

Y-12

OAK RIDGE Y-12 PLANT

LOCKHEED MARTIN



EMERGENCY PLANNING AND COMMUNITY

RIGHT-TO-KNOW ACT

SECTION 312 TIER TWO REPORT FORMS

R. A. Evans
Environmental Compliance Department
Environment, Safety, Health and Quality Organization

February 2000

Prepared by the
Oak Ridge Y-12 Plant
Oak Ridge, Tennessee 37831
managed by
Lockheed Martin Energy Systems, Inc.
for the U.S. Department of Energy
under Contract DE-AC05-84OR21400

MANAGED BY
LOCKHEED MARTIN ENERGY SYSTEMS, INC.
FOR THE UNITED STATES
DEPARTMENT OF ENERGY

UCN-13672 (2 11-97)

DISCLAIMER

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DISCLAIMER

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Y/TS-1781

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Emergency
and
Hazardous
Chemical
Inventory

Specific
information
i.e. Chemical

Date Received

24 Hr. Phone (865) 576-1005

☐ Check if information below is identical to the information submitted last year.

Storage Locations

C

9201-5; 9767-13; 9998
9202; 9709; 9738
9202 / 3rd Floor; 9204-1; 9204-2; 9204-2E; 9206; 9401-3; 9731; 9995
9202 / 1st Floor / Room 178; 9727-4; 9767-13
9202; 9203; 9404-20; 9831
9201-3; 9201-5N; 9202; 9204-1; 9401-3; 9420; 9703-15; 9712; 9714

9720-50; 9720-6; 9720-8; 9737; 9998
9202; 9203; 9204-3; 9737; 9995
9201-1; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2E; 9204-3; 9205
9206; 9401-3; 9731; 9995
9201-1; 9201-2; 9201-3; 9201-5; 9202; 9204-1; 9204-2; 9204-3; 9204-4
9208; 9212; 9215; 9219; 9401-3; 9404-20; 9404-5; 9420; 9703.15; 9712

9714; 9720-16; 9720-2; 9720-6; 9720-8; 9723-25; 9731; 9737; 9808; 9831

Date signed _____

☐ I have attached a description of
dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
Specific Information on Chemical	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
	FOR OFFICIAL USE ONLY ID # <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
Date Received <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>		
		Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>		

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	O p t i o n a l A t t a c h m e n t s
CAS <u>007440371</u> Trade Secret <input type="checkbox"/> Chem. Name <u>ARGON</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>A72</u> 9977-1 / Gas Storage <u>L42</u> 9201-2; 9201-3; 9201-5 / 2nd Floor / Arc Melt; 9202; 9203 <u>L42</u> 9204-1 / Maintenance Shop; 9204-2 / Maintenance; 9204-2E / 2nd Floor <u>L42</u> 9204-3; 9204-4; 9206; 9206 / West Dock; 9212 <u>L42</u> 9212 / B-1 Wing / Maintenance Area; 9212 / West Side Cylinder Storage <u>L42</u> 9215; 9215 / M Wing; 9215 / West side Cylinder Storage; 9401-1; 9401-5	<input type="checkbox"/>
CAS <u>007440371</u> Trade Secret <input type="checkbox"/> Chem. Name <u>ARGON (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>L42</u> 9404-8; 9420; 9423; 9703-15; 9709; 9709 / Weld Test Shop; 9711-1 <u>L42</u> 9720-13; 9720-58 / Waste oil/Solvent Storage; 9720-6 / Metal Fab Shops <u>L42</u> 9720-8; 9723-25 / 1st Floor / Maintenance shop; 9731; 9738; 9766; 9769 <u>L42</u> 9771; 9831; 9989; 9990-3; 9995; 9998; Union Valley Facility <u>R42</u> 9204-4	<input type="checkbox"/>
CAS <u>007440417</u> Trade Secret <input type="checkbox"/> Chem. Name <u>BERYLLIUM & COMPOUNDS, AS BE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>D41</u> 9201-5; 9202 <u>F41</u> 9202 <u>J41</u> 9998 <u>M41</u> 9203; 9995 <u>N41</u> 9203A / 1st Floor; 9995 <u>R41</u> 9202; 9203A / 1st Floor / Room 102A; 9995	<input type="checkbox"/>

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific Information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u> </div> <div style="width: 45%;"></div> </div>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u> Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	
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Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	C n t y p e P r e s e p s	Storage Codes and Locations (Non-Confidential) Storage Locations	O P I																	
CAS <u>001317653</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CALCIUM CARBONATE (cont'd)</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> <div style="width: 45%;"></div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 6 <input type="checkbox"/> 5 No. of Days On-Site (days)	<div style="display: flex;"> <div style="width: 10%;"> <table border="1" style="font-size: 8px;"> <tr><td>N</td><td>4</td><td>1</td></tr> <tr><td>R</td><td>4</td><td>1</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> </div> <div style="width: 90%;"> 9202; 9203; 9995 9201-4; 9206; 9703-15; 9714; 9720-13; 9720-6; 9720-8; 9825 </div> </div>	N	4	1	R	4	1													<input type="checkbox"/>
N	4	1																				
R	4	1																				
CAS <u>010043524</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CALCIUM CHLORIDE</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> <div style="width: 45%;"></div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 6 <input type="checkbox"/> 5 No. of Days On-Site (days)	<div style="display: flex;"> <div style="width: 10%;"> <table border="1" style="font-size: 8px;"> <tr><td>D</td><td>4</td><td>1</td></tr> <tr><td>E</td><td>4</td><td>1</td></tr> <tr><td>E</td><td>4</td><td>1</td></tr> <tr><td>F</td><td>4</td><td>1</td></tr> <tr><td>J</td><td>4</td><td>1</td></tr> <tr><td>M</td><td>4</td><td>1</td></tr> </table> </div> <div style="width: 90%;"> 9712 9201-1; 9201-4; 9201-5; 9204-3 / 1st Floor / Room 101 9204-3 / 1st Floor / Room 109; 9738 / Foundry 9202; 9404-20; 9720-50 9219 / Grounds and Roads Work Area; 9831 9202; 9769 / 3rd Floor / Room 308 </div> </div>	D	4	1	E	4	1	E	4	1	F	4	1	J	4	1	M	4	1	<input type="checkbox"/>
D	4	1																				
E	4	1																				
E	4	1																				
F	4	1																				
J	4	1																				
M	4	1																				
CAS <u>010043524</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CALCIUM CHLORIDE (cont'd)</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> <div style="width: 45%;"></div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 6 <input type="checkbox"/> 5 No. of Days On-Site (days)	<div style="display: flex;"> <div style="width: 10%;"> <table border="1" style="font-size: 8px;"> <tr><td>N</td><td>4</td><td>1</td></tr> <tr><td>R</td><td>4</td><td>1</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> </div> <div style="width: 90%;"> 9203; 9219 / Grounds and Roads Work Area; 9995; Union Valley Facility 9720-2; 9720-50; 9993 </div> </div>	N	4	1	R	4	1													<input type="checkbox"/>
N	4	1																				
R	4	1																				

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two

Emergency
and
Hazardous
Chemical
InventorySpecific
Information
on Chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*Street Bear Creek RoadCity Oak Ridge County Anderson State TN Zip 37831SIC Code 3499 Dun & Brad Number - - FOR
OFFICIAL
USE
ONLY

ID #

Date Received

Owner/Operator Name

Name U.S. Department of Energy Phone (865) 576 9850Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift Superintendent Title Phone (865) 574-7172 24 Hr. Phone (865) 574-7172Name DOE Emergency Response Center Title Phone (865) 576-1005 24 Hr. Phone (865) 576-1005

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description

Physical
and Health
Hazards
(check all that apply)

Inventory

C
n
T
y
p
eP
r
e
s
sStorage Codes and Locations
(Non-Confidential)

Storage Locations

O
p
tCAS 001305 620 Trade Secret ☐Chem. Name CALCIUM HYDROXIDECheck all that apply
☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHSEHS Name ☐ Fire
☐ Sudden Release of Pressure
☐ Reactivity
☒ Immediate (acute)
☒ Delayed (chronic)0 4 Max. Daily Amount (code)
0 4 Avg. Daily Amount (code)
3 6 5 No. of Days On-Site (days)

J	4	1	9731
M	4	1	9201-3; 9202; 9204-2; 9204-3; 9995
N	4	1	9202; 9204-1; UVSPF
P	4	1	9723-16

CAS 007440 702 Trade Secret ☐Chem. Name CALCIUM METALCheck all that apply
☒ Pure ☐ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHSEHS Name ☒ Fire
☐ Sudden Release of Pressure
☒ Reactivity
☒ Immediate (acute)
☐ Delayed (chronic)0 4 Max. Daily Amount (code)
0 4 Avg. Daily Amount (code)
3 6 5 No. of Days On-Site (days)

D	4	1	9204-3; 9206; 9720-27
F	4	1	9202; 9212
M	4	1	9202; 9204-3; 9995
N	4	1	9202

CAS 001333 864 Trade Secret ☐Chem. Name CARBON BLACKCheck all that apply
☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHSEHS Name ☒ Fire
☐ Sudden Release of Pressure
☐ Reactivity
☒ Immediate (acute)
☐ Delayed (chronic)0 4 Max. Daily Amount (code)
0 4 Avg. Daily Amount (code)
3 6 5 No. of Days On-Site (days)

D	4	1	9202; 9204-2; 9204-2E; 9206; 9404-9; 9720-19A; 9720-27; 9731; 9998
E	4	1	9201-5; 9204-2E
F	4	1	9201-5; 9202; 9206; 9212; 9215; 9404-9; 9720-20; 9720-5
I	4	1	9422
J	4	1	9202; 9731; 9998
M	4	1	9202; 9203; 9204-3

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Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

☐ I have attached a site plan☐ I have attached a list of site coordinate abbreviations☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two <small>Emergency and Hazardous Chemical Inventory</small> <small>Specific Information by Chemical</small>	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
	FOR OFFICIAL USE ONLY ID # <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
	Date Received <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>	
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Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	Storage Codes and Locations <small>(Non-Confidential)</small>	O P I																								
CAS <u>001333</u> <u>864</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CARBON BLACK (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>N</td><td>4</td><td>1</td><td>9202; 9203; 9204-2; 9204-3; 9204-4; 9731; 9995</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-2; 9201-5; 9202; 9204-1; 9204-2; 9208; 9212; 9215; 9420</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9703-15; 9709; 9710-2; 9720-1; 9720-6; 9720-8; 9725; 9737; 9738; 9831</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9995; UVSPF</td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	N	4	1	9202; 9203; 9204-2; 9204-3; 9204-4; 9731; 9995	R	4	1	9201-1; 9201-2; 9201-5; 9202; 9204-1; 9204-2; 9208; 9212; 9215; 9420	R	4	1	9703-15; 9709; 9710-2; 9720-1; 9720-6; 9720-8; 9725; 9737; 9738; 9831	R	4	1	9995; UVSPF									<input type="checkbox"/>
N	4	1	9202; 9203; 9204-2; 9204-3; 9204-4; 9731; 9995																									
R	4	1	9201-1; 9201-2; 9201-5; 9202; 9204-1; 9204-2; 9208; 9212; 9215; 9420																									
R	4	1	9703-15; 9709; 9710-2; 9720-1; 9720-6; 9720-8; 9725; 9737; 9738; 9831																									
R	4	1	9995; UVSPF																									
CAS <u>000124</u> <u>389</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CARBON DIOXIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>F</td><td>4</td><td>1</td><td>9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2E; 9204-4; 9206; 9212; 9714</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9201-3; 9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-4; 9206; 9212</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9215; 9219; 9401-1; 9404-1; 9404-8; 9704-1; 9709; 9710-3; 9712; 9714</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9720-13; 9720-16; 9720-20; 9720-41; 9720-6; 9723-25; 9731; 9737</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9811-1; 9983-44; 9995; 9998; UVSPF</td></tr> <tr><td>L</td><td>4</td><td>2</td><td>9204-2E / 2nd Floor; 9709; 9711-5; 9769; 9989; 9990-3; 9995 / BASEMENT</td></tr> </table>	F	4	1	9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2E; 9204-4; 9206; 9212; 9714	F	4	2	9201-3; 9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-4; 9206; 9212	F	4	2	9215; 9219; 9401-1; 9404-1; 9404-8; 9704-1; 9709; 9710-3; 9712; 9714	F	4	2	9720-13; 9720-16; 9720-20; 9720-41; 9720-6; 9723-25; 9731; 9737	F	4	2	9811-1; 9983-44; 9995; 9998; UVSPF	L	4	2	9204-2E / 2nd Floor; 9709; 9711-5; 9769; 9989; 9990-3; 9995 / BASEMENT	<input type="checkbox"/>
F	4	1	9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2E; 9204-4; 9206; 9212; 9714																									
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CAS <u>000124</u> <u>389</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CARBON DIOXIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>L</td><td>4</td><td>2</td><td>9998</td></tr> <tr><td>L</td><td>6</td><td>2</td><td>9401-1</td></tr> <tr><td>P</td><td>4</td><td>2</td><td>9201-3; 9710-2 / Outside Tanker</td></tr> <tr><td>P</td><td>7</td><td>2</td><td>9710-2</td></tr> <tr><td>R</td><td>4</td><td>2</td><td>9201-1; 9204-4; 9737; 9995</td></tr> <tr><td>R</td><td>6</td><td>2</td><td>9710-2</td></tr> </table>	L	4	2	9998	L	6	2	9401-1	P	4	2	9201-3; 9710-2 / Outside Tanker	P	7	2	9710-2	R	4	2	9201-1; 9204-4; 9737; 9995	R	6	2	9710-2	<input type="checkbox"/>
L	4	2	9998																									
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Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two (Emergency and Hazardous Chemical Inventory) Specific Information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	C n T y p e P T r e e s s e s Storage Codes and Locations (Non-Confidential) Storage Locations	O p t																		
CAS <u>000124389</u> Trade Secret <input type="checkbox"/> Chem. Name <u>CARBON DIOXIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>R</td><td>7</td><td>1</td></tr><tr><td>R</td><td>7</td><td>2</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> 9995 9710-2	R	7	1	R	7	2													<input type="checkbox"/>
R	7	1																				
R	7	2																				
CAS <u> </u> Trade Secret <input type="checkbox"/> Chem. Name <u>CONTINUUM AT220</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>P</td><td>4</td><td>1</td></tr><tr><td>P</td><td>4</td><td>1</td></tr><tr><td>R</td><td>4</td><td>1</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> 9409-10; 9409-13; 9409-15; 9409-17; 9409-20; 9409-26; 9409-28; 9409-29 9409-32; 9409-34; 9409-35 9711-1	P	4	1	P	4	1	R	4	1										<input type="checkbox"/>
P	4	1																				
P	4	1																				
R	4	1																				
CAS <u> </u> Trade Secret <input type="checkbox"/> Chem. Name <u>DIANODIC DN300</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>P</td><td>4</td><td>1</td></tr><tr><td>R</td><td>4</td><td>1</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> 9409-20; 9409-22; 9409-22E; 9409-23; 9409-73 9409-22	P	4	1	R	4	1													<input type="checkbox"/>
P	4	1																				
R	4	1																				

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Name and official title of owner/operator OR owner/operator's authorized representative

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Reporting Period

From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Other																								
CAS <u>061790532</u> Trade Secret <input type="checkbox"/> Chem. Name <u>DIATOMACEOUS EARTH</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>E</td><td>4</td><td>1</td><td>9206</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9404-5; 9720-15</td></tr><tr><td>J</td><td>4</td><td>1</td><td>9201-1 / Oil House; 9202; 9212 / B-1 Wing; 9212 / C-1 Wing</td></tr><tr><td>J</td><td>4</td><td>1</td><td>9212 / E Wing; 9212 / Reduction; 9720-2; 9720-8</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9207; 9995; 9998</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9201-1 / 1st Floor / Oil Room; 9202; 9731; 9998</td></tr></table>	E	4	1	9206	F	4	1	9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9404-5; 9720-15	J	4	1	9201-1 / Oil House; 9202; 9212 / B-1 Wing; 9212 / C-1 Wing	J	4	1	9212 / E Wing; 9212 / Reduction; 9720-2; 9720-8	M	4	1	9202; 9207; 9995; 9998	N	4	1	9201-1 / 1st Floor / Oil Room; 9202; 9731; 9998	<input type="checkbox"/>
E	4	1	9206																									
F	4	1	9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9404-5; 9720-15																									
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CAS <u>061790532</u> Trade Secret <input type="checkbox"/> Chem. Name <u>DIATOMACEOUS EARTH (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9202; 9204-2; 9720-8; 9737</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></table>	R	4	1	9201-1; 9202; 9204-2; 9720-8; 9737																					<input type="checkbox"/>
R	4	1	9201-1; 9202; 9204-2; 9720-8; 9737																									
CAS <u> </u> Trade Secret <input type="checkbox"/> Chem. Name <u>DIESEL FUEL NO. 2</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>A</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9201-4; 9201-5; 9203; 9204-2; 9204-4; 9206; 9210; 9211</td></tr><tr><td>A</td><td>4</td><td>1</td><td>9212; 9416-35; 9702; 9706-2; 9710-2; 9712; 9720-2; 9720-5; 9731; 9998</td></tr><tr><td>A</td><td>4</td><td>1</td><td>Post 10; Post 24; Post 33; Post 8</td></tr><tr><td>B</td><td>4</td><td>1</td><td>9714 / TSD Garage; 9754-3</td></tr><tr><td>C</td><td>4</td><td>1</td><td>9710-3; 9722-2; 9999</td></tr><tr><td>D</td><td>4</td><td>1</td><td>9401-1; 9998</td></tr></table>	A	4	1	9201-1; 9201-3; 9201-4; 9201-5; 9203; 9204-2; 9204-4; 9206; 9210; 9211	A	4	1	9212; 9416-35; 9702; 9706-2; 9710-2; 9712; 9720-2; 9720-5; 9731; 9998	A	4	1	Post 10; Post 24; Post 33; Post 8	B	4	1	9714 / TSD Garage; 9754-3	C	4	1	9710-3; 9722-2; 9999	D	4	1	9401-1; 9998	<input type="checkbox"/>
A	4	1	9201-1; 9201-3; 9201-4; 9201-5; 9203; 9204-2; 9204-4; 9206; 9210; 9211																									
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Tier Two

Emergency
and
Hazardous
Chemical
InventorySpecific
Information
on Chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*Street Bear Creek RoadCity Oak Ridge County Anderson State TN Zip 37831SIC Code 3499 Dun & Brad Number - - FOR OFFICIAL USE ONLY ID #
Date Received

Owner/Operator Name

Name U.S. Department of Energy Phone (865) 576-9850Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift Superintendent Title Phone (865) 574-7172 24 Hr. Phone (865) 574-7172Name DOE Emergency Response Center Title Phone (865) 576-1005 24 Hr. Phone (865) 576-1005

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C	4	1	9206; 9219; 9720-50																									
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P	4	1	9712 / Tanker Truck; 9737																									
R	4	1	9215; 9401-1; 9714																									
CAS <u>000107211</u> Trade Secret <input type="checkbox"/> Chem. Name <u>ETHYLENE GLYCOL</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td><td>9712; 9714</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9401-1; 9404-5; 9720-15; 9720-8; 9731; 9831</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9201-2; 9201-3; 9202; 9204-2E; 9204-4; 9206; 9219; 9404-20; 9404-5</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9703-15; 9709; 9720-13; 9720-15; 9720-16; 9720-6; 9720-8; 9723-25</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9983-BK</td></tr><tr><td>F</td><td>4</td><td>2</td><td>9206; 9401-3; 9709; 9714; 9720-20; 9720-6; 9723-25; 9983-BK</td></tr></table>	D	4	1	9712; 9714	E	4	1	9401-1; 9404-5; 9720-15; 9720-8; 9731; 9831	F	4	1	9201-2; 9201-3; 9202; 9204-2E; 9204-4; 9206; 9219; 9404-20; 9404-5	F	4	1	9703-15; 9709; 9720-13; 9720-15; 9720-16; 9720-6; 9720-8; 9723-25	F	4	1	9983-BK	F	4	2	9206; 9401-3; 9709; 9714; 9720-20; 9720-6; 9723-25; 9983-BK	<input type="checkbox"/>
D	4	1	9712; 9714																									
E	4	1	9401-1; 9404-5; 9720-15; 9720-8; 9731; 9831																									
F	4	1	9201-2; 9201-3; 9202; 9204-2E; 9204-4; 9206; 9219; 9404-20; 9404-5																									
F	4	1	9703-15; 9709; 9720-13; 9720-15; 9720-16; 9720-6; 9720-8; 9723-25																									
F	4	1	9983-BK																									
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CAS <u>000107211</u> Trade Secret <input type="checkbox"/> Chem. Name <u>ETHYLENE GLYCOL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1"><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9712; 9720-16; 9720-8; 9995</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9201-2; 9202; 9203; 9204-1; 9204-4; 9212; 9219; 9420; 9704-1; 9706-2</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9710-3; 9712; 9720-20; 9720-6; 9723-14; 9731; 9733-1; 9737; 9769</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9983-44; 9998</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9114; 9201-1; 9204-2E; 9204-4; 9212; 9220; 9404-5; 9420; 9714; 9720-16</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9720-6; 9720-8; 9737</td></tr></table>	M	4	1	9202; 9203; 9712; 9720-16; 9720-8; 9995	N	4	1	9201-2; 9202; 9203; 9204-1; 9204-4; 9212; 9219; 9420; 9704-1; 9706-2	N	4	1	9710-3; 9712; 9720-20; 9720-6; 9723-14; 9731; 9733-1; 9737; 9769	N	4	1	9983-44; 9998	R	4	1	9114; 9201-1; 9204-2E; 9204-4; 9212; 9220; 9404-5; 9420; 9714; 9720-16	R	4	1	9720-6; 9720-8; 9737	<input type="checkbox"/>
M	4	1	9202; 9203; 9712; 9720-16; 9720-8; 9995																									
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Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

I, R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

☐ I have attached a site plan☐ I have attached a list of site coordinate abbreviations☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory		Facility Identification				Owner/Operator Name	
Name US DOE Lockheed Martin Energy Systems Y-12 Plant*		Name U.S. Department of Energy		Phone (865) 576-9850			
Street Bear Creek Road		County Anderson		State TN Zip 37831		Mail Address P.O. Box 2001, Oak Ridge, TN 37831	
City Oak Ridge		Dun & Brad Number		Emergency Contact Name Plant Shift Superintendent		Title	
SIC Code 3499		ID #		Phone (865) 574-7172		24 Hr. Phone (865) 574-7172	
FOR OFFICIAL USE ONLY		Date Received		Name DOE Emergency Response Center		Title	
				Phone (865) 576-1005		24 Hr. Phone (865) 576-1005	
Important: Read all instructions before completing form		Reporting Period		From January 1 to December 31, 1999		<input type="checkbox"/> Check if information below is identical to the information submitted last year.	
Chemical Description		Physical and Health Hazards (check all that apply)		Inventory		Storage Codes and Locations (Non-Confidential) Storage Locations	
CAS 000076131 Chem. Name FREON 113 Check all that apply: EHS Name		Fire Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)		Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-Site (days)		9215 9201-2; 9201-5; 9202; 9206; 9212; 9215; 9720-2 9201-1; 9201-3; 9202; 9203; 9204-1; 9204-3; 9208; 9212; 9709; 9720-2 9720-20; 9995 9201-3; 9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206 9212; 9215; 9219; 9401-3; 9404-1; 9404-20; 9710-3; 9712; 9720-16	
CAS 000076131 (cont'd) Chem. Name FREON 113 (cont'd) Check all that apply: EHS Name		Fire Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)		Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-Site (days)		9720-20; 9720-6; 9723-25; 9731; 9737; 9995; 9998 9202 9202; 9203; 9207 / 5th Floor; 9207 / 4th Floor; 9731; 9769 / 3rd Floor 9995 / BASEMENT; 9995 / 1st Floor 9204-1 / 1st Floor / Red Shop 9103 / 1st Floor; 9203; 9204-4; 9995	
CAS 000076131 (cont'd) Chem. Name FREON 113 (cont'd) Check all that apply: EHS Name		Fire Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)		Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-Site (days)		9201-1; 9201-3; 9215; 9720-2; 9720-8; 9737; 9995; UVSPF 9202	
Certification (Read and sign after completing all sections)		I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.		Signature Todd R. Butz, Director Environment, Safety, Health and Quality		Date signed	
Name and official title of owner/operator OR owner/operator's authorized representative		Signature		Date signed		Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguard measures	

Tier Two Emergency and Hazardous Chemical Inventory Specific Information, Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Reporting Period

From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Opt																					
CAS <u>000075</u> <u>71</u> <u>8</u> Trade Secret <input type="checkbox"/> Chem. Name <u>FREON 12</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>C</td><td>n</td><td>P</td></tr><tr><td>T</td><td>T</td><td>r</td></tr><tr><td>y</td><td>e</td><td>e</td></tr><tr><td>p</td><td>m</td><td>s</td></tr><tr><td>e</td><td>p</td><td>s</td></tr></table> <u>D</u> <u>4</u> <u>1</u> 9215 <u>F</u> <u>4</u> <u>1</u> 9107; 9201-3; 9202; 9203; 9208; 9610; 9714; 9720-20; 9995 <u>F</u> <u>4</u> <u>2</u> 9111; 9201-3; 9202; 9204-1; 9204-2; 9204-2E; 9204-4; 9206; 9212; 9215 <u>F</u> <u>4</u> <u>2</u> 9401-3; 9404-4; 9712; 9714; 9720-16; 9720-20; 9723-25; 9731; 9737 <u>F</u> <u>4</u> <u>2</u> 9998 <u>L</u> <u>4</u> <u>1</u> 9712; 9720-2; 9720-8; 9959; 9995	C	n	P	T	T	r	y	e	e	p	m	s	e	p	s	<input type="checkbox"/>						
C	n	P																							
T	T	r																							
y	e	e																							
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CAS <u>000075</u> <u>71</u> <u>8</u> Trade Secret <input type="checkbox"/> Chem. Name <u>FREON 12 (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>L</td><td>4</td><td>2</td></tr><tr><td>L</td><td>4</td><td>2</td></tr><tr><td>L</td><td>4</td><td>2</td></tr><tr><td>M</td><td>4</td><td>1</td></tr><tr><td>N</td><td>4</td><td>1</td></tr><tr><td>R</td><td>4</td><td>1</td></tr></table> 9201-1; 9201-3; 9201-5N; 9202; 9204-1 / Dock 119; 9204-2E; 9204-4 9712; 9714 / TSD Garage; 9737; 9808 / Refrigeration Shop; 9959; 9981 9995 9995 9215 9201-1; 9201-3; 9202; 9737; 9995; UVSPF	L	4	2	L	4	2	L	4	2	M	4	1	N	4	1	R	4	1	<input type="checkbox"/>			
L	4	2																							
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R	4	2																							

