

TRIM

(Comcare use only)

Workplace number

(If previously notified)

# FORM WHS—HCM002 NOTIFICATION FORM—MANIFEST QUANTITIES SCHEDULE 11 CHEMICALS/ABANDONED TANK

Please note the following information before starting your application

- Manifest notifications should be made by the person conducting the business or undertaking (PCBU) at a workplace where Schedule 11 hazardous chemicals exceed the manifest quantity. When the PCBU in these circumstances, is the Commonwealth, a public authority or a non-Commonwealth licensee, notification should be made to Comcare.
- > For tank abandonment notifications, the notifier would be the PCBU with control or management of a tank at a workplace. When the PCBU is the Commonwealth, a public authority or a non-Commonwealth licensee, the notification should be made to Comcare.
- > It is advised that all notifiers read the *Guidance Material for Schedule 11 Hazardous Chemicals and Abandonment of Tanks Notifications* before completing this notification.
- > The guidance material is available on the Comcare website under Safety & Prevention>Health & safety topics>Hazardous chemicals.
- > For more information call 1300 366 979 or email WHS.Chemicals@comcare.gov.au.

### **PRIVACY AND PERSONAL INFORMATION**

Any personal information collected by Comcare in connection with this notification may be used in Comcare's exercise of its functions and powers under the *Work Health and Safety Act 2011* (WHS Act), *Work Health and Safety Regulations 2011* (WHS Regulations) and other legislation, and the administration and evaluation of Comcare's programs generally.

Comcare may disclose personal information to the following bodies and agencies, including but not limited to, its legal advisers; the Safety, Rehabilitation and Compensation Commission; contractors and agents; a court or tribunal; state or territory work health and safety regulatory agencies; Commonwealth, state or territory industry regulators; enforcement agencies (including police investigating or conducting an interview in connection with the notification); state and territory Coroners; and any other person where there is an obligation under law to do so.

Comcare and inspectors appointed by Comcare respect your privacy and are committed to protecting your personal information. If you have any concerns about the privacy of your personal information, please contact Comcare's privacy contact officer by email at privacy@comcare.gov.au.

Comcare's privacy statement is available at http://www.comcare.gov.au/about\_us/privacy.

## PCBUs IN COMCARE'S JURISDICTION

A PCBU must notify Comcare of their manifest quantities of Schedule 11 Chemicals or Abandonment of Tanks if the PCBU is the Commonwealth, a public authority or a non-Commonwealth licensee as defined in the WHS Act and Regulations. For more information about PCBUs in Comcare's jurisdiction, refer to www.comcare.gov.au.

<b>SECTION 1. NOTIFICATION TYPE</b> (This section is required to be completed for each unique type of notification)	Notification type completed? Y N
Select one:	
Notification of Schedule 11 hazardous chemical exceeding manifest quantities (Complete Sections 1, 2, 3, 4, 5, 6, 7, 8 and 10)	
Schedule 11 hazardous chemical no longer stored at manifest quantities at the site (Complete Sections 1, 2, 3, 4 and 10)	
Amendment to details (Complete Sections 1, 2, 3, 4, 6, 7, 8 and 10)	
Abandonment of tank (Complete Sections 1, 2, 3, 4, 9 and 10)	

SECTION 2. NOTIFIER DETAILS (PCBU)		
Name (e.g. Commonwealth agency/ organisation)		
ACN (if applicable)	ABN	
Postal address		
Suburb/town	State Postcode	

### SECTION 3. NAME AND DETAILS OF CONTACT PERSON FOR NOTIFIER

Surname		
First name		
Contact person's designation/title		
Phone number	Mobile number	
Fax number		
Email		
Postal address for individual		
Suburb/town	State	

Name and details of contact person for notifier completed?

Y N

SECTION 4. WORKPLACE DETAILS (Where the chemicals or the tank are located)		
Name of workplace		
Street number and street name		
Suburb/town	State	

SECTION 5. PREVIOUS OCCUPIER OF THE SITE (IF KNOWN) (Supply the details of the previous occupant or land owner)		
Name of occupier		
ACN (if applicable)	ABN	
Current postal address (if known)		
Duration of occupancy (if known)	from to	

SECTION 6. DETAILED INFORMATION ABOUT THE ACTIVITIES UNDERTAKEN AT THE WORKPLACE USING, HANDLING OR STORING THE SCHEDULE 11 HAZARDOUS	about th underta workplo handling the Sch hazardou	information le activities iken at the ace using, g or storing hedule 11 us chemical pleted?
CHEMICAL	Y	Ν

What is the type of business or undertaking being conducted? (For example-research facility, fuel storage depot)

Which are the activities of the business or undertaking that involve using, handling or storing schedule 11 hazardous chemicals? (For example—chemical research and analysis)

#### SECTION 7. WHAT ARE THE DETAILS OF THE SPECIFIC SCHEDULE 11 HAZARDOUS CHEMICALS THAT ARE USED, HANDLED OR STORED?

What are the details of the specific Schedule 11 hazardous chemicals that are used, handled or stored completed? Y N

These figures should represent the maximum quantity of chemicals that would be expected to be stored, handled or used at the workplace.

