Albert Turi Jr. – Chief of Safety
Safety and Inspection Command

9 MetroTech Center – Brooklyn, NY 11201
(718) 999-2723

TO: UNIT: E 10 BATT: 1 DIV: 1

FROM: Albert Turi Chief of Safety

SUBJECT: Hazardous Substance Storage Location Reporting

As part of the Community Right-to-Know Law, attached are Facility Inventory Forms for an occupancy located in your administrative district that has filed a disclosure of their hazardous substance storage, along with required Material Safety Data Sheets (MSDSs) for those substances reported.

These information forms identify the facility, its owner/operator, emergency contacts, as well as hazardous storage identification and storage locations.

Administrative units are to file the facility forms and MSDSs in the appropriate building folder. Previous year's filings for this occupancy can be discarded when replaced with the current filing.

A Unit's awareness of a location with hazardous substance storage should be given attention during field inspection duties for pre-planning, drill subjects, and CIDS preparation.

Questions regarding this can be directed to the Safety Command.

AT:JJC

Attachment

Revised [illegible] Important: Read all instructions before completing form — Reporting period: From January 1 to December 31, 1999 — Page 1 of [illegible] pages

NEW YORK CITY Right-to-Know FACILITY INVENTORY FORM — TIER TWO

EHS

Facility Identification

Name SALOMON SMITH BARNEY HOLDINGS, INC
Street 7 WORLD TRADE CENTER
City NEW YORK State NY Zip+4 10048-1196
Telephone (212) 783-7000 County
SIC Code 6211 Dun & Bradstreet Number 01-163-3145

For Official Use Only: ID# Date Received:

Owner/Operator

Name SALOMON SMITH BARNEY Phone (212) 7[illegible]
Mail Address SAME

Emergency Contacts

Name EDWARD J CAMPBELL Title PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) [illegible]
Name TITO O. MESIAS Title ASSISTANT MANAGER
Day Phone (212) 783-5523 24-hr phone (917) [illegible]

Chemical Description

Chemical 1

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): NO SWEAT: 75% METHYLENE CHLORIDE (75-09-2), 13% PROPANE (74-98-6), 13% ISOBUTANE (75-28-5)
Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [✓] Fire
- [✓] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [✓] Delayed (chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Container / Pressure / Temperature
- F24 — 47TH FLOOR
- E-10
- B-1
- D-1

OPTIONAL: Check box if information submitted is identical to last year: [✓]

Chemical 2

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): SHINE-UP: 3% SILICONE (63148-62-9), 5% BUTANE (106-97-0), 5% PROPANE (7498-6), 5% ISOBUTANE (75-28-5), 20% ISOPARAFFINIC HYDROCARBON SOLVENT (64742-48-9), OTHERS
Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [✓] Fire
- [✓] Sudden Release Of Pressure
- [ ] Reactivity
- [ ] Immediate (acute)
- [✓] Delayed (chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential)
- F14 — 47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year: [✓]

Chemical 3

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): 2WD OIL SOLUBLE SPOTTER
ISOPROPANOL (67-63-0)
ISOBUTANE (75-28-5)
PROPANE (74-98-6)
Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [ ] Fire
- [ ] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [✓] Delayed (chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential)
- F14 — 47TH FLOOR

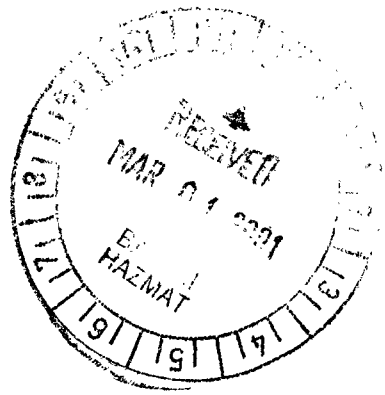
OPTIONAL: Check box if information submitted is identical to last year: [ ]

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through ____, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

JOHN MARKSON FIRST VICE PRESIDENT
Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

OPTIONAL: I have attached a site plan [ ]



