

Section 4, 8(d), and 8(a) Webinar

December 12, 2013.

Office of Chemical Safety and Pollution Prevention

Agenda

- Speaker: Veronica Shortt, Information Management Division
- Welcome and Overview
- Section 4 highlights
 - Browser-based Application
 - Security
 - Roles
 - Industry Beta Testing
- Demo of CDX Login and Section 4 Web Tool
- Resources
- Questions and Answers

Highlights & Security

- Browser-based Application
- Submission of Section 4 facilitated via EPA's Central Data Exchange (CDX)
 - Enables companies to electronically submit data
 - Provides secure exchange of confidential business information (CBI) data
 - Improves security using digital encryption
 - All data is encrypted in transit to Federal Standards
 - Sensitive data is encrypted at rest to Federal Standards
 - All sensitive data remains encrypted at rest until it is behind at least 2-3 Firewalls



Roles & Responsibilities

- Primary Authorized Official (AO)
 - User who has the ability to authorize and sign a submission
 - Start a form
 - Edit/delete information on a form
 - Submit a form
 - Retrieve Copy of Record
 - Unlock a form for editing
 - Assign Supports
- Primary Support
 - Enter and edit information for in progress and unlocked forms



Demo of CDX Login and Section 4 Tool





Primary Authorized Official



CENTRAL DATA EXCHANGE

CDX Home

About CDX

Recent Announcements

Terms and Conditions

Helr

Central Data Exchange

Contact Us



Welcome

Welcome to the Environmental Protection Agency (EPA) Central Data Exchange (CDX) – the Agency's electronic reporting site. The Central Data Exchange concept has been defined as a central point which supplements EPA reporting systems by performing new and existing functions for receiving legally acceptable data in various formats, including consolidated and integrated data.

Warning Notice and Privacy Policy

Warning Notice

EPA's Central Data Exchange Registration procedure is part of a United States Environmental Protection Agency (EPA) computer system, which is for authorized use only. Unauthorized access or use of this computer system may subject violators to criminal, civil, and/or administrative action. All information on this computer system may be monitored, recorded, read, copied, and disclosed by and to authorized personnel for official purposes, including law enforcement. Access or use of this computer system by any person, whether authorized or unauthorized, constitutes consent to these terms.

Privacy Statement

EPA will use the personal identifying information which you provide for the expressed purpose of registration to the Central Data Exchange site and for updating and correcting information in internal EPA databases as necessary. The Agency will not make this information available for other purposes unless required by law. EPA does not sell or otherwise transfer personal information to an outside third party. [Federal Register: March 18, 2002 (Volume 67, Number 52)][Page 12010–12013].





CDX Home About CDX Recent Announcements Terms and Conditions FAQs Help Logged in as JOHNDOE9 (Log out) Central Data Exchange Contact Us Last Login: 11/19/2013 1:25:52 PM MvCDX Inbox My Profile Role Sponsorship **Submission History News and Updates** Services Manage Your Program Services No news/updates. Program Service Name Role(s) Primary Authorized Official CSPP: Submissions for Chemical Safety and Pesticide Programs Add Program Service

CDX Help Desk: 888-890-1995 | (970) 494-5500 for callers from Puerto Rico and Guam



CHEMICAL INFORMATION SUBMISSION SYSTEM



The software includes embedded help files and a downloadable user manual to guide you through the Section 4 submission process.

The Toxic Substances Control Act gives EPA authority to issue data development regulations that require manufacturers and processors of existing chemicals to test their chemicals for health and environmental effects. EPA has the broad authority under the law to issue:

Information collection regulations that require the submission of health and safety studies which are known or available to those who manufacture, process, or distribute in commerce specified chemicals; and regulations designed to gather information from manufacturers and processor about production/import volumes, chemical uses and methods of disposal, and the extent to which people and the environment are exposed.

TSCA also requires EPA to develop regulations that establish import/export requirements for chemicals which are subject to certain requirements under TSCA.

Paperwork Reduction Act Notice

The information collection requirements contained in this final rule have been submitted for OMB approval under PRA, 44 U.S.C. 3501 et seq. The ICR document prepared by EPA, identified under EPA ICR No. 2412.01 and OMB control number 2070-0004, is available in the docket for the final rule. The ICR addresses the incremental changes to the currently approved ICR documents that cover the existing reporting and record keeping programs that are approved under OMB control numbers 2070-0004, 2070-0033, and 2070-0054. An agency may not conduct or sponsor, and a person is not required to, respond to a collection of information unless it displays a currently valid OMB control number. The amended information collection activities contained in this final rule are designed to assist the Agency in meeting its responsibility under TSCA to receive, process, and review reports, data, and other information. As such, responses to the collection of information covered by this ICR would still be mandatory, but with the final rule, respondents would be required to use the CISS reporting tool.

Authority

The Government Paperwork Elimination Act (GPEA) (44 U.S.C. 3504) provides that, when practicable, Federal organizations use electronic forms, electronic filings, and electronic signatures to conduct official business with the public. EPA's Cross-Media Electronic Reporting Regulation (CROMERR) (40 CFR part 3) (Ref. 2), provides that any requirement in title 40 of the CFR to submit a report directly to EPA can be satisfied with an electronic submission that meets certain conditions once the Agency published a document in the **Federal Register** announcing that EPA is prepared to receive certain documents in electronic form. For more information about CROMERR, go to http://www.epa.gov/cromerr.

HOME



Submissions

Create, modify, or delete a submission by clicking the Submissions tab.

User Management

Manage the access rights of Supports for each Section 4 submission. For every Support the Authorized Official may grant him/her the ability to edit (but not unlock, create, delete, or submit) the submission.

Resources

A helpful guide that describes the Section 4 system and provides useful links for further usability instruction.

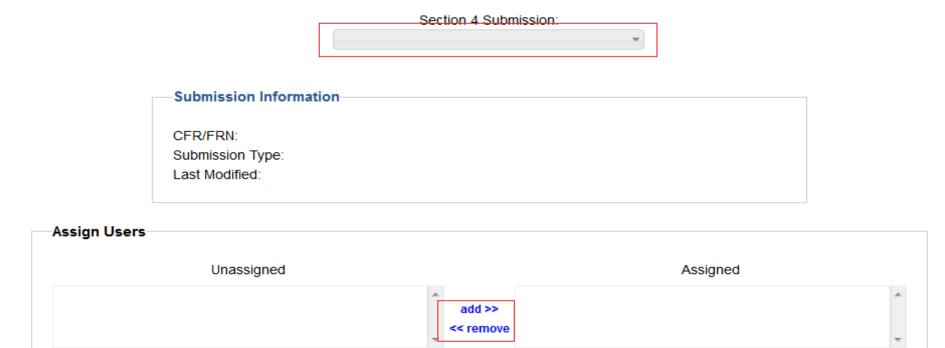
Authorized Official

An Authorized Official has the ability to create, delete, amend, unlock and submit all Section 4 submissions electronically to EPA. The Authorized Official also has the ability to assign Supports to individual submissions.

Log Out

USER MANAGEMENT

The Authorized Official is responsible for restricting a Support's access to select submissions by assigning or unassigning them to each submission. The Support can access and edit only those submissions for which the Authorized Official has granted access. Select a submission from the drop-down menu, and assign a Support to the submission by highlighting the individual and clicking the add link. To unassign a Support, highlight the individual and click the remove link. To highlight and assign or unassign multiple Supports, hold down the Ctrl or Shift keys on the keyboard and click each Support before moving. You must click the Save button after each assignment.



HOME

User Management



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SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766

- If starting a Section 4 Test Rule, ECA, MOU, or a 40 CFR 766 submission, select the appropriate submission type from the drop-down menu and click the 'Start New Submission' button.
- To edit an In Progress submission, click the submission link in the Submission Alias column in the table below.
- To access and edit a submission previously Submitted through CDX, unlock the submission by clicking the lock icon () and enter
 your passphrase originally associated with the selected submission. All additional changes made to a submission will be submitted as
 an amendment.
- Click the green arrow icon (-) to download a copy of record for a completed submission. It may take up to 15 minutes for the copy of record to become available.
- You may delete any submission that has not yet been submitted by clicking the delete icon (X).

8 items found Page 1 of 1 25 * Items Per Page: Modify Submission Copy of Submission Alias CFR/FRN Status • Action Date : Date : Record 40 CFR 766 Dibenzodioxins / In CFR766-20131121-12:41:40 11/27/2013 Progress EST Dibenzofurans In ECA-20131121-12:41:03 EST 11/27/2013 Progress -ECA-20131129-15:25:33 EST 70 FR 39630 11/29/2013 11/29/2013 Submitted In ECA-20131204-15:12:41 EST 12/04/2013 Progress 🖹 In MOU-20131121-12:41:27 EST MOUForm 11/27/2013 Progress In TestRules-20131121-12:41:14 53 FR 22300 12/04/2013 11/26/2013 **EST** Progress TestRules-20131127-10:17:23 🖹 In 69 FR 22402 11/27/2013 Progress **EST** test amendment 53 FR 22300 11/29/2013 11/29/2013 Submitted

Select the submission type and then click Start New Submission
Submission Type:

Test Rules

ECA

MOU

40 CFR 766 Dibenzodioxins/Dibenzofurans

Section 4: Test Rules/Letter of Intent









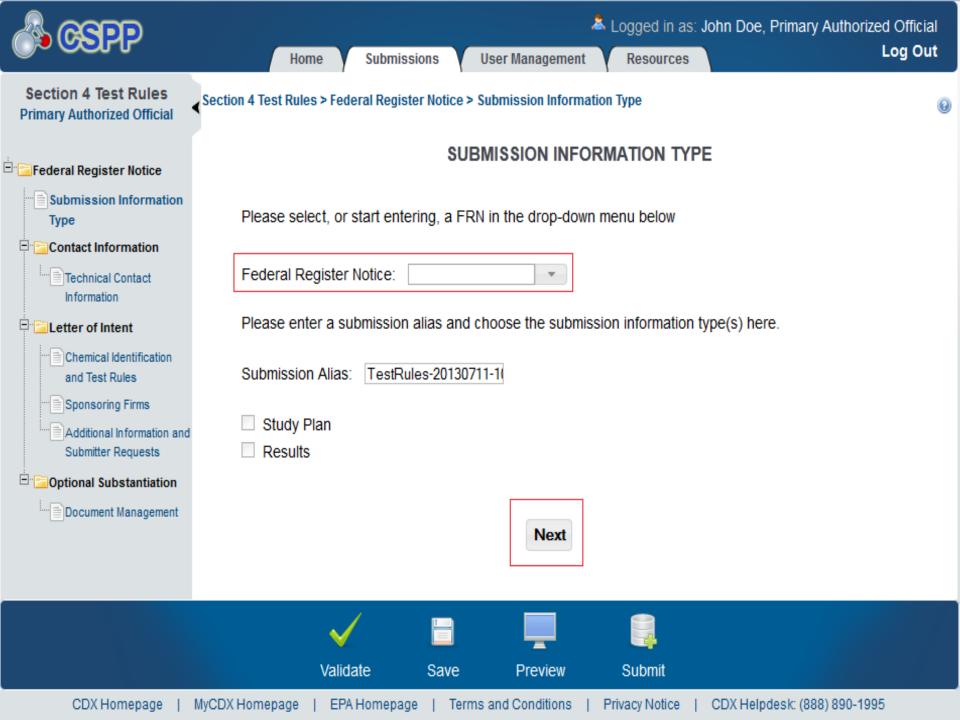
CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length. To better protect your form, your passphrase should contain a combination of letters numbers. Your passphrase may include spaces, but should not contain special characters (for example, + and *).

As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized individuals. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: If you lose or forget your passphrase, you will not be able to access your Section 4 Submission to print, submit, or make changes. You will need to complete a new Section 4 Submission and create a new passphrase for the submission. For security reasons, the system administrator will not have access to your passphrase and will not be able to retrieve it or reset it.

New Passphrase: Confirm New Passphrase:	
Cancel	Next



Section 4 Test Rules Primary Authorized Official

Contact Information

□ Letter of Intent

Technical Contact

Sponsoring Firms

☐ ☐ Optional Substantiation Document Management

Information

Submission Information Type

Chemical Identification and Test Rules

Additional Information and Submitter Requests

□ 53 FR 22300

Section 4 Test Rules > 53 FR 22300 > Contact Information > Technical Contact Information

TECHNICAL CONTACT INFORMATION

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this submission. Identify if this submission is being submitted on behalf of another company or consortium by selecting the appropriate radio button. If submitting on behalf of is not applicable, select the N/A radio button. Click the 'Copy CDX Registration' button to copy your information from CDX Registration.

- N/A
- This is a submission on behalf of a consortium
- This is a submission on behalf of another company

Copy CDX Registration Click here to copy your information from CDX Registration:

CBI:	
Prefix:	•
First Name:	
Middle Initial:	
Last Name:	
Suffix:	▼
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	▼
Postal Code:	
Country:	

Previous

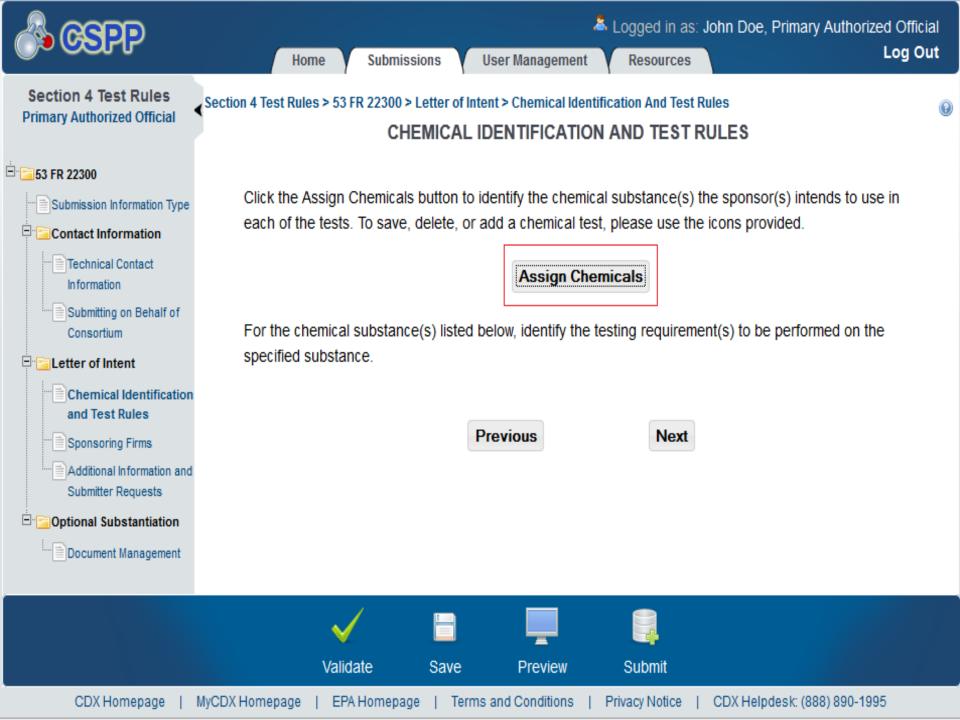
Next













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CHEMICAL MANAGEMENT

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se in

Select each chemical substance for which the sponsor(s) intends to use in each of the tests. When all appropriate chemical substances have been assigned, click the Save button.

Assign	Chemical Name	CASRN
	Un/check All Chemicals	
	2-Fluoroacetamide	640-19-7
	4-Bromobenzyl Cyanide	16532-79-9
	Bis(2-chloroisopropyl)ether	108-60-1
	Endrin	72-20-8
	Maleic Hydrazide	123-33-1
	Methanethiol	74-93-1
	Pentachlorobenzene	608-93-5
	Trichloromethanethiol	75-70-7

Save

Cancel

□ 71 FR 13708

= 1324-76-1 **X**Remove

2941-64-2

XRemove

Section 4 Test Rules Primary Authorized Official

Contact Information Technical Contact

Information ☐ ☐ Letter of Intent

Submission Information Type

Chemical Identification

Additional Information and

and Test Rules Sponsoring Firms

Submitter Requests

☐ ☐ Optional Substantiation Document Management

Section 4 Test Rules > 71 FR 13708 > Letter of Intent > Chemical Identification and Test Rules

Chemical Test

CHEMICAL IDENTIFICATION AND TEST RULES

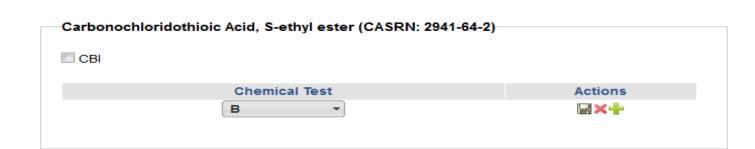
User Management

Click the Assign Chemicals button to identify the chemical substance(s) the sponsor(s) intends to use in each of the tests. To save, delete, or add a chemical test, please use the icons provided.

Assign Chemicals

For the chemical substance(s) listed below, identify the testing requirement(s) to be performed on the specified substance.