REFER TO THE HAZARDOUS CHEMICALS GL	UIDANCE MATERIAL—GHS/ADG CONVERSION

ltem	Type of material	Category	Manifest QTY	Notified amount
1	Flammable gases	Category 1	5000L	
2	Gases under	With acute toxicity, categories 1, 2, 3 or 4	500L	
3	pressure	With skin corrosion categories 1A, 1B or 1C	500L	
4		Aerosols	10 000L	
5		Not specified elsewhere in this Table	10 000L	
6	Flammable	Category 1	500L	
7	liquids	Category 2	2500L	
8		Category 3	10 000L	
9		Any combination of chemicals from Items 6 to 8 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000L	
10		Category 4	100 000L	
11	Self-reactive	Туре А	50kg or 50L	
12	substances	Туре В	500kg or 500L	
13		Type C to F	2500kg or 2500L	
14	Flammable	Category 1	2500kg	
15	solids	Category 2	10 000kg	
16		Any combination of chemicals from Items 12 to 15 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000kg or 10 000L	
17	Pyrophoric liquids and pyrophoric solids	Category 1	500kg or 500L	
18	Self-heating	Category 1 2500kg or 2500		
19	Substances and mixtures	Category 2	10 000kg or 10 000L	
20	Any combination of chemicals from Items 1 to 19 where none of the items exceeds the quantities in columns 4 or 5 on their own		10 000kg or 10 000L	

ltem	Type of material	Category	Manifest QTY	Notified amount
21	Substances	Category 1 500L or 500kg		
22which in contact with water emit flammable gas23gas		Category 2	2500kg or 2500L	
		Category 3	10 000kg or 10 000L	
		Any combination of chemicals from Items 21 to 23 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000kg or 10 000L	
25	Oxidising	Category 1	500kg or 500L	
26	liquids and oxidising	Category 2	2500kg or 2500L	
27	solids	Category 3	10 000kg or 10 000L	
28		Any combination of chemicals from Items 25 to 27 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000kg or 10 000L	
29	Organic	Туре А	50kg or 50L	
30	peroxides	Туре В	500kg or 500L	
31 32		Type C to F	2500kg or 2500L	
		Any combination of chemicals from Items 30 and 31 where none of the items exceeds the quantities in columns 4 or 5 on their own	2 500kg or 2 500L	
33	Acute	Category 1	500kg or 500L	
34	toxicity	Category 2	2500kg or 2500L	
35		Category 3	10 000kg or 10 000L	
36		Any combination of chemicals from Items 33 to 35 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000kg or 10 000L	
37	Skin	Category 1A	500kg or 500L	
38	corrosion	Category 1B	2500kg or 2500L	
39		Category 1C	10 000kg or 10 000L	
40	Corrosive to metals	Category 1	10 000kg or 10 000L	
41		Any combination of chemicals from Items 37 to 40 where none of the items exceeds the quantities in columns 4 or 5 on their own	10 000kg or 10 000L	
42	Unstable explosives		50kg or 50L	

What are the details of the specific Schedule 11 hazardous chemicals that are used, handled or stored completed? Y N

SECTION 8. PLEASE ATTACH A COPY OF THE MANIFEST FOR SCHEDULE 11 SUBSTANCES THAT CONFORMS TO THE REQUIREMENTS OF SCHEDULE 12 OF THE WHS REGULATIONS.	Please attach a copy of the manifest for Schedule 11 substances that conforms to the requirements of Schedule 12 of the WHS Regulations completed? Y N
I have attached a copy of the manifest YES	
Please confirm if the workplace has an emergency plan that meets the requirements of regulation 361	
Please confirm if the workplace displays placards that meet the requirements of Schedule 13 of the <i>Work</i> Health and Safety Regulations 2011 (Cth) YES	
IF YOU DO NOT INDICATE THAT YOU MEET THESE OBLIGATIONS YOUR NOTIFICATION WILL NOT BE PROCESSED.	
Please note: An example manifest can be found in the 'Guidance Material for Schedule 11 hazardous chemicals and abandonment of tanks notification' document.	

SECTION 9. DETAILED INFORMATION ABOUT THE NOTIFICATION OF ABANDONED TANK (Details of the tank)					
Tank identification or code number					
Туре					
Capacity					
Date tank was abandoned					
Class of Schedule 11 hazardous chemica	al that the tank contained				
You must attach a certificate supplied by a competent person that states that the abandonment was undertaken in accordance with AS/NZ 1596: 2008 The Storage and Handling of LP Gas or with AS 4976: 2008 The Removal and Disposal of Underground Petroleum Storage Tanks. Refer to the Notification of dangerous goods on premises guide for more information. YES (please tick) I have attached a certificate of tank abandonment from a competent person.					

#### **SECTION 10. DECLARATION BY NOTIFIER**

(Signed by the person in Section 3)

Declaration by notified completed? Y N

Note: Note that in relation to section 268 of the *Work Health and Safety Act 2011*, Part 7.4 of the *Criminal Code Act 1995* makes it an offence for you to give Comcare false or misleading information in respect of this notification. Should you provide false or misleading information in this notification, you will be liable for prosecution under the *Criminal Code Act 1995*, and if convicted, face a penalty of up to 12 months imprisonment.

I declare that:

- > I am empowered by valid and express power, delegation in writing or authorisation in writing, to act as, for or on behalf of the PCBU that is required to make this notification.
- > The information in this notification is true and correct to the best of my knowledge.
- > I consent to Comcare making enquiries and exchanging information with other Commonwealth entities and other work health and safety regulators in the states and territories regarding any matter relevant to this notification.

Print name	Date	L	/	/	
Signature	Contact phone no.				
Position title					

Please fax completed forms to 1300 196 971 or post to:

Authorisations Team Comcare GPO Box 9905 Canberra ACT 2601

If you have any further questions on lodging or completing the form, please contact the Authorisations Team on 1300 366 979 or email WHS.Chemicals@comcare.gov.au