYCLING LLC	4343 KENNEDY AVE., EAST CHICAGO, IN 46312

[Add Selected](#)

[Add a new Location](#) [New Location](#)

Name: KMART 3340 [Edit Location](#)

Address: 494 ELDEN ST, HERNDON, VA 20170

SECTION 6.2. TRANSFERS TO OTHER OFF-SITE LOCATION (CONTINUED)		
A. Total Transfer (pounds/year*) (Enter a range code** or estimate)	B. Basis of Estimate (Enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
6.2 Off-Site EPA Identification Number (RCRA ID No.)		
Off-Site Location Name:		
Off-Site Address:		
City	County	State
		ZIP
		Country (non-US)
Is this location under control of reporting facility or parent company? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A. Total Transfer (pounds/year*) (Enter a range code** or estimate)	B. Basis of Estimate (Enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M

Part II Section 7.a On-site Waste Treatment

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY					
<input type="checkbox"/> Not Applicable (NA) - Check here if no on-site waste treatment method is applied to any waste stream containing the toxic chemical or chemical category.					
a. General Waste Stream (Enter code)	b. Waste Treatment Method(s) Sequence (Enter 3- or 4-character code(s))			c. Waste Treatment Efficiency (Enter 2 character code)	
7A.1a	7A.1b	1	2	7A.1c	
	3	4	5		
	6	7	8		
7A.2a	7A.2b	1	2	7A.2c	
	3	4	5		
	6	7	8		
7A.3a	7A.3b	1	2	7A.3c	
	3	4	5		
	6	7	8		
7A.4a	7A.4b	1	2	7A.4c	
	3	4	5		
	6	7	8		
7A.5a	7A.5b	1	2	7A.5c	
	3	4	5		
	6	7	8		

If additional pages of Part II, Section 6.2/7.A are attached, indicate the total number of pages in this box and indicate the Part II, Section 6.2/7.A page number in this box. (Example: 1, 2, 3, etc.)

EPA form 9350-1 (Rev. 09/2017). Previous editions are obsolete. *For Dioxin or Dioxin-like compounds, report in grams/year.
**Range Codes: A= 1-10 pounds; B= 11-499 pounds; C= 500-999 pounds.

On-site Waste Management

Form R, Part II, Section 7

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Section 7A: On-site Waste Treatment Methods and Efficiency [Need Reporting Help?](#)

If waste streams containing the toxic chemical do not undergo any on-site treatment, click the "Not Applicable" check box below.

Not Applicable

Please enter information on the types of waste treatment methods applied on-site to waste streams that contain the TRI chemical. You must first create a list of applicable waste stream "profile(s)" that describe the type of waste stream containing the TRI chemical and the sequence of treatment methods that are applied to it. Click on **New Profile** to add a new waste stream profile.

Once you have created one or more waste stream profiles you can select them from the list provided and click **Add**. To complete the row, you will need to select a waste treatment efficiency range code.

Note: You can re-order your waste treatment methods by clicking and dragging.

Treatment Profile	General Waste Stream Code	Waste Treatment Method(s) Sequence
<input type="text" value="Test"/>	W - Wastewater (aqueous w... x	<div style="display: flex; align-items: center;"> <div style="border: 1px solid gray; padding: 2px;">Select Treatment Method(s)</div> <div style="margin-left: 5px; color: blue; font-size: small;">Add</div> </div> <div style="margin-top: 2px;"> 1: H040 - Incineration—thermal destruction other than use as a fuel X </div>
<div style="border: 1px solid gray; padding: 2px;">Select Profile to Add</div>		<div style="border: 1px solid gray; padding: 2px; color: blue; font-size: small;">Add</div>

Part II Section 7.b Onsite Energy Recovery

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

NA Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods (Enter 3-character code(s))

1. 2. 3.

Section 7B: On-site Energy Recovery Methods and Quantity [Need Reporting Help?](#)

If you did not have on-site energy recovery applied to any waste stream containing the TRI chemical, click the "Not Applicable" check box below.

Not Applicable

If you did apply energy recovery to this TRI chemical, please enter the quantity of the TRI chemical treated burned for energy recovery on-site during the reporting year and select up to 3 energy recovery method codes using the selection lists provided.

Quantity Used for Energy Recovery On-site (lbs):

Energy Recovery Methods:

First Method

Second Method

Third Method

Part II Section 7.c Onsite Recycling

SECTION 7C. ON-SITE RECYCLING PROCESSES

NA Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods (Enter 3-character code(s))

1. 2. 3.

Section 7C: On-site Recycling Methods and Quantity [Need Reporting Help?](#)

If you did not have on-site recycling applied to any waste stream containing the TRI chemical, click the "Not Applicable" box below.

Not Applicable

If you did recycle this TRI chemical, please enter the quantity of the TRI chemical recycled on-site during the reporting year and select up to 2 recycling method codes using the selection lists provided.

Quantity Recycled On-site (lbs):

Recycling Methods:

First Method

Second Method

Part II: Section 8.8 Non-Production Quantities

8.8	Non-Production-Related Waste Managed**		
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Non-Production Quantities

RY 20
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Form R, Part II, Section 8.8 [Need Reporting Help?](#)

In RY 2017, did your facility release or dispose of this chemical or transfer this chemical off-site due to: (1) remedial actions; (2) catastrophic events such as earthquakes, fires, or floods; or (3) other one-time events not associated with normal or routine production processes? **Yes:** **No:**

Your reported values for on-site release and disposal and off-site transfers are provided below. Provide the amount of each of the reported values that was a result of remediation activities, catastrophic events, or one-time events that were not associated with normal or routine production processes. If a release or transfer listed below was not the result of one of these events, you should report zero for that row. Use the form below to edit the data used by the calculator, if necessary. If applicable, select a rounding value from the **Rounding** dropdown. Note that while Rounding is permitted, EPA recommends using the value as calculated in order to avoid confusion and any apparent internal inconsistency in your submission.

Release or Other Waste Management Description	Reported Value for this Section (lbs)	Numeric Basis for Production-Related Processes ?	Non-Production Related Quantity for this Section (lbs)
Section 5.2: Stack or Point Air Emissions	1,000	1,000	<input type="text" value="0"/>
Section 5.1: Fugitive or Non-Point Air Emissions	1,000	1,000	<input type="text" value="0"/>
SUGARLAND RUN (Section 5.3)	2,000	2,000	<input type="text" value="0"/>
Section 6.1: LEESBURG WATER POLLUTION	1,000	1,000	<input type="text" value="0"/>
Totals			
Calculated Total (lbs):			0
Rounding:			<input type="text" value="0"/>

Part II: Section 8.1-8.7 Waste Management

SECTION 8. SOURCE REDUCTION AND WASTE MANAGEMENT				
	Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1 - 8.7 Production-Related Waste Managed				
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills			
8.1b	Total other on-site disposal or other releases			
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills			
8.1d	Total other off-site disposal or other releases			
8.2	Quantity used for energy recovery on-site			
8.3	Quantity used for energy recovery off-site			
8.4	Quantity recycled on-site			
8.5	Quantity recycled off-site			
8.6	Quantity treated on-site			
8.7	Quantity treated off-site			

Waste Management

RY 2017
2017WKTHYZZEBRZ
REVISION Cyclohexane

Form R, Part II, Section 8.1-8.7 [Need Reporting Help?](#)

Waste Management Description	Prior Year (RY 2016)	Current Year (RY 2017)	Reporting Year 2018	Reporting Year 2019
	<input type="checkbox"/> Edit		<input type="checkbox"/> Use Current Year Quantities	<input type="checkbox"/> Use Current Year Quantities
Section 8.1a: Total On-site Disposal to Class I Underground Injection Wells, RCRA Subtitle C Landfills, and Other Landfills ?	<input type="text" value="0"/> NA	597 <input type="button" value="Edit"/>	<input type="text" value="597"/> <input type="checkbox"/> NA	<input type="text" value="597"/> <input type="checkbox"/> NA
Section 8.1b: Total Other On-site Disposal or Other Releases ?	<input type="text" value="160"/> NA	35,249 <input type="button" value="Edit"/>	<input type="text" value="35,249"/> <input type="checkbox"/> NA	<input type="text" value="35,249"/> <input type="checkbox"/> NA
Section 8.1c: Total Off-site Disposal to Class I Underground Injection Wells, RCRA Subtitle C Landfills, and Other Landfills ?	<input type="text" value="337"/> NA	207.12 <input type="button" value="Edit"/>	<input type="text" value="207.12"/> <input type="checkbox"/> NA	<input type="text" value="207.12"/> <input type="checkbox"/> NA
Section 8.1d: Total Other Off-site Disposal or Other Releases ?	<input type="text" value="0"/> NA	655.88 <input type="button" value="Edit"/>	<input type="text" value="655.88"/> <input type="checkbox"/> NA	<input type="text" value="655.88"/> <input type="checkbox"/> NA
Section 8.2: Quantity Used for Energy Recovery On-site ?	<input type="text" value="0"/> NA	NA	<input checked="" type="checkbox"/> NA	<input checked="" type="checkbox"/> NA
Section 8.3: Quantity Used for Energy Recovery Off-site ?	<input type="text" value="0"/> NA	NA	<input checked="" type="checkbox"/> NA	<input checked="" type="checkbox"/> NA
Section 8.4: Quantity Recycled On-site ?	<input type="text" value="0"/> NA	NA	<input checked="" type="checkbox"/> NA	<input checked="" type="checkbox"/> NA