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Emergency Contacts
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Name TITO O. MESIAS Title ASST. PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) 980-3467

Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations (Container, Pressure, Temperature)	OPTIONAL
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): DIESEL FUEL 100% (68476-34-6) ≤ .01% NAPHTHALENE (91-20-3) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[✓] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 04 Avg. Amount (code): 04 No. of Days Present: 365	B14 UNDERGROUND LEVEL, WESTERN MOST BAYS OF LOADING DOCK	Check box if information submitted is identical to last year: [✓]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): DTM ACRYLIC SEMI-GLOSS 12.4% TITANIUM DIOXIDE (13463677) 2.5% ZINC PHOSPHATE (7779900) 4.2% ETHYLENE GLYCOL (107211) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 02 Avg. Amount (code): 02 No. of Days Present: 365	F14 41ST FLOOR	Check box if information submitted is identical to last year: [ ]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): EPOXY THINNER 40% XYLENE (1330207) 10% ETHYL BENZENE (100414) 50% METHYL ISOBUTYL KETONE (108101) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[✓] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	F14 47TH FLOOR	Check box if information submitted is identical to last year: [ ]

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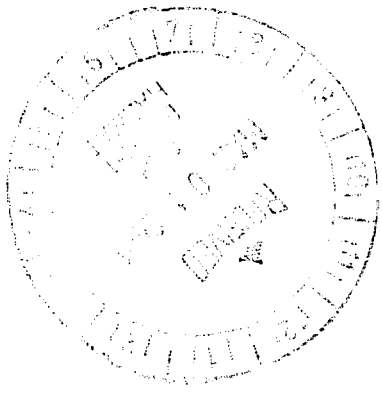

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Name TITO O. MESIAS Title ASST. PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) 960-3467

Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations (Container, Pressure, Temperature)	OPTIONAL
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): BIOSPERSE 255 MICROBIOCIDE 15% GLUTARALDEHYDE (111-30-8) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 02 Avg. Amount (code): 02 No. of Days Present: 365	E 1 4 — 48TH. FLOOR (PLANT)	Check box if information submitted is identical to last year: [✓]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): BIOSPERSE 257 MICROBIOCIDE 25% TRIS(HYDROXYMETHYL) NITROMETHANE (126-11-4) 17% FORMALDEHYDE (50-00-0) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 02 Avg. Amount (code): 02 No. of Days Present: 365	E 1 4 — 48TH. FLOOR (PLANT)	Check box if information submitted is identical to last year: [✓]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): BLEACH: SODIUM HYPOCHLORITE 5.25% (7681-52-9) SODIUM HYDROXIDE 0.1 TO 0.2% (1310-73-2) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [✓] Reactivity [✓] Immediate (acute) [✓] Delayed(chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	N 1 4 — 47TH. FLOOR	Check box if information submitted is identical to last year: [✓]

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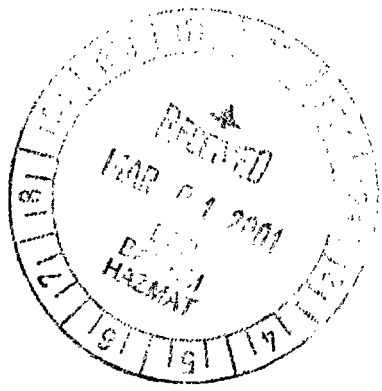
JOHN MARKSON FIRST VICE PRESIDENT
Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

OPTIONAL
I have attached a site plan [ ]



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Emergency Contacts

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Name TITO O. MESIAS Title ASST. PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) 280-3467

Chemical Description

Chemical 1

CAS [ ] Trade Secret [ ]

Name(s) of Chemical(s): ENAMELITE 548 JET BLACK: 2% CARBON BLACK (1333-86-4), 2% METHYL ISO-AMYL KETONE (110-12-3), 2% MINERAL SPIRITS (8052-41-3) 2% AROMATIC NAPHTA (64742-95-6)

Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [✓] Fire
- [✓] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [✓] Delayed (chronic)

Inventory
- Max Amount (code): 02
- Avg. Amount (code): 02
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Container / Pressure / Temperature: E14 — Storage Locations: 47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

Chemical 2

CAS [ ] Trade Secret [ ]

Name(s) of Chemical(s): E-Z ALCOHOL 42% ETHYL ALCOHOL (64-17-5), 53% METHYL ALCOHOL (67-56-1) 3% ETHYL ACETATE (141-78-6), 3% WATER (7732-18-5)

Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [✓] Fire
- [ ] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [✓] Delayed (chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Container / Pressure / Temperature: E14 — Storage Locations: 47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

Chemical 3

CAS [ ] Trade Secret [ ]

Name(s) of Chemical(s): FANTASTIC 7% 2-BUTOXYETHANOL (111-76-2)

Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [ ] Fire
- [ ] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [ ] Delayed (chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Container / Pressure / Temperature: E14 — Storage Locations: 47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

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Name and official title of owner/operator OR owner/operator's authorized representative | Signature | Date signed

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Revised [illegible] ...portant: Read all instructions before completing form — Reporting period: From January 1 to December 31, 2000 — Page 5 of 8 pages

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Name TITO O. MESIAS Title ASST. PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) 980-2467

Chemical Description

Chemical 1

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): FREON 11: 100% METHANE TRICHLOFLUORO (75-69-4)
Check all that apply: [✓] Pure [ ] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [ ] Fire
- [ ] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [ ] Delayed(chronic)

Inventory
- Max Amount (code): 03
- Avg. Amount (code): 03
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Storage Locations

Container	Pressure	Temperature	Storage Locations
E	1	4	47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

Chemical 2

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): FREON 12: 100% METHANE DICHLORODIFLUORO (75-71-8)
Check all that apply: [✓] Pure [ ] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [ ] Fire
- [ ] Sudden Release Of Pressure
- [✓] Reactivity
- [✓] Immediate (acute)
- [✓] Delayed(chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Storage Locations

Container	Pressure	Temperature	Storage Locations
E	1	4	47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

Chemical 3

CAS [ ] Trade Secret [ ]
Name(s) of Chemical(s): HAND WASH 10% PETROLEUM SULFONATE (61789-85-3) 10% PROPYLENE GLYCOL ETHER (68603-15-6)
Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS

Physical and Health Hazards (Check all that apply)
- [ ] Fire
- [ ] Sudden Release Of Pressure
- [ ] Reactivity
- [✓] Immediate (acute)
- [ ] Delayed(chronic)

Inventory
- Max Amount (code): 01
- Avg. Amount (code): 01
- No. of Days Present: 365

Storage Codes and Locations (Non-Confidential) — Storage Locations

Container	Pressure	Temperature	Storage Locations
N	1	4	47TH FLOOR

OPTIONAL: Check box if information submitted is identical to last year [✓]

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JOHN MARKSON FIRST VICE PRESIDENT
Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

OPTIONAL: I have attached a site plan [ ]

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Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations (Container, Pressure, Temperature)	OPTIONAL
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): HEAVY DUTY SPRAY CLEANER 40% 2-BUTOXYETHANOL (111-76-2), <1.0% SODIUM HYDROXIDE (1310-73-2), 25% ETHANOLAMINE (141-43-5), OTHERS Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed (chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	N 1 4 — 47TH FLOOR	Check box if information submitted is identical to last year: [✓]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): INSTANT MILDEW STAIN REMOVER (0-100)% WATER (7732-18-5), (15-20)% SODIUM HYPOCHLORITE (7681-52-9), (0-5)% SODIUM SESQUICARBONATE (533-96-0), OTHERS Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[ ] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [ ] Delayed (chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	N 1 4 — 47TH FLOOR	Check box if information submitted is identical to last year: [ ]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): LEAD ACID BATTERY: 60% LEAD (7439-92-1) 2% ANTIMONY (7440-36-0), 2% ARSENIC (7440-38-2), 0.2% CALCIUM (7440-31-5), 30% SULPHURIC ACID (7664-93-9), 10% SILICON DIOXIDE (60676-86-0) Check all that apply: [ ] Pure [✓] Mix [✓] Solid [ ] Liquid [ ] Gas [ ] EHS	[✓] Fire [ ] Sudden Release Of Pressure [✓] Reactivity [✓] Immediate (acute) [✓] Delayed (chronic)	Max Amount (code): 04 Avg. Amount (code): 04 No. of Days Present: 365	R 2 4 — 35TH FLOOR	Check box if information submitted is identical to last year: [✓]

