

**ENVIRONMENTAL PROTECTION AGENCY
TOXIC SUBSTANCES CONTROL ACT (TSCA) CERTIFICATION**

(1) Check appropriate box:

Blanket Certification

(Please complete items 2, 3, 4, 5, 6, 7, 8, 11,12,13, 14)

Individual Shipment

(Please complete items 2, 3, 4, 8, 9, 10, 11,12,13,14)

(2) EIN / SSN / Importer Number: _____

(3) Importer of Record Name: _____

(4) Importer of Records Address: _____

(5) Effective date: _____ (certification is valid until revoked or for up to one year from effective date)

(6) Foreign Supplier Name: _____

(7) Foreign Supplier Address: _____

(8) Item description: _____

(9) HS Code(s) _____

(10) Bill of Lading or Airway Bill Number _____

(11) Check appropriate certification statement

I certify that all chemicals or chemical substances in this shipment or these shipments comply with all applicable rules or order under TSCA and that I am not offering a chemical substance for entry in violation of TSCA or any applicable rule or order thereunder

I certify that all chemicals in this shipment or these shipments are not subject to TSCA

(12) IN WITNESS WHEREOF, the said _____ has caused
Importer of Record

(13) these presents to be sealed and signed _____ / _____
Signature Date

(14) _____ / _____
Print Name Capacity / Title