Part II: Section 8.9 Production or Activity Ratio

8.9	<input type="checkbox"/> Production ratio or <input type="checkbox"/> Activity ratio (select one and enter value to the right)	
-----	--	--

Production Ratio or Activity Ratio

Form R, Part II, Section 8.9 [Need Reporting Help?](#)

RY 2017
2017WKTHYZZEBRZ
REVISION Cyclohexane

Use this section to enter a production or activity ratio. This is a ratio comparing current and prior year values for the variable(s) that best reflect the output or outcome of the process(es) in which the EPCRA Section 313 chemical is involved. This ratio puts year-to-year changes in quantities released and managed as waste into the context of production (i.e., have releases increased more than production increased?).

If you did not manufacture, process, or otherwise use the reported TRI chemical during the prior reporting year, check the "Not Applicable" box provided.

Not Applicable

Select Metric: Production Ratio Activity Ratio

Calculate your ratio

Production Ratio or Activity Ratio:

1.0 equals the same production level as the prior reporting year.

Optional: Include info on production or activity variable(s) used to calculate ratio.

Production or Activity Variable(s): (included in Section 9.1, Miscellaneous Information)

made cylinders

(3986/4000 characters remaining.)

Part II: Section 8.10 Source Reduction

8.10 Did your facility engage in any newly implemented source reduction activities for this chemical during the reporting year? If so, complete the following section; if not, check NA. NA <input type="checkbox"/>				
Source Reduction Activities (Enter code(s))	Methods to Identify Activity (Enter code(s))			Estimated annual reduction (Enter code(s)) (optional)
8.10.1	a.	b.	c.	d.
8.10.2	a.	b.	c.	d.
8.10.3	a.	b.	c.	d.
8.10.4	a.	b.	c.	d.

EPA form 9350 -1 (Rev. 09/2017). Previous editions are obsolete.

*For Dioxin or Dioxin-like compounds, report in grams/year.
**Includes quantities released to the environment or transferred off-site as a result of remedial actions, catastrophic events, or other one-time events not associated with production processes

Source Reduction Activities

Form R, Part II, Section 8.10 [Need Reporting Help?](#)

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017WKTHYZZEBRZ
RY 2019
Toluene

Source Reduction Activity

Select a Source Reduction Activity

Cleaning and Degreasing

- W59 - Modified stripping/cleaning equipment
- W60 - Changed to mechanical stripping/cleaning devices (from solvents or other materials)
- W61 - Changed to aqueous cleaners (from solvents or other materials)
- W63 - Modified containment procedures for cleaning units
- W64 - Improved draining procedures

Part II: Section 8.11 Pollution Prevention

FORM R	Approval Expires: _____ Page 0 of 0
Part II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI Facility ID Number
SECTION 8.11. DISPOSAL OR OTHER RELEASES, SOURCE REDUCTION, AND RECYCLING ACTIVITIES	Toxic Chemical, Category, or Generic Name
8.11 If you wish to submit additional optional information on source reduction, recycling, or pollution control activities, provide it here.	

Optional Pollution Prevention Information

RY 2017
2017WKTHYZZEBRZ
REVISION Cyclohexane

Form R, Part II, Section 8.11 [Need Reporting Help?](#)

If you wish, enter additional optional information on source reduction, recycling, energy recovery, treatment, or other pollution control activities in the boxes below. Providing detailed information in this section is an opportunity to publicly highlight the steps your facility has taken to reduce the amount of toxic chemicals entering the environment. You may indicate that you are submitting information pertaining to specific topics using the optional checkboxes below. Do not enter information unrelated to pollution prevention in this section.

Source Reduction

Recycling

Energy Recovery

burned oil

(3990/4000 characters remaining.)

Waste Treatment

General Environmental Management

Methods for Identifying Pollution Prevention Opportunities

Ways P2 Was Incorporated in Original Process Design

Other Optional Pollution Prevention Information:

[If your pollution control activity is not listed above, please provide any optional detailed information here.]

(4000/4000 characters remaining.)

Part II: Section 9.1 Miscellaneous Information

SECTION 9. MISCELLANEOUS INFORMATION	
9.1	If you wish to submit any miscellaneous, additional, or optional information regarding your Form R submission, provide it here.

EPA form 9350 -1 (Rev. 09/2017). Previous editions are obsolete.