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I, Ed R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
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This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
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Reporting Period From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O P T																								
CAS <u>000075456</u> Trade Secret <input type="checkbox"/> Chem. Name <u>FREON 22</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>F</td><td>4</td><td>1</td><td>9202; 9204-1</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9201-2; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-3; 9212; 9401-3</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9404-1; 9710-2; 9720-20; 9720-6; 9737</td></tr> <tr><td>L</td><td>4</td><td>1</td><td>9215; 9808; 9959</td></tr> <tr><td>L</td><td>4</td><td>2</td><td>9201-3; 9206; 9208; 9420; 9720-8; 9737; 9808 / Refrigeration Shop</td></tr> <tr><td>L</td><td>4</td><td>2</td><td>9959; 9995</td></tr> </table>	F	4	1	9202; 9204-1	F	4	2	9201-2; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-3; 9212; 9401-3	F	4	2	9404-1; 9710-2; 9720-20; 9720-6; 9737	L	4	1	9215; 9808; 9959	L	4	2	9201-3; 9206; 9208; 9420; 9720-8; 9737; 9808 / Refrigeration Shop	L	4	2	9959; 9995	<input type="checkbox"/>
F	4	1	9202; 9204-1																									
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CAS <u>000075456</u> Trade Secret <input type="checkbox"/> Chem. Name <u>FREON 22 (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9204-3; 9767-10; 9767-11; 9767-12; 9767-13; 9767-3</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9767-4; 9767-8</td></tr> <tr><td>R</td><td>4</td><td>2</td><td>9202</td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	R	4	1	9201-1; 9201-3; 9204-3; 9767-10; 9767-11; 9767-12; 9767-13; 9767-3	R	4	1	9767-4; 9767-8	R	4	2	9202													<input type="checkbox"/>
R	4	1	9201-1; 9201-3; 9204-3; 9767-10; 9767-11; 9767-12; 9767-13; 9767-3																									
R	4	1	9767-4; 9767-8																									
R	4	2	9202																									
CAS <u>000075694</u> Trade Secret <input type="checkbox"/> Chem. Name <u>FREON(R) 11</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>D</td><td>4</td><td>1</td><td>9201-5E; 9720-2 / Bay 40 Oil storage</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9201-3; 9202; 9203; 9204-2E; 9995</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9201-3; 9202; 9204-2; 9212; 9714; 9720-20; 9720-6; 9995; 9998</td></tr> <tr><td>L</td><td>4</td><td>2</td><td>9202</td></tr> <tr><td>M</td><td>4</td><td>1</td><td>9995</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9201-3; 9202; 9212; 9720-2; 9737; 9995; UVSPF</td></tr> </table>	D	4	1	9201-5E; 9720-2 / Bay 40 Oil storage	F	4	1	9201-3; 9202; 9203; 9204-2E; 9995	F	4	2	9201-3; 9202; 9204-2; 9212; 9714; 9720-20; 9720-6; 9995; 9998	L	4	2	9202	M	4	1	9995	R	4	1	9201-3; 9202; 9212; 9720-2; 9737; 9995; UVSPF	<input type="checkbox"/>
D	4	1	9201-5E; 9720-2 / Bay 40 Oil storage																									
F	4	1	9201-3; 9202; 9203; 9204-2E; 9995																									
F	4	2	9201-3; 9202; 9204-2; 9212; 9714; 9720-20; 9720-6; 9995; 9998																									
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- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Revised June 1990

Tier Two Emergency and Hazardous Chemical Inventory Specific Information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3</u> <u>4</u> <u>9</u> <u>9</u> Dun & Brad Number <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	C n T y p e P r e s s	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>
CAS [][][][][][][][] Trade Secret [] Chem. Name GASOLINE, UNLEADED <hr/> Check all that apply: [] Pure [X] Mlx [] Solid [X] Liquid [] Gas [] EHS EHS Name _____	[X] Fire [] Sudden Release of Pressure [] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	[0][5] Max. Daily Amount (code) [0][5] Avg. Daily Amount (code) [3][6][5] No. of Days On-Site (days)	A 4 1 9201-5; 9204-3; 9204-4; 9709; 9712; 9770-1; 9984; 9995 A 4 1 EAST PINE RIDGE B 4 1 9714 / Underground Tank; 9754-3 / Underground Tank C 4 1 9202 D 4 1 9401-1; 9720-13; 9998 F 4 1 9201-1; 9201-2 / Storage Shed; 9202; 9204-1; 9206; 9219; 9404-20	
CAS [][][][][][][][] Trade Secret [] Chem. Name GASOLINE, UNLEADED (cont'd) <hr/> Check all that apply: [] Pure [X] Mlx [] Solid [X] Liquid [] Gas [] EHS EHS Name _____	[X] Fire [] Sudden Release of Pressure [] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	[0][5] Max. Daily Amount (code) [0][5] Avg. Daily Amount (code) [3][6][5] No. of Days On-Site (days)	F 4 1 9404-5; 9714; 9720-13; 9720-16; 9720-41; 9720-6; 9808; 9828-6; 9983 P 4 1 9712; 9737 R 4 1 9215A [][][] [][][] [][][]	
CAS 0 0 7 7 8 2 4 2 5 Trade Secret [] Chem. Name GRAPHITE-NATURAL/SYNTHETIC <hr/> Check all that apply: [] Pure [X] Mlx [X] Solid [] Liquid [] Gas [] EHS EHS Name _____	[X] Fire [] Sudden Release of Pressure [] Reactivity [] Immediate (acute) [X] Delayed (chronic)	[0][5] Max. Daily Amount (code) [0][5] Avg. Daily Amount (code) [3][6][5] No. of Days On-Site (days)	D 4 1 9731 E 4 1 9212 F 4 1 9201-1; 9201-2; 9201-3; 9203; 9204-1; 9204-2; 9204-3; 9204-4; 9206 F 4 1 9208; 9215; 9401-3; 9709; 9720-16; 9720-20; 9731; 9737; 9767-13 F 4 1 9767-4; 9995; 9998 F 4 2 9201-2; 9201-5; 9204-1; 9204-2E; 9204-4; 9212; 9219; 9709; 9714	

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

add R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576 9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
Specific Information by Chemical	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
	FOR OFFICIAL USE ONLY ID # <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
Date Received <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>		
Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>				

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	O p t i o n a l
CAS <u>007782425</u> Trade Secret <input type="checkbox"/> Chem. Name <u>GRAPHITE-NATURAL/SYNTHETI</u> C (cont'd) Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>F42</u> 9220-16; 9220-20; 9220-41 <u>J41</u> 9202 <u>K41</u> 9201-1; 9202; 9401-3; 9712 <u>M41</u> 9202; 9203; 9995 <u>N41</u> 9201-3; 9202; 9203; 9204-3; 9208; 9703-15; 9995 <u>R41</u> 9201-1; 9201-3; 9201-5; 9203; 9204-1; 9204-2E; 9204-3; 9212; 9215	<input type="checkbox"/>
CAS <u>007782425</u> Trade Secret <input type="checkbox"/> Chem. Name <u>GRAPHITE-NATURAL/SYNTHETI</u> C (cont'd) Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>R41</u> 9215A; 9401-3; 9703-15; 9709; 9712; 9714; 9720-1; 9720-20; 9720-21 <u>R41</u> 9720-6; 9737; 9831; 9995 <u>R42</u> 9202	<input type="checkbox"/>
CAS <u>007440597</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HELIUM</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<u>L41</u> 9201-3; 9203; 9204-2E; 9206; 9709; UVSPF <u>L42</u> 9201-1; 9201-2; 9201-3; 9201-5N; 9202; 9203; 9204-1 / Dock 119; 9204-2 <u>L42</u> 9204-2 / Maintenance; 9204-2E; 9204-3; 9206; 9208; 9404-1; 9404-8 <u>L42</u> 9709; 9720-13; 9720-6; 9723-25; 9769; 9959; 9989; 9990; 9995; 9998 <u>M41</u> 9995 <u>Q42</u> 9977-1 / Gas Storage	<input type="checkbox"/>

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

I am, R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two

Emergency
and
Hazardous
(Chemical
Inventory)Specific
information
by Chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*Street Bear Creek RoadCity Oak Ridge County Anderson State TN Zip 37831SIC Code 3499Dun & Brad
Number - - FOR
OFFICIAL
USE
ONLYID # Date Received

Owner/Operator Name

Name U.S. Department of EnergyPhone (865) 576-9850Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift SuperintendentTitle Phone (865) 574-717224 Hr. Phone (865) 574-7172Name DOE Emergency Response CenterTitle Phone (865) 576-100524 Hr. Phone (865) 576-1005☐ Check if information below is identical to the information
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Reporting Period

From January 1 to December 31, 1999

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Opt																								
CAS <u>007440597</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HELIUM (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>R</td><td>4</td><td>1</td><td>9215A; 9977-1; UVSPF</td></tr><tr><td>R</td><td>4</td><td>2</td><td>9204-4; 9995</td></tr><tr><td>R</td><td>7</td><td>2</td><td>9995</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>	R	4	1	9215A; 9977-1; UVSPF	R	4	2	9204-4; 9995	R	7	2	9995													<input type="checkbox"/>
R	4	1	9215A; 9977-1; UVSPF																									
R	4	2	9204-4; 9995																									
R	7	2	9995																									
CAS <u>001333740</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>L</td><td>4</td><td>1</td><td>9202; UVSPF</td></tr><tr><td>L</td><td>4</td><td>2</td><td>9201-1; 9201-2; 9201-3; 9202; 9204-3; 9206; 9401-1; 9989; 9990; 9995</td></tr><tr><td>L</td><td>7</td><td>2</td><td>9995</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9995</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9202</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9401-3</td></tr></table>	L	4	1	9202; UVSPF	L	4	2	9201-1; 9201-2; 9201-3; 9202; 9204-3; 9206; 9401-1; 9989; 9990; 9995	L	7	2	9995	M	4	1	9995	N	4	1	9202	R	4	1	9401-3	<input type="checkbox"/>
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Name and official title of owner/operator OR owner/operator's authorized representative

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Reporting Period From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O P T																								
CAS <u>007647</u> <u>010</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN CHLORIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>HYDROGEN CHLORIDE (GAS O NLY)</u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>A</td><td>4</td><td>1</td><td>9204-2</td></tr> <tr><td>D</td><td>4</td><td>1</td><td>9201-5</td></tr> <tr><td>E</td><td>4</td><td>1</td><td>9202; 9204-2E</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9202; 9204-1; 9404-5</td></tr> <tr><td>G</td><td>4</td><td>1</td><td>9995; UVSPF</td></tr> <tr><td>L</td><td>4</td><td>1</td><td>9709</td></tr> </table>	A	4	1	9204-2	D	4	1	9201-5	E	4	1	9202; 9204-2E	F	4	1	9202; 9204-1; 9404-5	G	4	1	9995; UVSPF	L	4	1	9709	<input type="checkbox"/>
A	4	1	9204-2																									
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L	4	1	9709																									
CAS <u>007647</u> <u>010</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN CHLORIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>HYDROGEN CHLORIDE (GAS O NLY)</u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>M</td><td>4</td><td>1</td><td>9201-5; 9202; 9203; 9204-2E; 9204-3; 9205; 9206; 9212; 9224; 9401-3</td></tr> <tr><td>M</td><td>4</td><td>1</td><td>9720-2; 9731; 9737; 9769; 9995; UVSPF</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9103; 9104-3; 9106; 9107; 9108; 9109; 9110; 9111; 9113; 9114; 9115</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9116; 9119; 9201-1; 9201-2; 9201-3; 9201-5; 9201-5N; 9202; 9203</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206; 9210; 9212; 9215</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9401-1; 9401-3; 9420; 9626; 9702; 9704-1; 9709; 9710-2; 9710-3; 9711-1</td></tr> </table>	M	4	1	9201-5; 9202; 9203; 9204-2E; 9204-3; 9205; 9206; 9212; 9224; 9401-3	M	4	1	9720-2; 9731; 9737; 9769; 9995; UVSPF	N	4	1	9103; 9104-3; 9106; 9107; 9108; 9109; 9110; 9111; 9113; 9114; 9115	N	4	1	9116; 9119; 9201-1; 9201-2; 9201-3; 9201-5; 9201-5N; 9202; 9203	N	4	1	9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206; 9210; 9212; 9215	N	4	1	9401-1; 9401-3; 9420; 9626; 9702; 9704-1; 9709; 9710-2; 9710-3; 9711-1	<input type="checkbox"/>
M	4	1	9201-5; 9202; 9203; 9204-2E; 9204-3; 9205; 9206; 9212; 9224; 9401-3																									
M	4	1	9720-2; 9731; 9737; 9769; 9995; UVSPF																									
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N	4	1	9401-1; 9401-3; 9420; 9626; 9702; 9704-1; 9709; 9710-2; 9710-3; 9711-1																									
CAS <u>007647</u> <u>010</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN CHLORIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>HYDROGEN CHLORIDE (GAS O NLY)</u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>N</td><td>4</td><td>1</td><td>9711-5; 9712; 9720-13; 9720-16; 9720-5; 9720-6; 9723-14; 9723-16</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9723-18; 9723-19; 9723-21; 9723-25; 9723-27; 9723-28; 9723-31; 9728</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9731; 9733-1; 9736; 9737; 9739; 9766; 9769; 9983-62; 9995; UVSPF</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-4; 9204-2E; 9714; 9723-16; 9737; 9995; UVSPF</td></tr> <tr><td>R</td><td>6</td><td>3</td><td>9995</td></tr> </table>	N	4	1	9711-5; 9712; 9720-13; 9720-16; 9720-5; 9720-6; 9723-14; 9723-16	N	4	1	9723-18; 9723-19; 9723-21; 9723-25; 9723-27; 9723-28; 9723-31; 9728	N	4	1	9731; 9733-1; 9736; 9737; 9739; 9766; 9769; 9983-62; 9995; UVSPF	R	4	1	9201-1; 9201-4; 9204-2E; 9714; 9723-16; 9737; 9995; UVSPF	R	6	3	9995	<input type="checkbox"/>				
N	4	1	9711-5; 9712; 9720-13; 9720-16; 9720-5; 9720-6; 9723-14; 9723-16																									
N	4	1	9723-18; 9723-19; 9723-21; 9723-25; 9723-27; 9723-28; 9723-31; 9728																									
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Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