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JOHN MARKSON FIRST VICE PRESIDENT
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

Date signed

OPTIONAL
I have attached a site plan [ ]

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Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations (Container, Pressure, Temperature)	OPTIONAL
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): LOCTITE CHISEL GASKET REMOVER: (60-70)% METHELENE CHLORIDE (75-09-2), (10-30)% BUTANE (106-97-8), (10-30)% ISOBUTANE (75-28-5), (10-30)% PROPANE (74-98-6), METHYL ALCOHOL (5-10)% (67-56-1) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[✓] Fire [✓] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [✓] Delayed (chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	F24 — 47TH FLOOR	Check box if information submitted is identical to last year [ ]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): LYSOL BRAND DISINFECTANT SPRAY: 4% CARBON DIOXIDE (124-38-9), 79% ETHANOL (64-17-5) Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[✓] Fire [✓] Sudden Release Of Pressure [ ] Reactivity [ ] Immediate (acute) [✓] Delayed (chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	F24 — 47TH FLOOR	Check box if information submitted is identical to last year [✓]
CAS [ ] Trade Secret [ ] Name(s) of Chemical(s): MOBIL GREASE 28: 1% SODIUM NITRATE (7632-00-0), 1% PENTA ERYTHRITO (115-77-5) OTHERS Check all that apply: [ ] Pure [✓] Mix [ ] Solid [✓] Liquid [ ] Gas [ ] EHS	[✓] Fire [ ] Sudden Release Of Pressure [ ] Reactivity [✓] Immediate (acute) [ ] Delayed (chronic)	Max Amount (code): 01 Avg. Amount (code): 01 No. of Days Present: 365	F14 — 47TH FLOOR	Check box if information submitted is identical to last year [✓]

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Name TITO C. MESIAS Title ASST. PROPERTY MANAGER
Day Phone (212) 783-5523 24-hr phone (917) 770-3467

Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations (Container, Pressure, Temperature)	OPTIONAL
CAS: Trade Secret: ☐ Name(s) of Chemical(s): NICKEL CADMIUM BATTERIES 28% POTASSIUM HYDROXIDE (1310583) 9% CADMIUM OXIDE (1306190) Check all that apply: [ ] Pure [✓] Mix [✓] Solid [ ] Liquid [ ] Gas [ ] EHS	☑ Fire ☐ Sudden Release Of Pressure ☑ Reactivity ☑ Immediate (acute) ☑ Delayed(chronic)	Max Amount (code): 03 Avg. Amount (code): 03 No. of Days Present: 365	R 1 4 — 5TH FLOOR	Check box if information submitted is identical to last year: ☑
CAS: Trade Secret: ☐ Name(s) of Chemical(s): Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS	☐ Fire ☐ Sudden Release Of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed(chronic)	Max Amount (code): Avg. Amount (code): No. of Days Present:		Check box if information submitted is identical to last year: ☐
CAS: Trade Secret: ☐ Name(s) of Chemical(s): Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS	☐ Fire ☐ Sudden Release Of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed(chronic)	Max Amount (code): Avg. Amount (code): No. of Days Present:		Check box if information submitted is identical to last year: ☐

Certification (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through ____, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

JOHN MARKSON FIRST VICE PRESIDENT

Name and official title of owner/operator OR owner/operator's authorized representative | Signature | Date signed

OPTIONAL
I have attached a site plan ☐