Miscellaneous Information

RY 2017
2017WKTHYZZEBRZ
REVISION Cyclohexane

Form R, Part II, Section 9.1 [Need Reporting Help?](#)

If you wish to submit any miscellaneous, additional, or optional information regarding your Form R Submission, provide it here. You may indicate that you are submitting information pertaining to one or more of the following topics by checking a box next to the topic to which your information pertains.

Suggested Topics (text box will appear for topic(s) you select):

Changes in Production Levels

Calculation Methods, e.g., Emission Factors

One-time or Intermittent Events Impacting Reported Quantities

Issues or Difficulties Encountered in Submitting Form

Additional Contact Info

Other Regulatory Requirements Related to this Chemical

For the checkboxes below, you do not need to provide a comment in the text box that appears:

No TRI Reports Expected for this TRIFID Next Year

No TRI Report Expected for this Chemical Next Year

Other Miscellaneous Information:

[If your miscellaneous information topic is not listed above, please provide any optional detailed information here.]

(4000/4000 characters remaining.)

In other sections of TRI MWeb, you submitted the following comments for this chemical. You may edit your entries below.

Certifying Official Signature:

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)
 I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date signed:

Digital Signature Widget

eSignature Widget

1. Authentication

Log into CDX

User:
JPARRA01

Password:
●●●●●●

Show Password

Welcome Juan Parra

2. Verification

Question:
What is your best friend's last name?

Answer:
●●●●

Show Answer

Correct Answer

3. Sign File

[Sign](#)

Revision or Withdrawal Codes:

<p>This section only applies if you are revising or withdrawing a previously submitted form, otherwise leave blank.</p>	<p>Revision (Enter up to two code(s))</p> <div style="display: flex; justify-content: space-around;"> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> </div>	<p>Withdrawal (Enter up to two code(s))</p> <div style="display: flex; justify-content: space-around;"> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> </div>
---	---	---

The screenshot shows the EPA TRI-ME web application interface. A 'Revise Form' dialog box is open, prompting the user to select a revision code. The background shows a 'Form Home' page with a table of submitted forms for facility TRIFID. The table lists various chemical compounds and their associated revision codes and dates.

Chemical	Revision Code	Revision Date	Status
1,2,3-Trichloropropane	000096-18-4	A	Revision
1,2,4-Trimethylbenzene	000096-63-6	A	N/A
1,2,4-Trichlorobenzene	000120-82-1	A	N/A

Form A

Changing TRI Form R or A

TRI-MEweb Screenshots

Change Form Type

If you change from a Form R to a Form A, you will permanently delete any information you may have entered in Form R Part II. Note that your state/tribe may have different requirements regarding the use of the Form A for reporting purposes.

Chemical Name: N-Methyl-2-pyrrolidone (Category# 000872-50-4)

Select the type of form (Form A Certification Statement or Form R) for this chemical by selecting the appropriate option below.

Form R : Form A :

Save Cancel

Section 4.1-4.2: Facility Identification

SECTION 4. FACILITY IDENTIFICATION			
4.1	Facility or Establishment Name	TRI Facility ID Number	BIA Code
	Physical Street Address	Mailing Address (if different from physical street address)	
	City/County/State/ZIP Code	City/State/ZIP Code	Country (Non-US)
4.2 This report contains information for: (Important: Check c or d if applicable)			c. <input type="checkbox"/> A Federal Facility d. <input type="checkbox"/> GOCO

Facility Information
Part 1

RY 2017
2017WKTHYZZEBRZ
Chlorine

4.1 - 4.5 Facility Name and Address [Need Reporting Help?](#)

TRIFID	Facility Address	BIA Code	Facility Type	Edit
2017WKTHYZZEBRZ	[REDACTED]	037	Neither	<input type="button" value="Edit"/>
4.1 Facility Name		Mailing Address		NAICS Code(s)
[REDACTED]		Same as physical address		221112 (Primary)
				924110
				923120
				325520
				924120

Section 4.3-4.4: Contact Info

4.3	Technical Contact Name		Telephone Number (include area code and ext.)
	Email Address		
4.4	Public Contact Name		Telephone Number (include area code and ext.)
	Email Address		

TRI-ME WEB

My TRI Facility Management Forms Submission History Help

Part 1 3/4: Activities and Uses/Max On-site 5: On-site Releases 6: Off-site Transfers

Contact Information

Part I, Section 4.3 & 4.4

Select or enter a Technical Contact

Contact Name: [REDACTED]

Phone Number: [REDACTED]

Phone Ext: [REDACTED]

Contact Email: [REDACTED]

4.4 Public Contact Information [Need Reporting Help?](#)

Select or enter a Public Contact

Contact Name: [REDACTED]

Phone Number: [REDACTED]

Phone Ext: [REDACTED]

Contact Email: [REDACTED]