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Optional Attachments

- ☐ I have attached a site plan
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This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility. *

Tier Two Emergency and Hazardous Chemical Inventory	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
Specific Information by Chemical	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>	Emergency Contact		
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>	Name <u>Plant Shift Superintendent</u> Title <u> </u>		
FOR OFFICIAL USE ONLY	ID # <u> </u>	Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>		
	Date Received <u> </u>	Name <u>DOE Emergency Response Center</u> Title <u> </u>		
		Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>		

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Opt																					
CAS <u>007664</u> <u>39</u> <u>3</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN FLUORIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>HYDROGEN FLUORIDE</u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>2</u> Max. Daily Amount (code) <u>0</u> <u>2</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>C</td><td>n</td><td>P</td></tr><tr><td>y</td><td>T</td><td>r</td></tr><tr><td>e</td><td>e</td><td>s</td></tr><tr><td>p</td><td>m</td><td>s</td></tr><tr><td>e</td><td>p</td><td>s</td></tr></table> <u>E</u> <u>4</u> <u>1</u> 9212 <u>L</u> <u>4</u> <u>1</u> 9720-40 <u>L</u> <u>4</u> <u>2</u> 9204-3 <u>M</u> <u>4</u> <u>1</u> 9201-5N; 9202; 9204-3; 9204-4; 9212; 9212 / E Wing / Room 1021; 9720-2 <u>M</u> <u>4</u> <u>1</u> 9769; 9995 <u>N</u> <u>4</u> <u>1</u> 9202; 9204-2E / 3rd Floor; 9204-3; 9211; 9401-3; 9720-8; 9731; 9995	C	n	P	y	T	r	e	e	s	p	m	s	e	p	s	<input type="checkbox"/>						
C	n	P																							
y	T	r																							
e	e	s																							
p	m	s																							
e	p	s																							
CAS <u>007664</u> <u>39</u> <u>3</u> Trade Secret <input type="checkbox"/> Chem. Name <u>HYDROGEN FLUORIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>HYDROGEN FLUORIDE</u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>2</u> Max. Daily Amount (code) <u>0</u> <u>2</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>N</td><td>4</td><td>1</td></tr><tr><td>R</td><td>4</td><td>1</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> <u>UVSPF</u> <u>9720-8; 9995</u>	N	4	1	R	4	1																<input type="checkbox"/>
N	4	1																							
R	4	1																							
CAS <u>000067</u> <u>63</u> <u>0</u> Trade Secret <input type="checkbox"/> Chem. Name <u>ISOPROPYL ALCOHOL</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>F</td><td>4</td><td>1</td></tr><tr><td>M</td><td>4</td><td>1</td></tr><tr><td>N</td><td>4</td><td>1</td></tr><tr><td>N</td><td>4</td><td>1</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> <u>9201-1; 9201-5; 9201-5N; 9204-2; 9204-2E; 9208; 9720-8</u> <u>9103; 9202; 9206; 9720-2; 9720-8; 9737</u> <u>9203; 9204-2E; 9207; 9212; 9401-1; 9714; 9720-2; 9723-25; 9737; 9738</u> <u>9995; Firing Range; UVSPF</u>	F	4	1	M	4	1	N	4	1	N	4	1										<input type="checkbox"/>
F	4	1																							
M	4	1																							
N	4	1																							
N	4	1																							

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.I, David R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

☐ I have attached a site plan☐ I have attached a list of site coordinate abbreviations☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	O P I																								
CAS <u>000554132</u> Trade Secret <input type="checkbox"/> Chem. Name <u>LITHIUM CARBONATE</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>I</td><td>4</td><td>1</td><td>9202; 9204-4; 9215</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9204-4; 9215</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>	I	4	1	9202; 9204-4; 9215	R	4	1	9204-4; 9215																	<input type="checkbox"/>
I	4	1	9202; 9204-4; 9215																									
R	4	1	9204-4; 9215																									
CAS <u>007447418</u> Trade Secret <input type="checkbox"/> Chem. Name <u>LITHIUM CHLORIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>C</td><td>4</td><td>1</td><td>9204-2</td></tr><tr><td>D</td><td>4</td><td>1</td><td>9204-2; 9204-3</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9201-4; 9202; 9204-2; 9204-2E; 9204-4; 9720-2</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9204-2; 9995</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9202; 9203</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9202; 9204-2; 9204-2E; 9204-4; 9211; 9720-8; 9995</td></tr></table>	C	4	1	9204-2	D	4	1	9204-2; 9204-3	E	4	1	9201-4; 9202; 9204-2; 9204-2E; 9204-4; 9720-2	M	4	1	9202; 9203; 9204-2; 9995	N	4	1	9202; 9203	R	4	1	9202; 9204-2; 9204-2E; 9204-4; 9211; 9720-8; 9995	<input type="checkbox"/>
C	4	1	9204-2																									
D	4	1	9204-2; 9204-3																									
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R	4	1	9202; 9204-2; 9204-2E; 9204-4; 9211; 9720-8; 9995																									
CAS <u>013587161</u> Trade Secret <input type="checkbox"/> Chem. Name <u>LITHIUM DEUTERIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>04</u> Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td><td>9201-5; 9204-2; 9720-46</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>	D	4	1	9201-5; 9204-2; 9720-46																					<input type="checkbox"/>
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Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

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- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two

Emergency
and
Hazardous
Chemical
InventorySpecific
Information
Chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*

Street Bear Creek Road

City Oak Ridge County Anderson State TN Zip 37831

SIC Code 3499

Dun & Brad
NumberFOR
OFFICIAL
USE
ONLY

ID #

Date Received

Owner/Operator Name

Name U.S. Department of Energy

Phone (865) 576-9850

Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift Superintendent

Title

Phone (865) 574-7172

24 Hr. Phone (865) 574-7172

Name DOE Emergency Response Center

Title

Phone (865) 576-1005

24 Hr. Phone (865) 576-1005

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Reporting Period

From January 1 to December 31, 1999

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Chemical Description

Physical
and Health
Hazards
(check all that apply)

Inventory

C
n
T
y
p
e
P
r
e
s
sStorage Codes and Locations
(Non-Confidential)

Storage Locations

O
P
T

CAS 007580 67 8 Trade Secret

Chem. Name LITHIUM HYDRIDE

Check all
that apply☒ Pure ☐ Mix ☒ Solid ☐ Liquid ☐ Gas ☒ EHS

EHS Name LITHIUM HYDRIDE

- ☒
- Fire
-
- ☐
- Sudden Release
-
- of Pressure
-
- ☒
- Reactivity
-
- ☒
- Immediate (acute)
-
- ☒
- Delayed (chronic)

0 4 Max. Daily
Amount (code)
0 4 Avg. Daily
Amount (code)
3 6 5 No. of Days
On-Site (days)D 4 1 9201-5; 9204-2; 9720-46
F 4 1 9202; 9731
M 4 1 9202; 9203; 9995
N 4 1 9202

CAS 001310 65 2 Trade Secret

Chem. Name LITHIUM HYDROXIDE

Check all
that apply☒ Pure ☒ Mix ☐ Solid ☒ Liquid ☐ Gas ☐ EHS

EHS Name

- ☐
- Fire
-
- ☐
- Sudden Release
-
- of Pressure
-
- ☒
- Reactivity
-
- ☒
- Immediate (acute)
-
- ☒
- Delayed (chronic)

0 5 Max. Daily
Amount (code)
0 5 Avg. Daily
Amount (code)
3 6 5 No. of Days
On-Site (days)A 4 1 9204-2
D 4 1 9204-2

CAS 001317 71 1 Trade Secret

Chem. Name MAGNESIUM IRON SILICATE

Check all
that apply☐ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS

EHS Name

- ☐
- Fire
-
- ☐
- Sudden Release
-
- of Pressure
-
- ☐
- Reactivity
-
- ☒
- Immediate (acute)
-
- ☒
- Delayed (chronic)

0 4 Max. Daily
Amount (code)
0 4 Avg. Daily
Amount (code)
3 6 5 No. of Days
On-Site (days)J 4 1 9720-15; 9720-2; 9720-41; 9720-50; 9720-8; 9831
R 4 1 9738

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- ☐
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- coordinate abbreviations
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- I have attached a description of
-
- dikes and other safeguard measures

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	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O p t																								
CAS <u>001309484</u> Trade Secret <input type="checkbox"/> Chem. Name <u>MAGNESIUM OXIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>D</td><td>4</td><td>1</td><td>9204-2; 9404-2</td></tr> <tr><td>E</td><td>4</td><td>1</td><td>9204-2; 9720-19</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9202</td></tr> <tr><td>J</td><td>4</td><td>1</td><td>9204-2; 9404-20; 9831</td></tr> <tr><td>K</td><td>4</td><td>1</td><td>9203</td></tr> <tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9204-3; 9206; 9995</td></tr> </table>	D	4	1	9204-2; 9404-2	E	4	1	9204-2; 9720-19	F	4	1	9202	J	4	1	9204-2; 9404-20; 9831	K	4	1	9203	M	4	1	9202; 9203; 9204-3; 9206; 9995	<input type="checkbox"/>
D	4	1	9204-2; 9404-2																									
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K	4	1	9203																									
M	4	1	9202; 9203; 9204-3; 9206; 9995																									
CAS <u>001309484</u> Trade Secret <input type="checkbox"/> Chem. Name <u>MAGNESIUM OXIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>N</td><td>4</td><td>1</td><td>9201-3; 9202; 9203; 9204-3; 9731; 9995</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9202; 9212; 9703-15; 9720-6; 9720-8; 9737; 9995</td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	N	4	1	9201-3; 9202; 9203; 9204-3; 9731; 9995	R	4	1	9201-1; 9201-3; 9202; 9212; 9703-15; 9720-6; 9720-8; 9737; 9995													<input type="checkbox"/>				
N	4	1	9201-3; 9202; 9203; 9204-3; 9731; 9995																									
R	4	1	9201-1; 9201-3; 9202; 9212; 9703-15; 9720-6; 9720-8; 9737; 9995																									
CAS <u>001309382</u> Trade Secret <input type="checkbox"/> Chem. Name <u>MAGNETITE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>F</td><td>4</td><td>1</td><td>9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-3; 9206; 9212; 9215</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9404-1; 9720-16; 9720-20; 9720-8; 9731</td></tr> <tr><td>F</td><td>4</td><td>2</td><td>9212</td></tr> <tr><td>M</td><td>4</td><td>1</td><td>9731; 9998</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9110; 9831</td></tr> </table>	F	4	1	9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-3; 9206; 9212; 9215	F	4	1	9404-1; 9720-16; 9720-20; 9720-8; 9731	F	4	2	9212	M	4	1	9731; 9998	R	4	1	9110; 9831	<input type="checkbox"/>				
F	4	1	9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-3; 9206; 9212; 9215																									
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Signature

