



### Hazardous Materials Disclosure Statement

Building Permit #: BLD20\_\_\_\_\_

Project Address: \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Business Owner: \_\_\_\_\_ Owner Phone: \_\_\_\_\_

**NOTICE TO ALL APPLICANTS**

AN INCORRECT RESPONSE CAN SERIOUSLY DELAY  
 YOUR PROJECT REVIEW AND ISSUANCE OF A BUILDING PERMIT

Any hazardous materials that are or may be handled by a business must be disclosed. Hazardous materials can include, but are not limited to: cleaners, paints, flammables, solvents, compressed gases, oil and fuels. If you are certain your business or project will not handle any hazardous materials on site, check "NO" below. If there is a possibility that any hazardous materials may be handled on site, check "YES" below and contact Fire Prevention at (510) 494-4280. **If you indicate "YES" below, failure to contact the Fire Prevention/HazMat Unit may delay the completion of plan review and building permit issuance. State law requires many businesses that handle hazardous materials to have an approved Hazardous Materials Management Plan on file before a Certificate of Occupancy may be issued.**

A. My business will be or is handling hazardous materials: Yes \_\_\_\_\_ No \_\_\_\_\_

B. The permit requested does alter, modify or involve hazardous materials: Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to question B is YES, please provide the following information:

| <i>Material</i> | <i>Maximum Quantity Stored</i> | <i>Hazard Class</i> |
|-----------------|--------------------------------|---------------------|
|                 |                                |                     |
|                 |                                |                     |
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|                 |                                |                     |

**ATTACH HAZARDOUS MATERIAL INVENTORY STATEMENT OR ADDITIONAL SHEETS, AS NECESSARY.**

This form must be completed by the Facility Manager, Owner, or other responsible party for the company. **The signature of the Architect, General Contractor or Designer IS NOT acceptable.**

I certify that I have read this notice and attest that the above marked responses are correct. I agree to comply with all City, County, State and Federal laws, ordinances and regulations relating to the handling of hazardous materials.

|                       |                |
|-----------------------|----------------|
| _____                 | _____          |
| Signature             | Date           |
| _____                 | _____          |
| Name (Please Print)   | Title          |
| _____                 | _____          |
| Mailing Address       | Phone          |
| _____                 | _____          |
| City, State, Zip Code | E-mail address |