Benzenesulfonic Acid, [[4-[[4-(phenylamino)phenyl][4-(phenylimino)-2,5-cyclohexadien-1-ylidene]methyl]phenyl]amino]- (CASRN: 1324-76-1) CBI





Previous

Next

Actions

XRemove Save ☐ ☐ Optional Substantiation

Click the Add Sponsoring Firm button to add a new sponsoring firm. Add Sponsoring Firm

Previous Next



Document Management

Home

Submissions

User Management

Resources

Log Out

Section 4 Test Rules Primary Authorized Official

Submission Information

□ 53 FR 22300

Section 4 Test Rules > 53 FR 22300 > Letter of Intent > Additional Information and Submitter Requests ADDITIONAL INFORMATION AND SUBMITTER REQUESTS

Select the information or request type from the dropdown and click the Add Information button to

complete the required information.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

Information/Request Type:

Add Information

File Name

Document Type

Nothing found to display.

Attachment
Date

Action

Previous

Type Contact Information Technical Contact Information Letter of Intent Chemical Identification and Test Rules Sponsoring Firms Additional Information and Submitter Requests 640-19-7 X Remove 16532-79-9 X Remove Optional Substantiation

Document Management

Section 4: Submit Letter of Intent







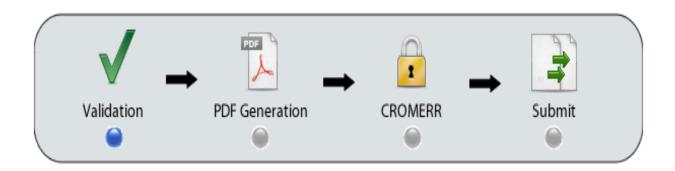
SUBMITTING OFFICIAL INFORMATION

The information below has been prepopulated from CDX registration. If the information listed is incorrect please make the appropriate edits.

CBI:			
Prefix:	Мг		
First Name:	John		
Middle Initial:			
Last Name:	Doe		
Job Title:			
Company Name:	TEST Company		
Phone Number:	5551231234		
Email Address:	johndoe@gmail.com		
Mailing Address 1:	123 Test Drive		
Mailing Address 2:	534-I		
City:	FAIRFAX		
State:	VA		
Postal Code:	22033		
	Cancel		



SUBMISSION PROCESS: VALIDATION



Running validation on your data



Processing. Please wait...

(Please disable any pop-up blockers within your internet browser settings to allow for the validation pop-up to be displayed if validation errors are present.)





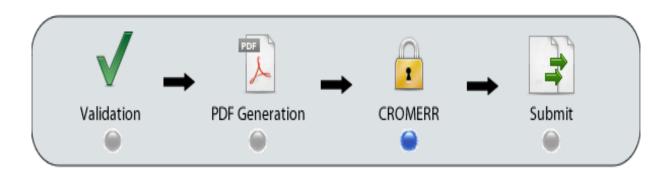
SUBMISSION PROCESS: PDF GENERATION

Your PDF preview transaction was successful!





CROSS-MEDIA ELECTRONIC REPORTING REGULATION (CROMERR) CERTIFICATION

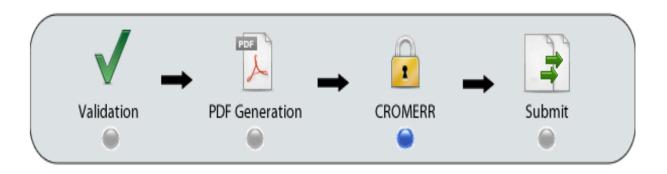


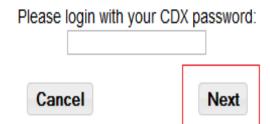
I certify, under penalty of law, that this document and all attachments were prepared under my direction of supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Cancel I Certify



CROSS-MEDIA ELECTRONIC REPORTING REGULATION (CROMERR) LOGIN

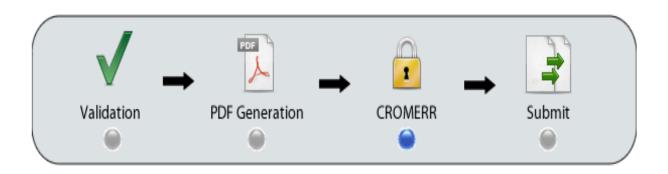


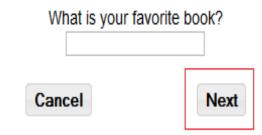






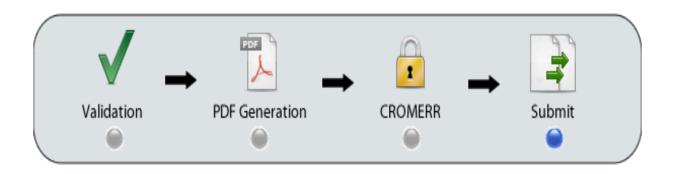
CROSS-MEDIA ELECTRONIC REPORTING REGULATION (CROMERR) SECURITY QUESTION







SUBMIT TO CDX



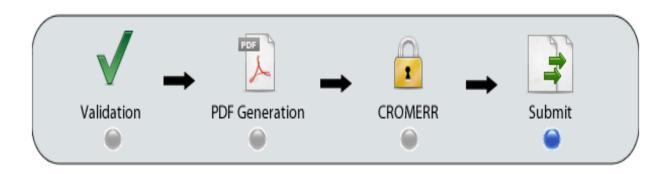
I hereby certify to the best of my knowledge and belief that (1) all information entered on this form is complete and accurate; and (2) any confidentiality claims are true and correct as to that information for which they have been asserted. Any knowing and willful misinterpretation is subject to criminal penalty pursuant to 18 USC 1001

Cancel





CROSS-MEDIA ELECTRONIC REPORTING REGULATION (CROMERR) SUBMISSION



The submission was sent to the EPA. The Copy of Record link allows you to download of the Copy of Record and signature for this submission. The Copy of Record link will appear in the Submissions list when the EPA receives and processes your submission.



Section 4: Test Rules/Study Plan





SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766



- To edit an In Progress submission, click the submission link in the Submission Alias column in the table below.
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9 items found. Page 1 of 1 Items Per Page: 25

Submission Alias \$	CFR/FRN \$	Status 💠	Modify Date	Submission Date \$	Copy of Record	Action
CFR766-20131121-12:41:40 EST	40 CFR 766 Dibenzodioxins / Dibenzofurans	ln Progress	11/27/2013			×
ECA-20131121-12:41:03 EST		ln Progress	11/27/2013			×
ECA-20131129-15:25:33 EST	70 FR 39630	Submitted	11/29/2013	11/29/2013	-	
ECA-20131204-15:12:41 EST		ln Progress	12/04/2013			×
MOU-20131121-12:41:27 EST	MOUForm	ln Progress	11/27/2013			×
TestRules-20131121-12:41:14 EST	53 FR 22300	ln Progress	12/04/2013	11/26/2013	•	
TestRules-20131127-10:17:23 EST	69 FR 22402	ln Progress	11/27/2013			×
TestRules-20131206-13:11:56 EST	53 FR 22300	ln Progress	12/06/2013			×
Test Rule 120613	53 FR 22300	Submitted	11/29/2013	11/29/2013	-	

Select the submission type and then click **Start New Submission**Submission Type:

Start New Submission





Please enter your user passphrase and click Next

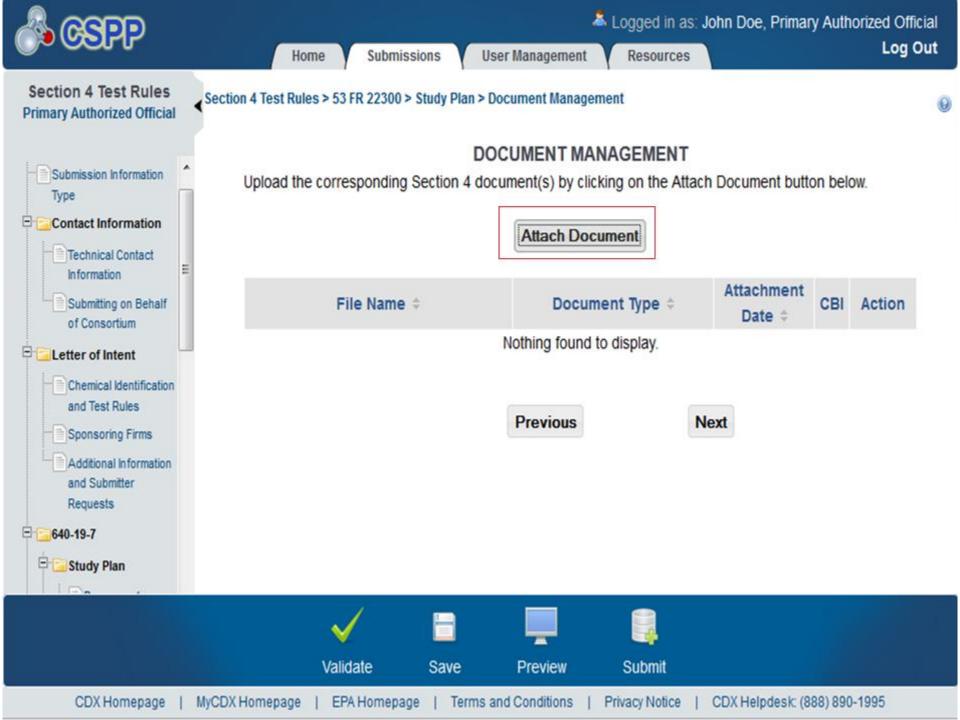


Forgot Your Passphrase?

For security reasons, the system administrator does not have access to your passphrase and cannot retrieve it or reset it to a new one. If you have forgotten your passphrase, you must complete a new Section 4 submission.

Cancel

Next



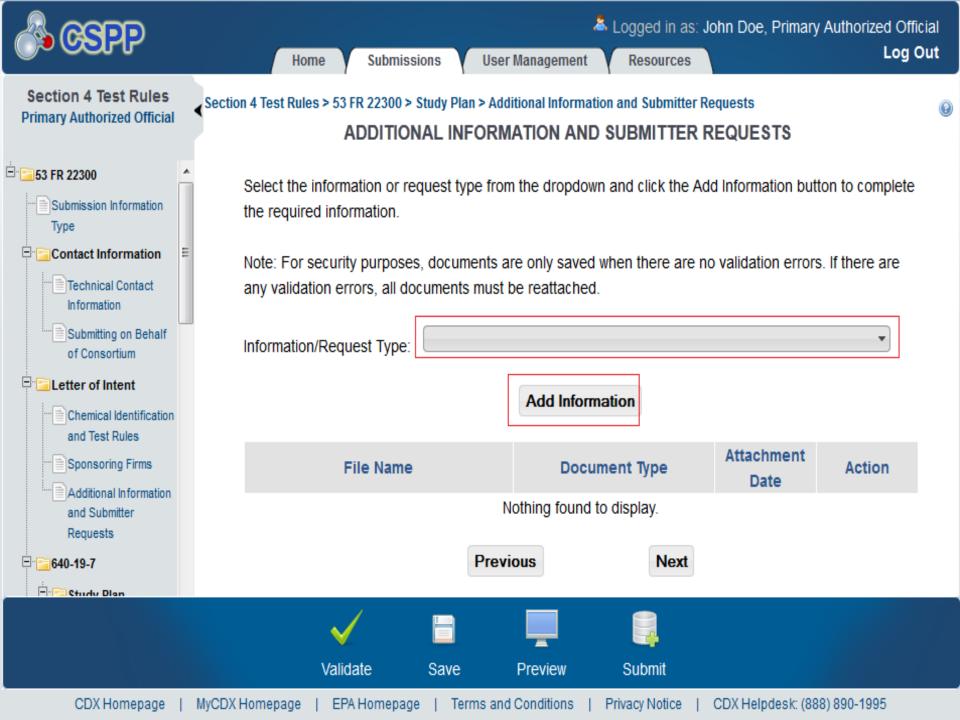


DOCUMENT MANAGEMENT

Identify the Study Plan from the document type drop-down menu and browse for the appropriate Study Plan document. Click OK to attach.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI: Document Type:	V
Document Upload:	Browse
Sanitized Document Upload:	Browse (optional)
Effects:	-
EndPoints:	
	OK Cancel



Section 4 Test Rules Primary Authorized Official

Submitter Requests

Document Management Additional Information and Submitter Requests Test Rules Substantiation Part 1

Test Rules

Part 2

I... Document Management

> Document Management

Additional Information and Submitter Requests

Ē Results

XRemove **=** 16532-79-9 Study Plan

Ē ■ Results

Substantiation

640-19-7

Study Plan

Section 4 Test Rules > 53 FR 22300 > Study Plan > Test Rules Substantiation Part 1

TEST RULES SUBSTANTIATION PART 1 Ē 53 FR 22300 E Submission Has the information been disclosed in a patent? Information Type Yes No Contact Information Technical Contact Would disclosure of the study plan information disclose processes used in the Information manufacture or processing of a chemical substance or mixture? Submitting on Behalf of Yes No Consortium Describe how this would occur. Letter of Intent Chemical Identification and Test Rules Sponsoring Firms Additional Information and

Home

Would disclosure of the study plan information disclose the portion of a mixture comprised by any of the substances in the mixture?

Describe how this would occur.

Has this information been disclosed to the public in any form?

No Describe the circumstances.

No

Previous

Next









Validate

Section 4 Test Rules Primary Authorized Official

Submission Information

Technical Contact

Submitting on Behalf of Consortium

Chemical Identification and Test Rules Sponsoring Firms Additional Information and Submitter Requests

Contact Information

Information

□ Letter of Intent

□ 640-19-7

E Study Plan

Document Management Additional Information and Submitter Requests Test Rules

Substantiation Part

Test Rules Substantiation Part 2

.... Document Management

> Document Management

Results

XRemove

16532-79-9 Study Plan

□ 53 FR 22300

Type

Section 4 Test Rules > 53 FR 22300 > Study Plan > Test Rules Substantiation Part 2

TEST RULES SUBSTANTIATION PART 2

- For what period of time should confidential treatment be given? Until a specific date, the occurrence of a specific event, or permanently?
 - Event
 - Date
 - Permanently

Why should confidential treatment be given?

What harmful effects to your competitive position, if any, do you think would result from disclosure of this information? How would a competitor use such information? How substantial would the harmful effects be? What is the causal relationship between disclosure and the harmful effects?

What measures have you taken to guard against disclosure of this information to others?

To what extent has this information been disclosed to others? What precautions have been taken in connection with such disclosures?











Section 4 Test Rules **Primary Authorized Official**

53 FR 22300 Submission Information Type Contact Information Technical Contact Information Submitting on Behalf of Consortium Letter of Intent Chemical Identification and Test Rules Sponsoring Firms Additional Information and Submitter Requests 640-19-7 Study Plan Document Management Additional Information and Submitter Requests Test Rules Substantiation Part Test Rules Substantiation Part 2 Results Document Management X Remove 16532-79-9 Study Plan Document

disclosure and the harmful effects?

Home

Submissions

What measures have you taken to guard against disclosure of this information to others?

To what extent has this information been disclosed to others? What precautions have been taken in connection with such disclosures?

Has EPA, another Federal Agency, or any Federal court made any pertinent confidentiality determination regarding this information? Yes 0 No 0

Click the Browse button and search for the appropriate document(s). Click the Upload button to attach copies of such determinations.

> Upload Browse

File Name **Attachment Date**

Nothing found to display.