Date signed

Optional Attachments

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*This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific Information Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional																								
CAS <u>007439976</u> Trade Secret <input type="checkbox"/> Chem. Name <u>MERCURY METAL</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>6</u> Max. Daily Amount (code) <u>0</u> <u>6</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>L</td><td>4</td><td>1</td><td>9204-1; 9720-26</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9204-1; 9204-3; 9710-2; 9720-6; 9769; 9995</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9201-2; 9202; 9204-1; 9208; 9720-8; 9737 / 2nd Floor</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9201-2; 9212 / E Wing; 9704-2; 9769; 9995</td></tr></table>	L	4	1	9204-1; 9720-26	M	4	1	9202; 9203; 9204-1; 9204-3; 9710-2; 9720-6; 9769; 9995	N	4	1	9201-2; 9202; 9204-1; 9208; 9720-8; 9737 / 2nd Floor	R	4	1	9201-2; 9212 / E Wing; 9704-2; 9769; 9995	<input type="checkbox"/>								
L	4	1	9204-1; 9720-26																									
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N	4	1	9201-2; 9202; 9204-1; 9208; 9720-8; 9737 / 2nd Floor																									
R	4	1	9201-2; 9212 / E Wing; 9704-2; 9769; 9995																									
CAS <u>000067561</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHANOL</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td><td>9401-1; 9404-5; 9720-2; 9767-13; 9767-4</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9201-3; 9404-5; 9720-6</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9201-1; 9201-2; 9201-3; 9201-5; 9201-5E; 9202; 9203; 9204-1; 9204-2</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9204-2E; 9204-4; 9206; 9208; 9212; 9215; 9219; 9401-1; 9404-16</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9404-20; 9404-5; 9420; 9709; 9720-13; 9720-16; 9720-20; 9720-6; 9720-8</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9723-25; 9731; 9738; 9995</td></tr></table>	D	4	1	9401-1; 9404-5; 9720-2; 9767-13; 9767-4	E	4	1	9201-3; 9404-5; 9720-6	F	4	1	9201-1; 9201-2; 9201-3; 9201-5; 9201-5E; 9202; 9203; 9204-1; 9204-2	F	4	1	9204-2E; 9204-4; 9206; 9208; 9212; 9215; 9219; 9401-1; 9404-16	F	4	1	9404-20; 9404-5; 9420; 9709; 9720-13; 9720-16; 9720-20; 9720-6; 9720-8	F	4	1	9723-25; 9731; 9738; 9995	<input type="checkbox"/>
D	4	1	9401-1; 9404-5; 9720-2; 9767-13; 9767-4																									
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CAS <u>000067561</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHANOL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>F</td><td>4</td><td>2</td><td>9201-5; 9201-5N; 9204-4; 9206; 9212; 9215; 9404-5; 9709; 9712; 9720-20</td></tr><tr><td>F</td><td>4</td><td>2</td><td>9720-41; 9720-6</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2; 9204-3; 9204-4; 9207; 9208</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9210; 9211; 9212; 9215; 9220; 9224; 9401-1; 9706-1; 9706-2; 9720-2</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9720-20; 9731; 9737; 9769; 9995; UVSPF</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9111; 9201-2; 9201-5E; 9202; 9203; 9204-1; 9206; 9208; 9211; 9212</td></tr></table>	F	4	2	9201-5; 9201-5N; 9204-4; 9206; 9212; 9215; 9404-5; 9709; 9712; 9720-20	F	4	2	9720-41; 9720-6	M	4	1	9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2; 9204-3; 9204-4; 9207; 9208	M	4	1	9210; 9211; 9212; 9215; 9220; 9224; 9401-1; 9706-1; 9706-2; 9720-2	M	4	1	9720-20; 9731; 9737; 9769; 9995; UVSPF	N	4	1	9111; 9201-2; 9201-5E; 9202; 9203; 9204-1; 9206; 9208; 9211; 9212	<input type="checkbox"/>
F	4	2	9201-5; 9201-5N; 9204-4; 9206; 9212; 9215; 9404-5; 9709; 9712; 9720-20																									
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Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

I, R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
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This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576 9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
Specific Information by Chemical	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
	FOR OFFICIAL USE ONLY ID # <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
Date Received <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>		
		Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>		

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Reporting Period From January 1 to December 31, 1999

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CAS <u>000067561</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHANOL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>C</td><td>n</td><td>P</td></tr><tr><td>T</td><td>T</td><td>r</td></tr><tr><td>y</td><td>e</td><td>e</td></tr><tr><td>p</td><td>m</td><td>s</td></tr><tr><td>e</td><td>p</td><td>s</td></tr></table> <u>N</u> <u>4</u> <u>1</u> 9219; 9401-1; 9401-3; 9404-5; 9420; 9704-1; 9710-3; 9712; 9714; 9720-2 <u>N</u> <u>4</u> <u>1</u> 9720-20; 9720-41; 9723-14; 9723-25; 9731; 9733-1; 9737; 9769; 9995 <u>N</u> <u>4</u> <u>1</u> UVSPF <u>N</u> <u>4</u> <u>2</u> 9723-25 <u>R</u> <u>4</u> <u>1</u> 9103; 9201-1; 9201-2; 9201-5; 9203; 9204-2E; 9210; 9211; 9212; 9215 <u>R</u> <u>4</u> <u>1</u> 9219; 9220; 9401-1; 9706-2; 9712; 9714; 9720-2; 9720-6; 9720-8	C	n	P	T	T	r	y	e	e	p	m	s	e	p	s	<input type="checkbox"/>			
C	n	P																				
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R	4	1																				
R	4	2																				
R	6	2																				
CAS <u>000071556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHYL CHLOROFORM</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td></tr><tr><td>F</td><td>4</td><td>1</td></tr><tr><td>F</td><td>4</td><td>1</td></tr><tr><td>F</td><td>4</td><td>1</td></tr><tr><td>F</td><td>4</td><td>2</td></tr><tr><td>F</td><td>4</td><td>2</td></tr></table> <u>D</u> <u>4</u> <u>1</u> 9204-2; 9720-21 <u>F</u> <u>4</u> <u>1</u> 9201-1; 9201-2; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2; 9204-4 <u>F</u> <u>4</u> <u>1</u> 9206; 9208; 9215; 9219; 9401-3; 9420; 9610; 9712; 9714; 9720-13 <u>F</u> <u>4</u> <u>1</u> 9720-16; 9720-20; 9720-6; 9720-8; 9723-25; 9731; 9737; 9995; 9998 <u>F</u> <u>4</u> <u>2</u> 9201-1; 9201-3; 9201-5; 9202; 9204-1; 9204-2; 9204-2E; 9204-3; 9204-4 <u>F</u> <u>4</u> <u>2</u> 9206; 9208; 9212; 9219; 9401-1; 9401-3; 9404-1; 9704-1; 9714; 9720-13	D	4	1	F	4	1	F	4	1	F	4	1	F	4	2	F	4	2	<input type="checkbox"/>
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Tier Two

Emergency
and
hazardous
chemical
inventorySpecific
information
on chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*Street Bear Creek RoadCity Oak Ridge County Anderson State TN Zip 37831SIC Code 3499Dun & Brad
Number - - FOR
OFFICIAL
USE
ONLY

ID #

Date Received

Owner/Operator Name

Name U.S. Department of EnergyPhone (865) 576-9850Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift Superintendent

Title

Phone (865) 574-717224 Hr. Phone (865) 574-7172Name DOE Emergency Response Center

Title

Phone (865) 576-100524 Hr. Phone (865) 576-1005

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Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional																								
CAS <u>000071556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHYL CHLOROFORM (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>F</td><td>4</td><td>2</td><td>9720-16; 9720-20; 9720-41; 9720-6; 9731; 9737; 9811-1; 9983-BK; 9995</td></tr><tr><td>F</td><td>4</td><td>2</td><td>9998</td></tr><tr><td>L</td><td>4</td><td>2</td><td>9202</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9204-1; 9769; 9995; UVSPF</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9113; 9202; 9204-2E; 9215; 9401-3; 9404-1; 9723-25; 9998</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9201-5; 9203; 9204-1; 9212; 9215; 9420; 9714; 9769</td></tr></table>	F	4	2	9720-16; 9720-20; 9720-41; 9720-6; 9731; 9737; 9811-1; 9983-BK; 9995	F	4	2	9998	L	4	2	9202	M	4	1	9202; 9203; 9204-1; 9769; 9995; UVSPF	N	4	1	9113; 9202; 9204-2E; 9215; 9401-3; 9404-1; 9723-25; 9998	R	4	1	9201-1; 9201-3; 9201-5; 9203; 9204-1; 9212; 9215; 9420; 9714; 9769	<input type="checkbox"/>
F	4	2	9720-16; 9720-20; 9720-41; 9720-6; 9731; 9737; 9811-1; 9983-BK; 9995																									
F	4	2	9998																									
L	4	2	9202																									
M	4	1	9202; 9203; 9204-1; 9769; 9995; UVSPF																									
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R	4	1	9201-1; 9201-3; 9201-5; 9203; 9204-1; 9212; 9215; 9420; 9714; 9769																									
CAS <u>000071556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>METHYL CHLOROFORM (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>R</td><td>4</td><td>1</td><td>9995; UVSPF</td></tr><tr><td>R</td><td>4</td><td>2</td><td>9202; 9737</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>	R	4	1	9995; UVSPF	R	4	2	9202; 9737																	<input type="checkbox"/>
R	4	1	9995; UVSPF																									
R	4	2	9202; 9737																									
CAS <u>007440020</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NICKEL AND NICKEL COMPOUNDS</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td><td>9204-4 / 2nd Floor / Plating Shop; 9205; 9720-8</td></tr><tr><td>F</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9203; 9208</td></tr><tr><td>J</td><td>4</td><td>1</td><td>9204-4 / 2nd Floor / Plating Shop; 9720-2; 9720-50; 9831</td></tr><tr><td>K</td><td>4</td><td>1</td><td>9212; 9401-3</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9204-3; 9995; UVSPF</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9203; 9204-3; 9204-4 / 2nd Floor / Plating Shop</td></tr></table>	D	4	1	9204-4 / 2nd Floor / Plating Shop; 9205; 9720-8	F	4	1	9201-1; 9201-3; 9203; 9208	J	4	1	9204-4 / 2nd Floor / Plating Shop; 9720-2; 9720-50; 9831	K	4	1	9212; 9401-3	M	4	1	9202; 9203; 9204-3; 9995; UVSPF	N	4	1	9203; 9204-3; 9204-4 / 2nd Floor / Plating Shop	<input type="checkbox"/>
D	4	1	9204-4 / 2nd Floor / Plating Shop; 9205; 9720-8																									
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K	4	1	9212; 9401-3																									
M	4	1	9202; 9203; 9204-3; 9995; UVSPF																									
N	4	1	9203; 9204-3; 9204-4 / 2nd Floor / Plating Shop																									

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.I, Ed R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	Optional
CAS <u>007440020</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NICKEL AND NICKEL COMPOUND</u> DS (cont'd) Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	R 4 1 9201-5; 9204-3; 9212; 9720-2; 9720-8 <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	O P T
CAS <u>007440031</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NIObIUM METAL</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	D 4 1 9202 E 4 1 9202 F 4 1 9202 J 4 1 9202 K 4 1 9201-5; 9202; 9401-3; 9624 L 4 1 9831	O P T
CAS <u>007440031</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NIObIUM METAL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	M 4 1 9202; 9203; 9204-3; 9995; UVSPF N 4 1 9202; 9203; 9995 R 4 1 9201-1; 9202; 9206; 9212; 9401-3; 9420; 9703-15; 9709; 9720-33; 9720-6 R 4 1 9723-25; 9737; 9738; 9831; 9995; 9998 <u> </u> <u> </u>	O P T

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two
Emergency
and
Hazardous
Chemical
InventorySpecific
Information
on Chemical

Facility Identification

Name US DOE Lockheed Martin Energy Systems Y-12 Plant*Street Bear Creek RoadCity Oak Ridge County Anderson State TN Zip 37831SIC Code 3499 Dun & Brad Number - - FOR
OFFICIAL
USE
ONLYID # Date Received

Owner/Operator Name

Name U.S. Department of Energy Phone (865) 576 9850Mail Address P.O. Box 2001, Oak Ridge, TN 37831

Emergency Contact

Name Plant Shift SuperintendentTitle Phone (865) 574-717224 Hr. Phone (865) 574-7172Name DOE Emergency Response CenterTitle Phone (865) 576-100524 Hr. Phone (865) 576-1005☐ Check if information below is identical to the information submitted last year.

