



Design Your Hazmat Storage Building

Company _____ Contact Name _____

Location _____ Customer ID # _____

Material Being Stored

Type of Material - (Flammables, Combustibles, Pesticides, Corrosives etc.) _____

If Flammables: Will you be storing/dispensing a Class 1A or Class 1B? ☐ Yes ☐ No

If Yes, then Explosion Relief may be required.

Container Type - (55 gallon drums, 5 gallon pails, totes, bags etc.) _____

Quantity of - Drums, pails or other containers _____

Fire-rating Requirements

☐ Non Fire-rated ☐ 2 Hour Fire-Rated ☐ 4 Hour Fire-Rated ☐ Not sure

Location

What is the distance from any other structure on your site where you plan to locate your hazmat storage building?

☐ 0 - 10 feet ☐ 10 to 30 feet ☐ 30+ feet ☐ other

If your building requires location indoors, please describe: _____

Temperature Control Requirements

☐ Heat ☐ Air Please list temperature(s) you must maintain _____

Do you require refrigeration or a freezer? ☐ Yes ☐ No

Electrical/Power Supply Requirements

☐ Explosion Proof ☐ Non Explosion Proof ☐ Other

VOLTAGE

☐ 120V ☐ 208V ☐ 240V ☐ 480V ☐ Single Phase ☐ Three Phase

Separation Requirements

Do you need to segregate any materials?

☐ Yes ☐ No If yes, please describe _____

Operational Requirements

Are you planning to work inside your building in the following ways? (please check)

- ☐ Mixing ☐ Dispensing ☐ Filling/Refilling ☐ Other

Material Handling Requirements

How would you transport your materials into and out of the storage building?

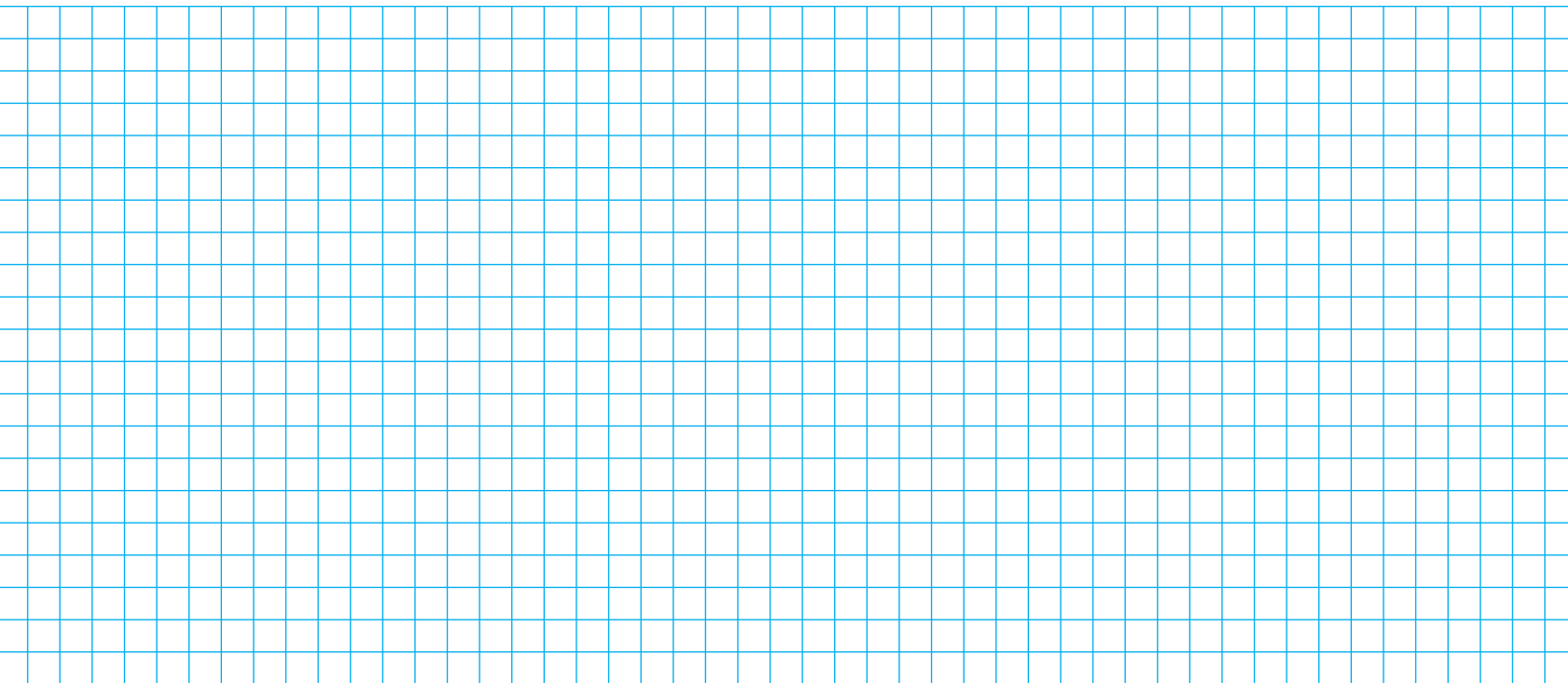
- ☐ Forklift ☐ Hand Truck ☐ Other

General Building Requirements

Please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Interior Lighting | <input type="checkbox"/> Sump Overflow Pipe & Cap |
| <input type="checkbox"/> Exterior Lighting | <input type="checkbox"/> Automatic Dry Chemical Fire Suppression System |
| <input type="checkbox"/> Electrical Outlets (interior) | <input type="checkbox"/> Safety Shower (with eye/face wash) |
| <input type="checkbox"/> Electrical Outlets (exterior) | <input type="checkbox"/> Eye & Face Wash Station |
| <input type="checkbox"/> Mechanical Ventilation | <input type="checkbox"/> Fire Sprinkler Hook Ups |
| <input type="checkbox"/> Loading Ramp(s) | <input type="checkbox"/> Drawings |
| <input type="checkbox"/> Shelving | <input type="radio"/> for records <input type="radio"/> for approvals <input type="radio"/> for permitting |
| <input type="checkbox"/> Remote Alarms (fire) | <input type="checkbox"/> State Approval or Inspection |
| <input type="checkbox"/> Spill or Leak Detection | |

If you would like, use this area to show us a sketch of what you envision for your building:



**To submit or review this form with a Sales Engineer, please contact the US Chemical Sales Office.
Phone: 1-800-233-1480 • Email: Chemicalinfo@uschemicalstorage.com • Fax: 1-800-295-1653**