

**APPENDIX A TO SAFETY CODE NO. 12
ARKANSAS WORKPLACE CHEMICAL LIST**

NAME OF EMPLOYER: _____

CONTACT PERSON: _____ **PHONE:** _____

WORKPLACE LOCATION: _____

MAILING ADDRESS: _____

CITY AND ZIP CODE: _____

List below each hazardous chemical used, generated, or stored in the workplace in an amount equal to or greater than fifty-five (55) gallons or five hundred (500) pounds. Fill in the appropriate information in each of the listed columns. If you have any questions contact the Arkansas Department of Labor at 682-4522.

Chemical Name or Common Name Used on the MSDS or the Container Label	CAS Number (if on the MSDS)	Location of the Chemical in the Workplace	Amount Present
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1. _____

2. _____

3. _____

4.

5.

6.

7.

8.

9.

10.

(If more space is needed use an additional form.)

Return the completed list to:

**Mike Watson
Division of Labor
Arkansas Dept of Labor and Licensing
Public Employee Right to Know
900 West Capitol Avenue, Suite 400
Little Rock, Arkansas 72201**