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

Chemical Description

Physical
and Health
Hazards
(check all that apply)

Inventory

C
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T
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p
e
P
r
e
s
sStorage Codes and Locations
(Non-Confidential)

Storage Locations

O
P
ICAS 007697372 Trade Secret ☐Chem. Name NITRIC ACID

Check all that apply:

☐ Pure ☒ Mix ☐ Solid ☒ Liquid ☐ Gas ☒ EHSEHS Name NITRIC ACID☐ Fire
☐ Sudden Release of Pressure
☒ Reactivity
☒ Immediate (acute)
☒ Delayed (chronic)☐ 0 ☐ 4 Max. Daily Amount (code)
☐ 0 ☐ 4 Avg. Daily Amount (code)
☐ 3 ☐ 6 ☐ 5 No. of Days On-Site (days)

A	4	1	9206; 9815
C	4	1	9206; 9206 / 2nd Floor / Room 100E; 9212 / B-1 Wing / Penthouse
D	4	1	9204-3; 9204-3 / 2nd Floor; 9731; UVSPF
E	4	1	9202
F	4	1	9212
M	4	1	9201-5 / 2nd Floor; 9201-5N / 1st Floor / Plating Shop; 9202; 9203

CAS 007697372 Trade Secret ☐Chem. Name NITRIC ACID (cont'd)

Check all that apply:

☐ Pure ☒ Mix ☐ Solid ☒ Liquid ☐ Gas ☒ EHSEHS Name NITRIC ACID☐ Fire
☐ Sudden Release of Pressure
☒ Reactivity
☒ Immediate (acute)
☒ Delayed (chronic)☐ 0 ☐ 4 Max. Daily Amount (code)
☐ 0 ☐ 4 Avg. Daily Amount (code)
☐ 3 ☐ 6 ☐ 5 No. of Days On-Site (days)

M	4	1	9204-2E / 3rd Floor / Room 316; 9204-3; 9204-3 / 1st Floor
M	4	1	9204-4 / 2nd Floor / Plating Shop; 9205
M	4	1	9207 / 1st Floor / Room 7-1006; 9212; 9212 / E Wing / Room 1021
M	4	1	9401-2 / Plating Shop / Annex; 9731; 9769; 9995; UVSPF
N	4	1	9202; 9203; 9212; 9731; 9766; 9769; 9995; UVSPF
P	4	1	9995

CAS 007697372 Trade Secret ☐Chem. Name NITRIC ACID (cont'd)

Check all that apply:

☐ Pure ☒ Mix ☐ Solid ☒ Liquid ☐ Gas ☒ EHSEHS Name NITRIC ACID☐ Fire
☐ Sudden Release of Pressure
☒ Reactivity
☒ Immediate (acute)
☒ Delayed (chronic)☐ 0 ☐ 4 Max. Daily Amount (code)
☐ 0 ☐ 4 Avg. Daily Amount (code)
☐ 3 ☐ 6 ☐ 5 No. of Days On-Site (days)

R	4	1	9204-1; 9204-2E; 9204-3; 9206; 9212; 9720-8; 9737; 9769; 9995; UVSPF
R	6	3	9995

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Name and official title of owner/operator OR owner/operator's authorized representative

Signature JRBDate signed

Optional Attachments

- ☐
- I have attached a site plan
-
- ☐
- I have attached a list of site coordinate abbreviations
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- ☐
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Revised June 1990

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576 9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>			
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>			

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Reporting Period From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	O P T												
CAS <u>007727</u> <u>379</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NITROGEN</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>A 7 2</td><td>9206; 9977-1</td></tr> <tr><td>C 4 2</td><td>9206</td></tr> <tr><td>J 4 1</td><td>9831</td></tr> <tr><td>K 4 2</td><td>9204-3</td></tr> <tr><td>L 4 1</td><td>9202; 9203; 9204-2E; 9206; 9624; 9709; 9831; UVSPF</td></tr> <tr><td>L 4 2</td><td>9104-5; 9114; 9201-1; 9201-2; 9201-2 / WELD SHOPS; 9201-2 / Weld</td></tr> </table>	A 7 2	9206; 9977-1	C 4 2	9206	J 4 1	9831	K 4 2	9204-3	L 4 1	9202; 9203; 9204-2E; 9206; 9624; 9709; 9831; UVSPF	L 4 2	9104-5; 9114; 9201-1; 9201-2; 9201-2 / WELD SHOPS; 9201-2 / Weld	<input type="checkbox"/>
A 7 2	9206; 9977-1															
C 4 2	9206															
J 4 1	9831															
K 4 2	9204-3															
L 4 1	9202; 9203; 9204-2E; 9206; 9624; 9709; 9831; UVSPF															
L 4 2	9104-5; 9114; 9201-1; 9201-2; 9201-2 / WELD SHOPS; 9201-2 / Weld															
CAS <u>007727</u> <u>379</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NITROGEN (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>L 4 2</td><td>9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9206; 9215; 9401-1</td></tr> <tr><td>L 4 2</td><td>9401-2; 9401-5; 9420; 9703-15; 9712; 9714; 9720-19; 9723-16; 9735</td></tr> <tr><td>L 4 2</td><td>9737; 9738; 9766; 9769; 9808; 9831; 9989; 9990; 9995; 9998; UVSPF</td></tr> <tr><td>L 5 2</td><td>9995</td></tr> <tr><td>L 6 2</td><td>9401-1</td></tr> <tr><td>L 7 2</td><td>9204-3; 9206; 9212</td></tr> </table>	L 4 2	9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9206; 9215; 9401-1	L 4 2	9401-2; 9401-5; 9420; 9703-15; 9712; 9714; 9720-19; 9723-16; 9735	L 4 2	9737; 9738; 9766; 9769; 9808; 9831; 9989; 9990; 9995; 9998; UVSPF	L 5 2	9995	L 6 2	9401-1	L 7 2	9204-3; 9206; 9212	<input type="checkbox"/>
L 4 2	9201-3; 9201-5; 9202; 9203; 9204-2; 9204-2E; 9206; 9215; 9401-1															
L 4 2	9401-2; 9401-5; 9420; 9703-15; 9712; 9714; 9720-19; 9723-16; 9735															
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L 5 2	9995															
L 6 2	9401-1															
L 7 2	9204-3; 9206; 9212															
CAS <u>007727</u> <u>379</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NITROGEN (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>05</u> Max. Daily Amount (code) <u>05</u> Avg. Daily Amount (code) <u>365</u> No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>M 4 1</td><td>UVSPF</td></tr> <tr><td>N 4 1</td><td>9202</td></tr> <tr><td>R 4 1</td><td>9201-1; 9202; 9215; 9401-3; 9703-15; 9709; 9737; 9738; UVSPF</td></tr> <tr><td>R 4 2</td><td>9204-4; 9995</td></tr> <tr><td>R 5 2</td><td>9714; 9737; 9831</td></tr> <tr><td>R 6 2</td><td>9204-1</td></tr> </table>	M 4 1	UVSPF	N 4 1	9202	R 4 1	9201-1; 9202; 9215; 9401-3; 9703-15; 9709; 9737; 9738; UVSPF	R 4 2	9204-4; 9995	R 5 2	9714; 9737; 9831	R 6 2	9204-1	<input type="checkbox"/>
M 4 1	UVSPF															
N 4 1	9202															
R 4 1	9201-1; 9202; 9215; 9401-3; 9703-15; 9709; 9737; 9738; UVSPF															
R 4 2	9204-4; 9995															
R 5 2	9714; 9737; 9831															
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Revised June 1990

Tier Two <small>Emergency and Hazardous Chemical Inventory</small>	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title _____ Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title _____ Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	
<small>Specific Information by Chemical</small>	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>			
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>			

Important: Read all instructions before completing form	Reporting Period From January 1 to December 31, <u>1999</u>	<input type="checkbox"/> Check if information below is identical to the information submitted last year.
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Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	C n T y p e P r e s s u r e	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O p t i o n a l
CAS <u>007727</u> <u>37</u> <u>9</u> Trade Secret <input type="checkbox"/> Chem. Name <u>NITROGEN (cont'd)</u> <small>Check all that apply</small> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>5</u> Max. Daily Amount (code) <u>0</u> <u>5</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>R</u> <u>7</u> <u>1</u> 9215A; 9720-2; 9977-1 <u>R</u> <u>7</u> <u>2</u> 9201-1; 9204-1; 9212; 9720-32; 9720-5 _____ _____ _____	<input type="checkbox"/>	
CAS <u>007782</u> <u>44</u> <u>7</u> Trade Secret <input type="checkbox"/> Chem. Name <u>OXYGEN</u> <small>Check all that apply</small> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>5</u> Max. Daily Amount (code) <u>0</u> <u>5</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>A</u> <u>7</u> <u>2</u> 9723-25; 9738 / Foundry; 9977-1 <u>L</u> <u>4</u> <u>2</u> 9114; 9201-1; 9201-2; 9201-3; 9201-5; 9202; 9203; 9204-1 <u>L</u> <u>4</u> <u>2</u> 9204-2 / Maintenance; 9204-2E; 9204-2E / 2nd Floor; 9204-3; 9204-4 <u>L</u> <u>4</u> <u>2</u> 9206; 9215 / M Wing; 9401-1; 9401-3; 9404-8; 9420; 9703-15; 9706-2 <u>L</u> <u>4</u> <u>2</u> 9709; 9709 / Weld Test Shop; 9710-2; 9714; 9720-6; 9720-8; 9731; 9737 <u>L</u> <u>4</u> <u>2</u> 9738; 9738 / Foundry; 9769; 9808; 9831; 9989; 9990; 9995	<input type="checkbox"/>	
CAS <u>007782</u> <u>44</u> <u>7</u> Trade Secret <input type="checkbox"/> Chem. Name <u>OXYGEN (cont'd)</u> <small>Check all that apply</small> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>5</u> Max. Daily Amount (code) <u>0</u> <u>5</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>L</u> <u>4</u> <u>2</u> 9995 / BASEMENT; 9998; UVSPF <u>R</u> <u>4</u> <u>2</u> 9204-4; 9215A; 9977-1 _____ _____ _____	<input type="checkbox"/>	

Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through <u>40</u> , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. <u>odd R. Butz</u> , Director Environment, Safety, Health and Quality Name and official title of owner/operator OR owner/operator's authorized representative		Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguard measures
Signature	Date signed _____	
This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.		

Tier Two Emergency and Hazardous Chemical Inventory	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
Specific Information on Chemical	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Own & Brand Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
	FOR OFFICIAL USE ONLY ID # <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
Date Received <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>		
Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>				

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional																								
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CAS <u> </u> Trade Secret <input type="checkbox"/> Chem. Name <u>PETROLEUM OIL (cont'd)</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>5</u> Max. Daily Amount (code) <u>0</u> <u>5</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<table border="1"> <tr><td>D</td><td>4</td><td>1</td><td>9720-8; 9727-4; 9731; 9737; 9767-1; 9767-11; 9767-13; 9767-3; 9767-8</td></tr> <tr><td>D</td><td>4</td><td>1</td><td>9808; 9998</td></tr> <tr><td>E</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9202; 9204-4; 9212; 9404-5; 9714 / TSD Garage; 9720-15</td></tr> <tr><td>E</td><td>4</td><td>1</td><td>9720-2; 9720-6; 9977-1</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9104-5; 9114; 9201-1; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2</td></tr> <tr><td>F</td><td>4</td><td>1</td><td>9204-2E; 9204-3; 9204-4; 9206; 9207; 9208; 9212 / A Wing</td></tr> </table>	D	4	1	9720-8; 9727-4; 9731; 9737; 9767-1; 9767-11; 9767-13; 9767-3; 9767-8	D	4	1	9808; 9998	E	4	1	9201-1; 9201-3; 9202; 9204-4; 9212; 9404-5; 9714 / TSD Garage; 9720-15	E	4	1	9720-2; 9720-6; 9977-1	F	4	1	9104-5; 9114; 9201-1; 9201-3; 9201-5; 9202; 9203; 9204-1; 9204-2	F	4	1	9204-2E; 9204-3; 9204-4; 9206; 9207; 9208; 9212 / A Wing	<input type="checkbox"/>
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Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

☐ I have attached a site plan☐ I have attached a list of site coordinate abbreviations☐ I have attached a description of dikes and other safeguard measures

Revised June 1990

Tier Two Emergency and Hazardous Chemical Inventory Specific information to Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3</u> <u>4</u> <u>9</u> <u>9</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
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CAS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Trade Secret <input type="checkbox"/> Chem. Name <u>PETROLEUM OIL (cont'd)</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name _____	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="text"/> <input type="text"/> Max. Daily Amount (code) <input type="text"/> <input type="text"/> Avg. Daily Amount (code) <input type="text"/> <input type="text"/> No. of Days On-Site (days)	<table border="1"> <tr><td>R</td><td>4</td><td>1</td><td>9103; 9113; 9201-1; 9201-2; 9201-3; 9201-5; 9201-5N; 9202; 9203</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206; 9208; 9212; 9215; 9219</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9401-3; 9404-5; 9404-8; 9420; 9610-2; 9703-15; 9704-1; 9709; 9712</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9714; 9720-13; 9720-15; 9720-16; 9720-2; 9720-20; 9720-21; 9720-6</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9720-8; 9723-25; 9725; 9737; 9738; 9744; 9766; 9767-13; 9767-4; 9831</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9983-BK; 9998</td></tr> </table>	R	4	1	9103; 9113; 9201-1; 9201-2; 9201-3; 9201-5; 9201-5N; 9202; 9203	R	4	1	9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206; 9208; 9212; 9215; 9219	R	4	1	9401-3; 9404-5; 9404-8; 9420; 9610-2; 9703-15; 9704-1; 9709; 9712	R	4	1	9714; 9720-13; 9720-15; 9720-16; 9720-2; 9720-20; 9720-21; 9720-6	R	4	1	9720-8; 9723-25; 9725; 9737; 9738; 9744; 9766; 9767-13; 9767-4; 9831	R	4	1	9983-BK; 9998
R	4	1	9103; 9113; 9201-1; 9201-2; 9201-3; 9201-5; 9201-5N; 9202; 9203																								
R	4	1	9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9206; 9208; 9212; 9215; 9219																								
R	4	1	9401-3; 9404-5; 9404-8; 9420; 9610-2; 9703-15; 9704-1; 9709; 9712																								
R	4	1	9714; 9720-13; 9720-15; 9720-16; 9720-2; 9720-20; 9720-21; 9720-6																								
R	4	1	9720-8; 9723-25; 9725; 9737; 9738; 9744; 9766; 9767-13; 9767-4; 9831																								
R	4	1	9983-BK; 9998																								

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

And R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations☐ I have attached a description of dikes and other safeguard measures.