Section 4.5-4.6 Dun and Bradstreet

4.5	NAICS Code(s) (6 digits)	Primary					
		a.	b.	c.	d.	e.	f.
4.6	Dun & Bradstreet Number(s) (9 digits)	a.					
		b.					

4.6 Facility Dun & Bradstreet Number(s) [Need Reporting Help?](#)

Dun & Bradstreet Numbers Not Applicable [Edit](#)

a: 006924989

b: [REDACTED]

Section 5: Parent Company

SECTION 5. PARENT COMPANY INFORMATION		
5.1	Name of U.S. Parent Company (for TRI Reporting purposes)	No U.S. Parent Company <input type="checkbox"/>
5.2	Parent Company's Dun & Bradstreet Number	NA <input type="checkbox"/>

5. Parent Company Name Information [Need Reporting Help?](#)

No U.S. Parent Company (for TRI reporting purposes) [Edit](#)

5.1 Parent Company Name:

Select or enter a Parent Company

Parent Company not listed

Enter Parent Company Name (if not listed above): Southern Co. Co Owned

5.2 Parent Company's Dun & Bradstreet Number: [REDACTED] Parent Company Dun & Bradstreet Number Not Applicable

Part II: Section 1.1-1.3 Toxic Chemical Identity

EPA FORM A PART II. CHEMICAL IDENTIFICATION <small>Do not use this form for reporting PBT chemicals, including Dioxin and Dioxin-like Compounds*</small>		TRI Facility ID Number
SECTION I. TOXIC CHEMICAL IDENTITY Report _____ of _____		
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)	
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)	
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)	

Add Form(s)

Facility: 2017WKTHYZZEBRZ - KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC

Enter the chemical name below for which you would like to create forms to search the list of TRI-listed chemicals. If you would like to include chemical synonyms in your search, please check **Search by chemical synonyms** before you enter the chemical name. You may enter generic chemical names separately by checking **Add generic chemicals**. When complete, click the **Add Form(s)** button to create forms for the TRI-Listed and generic chemicals specified

Select or enter a chemical or CAS/Category#

Search by chemical synonyms

Add generic chemicals

Add Form(s)

Cancel

This is done using a pop-up widget

Part II Section 2.1 Mixtures

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1.)	
2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

Add generic chemicals

Enter the generic chemical name(s) for which you would like to create forms and click the **Add Chemical to List** button for each chemical entered. Do not use this screen if you know the identity of the TRI-listed chemical. Enter a generic chemical name in this section only if the following three conditions apply:

1. You determine that the mixture contains an EPCRA Section 313 chemical but the only identity you have for that chemical is a generic name;
2. You know either the specific concentration of that EPCRA Section 313 chemical component or a maximum or average concentration level; and
3. You multiply the concentration level by the annual amount of the whole mixture processed (or otherwise used) and determine that you meet the processing (or otherwise use) threshold for that single, generically identified, mixture component.

Any generic chemicals reported in the prior year will be listed and selectable within the drop-down menu below.

Enter Generic Chemical: [Add Chemical to List](#) [Need Help?](#)

The following Generic Chemical(s) will be added:

Select a generic chemical or enter one above.

Add Form(s)

Cancel

Part II Section 9.2

Section 9.2: If you wish to submit any miscellaneous, additional, or optional information regarding your Form A submission, provide it here.

Topic	Comment

Miscellaneous Information

Form A, Part II, Section 9.2 [Need Reporting Help?](#)

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017WKTHYZZEBRZ Benzene RY 2019

If you wish to submit any miscellaneous, additional, or optional information regarding your Form A Submission, provide it here.

You may indicate that you are submitting information pertaining to one or more of the following topics by checking a box next to the topic to which your information pertains.

Suggested Topics (text box will appear for topic(s) you select):

- Changes in Production Levels
 Source Reduction Activity Involving this chemical
 One-Time or Intermittent Events Involving this chemical

For the checkboxes below, you do not need to provide a comment in the text box that appears:

- No TRI Report Expected for this Chemical Next Year

Other Miscellaneous Information:

[If your miscellaneous information topic is not listed above, please provide any optional detailed information here.]

<p>Certifying Official Signature:</p> <p>SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.) I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 60%;">Name and official title of owner/operator or senior management official:</td> <td style="width: 20%;">Signature:</td> <td style="width: 20%;">Date signed:</td> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> </tr> </table>	Name and official title of owner/operator or senior management official:	Signature:	Date signed:				<p>Digital Signature Widget</p> <p>eSignature Widget</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>1. Authentication</p> <p>Log into CDX</p> <p>User: JPARRA01</p> <p>Password: <input type="password" value="••••••"/></p> <p>Show Password <input type="checkbox"/></p> <p>Welcome Juan Parra</p> </div> <div style="width: 30%;"> <p>2. Verification</p> <p>Question: What is your best friend's last name?</p> <p>Answer: <input type="text" value="••••"/></p> <p>Show Answer <input type="checkbox"/></p> <p>Correct Answer</p> </div> <div style="width: 30%;"> <p>3. Sign File</p> <p><input type="button" value="Sign"/></p> </div> </div>
Name and official title of owner/operator or senior management official:	Signature:	Date signed:					

<p>Form R Schedule 1 (Dioxin releases)</p> <p>Section 5: Onsite Releases and Disposal</p> <p>The following Section may have a schedule 1 form</p> <ul style="list-style-type: none"> Section 5.1 Section 5.2 Section 5.3 Section 5.4.1 Section 5.4.2 Section 5.5 	<p>TRI-MEweb Screenshots</p> <p>On-site Releases and Disposal</p> <p>Form R, Part II, Section 5 Need Reporting Help?</p> <p style="text-align: right;">RY 2017 2017WKTHYZEZRZ Dioxin and Dioxin-II... ?</p> <p>Hover your cursor over the ? icon for more information. Enter data using detailed worksheet.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Form Section</th> <th style="width: 10%;"><input type="checkbox"/> Not Applicable</th> <th style="width: 15%;">Total Quantity (grams) ?</th> <th style="width: 10%;">Numeric Basis ?</th> <th style="width: 25%;">Basis of Estimate ?</th> </tr> </thead> <tbody> <tr> <td colspan="5">Air Releases</td> </tr> <tr> <td>Section 5.1: Fugitive or Non-Point Air Emissions ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">1 <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> <tr> <td>Section 5.2: Stack or Point Air Emissions ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="text"/> <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> <tr> <td colspan="5">Land Releases</td> </tr> <tr> <td>Section 5.4.1: On-site Underground Injection: Class I Wells ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="text"/> <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> <tr> <td>Section 5.4.2: On-site Underground Injection: Class II-V Wells ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="text"/> <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> <tr> <td>Section 5.5.1A: On-site Landfills: RCRA Subtitle C ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="text"/> <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> <tr> <td>Section 5.5.1B: On-site Landfills: Other ?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="text"/> <input type="button" value="Schedule 1"/></td> <td></td> <td>Select a Basis of Estim... ?</td> </tr> </tbody> </table>	Form Section	<input type="checkbox"/> Not Applicable	Total Quantity (grams) ?	Numeric Basis ?	Basis of Estimate ?	Air Releases					Section 5.1: Fugitive or Non-Point Air Emissions ?	<input type="checkbox"/>	1 <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?	Section 5.2: Stack or Point Air Emissions ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?	Land Releases					Section 5.4.1: On-site Underground Injection: Class I Wells ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?	Section 5.4.2: On-site Underground Injection: Class II-V Wells ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?	Section 5.5.1A: On-site Landfills: RCRA Subtitle C ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?	Section 5.5.1B: On-site Landfills: Other ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?
Form Section	<input type="checkbox"/> Not Applicable	Total Quantity (grams) ?	Numeric Basis ?	Basis of Estimate ?																																										
Air Releases																																														
Section 5.1: Fugitive or Non-Point Air Emissions ?	<input type="checkbox"/>	1 <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										
Section 5.2: Stack or Point Air Emissions ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										
Land Releases																																														
Section 5.4.1: On-site Underground Injection: Class I Wells ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										
Section 5.4.2: On-site Underground Injection: Class II-V Wells ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										
Section 5.5.1A: On-site Landfills: RCRA Subtitle C ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										
Section 5.5.1B: On-site Landfills: Other ?	<input type="checkbox"/>	<input type="text"/> <input type="button" value="Schedule 1"/>		Select a Basis of Estim... ?																																										

Section 5: Congener Page
Page 1 and 2 of 4

		FORM R Schedule 1		TRI Facility ID Number		
PART II. CHEMICAL-SPECIFIC INFORMATION (continued)						
SECTION 5. QUANTITY OF DIOXIN AND DIOXIN-LIKE COMPOUNDS ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE						
D. Mass (grams) of each compound in the category (1-17)	1	5.1 NA	5.2 NA	5.3	Discharges to receiving streams or water bodies (Enter data for one stream or water body per box)	NA
	2	Fugitive or non-point air emissions	Stack or point air emissions	5.3.1	5.3.2	5.3.3
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					
	13					
	14					
	15					
	16					
	17					

If additional pages of Section 5.3 are attached, indicate the total number of pages in this box:
and indicate the Section 5.3 page number in this box (Example: 1, 2, 3, etc.):