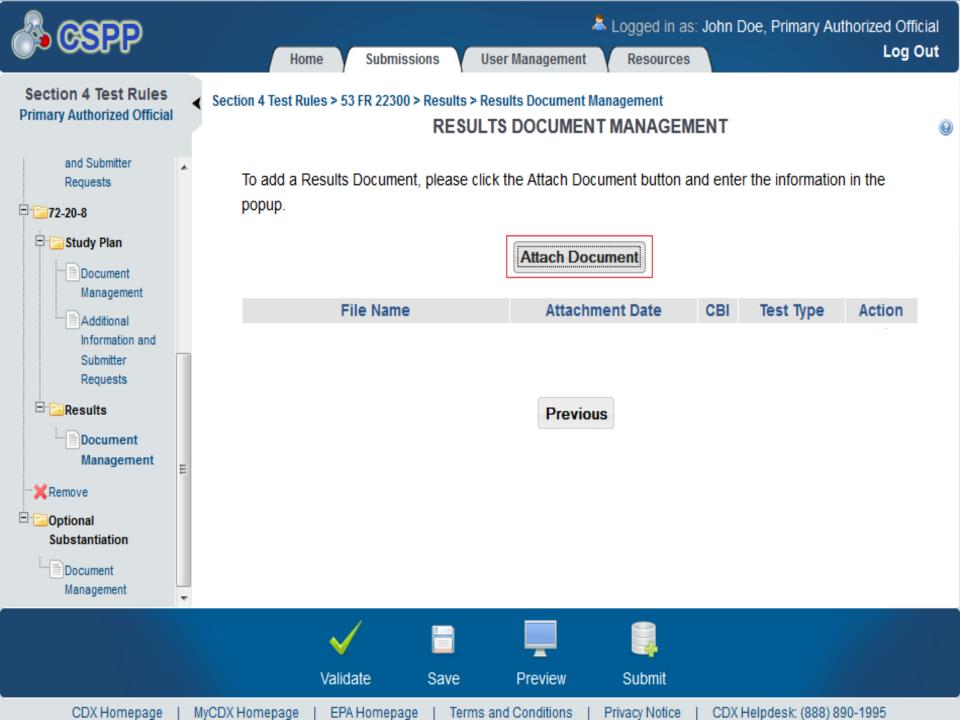
Previous

Management

Section 4: Test Rules/Results









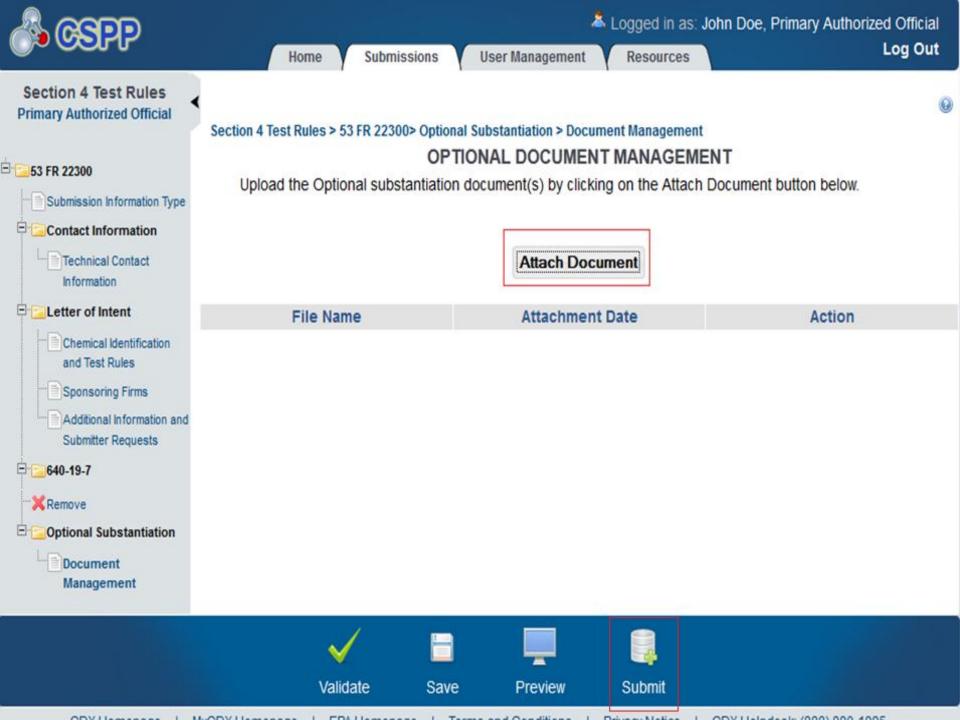
RESULTS DOCUMENT MANAGEMENT

0

Identify the Chemical Test from the drop-down menu and browse for the appropriate Results document. Click OK to attach.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI: Test Type:	
Document Upload:	Browse
Sanitized Document Upload:	Browse (optional)
Effects:	•
EndPoints:	
	OK Cancel



Section 4: Enforceable Consent Agreements (ECAs)





SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766



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Items Per Page: 25 ▼ Page 1 of 1 4 items found.

Submission Alias \$	CFR/FRN \$	Status 💠	Modify Date \$	Submission Date \$	Copy of Record	Action
CFR766-20131121-12:41:40 EST	40 CFR 766 Dibenzodioxins / Dibenzofurans	ln Progress	11/21/2013			×
ECA-20131121-12:41:03 EST		ln Progress	11/21/2013			×
MOU-20131121-12:41:27 EST	MOUForm	ln Progress	11/21/2013			×
TestRules-20131121-12:41:14 EST		ln Progress	11/21/2013			×

Export options: 4 CSV | S Excel | XML | 2 PDF

Select the submission type and then click Start New Submission

Submission Type: ECA

Start New Submission





CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length. To better protect your form, your passphrase should contain a combination of letters numbers. Your passphrase may include spaces, but should not contain special characters (for example, + and *).

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New Passphrase: Confirm New Passphrase:	
Cancel	Next



SUBMISSION INFORMATION TYPE

Please select, or start entering, a chemical in the drop-down menu below:

Ψ.

Please enter a submission alias and choose the submission information type(s) here.

Submission Alias: ECA-20130711-13:14:59

- Study Plans & Conduct of Testing
- Results





Federal Register Notice

Contact Information

Technical Contact Information

ECA Additional Information

Type

Submission Information

Log Out

N/A

Section 4 Enforceable Consent Agreement (ECA) Primary Authorized Official

□ 68 FR 33125 Submission Information Type Contact Information Technical Contact Information □ Study Plans & Conduct of Testing Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals XRemove □ Results Document Management **X**Remove

ECA Additional Information

Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > Contact Information > Technical Contact Information

TECHNICAL CONTACT INFORMATION

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this submission. Identify if this submission is being submitted on behalf of another company by selecting the appropriate radio button. If submitting on behalf of is not applicable, select the N/A radio button. Click the 'Copy CDX Registration' button to copy your information from CDX Registration.

This is a submission on behalf of another company					
Click here to copy your	information from CDX Registration: Copy CDX Registration				
CBI:					
Prefix:					
First Name:					
Middle Initial:					
Last Name:					
Suffix:	▼				
Company Name:					
Phone Number:	Ext:				
	(Do not enter any dashes (-) in Phone Number field above)				
Email Address:					
Mailing Address 1:					
	Street address, P.O. box, company name, etc.				
Mailing Address 2:	Apartment, suite, etc.				
City:	Apartment, Salte, Ctel				
State:					
Postal Code:					
Country:	▼				
	Previous				

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Section 4 Enforceable Consent Agreement (ECA) **Primary Authorized Official**

Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > Study Plans & Conduct of Testing > Principal Test Sponsor

Results

X Remove

68 FR 33125
Submission Information Type
Contact Information
"" Technical Contact Information
Submitting on Behalf of Company
Study Plans & Conduct of Testing
Principal Test Sponso
Principal Sponsor Organization
Testing Facilities
Study Professionals
XRemove

Document Management

ECA Additional Information

PRINCIPAL TEST SPONSOR

Fill out the information below for the Principal Test Sponsor.

CBI.	
Prefix:	▼
First Name:	
Middle Initial:	
Last Name:	
Suffix:	₩
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
0.7	Apartment, suite, etc.
City:	
State:	▼
Postal Code:	
Country:	

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Section 4 Enforceable Consent Agreement (ECA) **Primary Authorized Official**



Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > Study Plans & Conduct of Testing > Principal Sponsor Organization

PRINCIPAL SPONSOR ORGANIZATION

Fill out the information below for the Administrative Official(s) and Project Manager(s) in the Principal Sponsor's Organization below.

Firm -		Cancel	3
CBI:			
Prefix:	·		
First Name:			
Middle Initial:			
Last Name:			
Suffix:	₩		
Company Name:			
Job Title:			
Phone Number:	Ext:		
	(Do not enter any dashes (-) in Phone Number field above)		
Email Address:			
Mailing Address 1:			
	Street address, P.O. box, company name, etc.		
Mailing Address 2:	Apartment, suite, etc.		
City:	Apartment, soite, etc.		
State:	_		
Postal Code:			
Country:		•	
	Save		

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Section 4 Enforceable Consent Agreement (ECA) **Primary Authorized Official**

Contact Information Technical Contact Information

Company Study Plans & Conduct of

Testing

XRemove

Results

Submission Information Type

Submitting on Behalf of

Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals

Document Management

ECA Additional Information

□ 68 FR 33125

Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > Study Plans & Conduct of Testing > Testing Facilities **TESTING FACILITIES**

Fill out the information below for the responsible testing facilities.

	Ex	pand All Collaps	e All
▼ Facility -		Cancel	×
Testing Facility:			
Phone Number:	Ext:		
	(Do not enter any dashes (-) in Phone Number field above.)		
Mailing Address 1:			
	Street address, P.O. box, company name, etc.		
Mailing Address 2:			
	Apartment, suite, etc.		
City:			
State:	▼		
Postal Code:			
Country	▼		
Select the testing	· ·		
facility contact role:			
CBI:			
Prefix:	•		
First Name:			
Middle Initial:			
Last Name:			
Suffix:	- V		
Phone Number:	Ext:		
	(Do not enter any dashes (-) in Phone Number field above)		







Preview





	Home Submissions User Management Resources	Log Out
Section 4 Enforceable onsent Agreement (ECA) Primary Authorized Official	Postal Code: Country	
Contact Information Technical Contact Information Submitting on Behalf of Company Study Plans & Conduct of Testing Principal Test Sponsor Organization Testing Facilities Study Professionals Remove Results Document Management Remove ECA Additonal Information	Select the testing facility contact role: CB: Prefix: First Name: Middle Initial: Last Name: Suffix: Phone Number: (Do not enter any dashes (-) in Phone Number field above) Email Address: Mailing Address 1: Street address, P.O. box, company name, etc. Mailing Address 2: Apartment, suite, etc. City: State: Postal Code: Country: Click the Add Testing Facility button to add a new testing facility. Add Testing Facility Previous	
	. / 😑 🚾	

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Submit

Save

Validate

Section 4 Enforceable Consent Agreement (ECA) **Primary Authorized Official**

□ 68 FR 33125 Submission Information Type Contact Information Technical Contact Information Submitting on Behalf of Company ☐ Study Plans & Conduct of Testing Principal Test Sponsor Principal Sponsor Organization

Testing Facilities Study Professionals

Document Management

ECA Additional Information

XRemove

XRemove

□ Results

Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > Study Plans & Conduct of Testing > Study Professionals

STUDY PROFESSIONALS

Provide a brief summary of the training and experience of each professional involved in the study below.

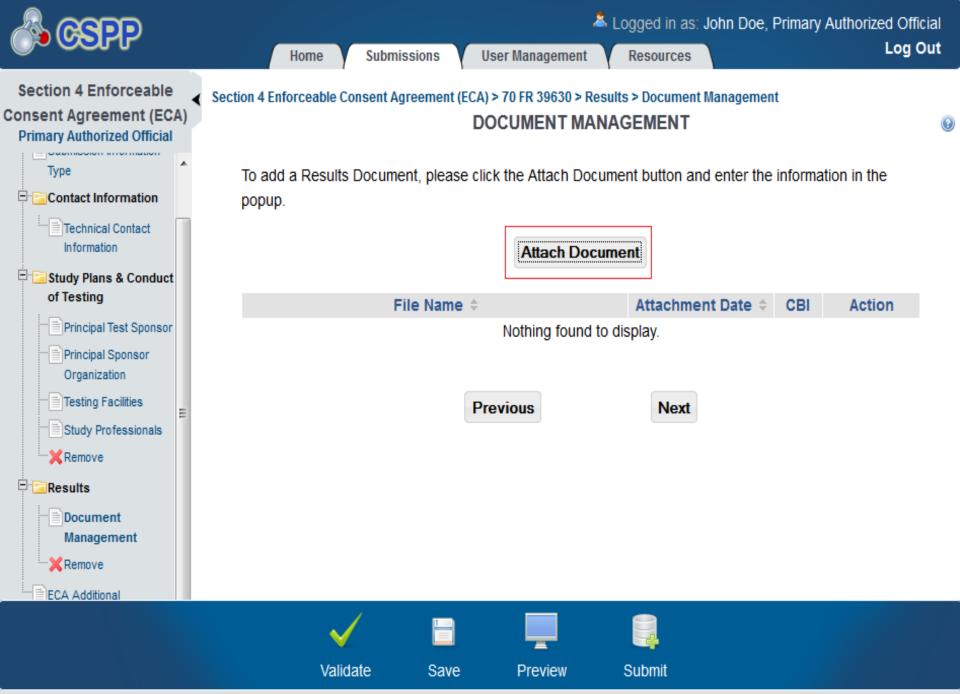
		Exp	oand All Colla	apse Al
-	Study Professional -		Cancel	×
	Select the Study Professional Role:	Ψ.		
	CBI:			
	Prefix:			
	First Name:			
	Middle Initial:			
	Last Name:			
	Suffix:	-		
	Company Name:			
	Phone Number:	Ext:		
		(Do not enter any dashes (-) in Phone Number fie above.)	ld	
	Email Address:			
	Mailing Address 1:			
		Street address, P.O. box, company name, etc.		
	Mailing Address 2:			
		Apartment, suite, etc.		
	City:			
	State:	- ▼		
	Postal Code:			
	Country:	▼		
	Experience Summary:			













DOCUMENT MANAGEMENT

ijeu in po: Odran Wulvey, i mnary Authorizeu

Browse for the appropriate Results document and click the OK button to attach.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:		
Document Upload:	Browse	
Sanitized Document Upload:	Browse (opti	ional
Effects:		
EndPoints:		



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Section 4 Enforceable Consent Agreement (ECA) Primary Authorized Official

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- Submission Information Type
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- Technical Contact Information
- Study Plans & Conduct of Testing
 - Principal Test Sponsor
 - Principal Sponsor Organization
 - Testing Facilities
 - Study Professionals
- X Remove
- Results
- Document Management
- **X**Remove
- ECA Additional Information

Section 4 Enforceable Consent Agreement (ECA) > Federal Register Notice > ECA Additional Information

ECA ADDITIONAL INFORMATION

Select the appropriate option below and upload the corresponding document.

- Amendments to the Study Plan
- Modification of ECAs

Attach Document

Document Type File Name Attachment Date Action

Nothing found to display.

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Section 4 Enforceable Section 4 Enforceable Consent Agreement (ECA) > 68 FR 33125 > ECA Additional Information Consent Agreement (ECA) **Primary Authorized Official** ECA ADDITIONAL INFORMATION 68 FR 33125 Submission Information Type Select the appropriate option below and upload the corresponding document. Contact Information Amendments to the Study Plan Technical Contact Modification of ECAs Information Submitting on Behalf of Company Attach Document Study Plans & Conduct of Testing **Document Type** File Name **Attachment Date** Action Principal Test Sponsor Nothing found to display. Principal Sponsor Organization Testing Facilities **Previous** Study Professionals X Remove Results Document Management **X**Remove ECA Additional Information



Section 4: Memorandum of Understanding (MOUs)





SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766



- If starting a Section 4 Test Rule, ECA, MOU, or a 40 CFR 766 submission, select the appropriate submission type from the drop-down menu and click the 'Start New Submission' button.
- To edit an In Progress submission, click the submission link in the Submission Alias column in the table below.
- To access and edit a submission previously Submitted through CDX, unlock the submission by clicking the lock icon (i) and enter your passphrase originally associated with the selected submission. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (-) to download a copy of record for a completed submission. It may take up to 15 minutes for the copy of record to become available.
- You may delete any submission that has not yet been submitted by clicking the delete icon (X).

Items Per Page: 25 ▼ Page 1 of 1 4 items found.

Submission Alias \$	CFR/FRN \$	Status ÷	Modify Date \$	Submission Date \$	Copy of Record	Action
CFR766-20131121-12:41:40 EST	40 CFR 766 Dibenzodioxins / Dibenzofurans	ln Progress	11/21/2013			×
ECA-20131121-12:41:03 EST		ln Progress	11/21/2013			×
MOU-20131121-12:41:27 EST	MOUForm	ln Progress	11/21/2013			×
TestRules-20131121-12:41:14 EST		ln Progress	11/21/2013			×

Export options: 4 CSV | S Excel | XML | 2 PDF

Select the submission type and then click Start New Submission

Submission Type: MOU

Start New Submission





CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length. To better protect your form, your passphrase should contain a combination of letters numbers. Your passphrase may include spaces, but should not contain special characters (for example, + and *).

As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized individuals. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: If you lose or forget your passphrase, you will not be able to access your Section 4 Submission to print, submit, or make changes. You will need to complete a new Section 4 Submission and create a new passphrase for the submission. For security reasons, the system administrator will not have access to your passphrase and will not be able to retrieve it or reset it.

New Passphrase: Confirm New Passphrase:	
Cancel	Next

N/A

This is a submission on behalf of another company

Section 4 Memorandum of Understanding (MOU) **Primary Authorized Official**

□ Federal Register Notice Submission Information Type ☐ Contact Information Technical Contact Information □ Study Plans & Conduct of Testing Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals **X**Remove □ Results Document Management X Remove MOU Additional Information

Section 4 Memorandum of Understanding (MOU) > Federal Register Notice> Contact Information > Technical Contact Information

TECHNICAL CONTACT INFORMATION

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this submission. Identify if this submission is being submitted on behalf of another company by selecting the appropriate radio button. If submitting on behalf of is not applicable, select the N/A radio button. Click the 'Copy CDX Registration' button to copy your information from CDX Registration.

Click here to copy your	information from CDX Registration: Copy CDX Re	gistration
.,,	3	
Prefix:	·	
First Name:		
Middle Initial:		
Last Name:		
Suffix:	*	
Company Name:		
Phone Number:	Ext:	
	(Do not enter any dashes (-) in Phone Number field above)	
Email Address:		
Mailing Address 1:		
	Street address, P.O. box, company name, etc.	
Mailing Address 2:		
City:	Apartment, suite, etc.	
State:		
Postal Code:		
Country:		~
country.		
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Log Out



□ Study Plans & Conduct of

Principal Sponsor Organization Testing Facilities Study Professionals

Principal Test Sponsor

Document Management

MOU Additional Information

Testing

X Remove

KRemove

Results

Sponsor

Fill out the information below for the Principal Test Sponsor.



Prefix:	▼
First Name:	
Middle Initial:	
Last Name:	
Suffix:	Y
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	₩
Postal Code:	
Country:	



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Section 4 Memorandum of Understanding (MOU) **Primary Authorized Official**

Federal Register Notice Submission Information Type Contact Information Technical Contact Information Submitting on Behalf of Company ☐ Study Plans & Conduct of Testing Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals X Remove Results Document Management X Remove

MOU Additional Information

Section 4 Memorandum of Understanding (MOU) > Federal Register Notice> Study Plans & Conduct of Testing > Principal Sponsor Organization

PRINCIPAL SPONSOR ORGANIZATION

Fill out the information below for the Administrative Official(s) and Project Manager(s) in the Principal Sponsor's Organization below.

Firm -		Cancel	×
Prefix:			
First Name:			
Middle Initial:			
Last Name:			
Suffix:			
Company Name:			
Job Title:			
Phone Number:	Ext:		
	(Do not enter any dashes (-) in Phone Number field above)		
Email Address:			
Mailing Address 1:			
	Street address, P.O. box, company name, etc.		
Mailing Address 2:			
City:	Apartment, suite, etc.		
State:	~		
Postal Code:			
Country:		-	
-	Save		
	Save		

Click Add Sponsor Organization to add a new sponsor organization. Add Sponsor Organization

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Section 4 Memorandum of Understanding (MOU) **Primary Authorized Official**

Submission Information Type

Submitting on Behalf of

Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals

Document Management

MOU Additional Information

Contact Information

Technical Contact Information

Company ☐ Study Plans & Conduct of

Testing

X Remove

X Remove

□ Results

Section 4 Memorandum of Understanding (MOU) > Federal Register Notice> Study Plans & Conduct of Testing > Testing Facilities





Fill out the information below for the responsible testing facilities.

Facility -		Cancel
Testing Facility:		
Phone Number:	Ext:	
	(Do not enter any dashes (-) in Phone Number field above.)	
Mailing Address 1:		
	Street address, P.O. box, company name, etc.	
Mailing Address 2:		
	Apartment, suite, etc.	
City:		
State:		
Postal Code:		
Country		
Select the testing	₩	
facility contact role:		
Prefix:		
First Name:		
Middle Initial:		
Last Name:		
Suffix:	▼	
Phone Number:	Ext:	
	(Do not enter any dashes (-) in Phone Number field above)	
Email Address:		

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	Home Submissions User Management Resources	Log Out
ection 4 Memorandum of Understanding (MOU) Primary Authorized Official Graph Federal Register Notice	State: Postal Code: Country	
Contact Information Technical Contact Information Submitting on Behalf of Company Study Plans & Conduct of Testing Principal Test Sponsor Organization Testing Facilities Study Professionals Remove Results MOU Additional Information	Select the testing facility contact role: Prefix: First Name: Middle Initial: Last Name: Suffix: Phone Number: (Do not enter any dashes (-) in Phone Number field above) Email Address: Mailing Address 1: Street address, P.O. box, company name, etc. Mailing Address 2: Apartment, suite, etc. City: State: Postal Code: Country: Save Click the Add Testing Facility button to add a new testing facility. Previous Next	

Validate

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Submission Information

Principal Test Sponsor Principal Sponsor Organization Testing Facilities Study Professionals

Federal Register Notice

Contact Information Technical Contact Information Submitting on Behalf of Company Study Plans & Conduct of

Type

Testing

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Document Management **X**Remove MOU Additional Information

Results

Section 4 Memorandum of Understanding (MOU) > Federal Register Notice> Study Plans & Conduct of Testing > Study Professionals

STUDY PROFESSIONALS

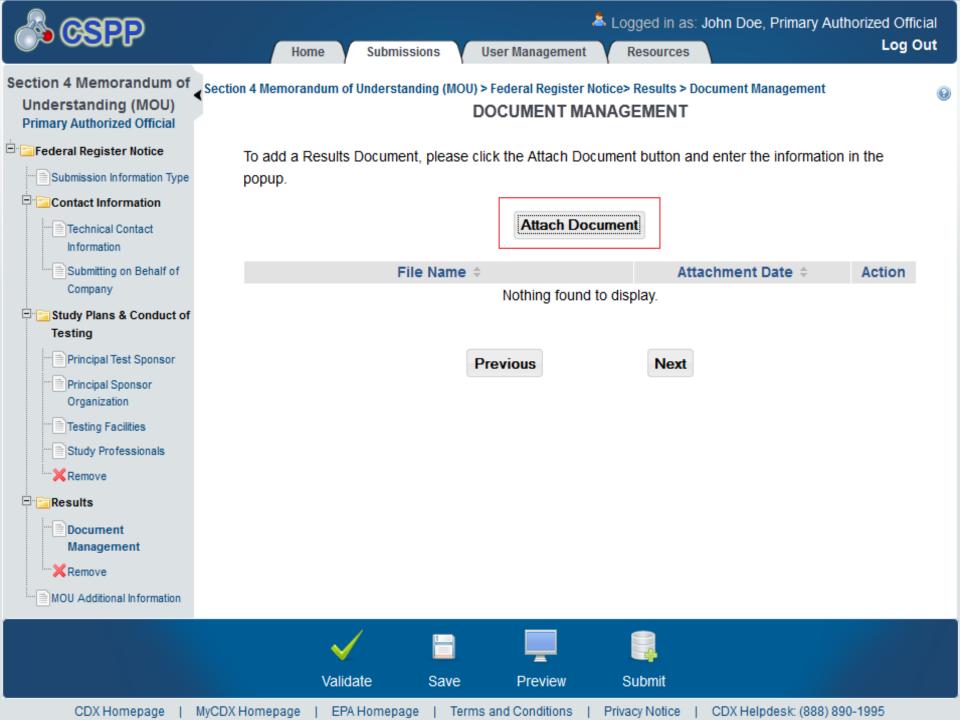
Provide a brief summary of the training and experience of each professional involved in the study below.

Study Professional -	Cancel
Select the Study Professional Role:	
Prefix:	₩
First Name:	
Middle Initial:	
Last Name:	
Suffix:	-
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	Ψ.
Postal Code:	
Country:	¥
Experience Summary:	
	Save

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DOCUMENT MANAGEMENT

Select the document type and browse for the document. If the document to be attached is not a study or an abstract/summary, it is to be identified as a supplemental document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

Document Upload:	Browse
Effects:	
EndPoints:	

OK Cancel

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Section 4 Memorandum of Understanding (MOU) Primary Authorized Official

Federal Register Notice

Submission Information Type

Contact Information

Technical Contact Information

> Submitting on Behalf of Company

Study Plans & Conduct of Testing

Principal Test Sponsor

Principal Sponsor Organization

Testing Facilities

Study Professionals

-X Remove

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Document Management

Remove

MOU Additional Information Section 4 Memorandum of Understanding (MOU) > Federal Register Notice> MOU Additional Information

MOU ADDITIONAL INFORMATION

Select the appropriate option below and upload the corresponding document.

Amendments to the Study Plan

Submissions

Modification of MOUs

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Attach Document

File Name Document Type Attachment Date Action

Nothing found to display.

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Section 4: 40 CFR 766 Dibenzodioxins/Dibenzofurans





Items Per Page:

SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766

- If starting a Section 4 Test Rule, ECA, MOU, or a 40 CFR 766 submission, select the appropriate submission type from the drop-down menu and click the 'Start New Submission' button.
- To edit an In Progress submission, click the submission link in the Submission Alias column in the table below.
- To access and edit a submission previously Submitted through CDX, unlock the submission by clicking the lock icon (🖻) and enter your passphrase originally associated with the selected submission. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (-) to download a copy of record for a completed submission. It may take up to 15 minutes for the copy of record to become available.
- You may delete any submission that has not yet been submitted by clicking the delete icon (X).

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Modify Submission Copy of Submission Alias CFR/FRN \$ Status Action Date Record Date 🖹 In 40 CFR 766 Dibenzodioxins / CFR766-20131121-12:41:40 EST 11/21/2013 Dibenzofurans Progress 🖹 In ECA-20131121-12:41:03 EST 11/21/2013 Progress 🖹 In MOU-20131121-12:41:27 EST MOUForm 11/21/2013 Progress TestRules-20131121-12:41:14 🖹 In 11/21/2013

Progress

Select the submission type and then click Start New Submission

Submission Type: 40 CFR 766 Dibenzodioxins/Dibenzofurans

Start New Submission

EST

4 items found.





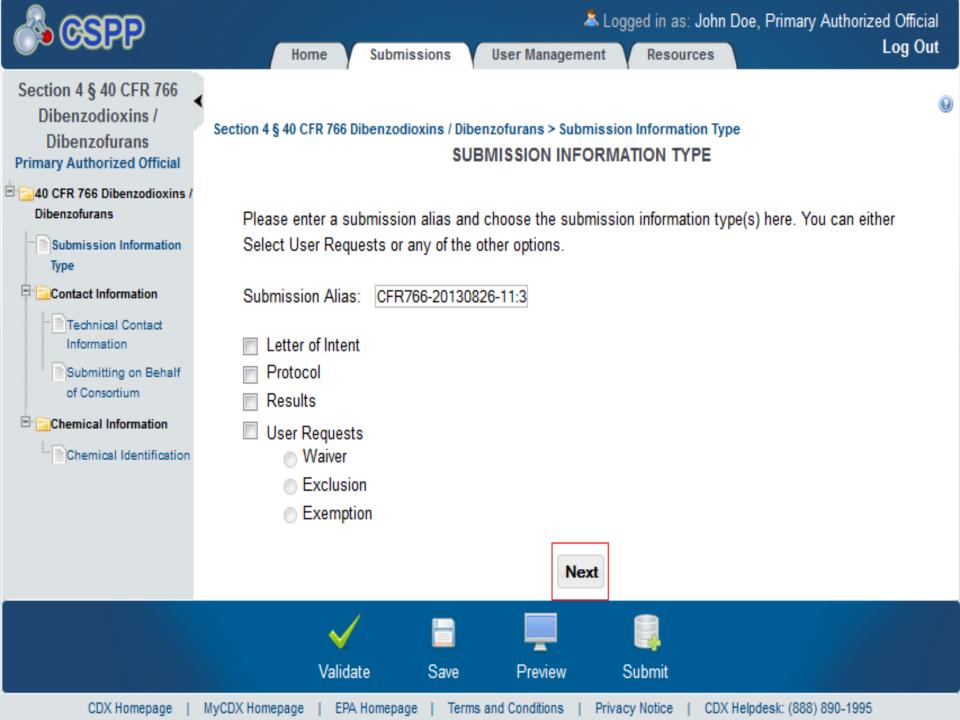
CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length. To better protect your form, your passphrase should contain a combination of letters numbers. Your passphrase may include spaces, but should not contain special characters (for example, + and *).

As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized individuals. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: If you lose or forget your passphrase, you will not be able to access your Section 4 Submission to print, submit, or make changes. You will need to complete a new Section 4 Submission and create a new passphrase for the submission. For security reasons, the system administrator will not have access to your passphrase and will not be able to retrieve it or reset it.

New Passphrase: Confirm New Passphrase:	
Cancel	Next



Submissions

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Section 4 § 40 CFR 766 Dibenzodioxins / **Dibenzofurans** Primary Authorized Official ☐ ☐ 40 CFR 766 Dibenzodioxins /

Dibenzofurans Submission Information Type

Contact Information Technical Contact Information

- Submitting on Behalf of Company
- Chemical Information
- Chemical Identification □ Letter of Intent
 - Sponsoring Firms
 - XRemove
- Protocol
 - Document Management
 - X Remove
- □ Results
 - Document Management
 - XRemove

Section 4 § 40 CFR 766 Dibenzodioxins / Dibenzofurans > Contact Information > Technical Contact Information

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this submission. Identify if this submission is being submitted on behalf of another company or consortium by selecting the appropriate radio button. If submitting on behalf of is not applicable, select the N/A radio button. Click the 'Copy CDX Registration' button to copy your information from CDX Registration.

TECHNICAL CONTACT INFORMATION

N/A

CBI:

- This is a submission on behalf of a consortium
- This is a submission on behalf of another company

Click here to copy your information from CDX Registration: Copy CDX Registration

Prefix:	¥
First Name:	
Middle Initial:	
Last Name:	
Suffix:	· ·
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	
Postal Code:	
Country:	

Previous

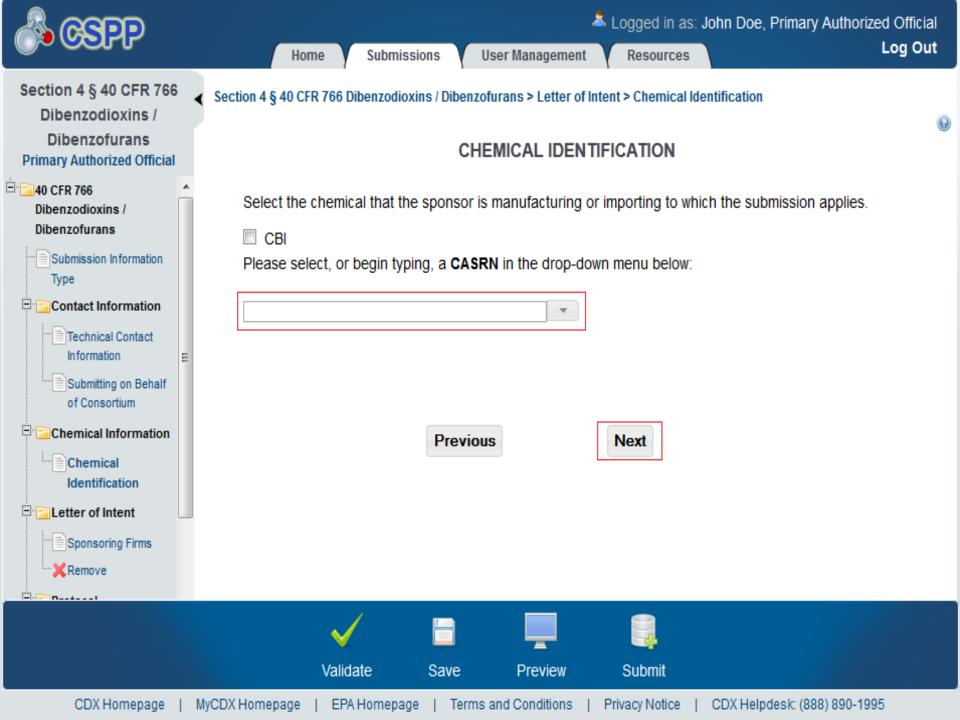
Next











Section 4 § 40 CFR 766
Dibenzodioxins /
Dibenzofurans
Primary Authorized Official

40 CFR 766 Dibenzodioxins / Dibenzofurans Submission Information Type Contact Information

Technical Contact
Submitting on Beha
of Company



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XRemove



- Letter of Intent





Protocol





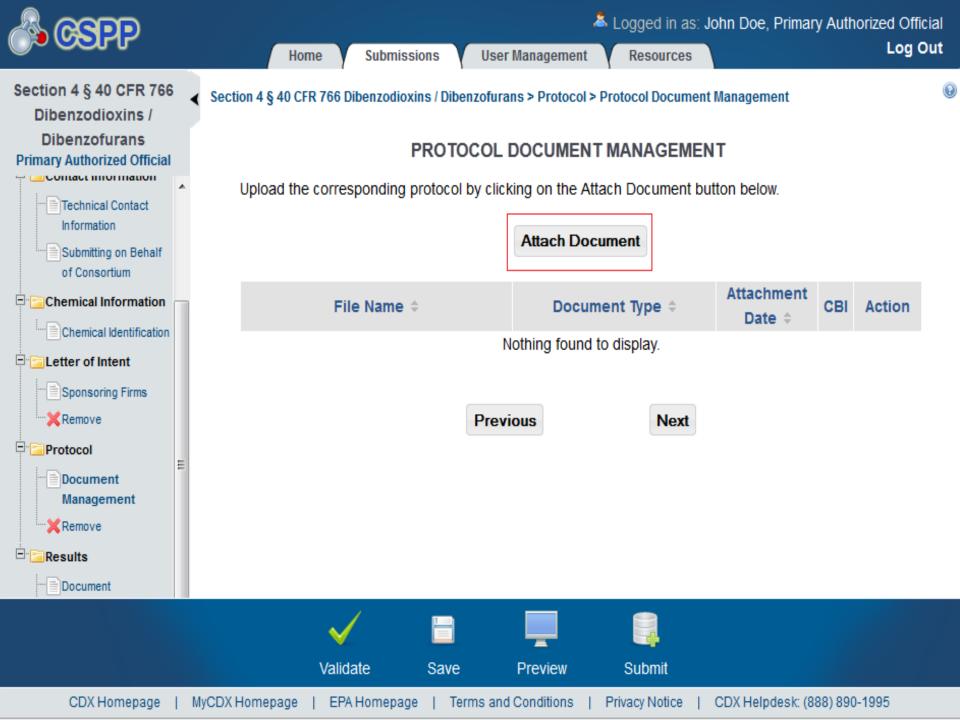
Section 4 § 40 CFR 766 Dibenzodioxins / Dibenzofurans > Letter of Intent > Sponsoring Firms SPONSORING FIRMS

Fill out the information below for the Sponsoring Firm.