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period

From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O P I
CAS <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> Trade Secret <input type="checkbox"/> Chem. Name <u>PETROLEUM OIL (cont'd)</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>0</u> <u>5</u> Avg. Daily Amount (code) <u>0</u> <u>5</u> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	C n P T T r y e e p m s e p s R <u>4</u> <u>2</u> <u>9404-1</u> <u> </u> <u> </u> <u> </u> <u> </u>	<input type="checkbox"/>
CAS <u>0</u> <u>0</u> <u>9</u> <u>0</u> <u>0</u> <u>2</u> <u>8</u> <u>8</u> <u>4</u> Trade Secret <input type="checkbox"/> Chem. Name <u>POLYETHYLENE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>0</u> <u>4</u> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	F <u>4</u> <u>1</u> <u>9202</u> K <u>4</u> <u>1</u> <u>9201-1; 9201-2; 9203; 9204-2E; 9215; 9420; 9703-15; 9704-1; 9720-15</u> K <u>4</u> <u>1</u> <u>9720-41; 9720-6; 9720-8; 9737; 9831; 9995</u> M <u>4</u> <u>1</u> <u>9202; 9995</u> N <u>4</u> <u>1</u> <u>9202; 9203; 9204-2E; 9215; 9995</u> R <u>4</u> <u>1</u> <u>9114; 9201-1; 9201-2; 9201-3; 9201-5; 9204-1; 9204-4; 9401-3; 9703-15</u>	<input type="checkbox"/>
CAS <u>0</u> <u>0</u> <u>9</u> <u>0</u> <u>0</u> <u>2</u> <u>8</u> <u>8</u> <u>4</u> Trade Secret <input type="checkbox"/> Chem. Name <u>POLYETHYLENE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>0</u> <u>4</u> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	R <u>4</u> <u>1</u> <u>9710-2; 9712; 9714; 9720-15; 9720-20; 9720-32; 9720-6; 9720-8; 9737</u> R <u>4</u> <u>1</u> <u>9831; 9983-24; 9998</u> <u> </u> <u> </u> <u> </u> <u> </u>	<input type="checkbox"/>

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

I am R. Butz, Director Environment, Safety, Health and Quality

I am the same and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

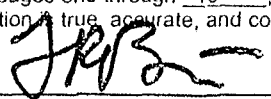
- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two <small>Emergency and Hazardous Chemical Inventory</small>	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
<small>Specific Information Chemical</small>	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
			Name <u>DOE Emergency Response Center</u> Title <u> </u>	
			Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form Reporting Period From January 1 to December 31, 1999 ☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	Storage Codes and Locations <small>(Non-Confidential)</small> <i>Storage Locations</i>	O P I																								
CAS <u>065997151</u> Trade Secret <input type="checkbox"/> Chem. Name <u>PORTLAND CEMENT</u> <small>Check all that apply</small> <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input checked="" type="checkbox"/> No. of Days On-Site (days) <u>3 6 5</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>C</td><td>4</td><td>1</td><td>9202; 9404-20; 9420; 9720-50; 9720-8; 9723-25; 9731; 9831; 9983-BK</td></tr> <tr><td>T</td><td>4</td><td>1</td><td>9995</td></tr> <tr><td>y</td><td>4</td><td>1</td><td>9205; 9401-3; 9404-20; 9404-5; 9420; 9616-7; 9720-50; 9720-8; 9723-25</td></tr> <tr><td>e</td><td>4</td><td>1</td><td>9731; 9831; 9998</td></tr> <tr><td>p</td><td>4</td><td>1</td><td>9720-50; UVSPF</td></tr> <tr><td>e</td><td>4</td><td>1</td><td>9202</td></tr> </table>	C	4	1	9202; 9404-20; 9420; 9720-50; 9720-8; 9723-25; 9731; 9831; 9983-BK	T	4	1	9995	y	4	1	9205; 9401-3; 9404-20; 9404-5; 9420; 9616-7; 9720-50; 9720-8; 9723-25	e	4	1	9731; 9831; 9998	p	4	1	9720-50; UVSPF	e	4	1	9202	□
C	4	1	9202; 9404-20; 9420; 9720-50; 9720-8; 9723-25; 9731; 9831; 9983-BK																									
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p	4	1	9720-50; UVSPF																									
e	4	1	9202																									
CAS <u>065997151</u> Trade Secret <input type="checkbox"/> Chem. Name <u>PORTLAND CEMENT (cont'd)</u> <small>Check all that apply</small> <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input checked="" type="checkbox"/> No. of Days On-Site (days) <u>3 6 5</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-3; 9201-5; 9204-1; 9204-4; 9215; 9404-20; 9404-8; 9420</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9720-50; 9731; 9737; 9831; 9995; UVSPF</td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	R	4	1	9201-1; 9201-3; 9201-5; 9204-1; 9204-4; 9215; 9404-20; 9404-8; 9420	R	4	1	9720-50; 9731; 9737; 9831; 9995; UVSPF																	□
R	4	1	9201-1; 9201-3; 9201-5; 9204-1; 9204-4; 9215; 9404-20; 9404-8; 9420																									
R	4	1	9720-50; 9731; 9737; 9831; 9995; UVSPF																									
CAS <u>000584087</u> Trade Secret <input type="checkbox"/> Chem. Name <u>POTASSIUM CARBONATE</u> <small>Check all that apply</small> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input checked="" type="checkbox"/> No. of Days On-Site (days) <u>3 6 5</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>I</td><td>4</td><td>1</td><td>9202; 9204-4; 9215</td></tr> <tr><td>K</td><td>4</td><td>1</td><td>9202</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9204-4</td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	I	4	1	9202; 9204-4; 9215	K	4	1	9202	R	4	1	9204-4													□
I	4	1	9202; 9204-4; 9215																									
K	4	1	9202																									
R	4	1	9204-4																									

Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through <u>40</u> , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I, <u>Ed R. Butz</u> , Director Environment, Safety, Health and Quality Name and official title of owner/operator OR owner/operator's authorized representative Signature <u></u> Date signed <u> </u>	Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguard measures
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Tier Two Emergency and Hazardous Chemical Inventory Specific Information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Reporting Period

From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O P T
CAS <u>0000151508</u> Trade Secret <input type="checkbox"/> Chem. Name <u>POTASSIUM CYANIDE</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS EHS Name <u>POTASSIUM CYANIDE</u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>02</u> Avg. Daily Amount (code) <u>02</u> No. of Days On-Site (days) <u>365</u>	C 4 1 9201-5N J 4 1 9706-2 / 1st Floor M 4 1 9204-3 / 1st Floor; 9401-4 N 4 1 9202 R 4 1 9995 / 1st Floor	<input type="checkbox"/>
CAS <u>0000057556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>PROPYLENE GLYCOL</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	C 4 1 9215 D 4 1 9201-5E; 9201-5N; 9206; 9212 / A Wing; 9212 / B-1 Wing; 9215 / M Wing D 4 1 9401-3; 9720-2; 9767-4; 9805; 9805-1; 9998 F 4 1 9201-2; 9202; 9202 / 3rd Floor; 9203; 9204-2E; 9206; 9208; 9215 F 4 1 9401-3; 9404-5; 9703-15; 9712; 9720-8; 9737; 9831; 9983-83; 9998 F 4 2 9710-3; 9720-41; 9811-1	<input type="checkbox"/>
CAS <u>0000057556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>PROPYLENE GLYCOL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	Max. Daily Amount (code) <u>04</u> Avg. Daily Amount (code) <u>04</u> No. of Days On-Site (days) <u>365</u>	M 4 1 9202; 9202 / 2nd Floor; 9203; 9709; 9995; UVSPF N 4 1 9103; 9104-5; 9109; 9113; 9115; 9119; 9201-1; 9201-2; 9201-3; 9202 N 4 1 9202 / 1st Floor; 9203; 9204-1; 9204-2; 9204-2E; 9207; 9208; 9212 N 4 1 9215; 9219; 9420; 9704-1; 9704-2; 9706-1; 9706-2; 9710-2; 9710-3 N 4 1 9711-1; 9712; 9714; 9720-13; 9720-16; 9720-20; 9720-41; 9720-5; 9720-6 N 4 1 9723-14; 9723-16; 9723-19; 9723-21; 9723-25; 9723-31; 9728; 9731	<input type="checkbox"/>

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 I, odd R. Butz, Director Environment, Safety, Health and Quality

I am the owner and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

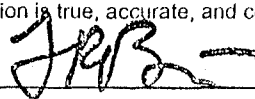
Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two <small>Emergency and hazardous chemical inventory</small>	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
<small>Specific information for chemical</small>	FOR OFFICIAL USE ONLY		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
	ID # <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>	
	Date Received <u> </u>		Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	C n T y p e P r e s s e s	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	O p t i o n a l
CAS <u>000057556</u> Trade Secret <input type="checkbox"/> Chem. Name <u>PROPYLENE GLYCOL (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>N</u> <u>4</u> <u>1</u> <u>R</u> <u>4</u> <u>1</u> <u>R</u> <u>4</u> <u>1</u> 	9733-1; 9736; 9737; 9764; 9769; 9831; 9983-44; 9995; 9998; UVSPF 9113; 9201-1; 9202; 9204-1; 9204-2E; 9204-4; 9206; 9212; 9215; 9720-2 9720-21; 9720-8; 9737; 9739; 9998 	<input type="checkbox"/>
CAS <u>014808607</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SILICA, CRYSTALLINE-QUARTZ</u> <u>Z</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>D</u> <u>4</u> <u>1</u> <u>E</u> <u>4</u> <u>1</u> <u>F</u> <u>4</u> <u>1</u> <u>F</u> <u>4</u> <u>1</u> <u>F</u> <u>4</u> <u>1</u> <u>F</u> <u>4</u> <u>1</u>	9202; 9731 9404-5; 9720-15 9104-5; 9114; 9201-1; 9201-3; 9202; 9203; 9204-1; 9204-2; 9204-2E 9204-3; 9204-4; 9206; 9212; 9215; 9401-3; 9404-20; 9404-5; 9420 9703-15; 9720-13; 9720-15; 9720-16; 9720-6; 9720-8; 9723-25; 9731 9744; 9767-4; 9831; 9983; 9983-BK	<input type="checkbox"/>
CAS <u>014808607</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SILICA, CRYSTALLINE-QUARTZ</u> <u>Z (cont'd)</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<u>0</u> <u>4</u> Max. Daily Amount (code) <u>0</u> <u>4</u> Avg. Daily Amount (code) <u>3</u> <u>6</u> <u>5</u> No. of Days On-Site (days)	<u>F</u> <u>4</u> <u>2</u> <u>J</u> <u>4</u> <u>1</u> <u>J</u> <u>4</u> <u>1</u> <u>K</u> <u>4</u> <u>1</u> <u>M</u> <u>4</u> <u>1</u> <u>N</u> <u>4</u> <u>1</u>	9204-4; 9995 9201-1; 9202; 9206; 9401-3; 9404-20; 9404-5; 9420; 9720-50; 9720-6 9720-8; 9723-25; 9731; 9831; 9998 9202; 9401-3; 9712; 9720-50; 9720-52; 9720-6 9202; 9204-3; 9208; 9995 9201-1; 9202; 9203; 9204-3; 9205; 9206; 9401-3; 9712; 9995; UVSPF	<input type="checkbox"/>

Declaration (Read and sign after completing all sections) I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through <u>40</u> , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am <u>David R. Butz</u> , Director Environment, Safety, Health and Quality I am the owner and official title of owner/operator OR owner/operator's authorized representative This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.		Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguard measures
Signature <u></u> Date signed <u> </u>		

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Reporting Period From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>	C n t y p e	P r e s e n t																		
CAS <u>014808</u> <u>607</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SILICA, CRYSTALLINE-QUART</u> Z (cont'd) Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days) <u>0</u> <u>4</u> <u>0</u> <u>4</u> <u>3</u> <u>6</u> <u>5</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>R</td><td>4</td><td>1</td></tr> <tr><td>R</td><td>4</td><td>1</td></tr> <tr><td>R</td><td>4</td><td>1</td></tr> <tr><td>R</td><td>4</td><td>1</td></tr> </table> 9201-1; 9201-2; 9201-3; 9201-4; 9201-5; 9202; 9203; 9204-1; 9204-3 9204-4; 9206; 9212; 9215; 9215A; 9401-3; 9404-20; 9404-5; 9404-8; 9420 9703-15; 9712; 9714; 9720-15; 9720-16; 9720-2; 9720-21; 9720-3 9720-41; 9720-50; 9720-6; 9720-8; 9731; 9737; 9738; 9744; 9831; 9995	R	4	1	R	4	1	R	4	1	R	4	1								
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Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
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H	4	1	9993																																																																	
J	4	1	9202; 9731																																																																	
K	4	1	9104-5; 9202; 9211																																																																	
M	4	1	9202; 9203; 9204-3; 9210; 9211; 9401-3; 9720-32; 9731; 9995; UVSPF																																																																	

Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through <u>40</u> , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. Todd R. Butz, Director Environment, Safety, Health and Quality Name and official title of owner/operator OR owner/operator's authorized representative Signature <u>JRB</u> Date signed <u> </u>	Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguard measures
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*This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Revised June 1990

Tier Two Emergency and Hazardous Chemical Inventory Specific Information by Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u> <div style="display: flex; justify-content: space-between;"> <div>FOR OFFICIAL USE ONLY</div> <div>ID # <u> </u> Date Received <u> </u></div> </div>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u> Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	
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Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory (check all that apply)	Storage Codes and Locations (Non-Confidential) <i>Storage Locations</i>
CAS <u>007647145</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM CHLORIDE (cont'd)</u> <div style="display: flex; justify-content: space-between;"> <div>Check all that apply</div> <div> <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	<div style="display: flex;"> <div style="width: 50px; text-align: center;"> C n T T r e e p m s e p s </div> <div> N 4 1 9113; 9202; 9203; 9204-1; 9204-3; 9205; 9206; 9208; 9210; 9211; 9215 N 4 1 9224; 9401-3; 9720-3; 9720-6; 9720-8; 9723-16; 9723-27; 9723-28; 9731 N 4 1 9766; 9769; 9995; UVSPF N 5 1 9211 R 4 1 9201-1; 9210; 9211; 9224; 9401-1; 9401-3; 9737; 9738; 9993; 9995 </div> </div>
CAS <u>001310732</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYDROXIDE</u> <div style="display: flex; justify-content: space-between;"> <div>Check all that apply</div> <div> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	<div style="display: flex;"> <div style="width: 50px; text-align: center;"> A C D D D D E </div> <div> 4 1 9204-2 4 1 9404-18 4 1 9201-1; 9201-2; 9201-5N; 9204-2; 9204-4; 9206; 9401-2; 9409-10 4 1 9409-13; 9409-15; 9409-17; 9409-20; 9409-22; 9409-26; 9409-29; 9409-32 4 1 9720-13; 9720-41; 9720-8; 9805-1 4 1 9206; 9401-2 </div> </div>
CAS <u>001310732</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYDROXIDE (cont'd)</u> <div style="display: flex; justify-content: space-between;"> <div>Check all that apply</div> <div> <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS </div> </div> EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> Max. Daily Amount (code) <input type="checkbox"/> Avg. Daily Amount (code) <input type="checkbox"/> No. of Days On-Site (days) <u>3</u> <u>6</u> <u>5</u>	<div style="display: flex;"> <div style="width: 50px; text-align: center;"> F I J J K M </div> <div> 4 1 9109; 9204-2; 9204-3; 9720-15; 9728 4 1 9720-2 4 1 9103; 9107; 9201-1; 9201-2; 9204-2; 9204-3; 9401-3; 9710-2; 9710-3 4 1 9720-2; 9728; 9731; 9737 4 1 9111; 9204-4; 9720-13 4 1 9201-3; 9202; 9203; 9204-2; 9204-3; 9206; 9212; 9709; 9731; 9769; 9805 </div> </div>

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 40, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two Emergency and Hazardous Chemical Inventory Specific Information Chemical	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Reporting Period

From January 1 to December 31, 1999

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	C n T y p e P r e s s Storage Codes and Locations (Non-Confidential) Storage Locations	O p t																								
CAS <u>001310732</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYDROXIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS HS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1"><tr><td>M</td><td>4</td><td>1</td><td>9995; UVSPF</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9104-3; 9109; 9111; 9114; 9115; 9116; 9119; 9201-1; 9201-2; 9201-3</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9201-5; 9202; 9203; 9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9205</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9207; 9208; 9210; 9211; 9212; 9401-3; 9420; 9703-15; 9706-2; 9710-2</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9710-3; 9711-5; 9720-41; 9720-8; 9723-16; 9723-27; 9723-28; 9723-31</td></tr><tr><td>N</td><td>4</td><td>1</td><td>9731; 9769; 9811-1; 9818; 9995; 9998; UVSPF</td></tr></table>	M	4	1	9995; UVSPF	N	4	1	9104-3; 9109; 9111; 9114; 9115; 9116; 9119; 9201-1; 9201-2; 9201-3	N	4	1	9201-5; 9202; 9203; 9204-1; 9204-2; 9204-2E; 9204-3; 9204-4; 9205	N	4	1	9207; 9208; 9210; 9211; 9212; 9401-3; 9420; 9703-15; 9706-2; 9710-2	N	4	1	9710-3; 9711-5; 9720-41; 9720-8; 9723-16; 9723-27; 9723-28; 9723-31	N	4	1	9731; 9769; 9811-1; 9818; 9995; 9998; UVSPF	<input type="checkbox"/>
M	4	1	9995; UVSPF																									
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N	4	1	9207; 9208; 9210; 9211; 9212; 9401-3; 9420; 9703-15; 9706-2; 9710-2																									
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CAS <u>001310732</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYDROXIDE (cont'd)</u> Check all that apply: <input checked="" type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS HS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1"><tr><td>R</td><td>4</td><td>1</td><td>9201-1; 9201-2; 9201-3; 9202; 9204-1; 9204-3; 9204-4; 9207; 9212</td></tr><tr><td>R</td><td>4</td><td>1</td><td>9401-3; 9404-5; 9409-22; 9720-8; 9737; 9815; 9995; 9998; UVSPF</td></tr><tr><td>R</td><td>6</td><td>3</td><td>9201-2</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>	R	4	1	9201-1; 9201-2; 9201-3; 9202; 9204-1; 9204-3; 9204-4; 9207; 9212	R	4	1	9401-3; 9404-5; 9409-22; 9720-8; 9737; 9815; 9995; 9998; UVSPF	R	6	3	9201-2													<input type="checkbox"/>
R	4	1	9201-1; 9201-2; 9201-3; 9202; 9204-1; 9204-3; 9204-4; 9207; 9212																									
R	4	1	9401-3; 9404-5; 9409-22; 9720-8; 9737; 9815; 9995; 9998; UVSPF																									
R	6	3	9201-2																									
CAS <u>007681529</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYPOCHLORITE</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS HS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1"><tr><td>D</td><td>4</td><td>1</td><td>9404-10; 9409-13; 9409-15; 9409-17; 9409-20; 9409-22; 9409-26; 9409-29</td></tr><tr><td>D</td><td>4</td><td>1</td><td>9409-32; 9720-8</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9409-10; 9409-12; 9409-13; 9409-15; 9409-17; 9409-18; 9409-19; 9409-2</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9409-20; 9409-22; 9409-22E; 9409-23; 9409-24; 9409-26; 9409-29</td></tr><tr><td>E</td><td>4</td><td>1</td><td>9409-32; 9409-34; 9720-2</td></tr><tr><td>M</td><td>4</td><td>1</td><td>9202; 9203; 9731</td></tr></table>	D	4	1	9404-10; 9409-13; 9409-15; 9409-17; 9409-20; 9409-22; 9409-26; 9409-29	D	4	1	9409-32; 9720-8	E	4	1	9409-10; 9409-12; 9409-13; 9409-15; 9409-17; 9409-18; 9409-19; 9409-2	E	4	1	9409-20; 9409-22; 9409-22E; 9409-23; 9409-24; 9409-26; 9409-29	E	4	1	9409-32; 9409-34; 9720-2	M	4	1	9202; 9203; 9731	<input type="checkbox"/>
D	4	1	9404-10; 9409-13; 9409-15; 9409-17; 9409-20; 9409-22; 9409-26; 9409-29																									
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I am R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

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This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Tier Two <small>Emergency and Hazardous Chemical Inventory</small> <small>Specific Information by Chemical</small>	Facility Identification Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u> Street <u>Bear Creek Road</u> City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u> SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Owner/Operator Name Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u> Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	FOR OFFICIAL USE ONLY ID # <u> </u> Date Received <u> </u>		Emergency Contact Name <u>Plant Shift Superintendent</u> Title <u> </u> Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u> Name <u>DOE Emergency Response Center</u> Title <u> </u> Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

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Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	Storage Codes and Locations <small>(Non-Confidential)</small> <i>Storage Locations</i>	O P T																								
CAS <u>007681529</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM HYPOCHLORITE (cont'd)</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 6 <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>N</td><td>4</td><td>1</td><td>9111; 9114; 9201-3; 9201-4; 9202; 9203; 9204-1; 9204-3; 9210; 9211</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9420; 9703-15; 9704-1; 9706-2; 9710-2; 9710-3; 9711-5; 9720-41; 9720-8</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9723-27; 9723-28; 9723-31; 9731; 9769; 9995; 9998</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>Union Valley Facility</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9201-5N; 9204-2; 9204-4</td></tr> </table>	N	4	1	9111; 9114; 9201-3; 9201-4; 9202; 9203; 9204-1; 9204-3; 9210; 9211	N	4	1	9420; 9703-15; 9704-1; 9706-2; 9710-2; 9710-3; 9711-5; 9720-41; 9720-8	N	4	1	9723-27; 9723-28; 9723-31; 9731; 9769; 9995; 9998	N	4	1	Union Valley Facility	R	4	1	9201-5N; 9204-2; 9204-4	<input type="checkbox"/>				
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N	4	1	Union Valley Facility																									
R	4	1	9201-5N; 9204-2; 9204-4																									
CAS <u>007757837</u> Trade Secret <input type="checkbox"/> Chem. Name <u>SODIUM SULFITE ANHYDROUS</u> Check all that apply: <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS EHS Name <u> </u>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	<input type="checkbox"/> <input type="checkbox"/> 4 Max. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 4 Avg. Daily Amount (code) <input type="checkbox"/> <input type="checkbox"/> 6 <input type="checkbox"/> 5 No. of Days On-Site (days)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>E</td><td>4</td><td>1</td><td>9201-2; 9201-3; 9204-2; 9767-8</td></tr> <tr><td>J</td><td>4</td><td>1</td><td>9203; 9401-3</td></tr> <tr><td>K</td><td>4</td><td>1</td><td>9104-5</td></tr> <tr><td>M</td><td>4</td><td>1</td><td>9201-3; 9202; 9203; 9204-3; 9995</td></tr> <tr><td>N</td><td>4</td><td>1</td><td>9202; 9203; 9731; 9766; 9959</td></tr> <tr><td>R</td><td>4</td><td>1</td><td>9401-3; 9995</td></tr> </table>	E	4	1	9201-2; 9201-3; 9204-2; 9767-8	J	4	1	9203; 9401-3	K	4	1	9104-5	M	4	1	9201-3; 9202; 9203; 9204-3; 9995	N	4	1	9202; 9203; 9731; 9766; 9959	R	4	1	9401-3; 9995	<input type="checkbox"/>
E	4	1	9201-2; 9201-3; 9204-2; 9767-8																									
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Todd R. Butz, Director Environment, Safety, Health and Quality

Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

Optional Attachments

- ☐ I have attached a site plan
- ☐ I have attached a list of site coordinate abbreviations
- ☐ I have attached a description of dikes and other safeguard measures

Tier Two <small>Emergency and Hazardous Chemical Inventory</small>	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576 9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
	City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact	
	SIC Code <u>3499</u> Dun & Brad Number <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>	
<small>Specific Information Chemical</small>	FOR OFFICIAL USE ONLY		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>	
	ID # <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>	
	Date Received <u> </u>		Phone <u>(865) 576-1005</u> 24 Hr. Phone <u>(865) 576-1005</u>	

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 1999

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards <small>(check all that apply)</small>	Inventory	Storage Codes and Locations <small>(Non-Confidential)</small>	O P I																								
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Signature: Robert Butz Date signed:

Optional Attachments

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

Tier Two Emergency and Hazardous Chemical Inventory Specific information by Chemical	Facility Identification		Owner/Operator Name	
	Name <u>US DOE Lockheed Martin Energy Systems Y-12 Plant*</u>		Name <u>U.S. Department of Energy</u> Phone <u>(865) 576-9850</u>	
	Street <u>Bear Creek Road</u>		Mail Address <u>P.O. Box 2001, Oak Ridge, TN 37831</u>	
City <u>Oak Ridge</u> County <u>Anderson</u> State <u>TN</u> Zip <u>37831</u>		Emergency Contact		
SIC Code <u>3499</u> Dun & Brad Number <u> </u> - <u> </u> - <u> </u>		Name <u>Plant Shift Superintendent</u> Title <u> </u>		
FOR OFFICIAL USE ONLY		Phone <u>(865) 574-7172</u> 24 Hr. Phone <u>(865) 574-7172</u>		
ID # <u> </u>		Name <u>DOE Emergency Response Center</u> Title <u> </u>		
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Signature

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This report covers only the activities of Lockheed Martin Energy Systems, Inc., at the subject facility.

Distribution:

J. D. Bolling
J. M. Eaton/R. A. Evans
R. T. Ford
M. Gallahar, DOE-EOC
H. S. Hackler
J. J. Hummer, LMC
E. Irwin
M. E. Lemmings, DOE-ORO
R. W. Martin, DOE-ORO
J. D. Rothrock/B. E. Cochran, DOE-ORO
R. R. Smith
M. Vestal, TDEC
Y-12 Records Services (1)/DOE-OSTI (3)
Y-12 Plant Shift Superintendent
EC Document Center-RC