		FORM R Schedule 1		TRI Facility ID Number					
PART II. CHEMICAL-SPECIFIC INFORMATION (continued)									
SECTION 5. QUANTITY OF DIOXIN AND DIOXIN-LIKE COMPOUNDS ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE									
C. Mass (grams) of each compound in the category (1-17)	5.4 - 5.5 Disposal to land on-site								
	1	5.4.1 NA	5.4.2 NA	5.5.1A NA	5.5.1B NA	5.5.2 NA	5.5.3A NA	5.5.3B NA	5.5.4 NA
	2	Class I Underground Injection Wells	Class II-V Underground Injection Wells	RCEA Subtitle C landfills	Other landfills	Land treatment applications farming	RCEA Subtitle C surface impoundments	Other surface impoundments	Other disposal
	3								
	4								
	5								
	6								
	7								
	8								
	9								
	10								
	11								
	12								
	13								
	14								
	15								
	16								
	17								

Section 5.1 Schedule 1

Enter the quantity (in grams) for each individual Dioxin and Dioxin-like Compounds category member. Each quantity field should contain a quantity or a zero. After entering the quantity data, the **Calculated Total** and **Total for Reporting** values are updated. If applicable, select a rounding value from the **Rounding** dropdown. Note that while rounding is permitted, EPA recommends using the value as calculated in order to avoid confusion and any inconsistency in your submission.

If all or part of the release or transfer quantity is attributable to remedial actions, catastrophic events, or one-time events not associated with normal production processes, select "Yes, I have non-production quantities to enter." and enter the non-production quantities below for each category member. These quantities will be reported in Schedule 1 Section 8.8. Click **Save** when you are finished, or **Cancel** to discard your edits.

You may view toxic equivalents (TEQ) calculations for your Schedule 1 data at any time by viewing your Toxics Equivalents Report on the Submission History page.

Non-production Quantities?

- No, I do not have non-production quantities to enter.
- Yes, I have non-production quantities to enter.

Category Member	Quantity (grams)	Remedial/Catastrophic/One-time Events not Associated with Production Processes (grams)
2,3,7,8-Tetrachlorodibenzo- p-dioxin	<input type="text" value="1"/>	<input type="text" value="0"/>
1,2,3,7,8-Pentachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,7,8-Hexachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,6,7,8-Hexachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,7,8,9-Hexachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,6,7,8-Heptachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,6,7,8,9-Octachlorodibenzo- p-dioxin	<input type="text" value="0"/>	<input type="text" value="0"/>

2,3,7,8-Tetrachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,7,8-Pentachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
2,3,4,7,8-Pentachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,7,8-Hexachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,6,7,8-Hexachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,7,8,9-Hexachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
2,3,4,6,7,8-Hexachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,6,7,8-Heptachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,7,8,9-Heptachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
1,2,3,4,6,7,8,9-Octachlorodibenzofuran	<input type="text" value="0"/>	<input type="text" value="0"/>
Totals		
Calculated Total:	1	
Rounding:	<input type="text" value="0"/>	
Total for Reporting:	1	
<input type="checkbox"/> I would like to enter total grams of Dioxin and Dioxin-like Compounds		
<input type="button" value="Save"/> <input type="button" value="Cancel"/>		

Section 6.1: POTW
Page 3 of 4 of Schedule 1 form

FORM R Schedule 1
PART II. CHEMICAL-SPECIFIC INFORMATION (continued)
TRF Facility ID Number

SECTION 6. TRANSFERS OF DIOXIN AND DIOXIN-LIKE COMPOUNDS IN WASTES TO OFF-SITE LOCATIONS

6.1. DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW) NA

6.1		D. Mass (grams) of Each Compound in the Category (1-17)							
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
1.	10	11	12	13	14	15	16	17	
2.	1	2	3	4	5	6	7	8	
3.	10	11	12	13	14	15	16	17	
1.	1	2	3	4	5	6	7	8	
2.	10	11	12	13	14	15	16	17	
3.	1	2	3	4	5	6	7	8	
1.	10	11	12	13	14	15	16	17	

6.1 TRANSFERS TO OTHER OFF-SITE LOCATIONS NA

Section 6.2: Off-site transfer
Page 3 of 4 of Schedule 1 form

6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS NA

6.2		D. Mass (grams) of Each Compound in the Category (1-17)							
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
1.	10	11	12	13	14	15	16	17	
2.	1	2	3	4	5	6	7	8	
3.	10	11	12	13	14	15	16	17	
1.	1	2	3	4	5	6	7	8	
2.	10	11	12	13	14	15	16	17	
3.	1	2	3	4	5	6	7	8	
1.	10	11	12	13	14	15	16	17	

If additional pages of Section 6.1 or 6.2 are attached, indicate the total number of pages in this box and indicate the Section 6.1 or 6.2 page number in this box: (Example: 1, 2, 3, etc.)

