|  |  |  |
| --- | --- | --- |
| Hazardous Materials Inventory for UC Cooperative Extension, |       | County |
| Hazardous Materials Storage Location: |         | *(complete a separate form for each storage room/building)* |
| Name of Individual Maintaining Inventory: |         |  |
| Inventory Date: |       | Review Date: |       | Review Date: |       | Review Date: |       |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Product Name | Quantity *(Number of Containers)* | Current Amount | MaximumAmount | Units*(lbs/gals/ft3)* | Container Type*(metal/glass/**plastic/etc.)* | Hazardous Ingredient(s) |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |