

**U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
ANNUAL CHEMICAL (Hazardous Materials) INVENTORY SHEET**

Page # _____

Inventory Completed By _____

State _____

District/SO/Branch _____

Building Name _____

Work Area _____

DATE

Company Name/ Address - Phone	Product Name	Product Number	Form* Number	Cont. Size	No. of Cont. On Hand	National Stock Number NSN	User(s)	Remarks	MSDS on Hand (Yes/No)

*Form = 1 LIQUID, 2 AEROSOL, 3 SOLID, 4 GEL, 5 PASTE, 6 POWDER, 7 GAS