## **Polymer Exemption**

## **Chemical Safety Act Certification**

I hereby certify to the best of my knowledge and belief that all information entered on this form is complete and accurate.

I further certify that, pursuant to 15 U.S.C. § 2613(c), for all claims for protection for any confidential information made with this submission, all information submitted to substantiate such claims is true and correct, and that it is true and correct that the person submitting the claim has:

- (i) taken reasonable measures to protect the confidentiality of the information;
- (ii) determined that the information is not required to be disclosed or otherwise made available to the public under any other Federal law;
- (iii) a reasonable basis to conclude that disclosure of the information is likely to cause substantial harm to the competitive position of the person; and
- (iv) a reasonable basis to believe that the information is not readily discoverable through reverse engineering.

Any knowing and willful misrepresentation is subject to criminal penalty pursuant to 18 U.S.C. § 1001

## **Polymer Exemption Certification**

I certify, under penalty of law, that the following is true:

I certify that all of the chemical substances I am reporting in this notification were: manufactured (which includes imports) for a commercial purpose other than for research and development; meet the definition of a polymer in 40 CFR 723.250(a); are not specifically excluded from the exemption as stated in 40 CFR 723.250(d); and meet the conditions of the exemption as defined in 40 CFR 723.250(e).

General Form Information						СВІ	X			
Form Alias				Repo	orting Yea	r	Numb	er of Pol	ymers	
Polymer E	xemption-20230105-		2022			5				
Submitter	Information								СВІ	X
Prefix First Name M			Middle Initial			Last Name				Suffix
	William		K			Brigman				
Job Title		Not Applicable								
Organizatio	on Name	NEW TEST ORG	ORG 111							
Phone Nun	mber	8289191634								
Email Addr	ess	william.brigman	@cgifederal.com							
Mailing Add	dress 1	12601 FAIR LAK	LAKES CIRCLE							
Mailing Add	dress 2	Apt 200								
City			State		Postal Code Cour		Country	ntry		
FAIRFAX		VA		22033 US		us				
Submitting on Behalf of Company (If Applicable)									СВІ	
Prefix First Name N			Middle Initial		Last Name					Suffix
Job Title										
Company Name										
Phone Number										
Email Address										
Mailing Address 1										
Mailing Address 2										
City			State		Postal Co	stal Code Country				
Manufactu	Manufacturer Information CBI X							X		

Paperwork Reduction Act: This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2070-0038). Responses to this collection of information are mandatory for certain persons, as specified at 40 CFR 721 and 725. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to be between 16.97 to 525.85 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 to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.



Organization Name NEW TEST ORG 1		3 111								
Phone Number 8289191		8289191634								
Email Address		william.brigman	@cgifederal.com							
Mailing Add	dress 1	12601 FAIR LAN	(ES CIRCLE							
Mailing Add	dress 2	Apt 200								
City			State Postal Code		ode	Country				
FAIRFAX			VA	/A 22033		us	us			
Technical	Contact Information						СВІ	X		
Prefix	First Name		Middle Initial Last		Last Name			Suffix		
	William				Brigman					
Job Title					**(					
Organizatio	on Name	NEW TEST ORG	3 111							
Phone Nun	nber	8289191634	289191634							
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Mailing Add	dress 2	Apt 200								
City		State	Postal Co	de	Со	untry				
FAIRFAX		VA	22033	•	us	i				

	GENERAL INFORM	ATION Contir	nued		
CHEMICAL IDENTIFICATION INFORMATION	ON				
Polymer Information					
Polymer Name: Formaldehyde				СВІ	X
Generic Chemical Name: generic chem name					
'Chemical Abstracts Service' (CAS) Registry	Number	50-00-0			
Method 1 (CAS Inventory Expert Service - a CAS Inventory Expert Services must be sub	a copy of the Identification repo	I ort obtained from the s notice)	X Meth (Othe	l <b>od 2</b> er Method)	
IES Order Number		869698			
This box will be marke	ed (X) if the data continues on t	l he next page.	Х		
	Exemption	n Criteria	<b>*</b> (		
Exemption Criteria (e1)					
	Functional Groups		25	СВІ	X
Functional Group			rn Level		ent Weight
Hydrazines		Hìgh		50.0	
	Atomic Elements			СВІ	X
Atomic Element				Percent	
Phosphorus (P)		$\bigcirc$	40.0		
Method of Measurement	Mea	surement Description	1		СВІ
GPC					X
Lowest number average molecular weight	Maximum weight % below 50	0 molecular weight		t % below 1000 mol	ecular weight
6,887	5		10		
	Monomers and C	Other Reactants			
CA Index Name CAS Reg #	CBI % Typica	l Comp Includ	de Identity	CBI Maximur	n Residual
Formaldehyde 50-00-0	X 56.0		X	30.0	X

	Attachments List							
#	File Name	Document Type	Description	СВІ	Section Title			
1	Attachment for Testing.docx	14F_RESPONSE	test	X	Polymers Identification Substances Chemical Structure Diagram			
2	Attachment for Testing_4.docx	CHEMICAL_STRUCTURE_ DIAGRAM	test	X	Polymers Identification Substances ID Method			
3	TEST ATTACHMENT- 1.docx	GPC_REPORT	test	X	Monomers			

