

## U.S. Environmental Protection Agency Stratospheric Ozone Protection Program

### Class I Producer Quarterly Report (Sec 82.13)

Version 5.0

Last Updated: April 2020



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 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 s

**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.*

*This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2060-0170). Responses to this collection of information are mandatory (40 CFR 82.13). 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 number and expiration date are displayed in the upper right corner of the form. The public reporting and recordkeeping burden for this collection of information is estimated to be 2 hours per response. Send comments on the Agency's need this formation, 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, Regulatory Support Division, 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.*

EPA Form #5900-151

**U.S. Environmental Protection Agency**  
*Class I Producer Quarterly Report*

Date Prepared: 7/17/2025

**Section 1: Report Identification Information**

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

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



## Class I Producer Quarterly Report

Reporting Period: #NAME?

## Proceed to Section 3

*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.*

[illegible]

## Class I Producer Quarterly Report

Reporting Period: #NAME?

## Prepare Submission

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.

*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.***

[illegible]

## U.S. Environmental Protection Agency

### Class I Producer Quarterly Report

#### 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				
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	CBM	
CFC-113	CFC-213	Halon 1202	CCL4	



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Return to Section 3