EPA Form 8350-3 (Rev. 09/2017). Previous editions are obsolete.

POTW
Form R, Part II, Section 6.1 [Need Reporting Help?](#)

RY 201
2017WKTHYZEBR
Dioxin and Dioxin-li...

Add Selected
Add a new POTW

Share percentage distribution values with EPA (optional)

Name: SENECA WASTEWATER TREATMENT PLANT

Address: 3750 PLANT ROAD, EAGAN, MN 55122-1004

County: Dakota

Total Quantity (grams) ?	Basis Of Estimate ?	Numeric Basis ?	Section 8.1c: Disposed in Class I UIC or Landfills ?	Section 8.1d: Otherwise Disposed or Released ?	Section 8.7: Treated Off-site ?	Total
<input type="text"/>	Select a Basis of Estimate	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="button" value="Schedule 1"/>			0 %	0 %	100 %	100 %

POTW
Form R, Part II, Section 6.1 [Need Reporting Help?](#)

KATHY ZEBRA Z FACILITY-TEST DATA UPDATED NOT CO-LOCATED FAC - 2017WKTHYZEBR
Dioxin and Dioxin-li...

Add:

County: Montgomery

If you do not know the ultimate disposition of quantities transferred to this POTW, click Calculate.

Total Quantity (grams) ?	Basis Of Estimate ?	Numeric Basis ?	Transfer Type	Delete
<input type="text" value="1,000"/>	E1 - Emission Factor, Published	No range codes - PBT	P39 - Experimental and Estimated Treatment Data	<input type="button" value="Delete"/>
<input type="button" value="Schedule 1"/>				

Section 8.1-8.7 Waste Management
Page 4 of 4

FORM R Schedule 1

TRI Facility ID Number

PART II. CHEMICAL-SPECIFIC INFORMATION (continued)

SECTIONS 8.1-8.8. WASTE MANAGEMENT QUANTITIES FOR DIOXIN AND DIOXIN-LIKE COMPOUNDS (current year only)

8.1-8.7 Production-related waste managed	8.1-8.7 Production-related waste managed										8.8 Non-production related waste managed*	
	8.1a	8.1b	8.1c	8.1d	8.2	8.3	8.4	8.5	8.6	8.7		
	Total on-site disposal to Class I	Total other on-site disposal or other releases	Total off-site disposal to Class I	Total other off-site disposal or other releases	Quantity used for energy recovery on-site	Quantity used for energy recovery off-site	Quantity recycled on-site	Quantity recycled off-site	Quantity treated on-site	Quantity treated off-site		
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												

* Chemical, Class I (grams) of each compound listed in the category (1.1-1.7).

Part I 3/4: Activities and Uses/Max On-site 5: On-site Releases 6: Off-site Transfers 7: On-site Waste Management **8: Waste Management** 9: Misc. Information

Waste Management RY 20
Form R, Part II, Section 8.1-8.7 [Need Reporting Help?](#) 2017WKTHVZZEBF
*Component category: Dioxin and Dioxin-li...

Waste Management Description	Prior Year (RY 2016)	Current Year (RY 2017)	Reporting Year 2018	Reporting Year 2019
Section 8.1a: Total On-site Disposal to Class I Underground Injection Wells, RCRA Subtitle C Landfills, and Other Landfills ?	<input type="text"/> <input checked="" type="checkbox"/> NA	0 Schedule 1 View	<input type="text"/> <input type="checkbox"/> NA	<input type="text"/> <input type="checkbox"/> NA
Section 8.1b: Total Other On-site Disposal or Other Releases ?	<input type="text"/> <input checked="" type="checkbox"/> NA	1 Schedule 1 View	<input type="text"/> <input type="checkbox"/> NA	<input type="text"/> <input type="checkbox"/> NA
Section 8.1c: Total Off-site Disposal to Class I Underground Injection Wells, RCRA Subtitle C Landfills, and Other Landfills ?	<input type="text"/> <input checked="" type="checkbox"/> NA	0 Schedule 1 View	<input type="text"/> <input type="checkbox"/> NA	<input type="text"/> <input type="checkbox"/> NA
Section 8.1d: Total Other Off-site Disposal or Other Releases ?	<input type="text"/> <input checked="" type="checkbox"/> NA	0 Schedule 1 View	<input type="text"/> <input type="checkbox"/> NA	<input type="text"/> <input type="checkbox"/> NA

[Prev \(Non-production Waste\)](#) [Save](#) [Next \(Activity and Production Ratio\)](#) [Check for Errors](#)