Firm -		Cancel	×
CBI:			
Firm Name:			
Phone Number:	Ext:		
Mailing Address 1:			
Mailing Address 2:			
City:			
State:	Ψ.		
Postal Code:			
Country:		₩	

Click the Add Sponsoring Firm button to add a new sponsoring firm. Add Sponsoring Firm







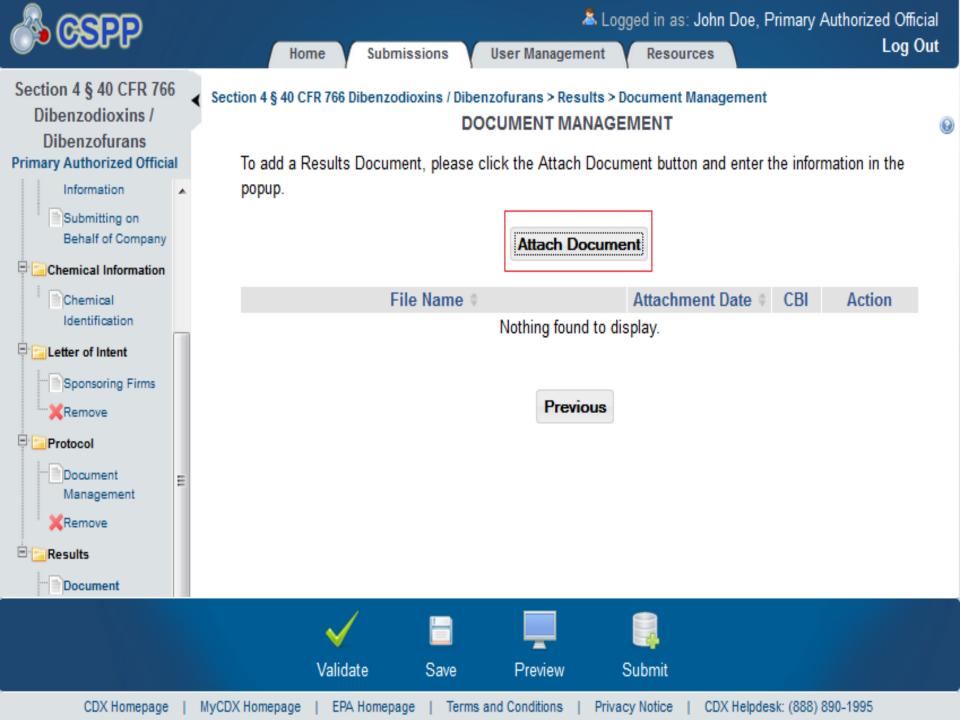
PROTOCOL DOCUMENT MANAGEMENT

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

Cancel

OK

CBI: Document Type:	
Document Upload:	Browse
Sanitized Document Upload:	Browse (optional)
Effects:	-
EndPoints:	
EnaPoints:	





DOCUMENT MANAGEMENT

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Browse for the appropriate document and click OK to attach.

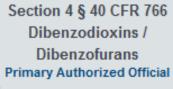
Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	
Document Upload:	Browse
Sanitized Document Upload:	Browse (optional)
Effects:	
EndPoints:	
	OK Cancel

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- Submission Information Type Contact Information
 - Technical Contact Information
 - Submitting on Behalf of Company
- Chemical Information
- Chemical Identification
- User Requests
- Waiver KRemove

Section 4 § 40 CFR 766 Dibenzodioxins / Dibenzofurans > User Requests > Waiver

WAIVER

To request a waiver, please identify the appropriate qualifying reason and then click the Attach Document button to attach any supporting documentation.

- The chemical substance is produced only in quantities of 100 kilograms or less per year, only for research and development purposes
- The cost of testing would drive the chemical substance off the market, or prevent resumption of manufacture or import of the chemical substance, if it is not currently manufactured, and the chemical substance will be produced so that no unreasonable risk will occur due to its manufacture, import, processing, distribution, use, or disposal. (In this case, the manufacturer must submit to EPA all data supporting the determination.)

Attach Document

Attachment Date |

CBI Action

Nothing found to display.

Previous





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Section 4 § 40 CFR 766 Dibenzodioxins / Dibenzofurans

Primary Authorized Official

40 CFR 766 Dibenzodioxins / Dibenzofurans

Submission Information Type Contact Information

> Information Submitting on Behalf

Technical Contact

of Company Chemical Information

Chemical Identification

Exclusion

Remove

User Requests

Section 4 § 40 CFR 766 Dibenzodioxins / Dibenzofurans > User Requests > Exclusion

EXCLUSION

To request exclusion, please identify the appropriate qualifying reason and then click the Attach Document button to attach required documentation.

- Testing of the appropriate grade of the chemical substance has already been carried out, either analytical testing at the lowest LOQ possible, with appropriate QA/QC, or a well-designed bioassay with appropriate QA/QC
- Process and reaction conditions of the chemical substance such that no HDDs/HDFs could be produced under those conditions.

Attach Document

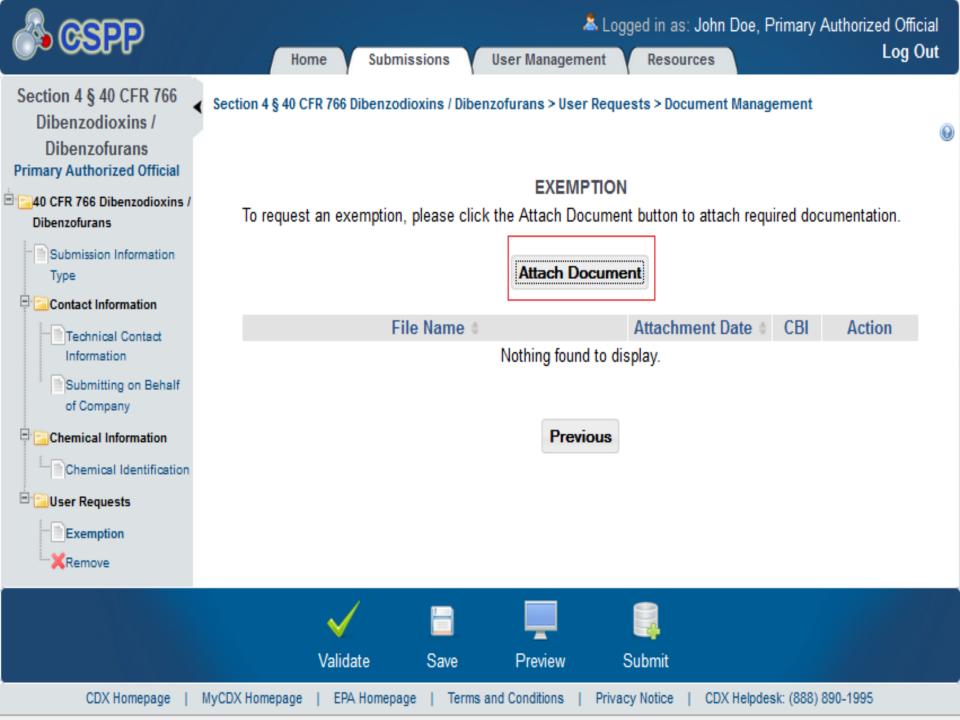
File Name 9

Attachment Date *

CBI Action

Nothing found to display.

Previous



Section 4: Download a Copy of Record





SECTION 4 TEST RULES, ECAS, MOUS, AND 40 CFR 766



- If starting a Section 4 Test Rule, ECA, MOU, or a 40 CFR 766 submission, select the appropriate submission type from the drop-down menu and click the 'Start New Submission' button.
- To edit an In Progress submission, click the submission link in the Submission Alias column in the table below.
- To access and edit a submission previously **Submitted** through CDX, unlock the submission by clicking the lock icon (id) and enter your passphrase originally associated with the selected submission. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (-) to download a copy of record for a completed submission. It may take up to 15 minutes for the copy of record to become available.
- You may delete any submission that has not yet been submitted by clicking the delete icon (X).

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Items Per Page: 25 ▼ 5 items found. Page 1 of 1

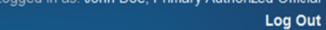
Submission Alias ÷	CFR/FRN ÷	Status \$	Modify Date \$	Submission Date \$	Copy of Record	Action
CFR766-20131125-11:08:20 EST	40 CFR 766 Dibenzodioxins / Dibenzofurans	ln Progress	11/25/2013			×
ECA-20131125-11:05:14 EST	68 FR 33125	Submitted	11/25/2013	11/25/2013	₩.	
MOU-20131125-11:08:02 EST	MOUForm	ln Progress	11/25/2013			×
TestRules 1	53 FR 22300	ln Progress	11/25/2013	11/22/2013	•	
TestRules-20131125-15:31:19 EST	53 FR 22300	ln Progress	11/25/2013			×

Export options: 4 CSV | X Excel | XML | A PDF

Select the submission type and then click Start New Submission Submission Type:

Start New Submission







DOWNLOAD COPY OF RECORD

You can now download the Copy of Record for the Section 4 Submission!



Download Copy of Record:

File Name

Copy of Record

Actions



Download Attachments:

File Name File Type File Size Actions

Home

We will resume in 5 minutes



Section 8(d) Health & Safety Data Reporting Tool







CHEMICAL INFORMATION SUBMISSION SYSTEM

TSCA Section 8(d) Health & Safety Data Reporting

ΟK

The software includes embedded help files and downloadable user manual to guide you through the 8(d) Health & Safety Data Reporting submission process.

EPA has the authority to publicize rules to require producers, importers, and processors to submit lists and/or copies of ongoing and completed unpublished health and safety studies. EPA's TSCA Section 8(d) Health & Safety Data Reporting Rule was established to gather health and safety information on chemical substances and mixtures needed by EPA to carry out its TSCA mandates (i.e., to support OPPT's Existing Chemicals Program and Chemical Testing Program and to set priorities for TSCA risk assessment/management activities). OPPT has also used its TSCA Section 8(d) authority to gather information needed by other federal agencies and EPA program offices. Chemicals that are designated or recommended for testing by the TSCA Interagency Testing Committee (ITC) may be added to the rule via immediate final rulemaking (up to 50 substances per year). Non-ITC chemicals can be added to the Section 8(d) rule via notice and comment rulemaking.

Paperwork Reduction Act Notice

The information collection requirements contained in this final rule have been submitted for OMB approval under PRA, 44 U.S.C. 3501 et seq. The ICR document prepared by EPA, identified under EPA ICR No. 2412.01 and OMB control number 2070-0004, is available in the docket for the proposed rule. The ICR addresses the incremental changes to the currently approved ICR documents that cover the existing reporting and record keeping programs that are approved under OMB control numbers 2070-0004, 2070-0033, and 2070-0054. An agency may not conduct or sponsor, and a person is not required to, respond to a collection of information unless it displays a currently valid OMB control number. The amended information collection activities contained in this final rule are designed to assist the Agency in meeting its responsibility under TSCA to receive, process, and review reports, data, and other information. As such, responses to the collection of information covered by this ICR would still be mandatory, but with the final rule, respondents would be required to use the CISS reporting tool.

Authority

The Government Paperwork Elimination Act (GPEA) (44 U.S.C. 3504) provides that, when practicable, Federal organizations use electronic forms, electronic filings, and electronic signatures to conduct official business with the public. EPA's Cross-Media Electronic Reporting Regulation (CROMERR) (40 CFR part 3) (Ref. 2), provides that any requirement in title 40 of the CFR to submit a report directly to EPA can be satisfied with an electronic submission that meets certain conditions once the Agency published a document in the **Federal Register** announcing that EPA is prepared to receive certain documents in electronic form. For more information about CROMERR, go to http://www.epa.gov/cromerr.

Submissions

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Submissions

Create, modify, or delete a submission by clicking the **Submissions** tab.

Persons who must report under the TSCA Section 8(d) rule include:

- Current, as well as prospective, manufacturers, importers, and processors of the subject chemical(s).
- Persons who, in the 10 years preceding the effective date that a substance or mixture is added to the rule, either had proposed to produce, import, or process, or had produced, imported, or processed the substance or listed mixture. Once a chemical substance or mixture is added to the rule, reporting obligations terminate (i.e., sunset) no later than 2 years after the effective date of the listing of the substance or mixture or on the removal of the substance or mixture from the rule.

User Management

Manage the access rights of Supports for each Section 8(d) Health & Safety Data Reporting submission. For every Support, the Authorized Official may grant him/her the ability to edit (but not unlock, create, delete, or submit) the submission.

Resources

A helpful guide that describes the Section 8(d) Health & Safety Data Reporting system and provides useful links for further usability instruction.

Authorized Official

An Authorized Official has the ability to create, amend and unlock submissions. The Authorized Official may also submit completed submissions either electronically or by mail. Finally, the Authorized Official has the ability to assign Supports to individual submissions.



Submissions

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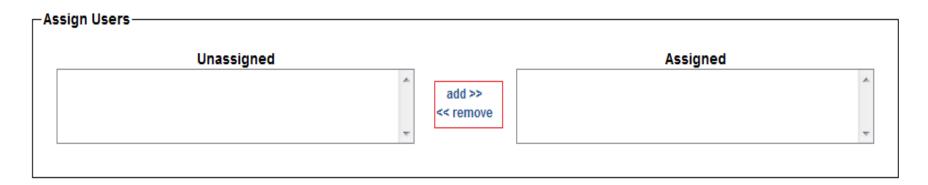
Log Out



USER MANAGEMENT

The Authorized Official is responsible for restricting a Support's access to select submissions by assigning or unassigning them to each submission alias. The Support can access and edit only those submissions for which the Authorized Official has granted access. Select a submission alias from the **Submission Alias** drop-down menu, and assign a Support to the submission by highlighting the individual and clicking the **add** link. To unassign a Support, highlight the individual and click the **remove** link. To highlight and assign or unassign multiple Supports, hold down the **Ctrl** or **Shift** keys on the keyboard and click each Support before moving. You must click the **Save** button after each submission assignment.

	Submission Alias:	▼	
Submissi	ion Alias		_
CASRN(s)			
Federal R	egister Notice:		





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Submissions

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- Current, as well as prospective, manufacturers, importers, and processors of the subject chemical(s).
- Persons who, in the 10 years preceding the effective date that a substance or mixture is added to the rule, either had proposed to produce, import, or process, or had produced, imported, or processed the substance or listed mixture. Once a chemical substance or mixture is added to the rule, reporting obligations terminate (i.e., sunset) no later than 2 years after the effective date of the listing of the substance or mixture or on the removal of the substance or mixture from the rule.

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Submissions

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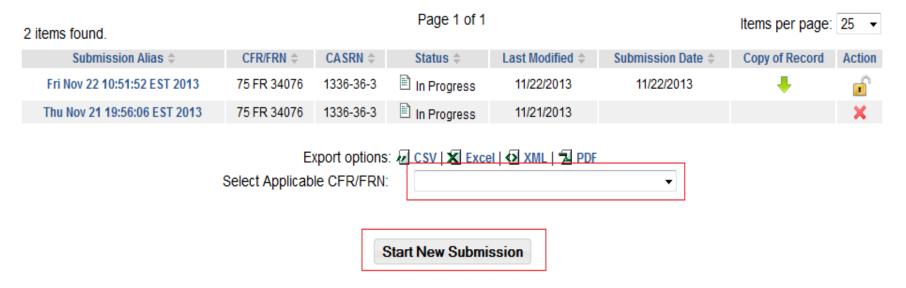
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SECTION 8(d) HEALTH & SAFETY DATA REPORTING

- If starting a Section 8(d) Health & Safety Data Reporting submission for the first time in CDX, select a CFR/FRN from the drop-down menu and click the Start New Submission button.
- To edit an In Progress submission, click the submission alias link in the Submission Alias column in the table below.
- To access and edit a form previously Submitted through CDX, unlock the form by clicking the lock icon (i) and enter your passphrase originally associated with the selected form. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (-) to download a copy of record for a submitted form. It may take up to 15 minutes for the copy of record to become available.
- You may delete any submission that has not yet been submitted by clicking the delete icon (X).







CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length and does not exceed 20 characters. To protect your account, your passphrase should contain a combination of letters and numbers. The passphrase you create may include spaces but should not contain special characters (for example, +,?, and *). You can associate the same passphrase with multiple submissions.

A passphrase can only be created by an Authorized Official for a submission. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: You will be responsible for remembering the passphrase and distributing it to only authorized Supports. If you forget the passphrase, you will not be able to access the Section 8(d) Health & Safety Data Reporting submission to print, submit, or make changes.'

New Passphrase: Confirm New Passphrase:	
Cancel	Next



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Section 8(d) Health & Safety Data Reporting > General Submission Information

GENERAL SUBMISSION INFORMATION

You have chosen to report under 75 FR 17645. Based on this selection, all data entered in this form should pertain to the CFR/FRN selected on the Submissions screen.

The submission alias is an optional field that changes the submission name on the **Submissions Screen**. Its purpose is to make it easier to distinguish between multiple submissions. If an alias is not selected, the field will default to the date and time it was created. The submission alias may be changed at any time.

Please enter a **Submission Alias** in the field below:

Submission Alias: Thu Sep 12 14:13:38 EDT 2013

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Submissions

This is a submission on behalf of another company:

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Section 8(d) Health & Safety Data Reporting > Contact Information > Technical Contact Information

TECHNICAL CONTACT INFORMATION

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this submission. Identify if this submission is being submitted on behalf of another company by checking the checkbox. Click the Copy button below to import your CDX registration contact information.

Copy CDX Registration	
CBI:	
Prefix:	
First Name:	
Middle Initial:	
Last Name:	
Suffix:	
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	
Postal Code:	
Country:	·
	Previous Next
	Previous











👗 Logged in as: John Doe, Primary Authorized Official

Log Out

Section 8(d) Health & Safety Data Reporting > Chemical Information > Chemical Substance Identity of Impurities

CHEMICAL SUBSTANCE IDENTITY OF IMPURITIES

Identify any impurity or additive known to have been present in the substance or listed mixtures as studied. To search EPA's Substance Registry Services (SRS) for the desired chemical(s), click the magnifying glass below.

Chemical Identifying SRS Chemical Name (descriptor) Synonyms CBI Actions Number Q



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SEARCH SUBSTANCE REGISTRY SERVICES

Enter the specific or partial, currently correct Chemical Abstracts (CA) Index name as listed on the TSCA Inventory and/or the exact corresponding Chemical Abstract Services Registry Number (CASRN) for each reportable chemical substance at your site. Click Search and select the appropriate CA Index name/ CASRN combination from EPA's Substance Registry Services (SRS).

1. CASRN:	Matches exactly	17
2. CA Index Name or Other Synonym:	Matches Exactly *	
		Search

Enter the specific or partial, currently correct Accession Number as listed on the TSCA Inventory and/or the exact or partial corresponding Generic Name for each reportable chemical substance at your site. Click Search and select the appropriate Accession Number/ Generic Name combination from EPA's Substance Registry Services (SRS).

Please search by Accession Num	ber and/or Generic Name	
Accession Number:	Matches Exactly ~	
2. Generic Name:	Matches Exactly =	
		Search





CHEMICAL NOT FOUND IN SUBSTANCE REGISTRY SERVICES

Complete all known chemical substance information in the below fields. To add multiple Chemical Synonyms, click the *button to add each synonym. Click the 'OK' button when all known chemical substance information has been fulfilled.

Chemical ID	
Unknown:	
Accession Number:	
CASRN:	
PMN Number:	
IUPAC Name:	
Chemical Name (descriptor):	
Chemical Synonym:	

OK

Cancel



Submissions

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Section 8(d) Health & Safety Data Reporting

Studies > Study Identification

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- General Submission Information
- Contact Information Technical Contact
- Information Submitting On Behalf Of
- Company Chemical Information
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- Study Identification
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STUDY IDENTIFICATION

Please select which types of studies you will be submitting:

- Not Applicable
 - Full Study Report
 - Initiated Studies
 - Ongoing Studies
 - Robust Summary
 - Studies Which are Known but without Possession of Copies
 - Studies Previously Sent to Federal Agencies without Confidentiality Claims

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Study Identification **Full Study Report**

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Studies Which are

Known but without

Section 8(d) Health & Safety Data Reporting > Studies > Full Study Report

FULL STUDY REPORT

CBI

Click the **Add Document** button to add a new Full Study Report document. **Add Document**

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Privacy Notice





FULL STUDY REPORT

Browse for the appropriate Full Study Report document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V
Document Upload:	Browse
Sanitized Document Upload:	Browse
Effects:	*
EndPoints:	
	OK Cancel



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Known but without

Section 8(d) Health & Safety Data Reporting > Studies > Initiated Studies

INITIATED STUDIES

Select the Add Document radio button option to attach a Initiated Studies document, or select the Add Studies radio button option to enter all required Initiated Studies information.

Select:

Add Documents

Add Studies

Click the Add Document button to add a new Initiated Studies document
Add Document

File Name CBI Actions

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INITIATED STUDIES

Browse for the appropriate Initiated Studies document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	
Document Upload:	Browse
Sanitized Document Upload:	Browse
Effects:	
EndPoints	



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INITIATED STUDIES

Select the Add Document radio button option to attach a Initiated Studies document, or select the Add Studies radio button option to enter all required Initiated Studies information.

Select: Add Documents Add Studies

Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, beginning date of the study, the purpose of the study, types of data to be collected, and the name and address of the laboratory conducting the study.

	Cancel
Study Title:	
Study Start Date:	
Study End Date:	
Study Purpose:	
	=
Data to be Collected:	***
	.::
Create a new Laboratory or	select an existing one from the drop-down. Create New
CBI:	
Laboratory Name:	
Mailing Address 1:	
Mailing Address 2:	
City:	
City: State:	*
-	*
State: Postal Code:	
State:	

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Section 8(d) Health & Safety Data Reporting > Studies > Ongoing Studies

ONGOING STUDIES

Select the Add Document radio button option to attach a Ongoing Studies document, or select the Add Studies radio button option to enter all required Ongoing Studies information.

Select:

Add Documents

Add Studies

Click the Add Document button to add a new Ongoing Studies document. Add Document

File Name CBI

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Validate



ONGOING STUDIES

Browse for the appropriate Ongoing Studies document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V
Document Upload:	Brows
Sanitized Document Upload:	Brows
Effects:	
EndPoints:	*
	OK Cancel

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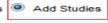
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Section 8(d) Health & Safety Data Reporting > Studies > Ongoing Studies

ONGOING STUDIES

Select the Add Document radio button option to attach a Ongoing Studies document, or select the Add Studies radio button option to enter all required Ongoing Studies information.

Select: Add Documents



Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, beginning date of the study, the purpose of the study, types of data to be collected, and the name and address of the laboratory conducting the study.

	Cancel
Study Title:	
Study Start Date:	
Study End Date:	
Study Purpose:	
	_==
Data to be Collected:	
	r select an existing one from the drop-down. Create New
CBI:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2: City:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2:	r select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2: City:	
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2: City: State:	

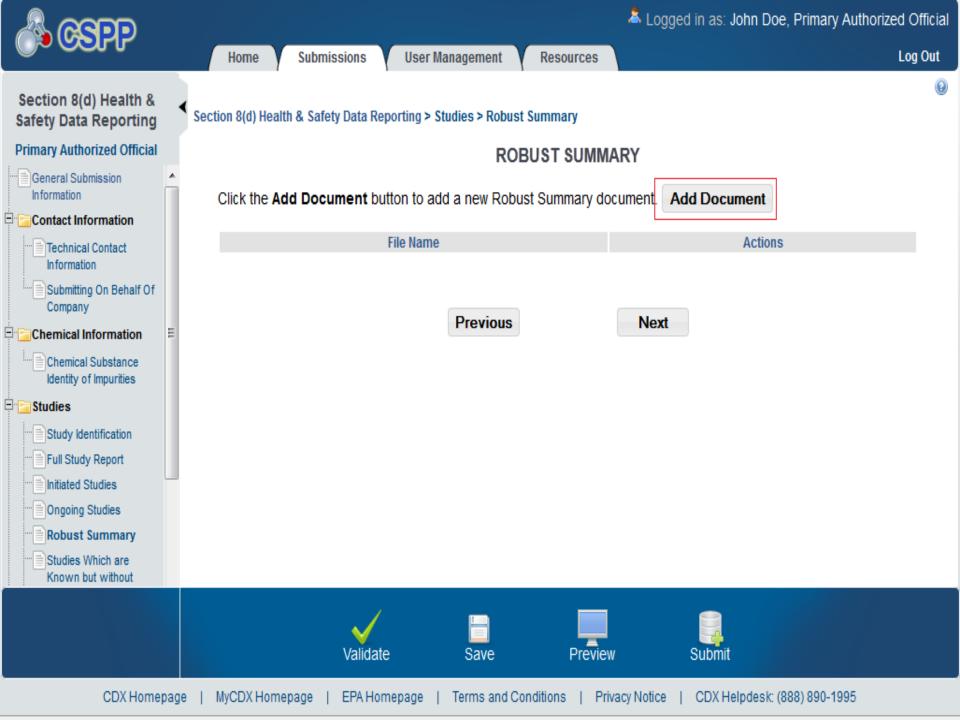
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ROBUST SUMMARY

Browse for the appropriate Robust Summary document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

Document Upload:		Browse
Effects:		
EndPoints:		٧
	OK Cancel	



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Studies Which are
Known but without

Section 8(d) Health & Safety Data Reporting > Studies > Studies Which are Known but without Possession of Copies

STUDIES WHICH ARE KNOWN BUT WITHOUT POSSESSION OF COPIES

Select the Add Document radio button option to attach a Studies Which are Known but without Possession of Copies document, or select the Add Studies radio button option to enter all required Studies Which are Known but without Possession of Copies information.

Select:

Add Documents

Add Studies

Click the **Add Document** button to add a new Studies Which are Known but without Possession of Copies document.

Add Document

File Name

CBI

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STUDIES WHICH ARE KNOWN BUT WITHOUT POSSESSION OF COPIES

Browse for the appropriate Studies Which are Known but without Possession of Copies document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V	
Document Upload:	Bro	WS
Sanitized Document Upload:	Bro	WS
Effects:		٧
EndPoints:		٧
	OK Cancel	

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Section 8(d) Health & Safety Data Reporting > Studies > Studies Which are Known but without Possession of Copies

STUDIES WHICH ARE KNOWN BUT WITHOUT POSSESSION OF COPIES

Select the Add Document radio button option to attach a Studies Which are Known but without Possession of Copies document, or select the Add Studies radio button option to enter all required Studies Which are Known but without Possession of Copies information.

Select: Add Documents Add Studies

Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, and the name and address of the contact conducting the study.

	Cancel
Study Title:	
Create a new Contact or s	elect an existing one from the drop-down. Create New
CBI:	
Prefix:	w
First Name:	
Last Name:	
Suffix:	w
Phone Number:	Ext:
Email Address:	(Do not enter any dashes (-) in Phone Number field above.)
Mailing Address 1:	
Mailing Address 2:	Street address, P.O. box, company name, etc.
City:	Apartment, suite, etc.
State:	-
Postal Code:	
Country:	-
	Save
	Add Study





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STUDIES PREVIOUSLY SENT TO FEDERAL AGENCIES WITHOUT CONFIDENTIALITY CLAIMS

Select the Add Document radio button option to attach a Studies Previously Sent to Federal Agencies without Confidentiality Claims document, or select the Add Studies radio button option to enter all required Studies Previously Sent to Federal Agencies without Confidentiality Claims information.

Select:
Add Documents
Add Studies

Click the **Add Document** button to add a new Studies Previously Sent to Federal Agencies without Confidentiality Add Document Claims document.

File Name CBI Actions

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STUDIES PREVIOUSLY SENT TO FEDERAL AGENCIES WITHOUT CONFIDENTIALITY CLAIMS

Browse for the appropriate Studies Previously Sent to Federal Agencies without Confidentiality Claims document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V		
Document Upload:	Br	Browse	
Sanitized Document Upload:	Br	Browse	
Effects:			
EndPoints:		v	
	OK Cancel		

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STUDIES PREVIOUSLY SENT TO FEDERAL AGENCIES WITHOUT CONFIDENTIALITY CLAIMS

Select the Add Document radio button option to attach a Studies Previously Sent to Federal Agencies without Confidentiality Claims document, or select the Add Studies radio button option to enter all required Studies Previously Sent to Federal Agencies without Confidentiality Claims information.

Select: Add Documents Add Studies

Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, submission date of the study, the agency, and the name and address of the agency contact conducting the study.

Study Title:	
Study Submission Date:	
Agency	
	¥
Create a new Contact or sel	ect an existing one from the drop-down. Create New
CBI:	
Prefix:	· ·
First Name:	
Last Name:	
Suffix:	-
Phone Number:	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	(Do not enter any basiles (-) in Priorie Number nela above.)
Mailing Address 1:	
Mailing Address 2:	Street address, P.O. box, company name, etc.
walling Address 2.	Apartment, suite, etc.
City:	
State:	
Postal Code:	
Country:	
	Save

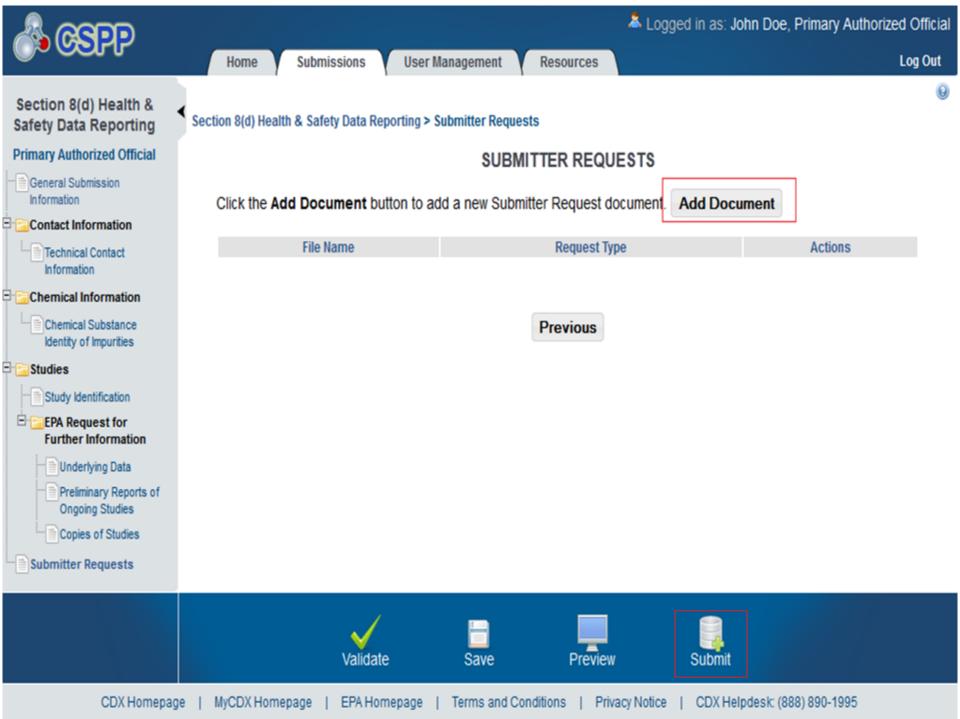
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8(d) User Request





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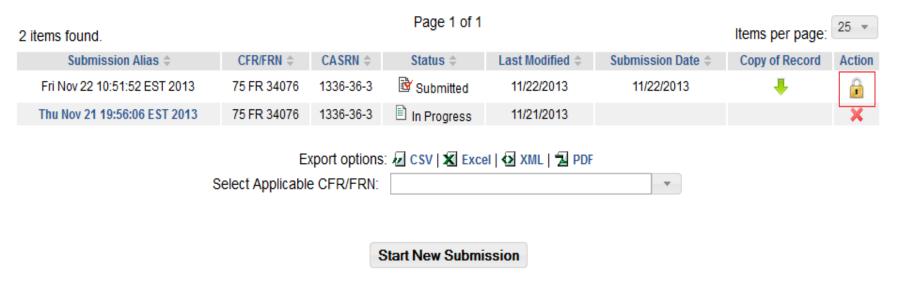
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SECTION 8(d) HEALTH & SAFETY DATA REPORTING

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- You may delete any submission that has not yet been submitted by clicking the delete icon (X).







Please enter your user passphrase and click **Next**



Forgot Your Passphrase?

For security reasons, the system administrator does not have access to your passphrase and cannot retrieve it or reset it to a new one. If you have forgotten your passphrase, you must complete a new Section 8(d) Health & Safety Data Reporting submission.

Cancel



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Contact Information

Technical Contact

Chemical Information

Chemical Substance Identity of Impurities

🗄 📴 Studies

Study Identification

Submitter Requests

STUDY IDENTIFICATION

Please select which types of studies you will be submitting:

- Not Applicable
 - Full Study Report
 - Initiated Studies
 - Ongoing Studies
 - Robust Summary
 - Studies Which are Known but without Possession of Copies
 - Studies Previously Sent to Federal Agencies without Confidentiality Claims

EPA Request for Further Information

- Underlying Data
- Preliminary Reports of Ongoing Studies
- Copies of Studies

Previous











Submissions User Management Home

Logged in as: John Doe, Primary Authorized Official

Resources

Log Out

Safety Data Reporting

Primary Authorized Official General Submission

Information Contact Information

Technical Contact Information

Chemical Information Chemical Substance

Identity of Impurities Studies

Study Identification EPA Request for

> Further Information **Underlying Data**

Ongoing Studies Copies of Studies

Preliminary Reports of

Submitter Requests

UNDERLYING DATA

Add Document Click the **Add Document** button to add a new Underlying Data document.

File Name

Previous

Section 8(d) Health & Safety Data Reporting > Studies > EPA Request for Further Information > Underlying Data

CBI

Actions

Next

Submit

Validate





UNDERLYING DATA

Browse for the appropriate Underlying Data document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	
Document Upload:	Brows
Sanitized Document Upload:	Brows
Effects:	•
EndPoints:	•
	OK Cancel



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Submissions

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Section 8(d) Health & Safety Data Reporting

Section 8(d) Health & Safety Data Reporting > Studies > Preliminary Reports of Ongoing Studies

Primary Authorized Official

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Study Identification

□ □ EPA Request for Further Information

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Preliminary
Reports of
Ongoing Studies

Copies of Studies

Submitter Requests

PRELIMINARY REPORTS OF ONGOING STUDIES

Select the Add Document radio button option to attach a Preliminary Reports of Ongoing Studies document, or select the Add Studies radio button option to enter all required Preliminary Reports of Ongoing Studies information.

Select:

Add Documents

Add Studies

Click the Add Document button to add a new Preliminary Reports of Ongoing Studies document.

Add Document

File Name

CBI

Actions

Previous

Next





Preview





PRELIMINARY REPORTS OF ONGOING STUDIES

Browse for the appropriate Preliminary Reports of Ongoing Studies document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V
Document Upload:	Browse
Sanitized Document Upload:	Browse
Effects:	
EndPoints:	
	OK Cancel

Primary Authorized Official

General Submission Information

Contact Information

Technical Contact Information Submitting On Behalf

Of Company Chemical Information

Chemical Substance Identity of Impurities

☐ Studies

Study Identification EPA Request for Further Information

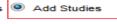
> Underlying Data Preliminary Reports of Ongoing Studies Copies of Studies

Submitter Requests

PRELIMINARY REPORTS OF ONGOING STUDIES

Select the Add Document radio button option to attach a Preliminary Reports of Ongoing Studies document, or select the Add Studies radio button option to enter all required Preliminary Reports of Ongoing Studies information.

Select: Add Documents



Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, beginning date of the study, the purpose of the study, types of data to be collected, and the name and address of the laboratory conducting the study.

Study Title:	
Study Title: Study Start Date:	
_	
Study End Date:	
Study Purpose:	_=
Data to be Collected:	* * *
Create a new Laboratory o	or select an existing one from the drop-down.
Create a new Laboratory (or select an existing one from the drop-down. Create New
	or select an existing one from the drop-down. Create New
CBI:	or select an existing one from the drop-down. Create New
CBI: Laboratory Name:	or select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1:	or select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2:	or select an existing one from the drop-down. Create New
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2: City:	
CBI: Laboratory Name: Mailing Address 1: Mailing Address 2: City: State:	

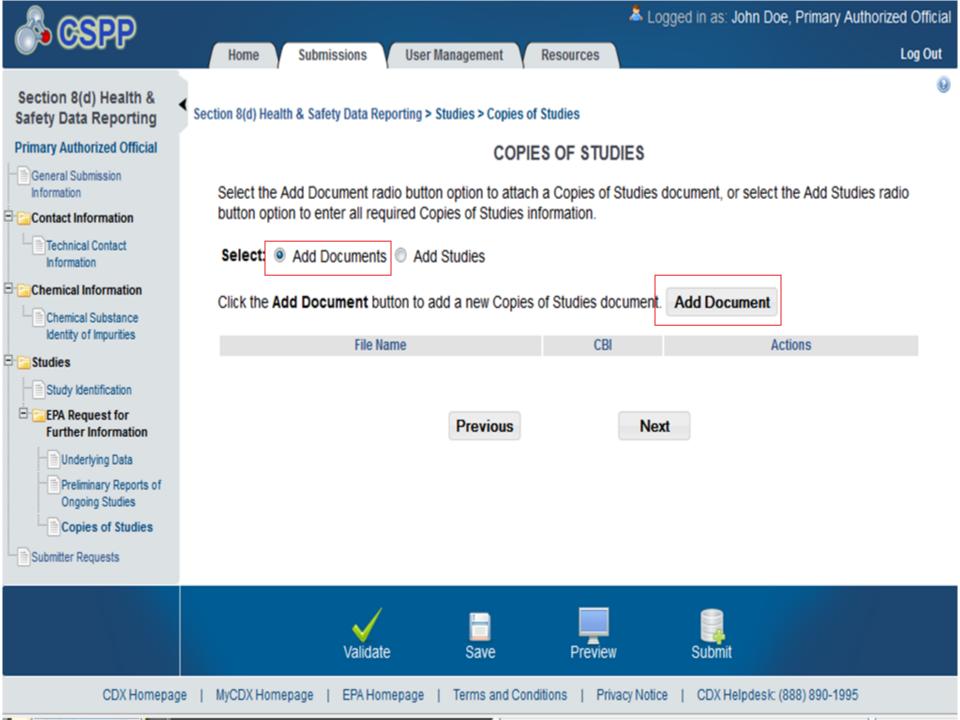
Previous















COPIES OF STUDIES

Browse for the appropriate Copies of Studies document.

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:	V		
Document Upload:		Brow	5
Sanitized Document Upload:		Brow	5
Effects:		-	,
EndPoints:	lu lu		,
	ОК	Cancel	

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Section 8(d) Health & Safety Data Reporting

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Chemical Substance Identity of Impurities

☐ Studies

Study Identification EPA Request for

Further Information Underlying Data

Preliminary Reports of Ongoing Studies

Copies of Studies

Submitter Requests

Section 8(d) Health & Safety Data Reporting > Studies > EPA Request for Further Information > Copies of Studies

COPIES OF STUDIES

Select the Add Document radio button option to attach a Copies of Studies document, or select the Add Studies radio button option to enter all required Copies of Studies information.

Select: Add Documents Add Studies

Click the Add Study button to add information pertaining to each listed study. For each listed study, provide the title of the study, and the name and address of the contact conducting the study.

	Cancel
Study Title:	
Create a new Contact or s	elect an existing one from the drop-down. Create New
CBI:	
Prefix:	w .
First Name:	
.ast Name:	
Suffix:	*
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	
Mailing Address 2:	Street address, P.O. box, company name, etc.
	Apartment, suite, etc.
City:	
State:	-
Postal Code:	
Country:	-
	Save
	Add Study





Previous





Section 8(a) PAIR Tool





Primary Authorized Official





CHEMICAL INFORMATION SUBMISSION SYSTEM



The software includes embedded help files and downloadable user manual to guide you through the 8(a) PAIR submission process.

TSCA 8(a) gives EPA the broad authority to require, by rulemaking, manufacturers (includes importers) and processors of chemical substances to maintain records and/or report such data as EPA may reasonably require to carry out the TSCA mandates.

Section 8(a) regulations can be tailored to meet unique information needs (e.g., via chemical-specific rules) or information can be obtained via use of "model" or standardized reporting rules. One example of a model TSCA Section 8(a) reporting rule is the "Preliminary Assessment Information Rule" (or PAIR).

Paperwork Reduction Act Notice

The information collection requirements contained in this final rule were submitted for OMB approval under PRA, 44 U.S.C. 3501 et seq. The ICR document prepared by EPA, identified under EPA ICR No. 2412.01 and OMB control number 2070-0054, is available in the docket for the proposed rule. The ICR addresses the incremental changes to the five currently approved ICR documents that cover the existing reporting and record keeping programs that are approved under OMB control numbers 2070-0004, 2070-0012, 2070-0033, 2070-0054, and 2070-0156. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The amended information collection activities contained in this final rule are designed to assist the Agency in meeting its responsibility under TSCA to receive, process, and review reports, data, and other information. As such, responses to the collection of information covered by this ICR would still be mandatory, but with the final rule, respondents would be required to use the CISS reporting tool.

Authority

The Government Paperwork Elimination Act (GPEA) (44 U.S.C. 3504) provides that, when practicable, Federal organizations use electronic forms, electronic filings, and electronic signatures to conduct official business with the public. EPA's Cross-Media Electronic Reporting Regulation (CROMERR) (40 CFR part 3) (Ref. 2), provides that any requirement in title 40 of the CFR to submit a report directly to EPA can be satisfied with an electronic submission that meets certain conditions once the Agency published a document in the **Federal Register** announcing that EPA is prepared to receive certain documents in electronic form. For more information about CROMERR, go to http://www.epa.gov/cromerr.



HOME

Forms

Under PAIR, producers and importers of a listed chemical are required to report the following site-specific information:

- · Quantity of chemical produced and/or imported
- · Amount of chemical lost to the environment during production or importation
- · Quantity of enclosed, controlled and open releases of the chemical
- . Per release, the number of workers exposed and the number of hours exposed

User Management

Manage the access rights of Supports for each 8(a) PAIR form. For every Support, the Authorized Official may grant him/her the ability to edit (but not unlock, create, delete, or submit) the form.

Resources

A helpful guide that describes the 8(a) PAIR system and provides useful links for further usability instruction.

Authorized Official

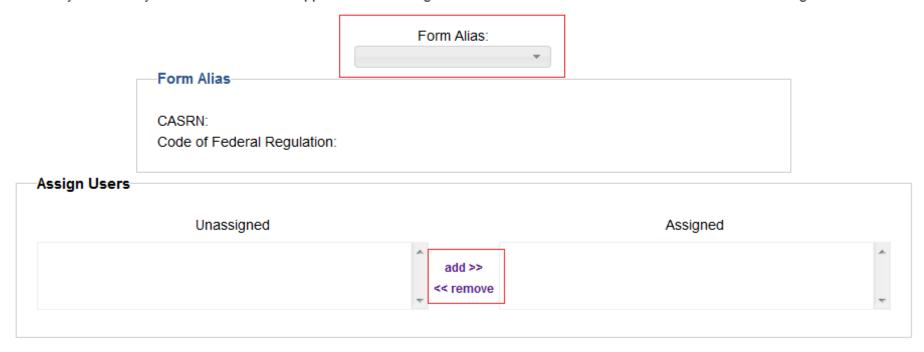
An Authorized Official has the ability to create, amend and unlock 8(a) PAIR forms. The Authorized Official may also submit completed forms electronically.





USER MANAGEMENT

The Authorized Official is responsible for restricting a Support's access to select forms by assigning or unassigning them to each Form Alias. The Support can access and edit only those forms for which the Authorized Official has granted access. Select a form alias from the Form Alias drop-down menu, and assign a Support to the form by highlighting the individual and clicking the add link. To unassign a Support, highlight the individual and click the remove link. To highlight and assign or unassign multiple Supports, hold down the Ctrl or Shift keys on the keyboard and click each Support before moving. You must click the Save button after each form alias assignment.





Forms

Under 8(a) PAIR, producers, importers, and processors of a listed chemical are required to report the following site-specific information:

· Quantity of chemical produced and/or imported

Home

Amount of chemical lost to the environment during production or importation

Forms

- Quantity of enclosed, controlled and open releases of the chemical
- · Per release, the number of workers exposed and the number of hours exposed

User Management

Manage the access rights of Supports for each 8(a) PAIR form. For every Support, the Authorized Official may grant him/her the ability to edit (but not unlock, create, delete, or submit) the form.

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Authorized Official

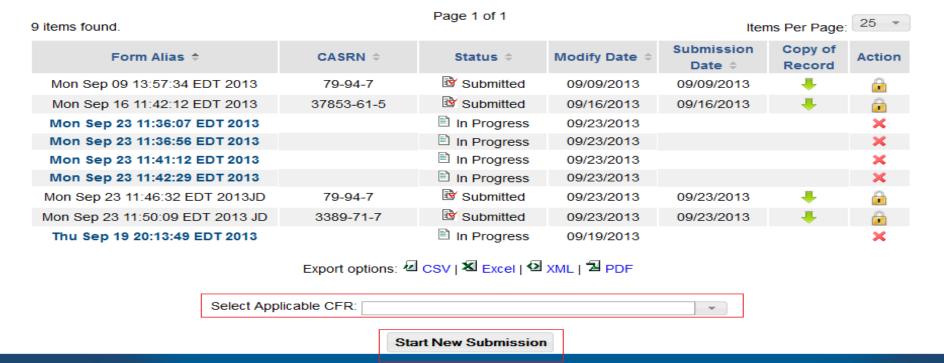
An Authorized Official has the ability to create, amend and unlock 8(a) PAIR forms. The Authorized Official may also submit completed forms electronically.



SECTION 8(a) PAIR

- If starting a Section 8(a) PAIR form for the first time in CDX, select the appropriate CFR from the drop-down menu and click the Start New Submission button.
- To edit an In Progress form, click the form alias link in the Form Alias column in the table below.
- To access and edit a form previously Submitted through CDX, unlock the form by clicking the lock icon () and enter your passphrase originally associated with the selected form. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (♣) to download a copy of record for a submitted form. It may take up to 15 minutes for the copy of record to become available.
- You may delete any form that has not yet been submitted by clicking the delete icon (X).

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Section 8(a)









CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length and does not exceed 20 characters. To protect your account, your passphrase should contain a combination of letters and numbers. The passphrase you create may include spaces but should not contain special characters (for example, +,?, and *). You can associate the same passphrase with multiple submissions.

> New Passphrase: Confirm New Passphrase:

A passphrase can only be created by an Authorized Official for an individual submission. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: You will be responsible for remembering the passphrase and distributing it to only authorized Supports for the submission type. If you forget the passphrase, you will not be able to access the Section 8(a) PAIR submission to print, submit, or make changes.

Cancel

 Ψ



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Forms

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Section 8(a) PAIR Reporting Primary Authorized Official ☐ 640 CFR 704.43

General Submission Information

> Contact Information Technical Contact Information

Chemical Information

Plant Site Physical Location

Mailing Address Preliminary

> Assessment Information - Part A

Preliminary Assessment

Information - Part B

Section 8(a) PAIR Reporting > 40 CFR 704.43> General Submission Information

GENERAL SUBMISSION INFORMATION

You have chosen to report under 40 CFR 704.43. Based on this selection, all data entered in this form should pertain to the following chemical selected from the drop-down menu below.

Please select, or begin typing, a CASRN in the drop-down menu below:

CASRN:

The form alias is an optional field that changes the submission name on the Forms Screen. Its purpose is to make it easier to distinguish between multiple submissions. If an alias is not selected, the field will default to the date and time it was created. The form alias may be changed at any time.

Form Alias:

Mon Sep 23 11:41:12 EDT 2013

Next

Upload XML



Save

Section 8(a) PAIR
Reporting Primary Authorized Officia
⊟ '

General Submission Information

Contact Information

Technical Contact Information

☐ Chemical Information

Plant Site Physical Location

Mailing Address

Preliminary Assessment Information - Part A

Preliminary Assessment Information - Part B Section 8(a) PAIR Reporting > 40 CFR 704.43 > Contact Information > Technical Contact Information

TECHNICAL CONTACT INFORMATION

Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this form. Identify if this submission is being submitted on behalf of another company by checking the checkbox. Click the Copy button below to import your CDX registration contact information.

This is a submission on behalf of another company:

Copy CDX Registration	
CBI:	
Prefix:	▼
First Name:	
Middle Initial:	
Last Name:	
Suffix:	-
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	Street address, P.O. box, company name, etc.
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
	Apartment, suite, etc.
City:	Apartment, suite, etc.
City: State:	Apartment, suite, etc.
_	





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Save





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Section 8(a) PAIR Reporting Primary Authorized Official □ □ 40 CFR 704.43

General Submission Information

Contact Information Technical Contact Information

> Submitting On Behalf Of Company

☐ Chemical Information

Plant Site Physical Location

Mailing Address

Preliminary

Assessment Information - Part A

Preliminary

Assessment Information - Part B Section 8(a) PAIR Reporting > Contact Information > Submitting On Behalf Of Company

SUBMITTING ON BEHALF OF COMPANY

Please fill out the fields below for the manufacturing or processing establishment on whose behalf this submission is being made.

CBI:	
Prefix:	*
First Name:	
Middle Initial:	
Last Name:	
Suffix:	· ·
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	
	Apartment, suite, etc.
City:	
State:	▼
Postal Code:	
Country:	▼
	Previous

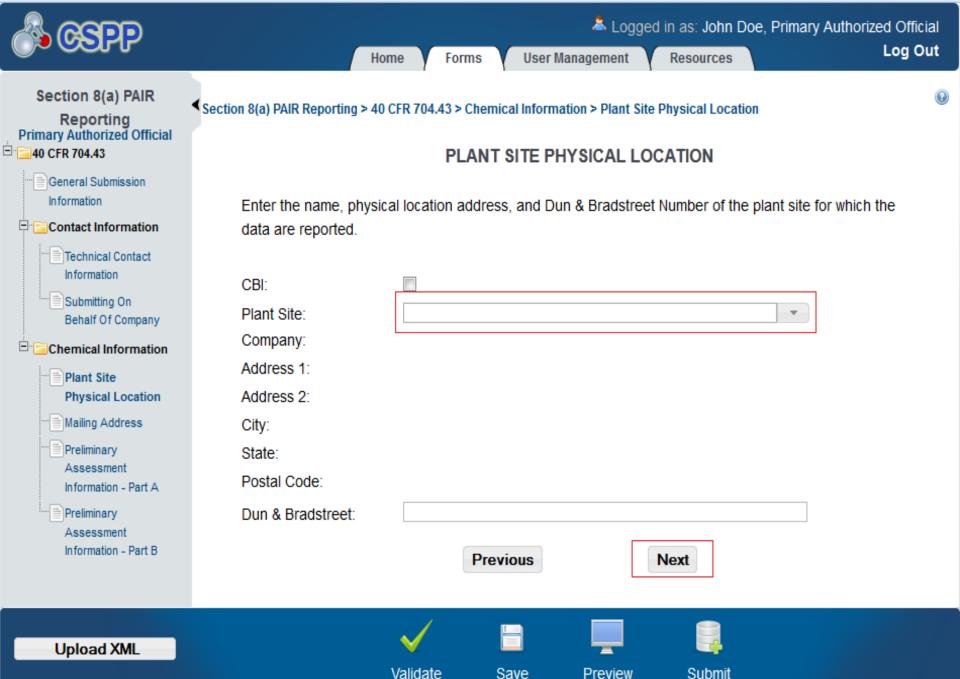
Upload XML













Section 8(a) PAIR Reporting Primary Authorized Official □ 10 CFR 704.43 General Submission Information □ Contact Information Technical Contact Information Submitting On Behalf Of Company

Plant Site Physical Location

Chemical Information

Mailing Address

- Preliminary
- Assessment
- Information Part A
- Preliminary Assessment
 - Information Part B

Section 8(a) PAIR Reporting > 40 CFR 704.43 > Chemical Information > Mailing Address

Forms

Home

MAILING ADDRESS

Select the appropriate radio button to show whether the plant site or corporate headquarters is submitting this form. Enter the corresponding name and mailing address. Click the Copy button to import information from the Plant Site Physical Location.

- Plant Site
- Corporate Headquarters

CBI:	
Company:	
Address 1:	
	Street address, P.O. box, company name, etc.
Address 2:	
	Apartment, suite, etc.
City:	
State:	
Postal Code:	







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Section 8(a) PAIR
Reporting Primary Authorized Official
□ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

General Submission Information

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Submitting On Behalf Of Company

☐ Chemical Information

Plant Site Physical Location

Mailing Address

Preliminary Assessment Information - Part А

Preliminary Assessment Information - Part B Section 8(a) PAIR Reporting > 40 CFR 704.43 > Chemical Information > Preliminary Assessment Information - Part A

Forms

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PRELIMINARY ASSESSMENT INFORMATION

Part A - Plant Site Activities

Please complete all fields below. Information in part A must be your best estimate from readily obtainable data.

This company is not involved in any manufacturing activity and imports a chemical at one site and processes it at another facility.

1.	Total Quantity Imported	kg		
2.	Quantity manufactured for sale or use	kg		
3a.	Quantity lost to the environment	kg	± %	
3b.	Quantity in wastes treated to destroy the chemical	kg	± %	
3c.	Quantity in wastes not treated to destroy the chemical	kg	± %	
3d.	Quantity lost during manufacture	kg		

Process Category Quantity (kg) Total Quantity (kg) **Total Workers Total Worker-Hours** Enclosed Controlled Release

5. On-Site Use as a Reactant CBI:

Open

4. Manufacture of the Chemical CBI:











Home

7. On-Site Preparation of Products CBI:

6. On-Site Nonreactant Use of the Chemical Substance CBI:

Section 8(a) PAIR
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340 CFR 704.43

General Submission
Information

Ė-

Contact Information

Technical Contact

Submitting On Behalf Of Company

E Chemical Information

Plant Site
Physical Location
Mailing Address

Preliminary
Assessment
Information - Part

Preliminary
Assessment
Information - Part
B

А

Process Category	Quantity (kg)	Total Quantity (kg)	Total Workers	Total Worker-Hour
Enclosed				
Controlled Release				
Open				

Process Category	Quantity (kg)	Total Quantity (kg)	Total Workers	Total Worker-Hours
Enclosed				
Controlled Release				
Open				

-				
Process Category	Quantity (kg)	Total Quantity (kg)	Total Workers	Total Worker-Hours
Enclosed				
Controlled Release				
Open				

-8. Manufacturer's Product	s CBI:			
a. Products for Export		kg		
	Domestic Indu	strial Products	Domestic Cons	umer Products
Chemical or Mixture	b.	kg	e.	kg
Article with Some Release	C.	kg	f.	kg
Article with No Release	d.	kg	g.	kg

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Next











9. Customer Uses and Products CBI:



	tion 8(a) PAIR Reporting Authorized Offici R 704.43
	eneral Submission formation
□ 📴 Со	ntact Information
	Technical Contact Information
	Submitting On
	Behalf Of
	Company
Ē- <mark>□</mark> Ch	emical Information
	Plant Site Physical Location Mailing Address
	Preliminary
	Assessment
	Information - Part
	A
	Preliminary
	Assessment
	Information - Part
	В

Section 8(a) PAIR Reporting > 40 CFR 704.43 > Chemical Information > Preliminary Assessment Informat	ion - Part I
--	--------------

PRELIMINARY ASSESSMENT INFORMATION

Part B - Chemical Substance Processing by Customers

Please complete all fields below. Information in part B must be accurate to within ±50%.

a. b.	Products for Export Quantity of Chemical Consumed as Reactant		kg		
	Do	mestic Industrial Prod	lucts	Domestic	Consumer Products
Che	mical or Mixture	c.	kg	f.	kg
Arti	cle with Some Release	d.	kg	g.	kg
Arti	cle with No Release	e.	kg	h.	kg
i.	Unknown Customer Use		kg	ı	
—10.	Customer Process Categ	ories CBI:			
	Customer Process Categ				
				kg	
Spe	cify Unknown if you do not	know within ±50%		kg kg	
Spe a.	cify Unknown if you do not Enclosed Processes	know within ±50%			

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> Submitting On Behalf Of Company

Chemical Information

Plant Site Physical Location

Mailing Address

Preliminary

Assessment

Information - Part A

Preliminary

Assessment Information - Part B

UPLOAD XML

Click the Upload XML File button below and select the XML file you have populated with information.

Upload XML file

Warning: When importing an XML file into the current form, if XML validation is passed, all form contents will be overwritten with the information stored within the imported XML file.

Export XML









CDX Homepage

Section 8(a) 40 CFR 766 Dibenzodioxins/Dibenzofurans







User Management

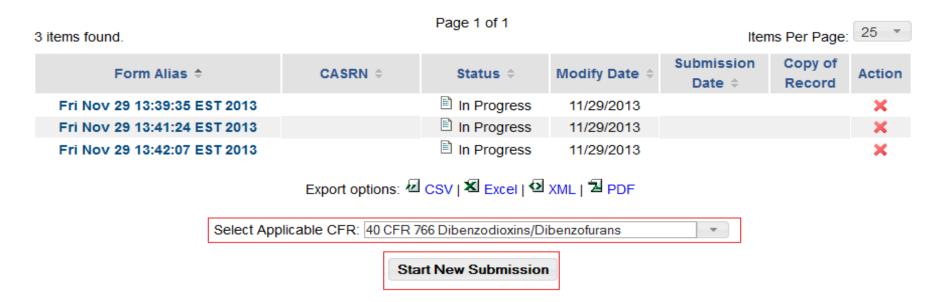


- If starting a Section 8(a) PAIR form for the first time in CDX, select the appropriate CFR from the drop-down menu and click the Start
 New Submission button.
- To edit an In Progress form, click the form alias link in the Form Alias column in the table below.

Forms

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- To access and edit a form previously Submitted through CDX, unlock the form by clicking the lock icon (i) and enter your passphrase originally associated with the selected form. All additional changes made to a submission will be submitted as an amendment.
- Click the green arrow icon (♣) to download a copy of record for a submitted form. It may take up to 15 minutes for the copy of record to become available.
- You may delete any form that has not yet been submitted by clicking the delete icon (X).







CREATE PASSPHRASE

Please create a passphrase that is at least 8 characters in length. To better protect your form, your passphrase should contain a combination of letters numbers. Your passphrase may include spaces, but should not contain special characters (for example, + and *).

As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized individuals. Your passphrase will be used as an encryption key to protect the contents of your data. As an Authorized Official, you are responsible for remembering your passphrase and distributing it to only authorized Supports.

Note: If you lose or forget your passphrase, you will not be able to access your Section 4 Submission to print, submit, or make changes. You will need to complete a new Section 4 Submission and create a new passphrase for the submission. For security reasons, the system administrator will not have access to your passphrase and will not be able to retrieve it or reset it.

New Passphrase: Confirm New Passphrase:	
Cancel	Next

Home

Forms

User Management

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Log Out



Management

Section 8(a) PAIR Reporting > 40 CFR 766 > General Submission Information

GENERAL SUBMISSION INFORMATION

You have chosen to report under **40 CFR 766**. Based on this selection, all data entered in this form should pertain to the following chemical selected from the drop-down menu below.

Please select, or begin typing, a CASRN in the drop-down menu below:

CASRN:

118-75-2

Chemical Name:

2,3,5,6-Tetrachloro-2,5-cyclohexadiene-1,4-dione

The form alias is an optional field that changes the submission name on the **Forms Screen**. Its purpose is to make it easier to distinguish between multiple submissions. If an alias is not selected, the field will default to the date and time it was created. The form alias may be changed at any time.

Form Alias:

Fri Nov 29 13:52:38 EST 2013

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Section 8(a) PAIR Reporting **Primary Authorized Official** 40 CFR 766

General Submission Information Contact Information Technical Contact Information Chemical Information

> Document Management

Section 8(a) PAIR Reporting > 40 CFR 766 > Contact Information > Technical Contact Information

Forms

TECHNICAL CONTACT INFORMATION

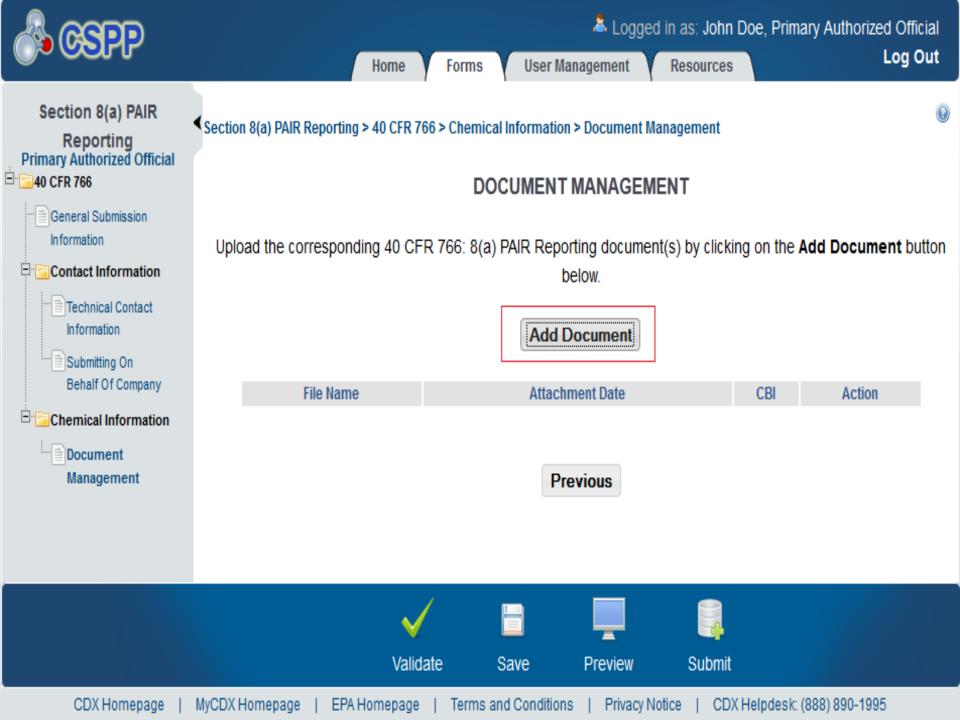
Identify the technical contact who is capable of answering questions related to the chemical(s) submitted to EPA within this form. Identify if this submission is being submitted on behalf of another company by checking the checkbox. Click the Copy button below to import your CDX registration contact information.

This is a submission on behalf of another company:

Home

Copy CDX Registration	
CBI:	
Prefix:	w
First Name:	
Middle Initial:	
Last Name:	
Suffix:	
Company Name:	
Phone Number:	Ext:
	(Do not enter any dashes (-) in Phone Number field above.)
Email Address:	
Mailing Address 1:	
	Street address, P.O. box, company name, etc.
Mailing Address 2:	Apartment, suite, etc.
	Apartinent, suite, etc.
City:	
State:	· •
Postal Code:	
Country:	
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DOCUMENT MANAGEMENT

Note: For security purposes, documents are only saved when there are no validation errors. If there are any validation errors, all documents must be reattached.

CBI:

1

Browse for the appropriate document.

Original Document:

Browse for the appropriate sanitized document.

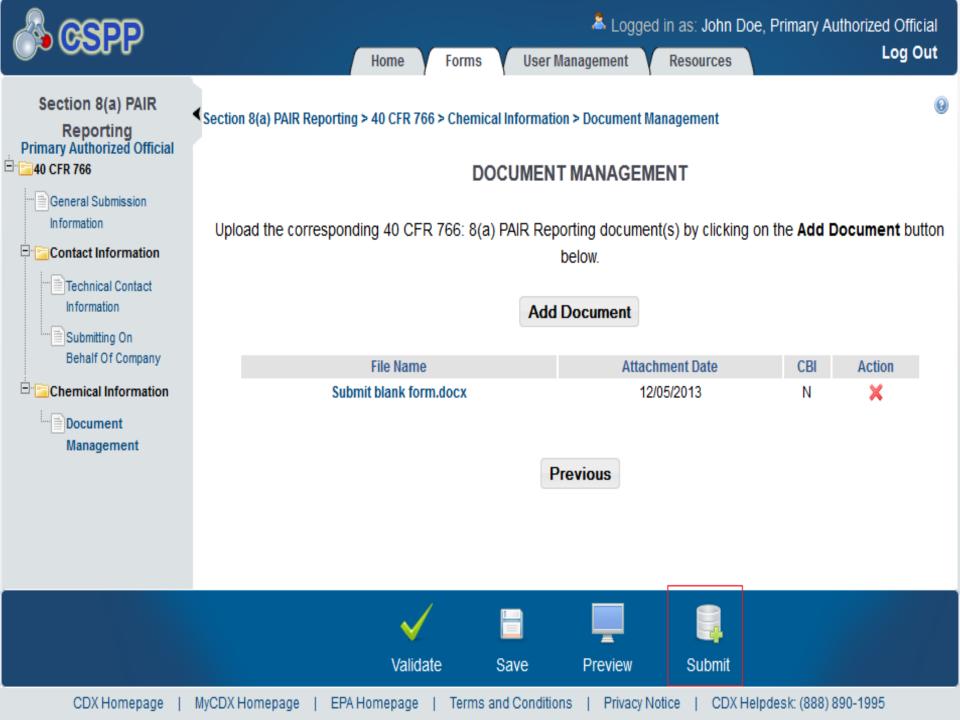
Sanitized Document:

Browse

Browse (optional)

OK

Cancel



Resources

- Resources
 - Resources screen within Section 8(d) and Section 8(a) web application provides useful links and user guides
- Contacts
 - TSCA Hotline: 202-564-3001, or <u>TSCA-Hotline@epamail.epa.gov</u>
 - CDX Helpdesk: 888-890-1995, or helpdesk@epacdx.net
- Industry Beta Testing (12/16-12/20)
 - Email <u>eTSCAReporting@epa.gov</u> to participate
- The slides and audio will be made available online
 - http://www.epa.gov/oppt/chemtest/ereporting/



Questions

Press *1 to ask a question

