



**CONTRACTOR DECLARATION AND REPORTING FORM**  
**For Department of Homeland Security**  
**CHEMICALS OF INTEREST**

|                  |                    |
|------------------|--------------------|
| UW Project Name: | UW Project Number: |
|------------------|--------------------|

In accordance with Section 01 35 23, paragraph 1.8, the Contractor shall complete this Contractor Declaration and Reporting Form and submit it to the Owner prior to work being performed onsite. In addition, the Contractor shall ensure that each of its Subcontractors complete this form and submit it to the Contractor. The Contractor shall submit the completed forms for all of its Subcontractors to the Owner prior to their work being performed onsite. The Contractor or Subcontractor completing this form shall list all Chemicals of Interest to be used on the Project. For a complete list of all Chemicals of Interest which must be reported, refer to Appendix A, 6 CFR Part 27, or visit the following website address for the complete list: [http://www.dhs.gov/xlibrary/assets/chemsec\\_appendixa-chemicalofinterestlist.pdf](http://www.dhs.gov/xlibrary/assets/chemsec_appendixa-chemicalofinterestlist.pdf).

| Chemical of Interest | Product Name <sup>a</sup> | Manufacturer | Max Quantity Onsite <sup>b</sup> | Max Container Size |
|----------------------|---------------------------|--------------|----------------------------------|--------------------|
|                      |                           |              |                                  |                    |
|                      |                           |              |                                  |                    |
|                      |                           |              |                                  |                    |
|                      |                           |              |                                  |                    |
|                      |                           |              |                                  |                    |
|                      |                           |              |                                  |                    |

Notes:

- a. Name of product to be used onsite, which contains the Chemical of Interest  
b. Refers to the maximum quantity of the product which would be onsite at any given time.

☐ Check here if no Chemicals of Interest will be used on this Project or brought onsite throughout the course of the entire Project. This form must still be signed and submitted by the Contractor and each Subcontractor.

|  |
|--|
| _____                                      |
| Print Name of Authorized Individual        |
| _____                                      |
| Print Title                                |
| _____                                      |
| Print Contractor's or Subcontractor's Name |
| _____                                      |
| Signature of Authorized Individual         |
| _____                                      |
| Date of Signature                          |

**This form shall be completed and submitted to the Owner with the Pre-Job Submittals**