



RI Department of Labor and Training
Workforce Regulation and Safety Division
Occupational Safety - Right-to-Know Unit
1511 Pontiac Avenue, P.O. Box 20157,
Cranston, RI 02920-0942
Telephone: (401) 462-8570 | Fax: (401) 462-8576
<https://dlt.ri.gov/register-right-to-know>

Email Forms To:
DLT.HazSub@dlt.ri.gov

ANNUAL HAZARDOUS SUBSTANCE REGISTRATION - RIGL #28-21

Do you need this registration in a language other than English? Yes No If yes, what language? _____

Section 1:

Record Number: _____ Registration Year: _____

Business Name: _____

Address: _____

City/Town: _____ State: _____ Zip Code: _____

Type of Business: _____

Telephone: _____ Email: _____

Business Location if different from above: _____

PROOF OF TRAINING: I, the undersigned, hereby certify that all employees who are exposed to any hazardous substances have received their annual training as specified in Section 28-21-9 of the Hazardous Substance Right-to-Know Act. Please use the back side of this form to list your hazardous substances. Please attach additional pages if necessary.

Name: _____ Date: _____ Telephone: _____

Signature: _____ Title: _____

Section 2:

Complete exemption request below if you believe you are exempt from the law.

EXEMPTION REQUESTED: I, the undersigned, hereby certify that my business is exempt from this law for the following reasons:

- No employees (Owner operated)
- Out of Business as of _____ (date)
- Out of State Business (sales representative, consultant, etc.)
- Domestic help (cook, nanny, maid, etc.)
- Employees not exposed to hazardous substances greater than 10 pounds or two gallons stored and/or used on the premises (All products containing carcinogens must be listed)

Name: _____ Date: _____ Telephone: _____

Signature: _____ Title: _____

ANNUAL HAZARDOUS SUBSTANCE REGISTRATION - RIGL #28-21

List of Hazardous Substances

Record Number: _____

Registration Year: _____

Business Name: _____

Trade Name:	Chemical Ingredients:	Trade Name :	Chemical Ingredients:
<i>example:</i> 1. <u>Windex</u>	<u>Ammonia</u>		
2. _____	_____	26. _____	_____
3. _____	_____	27. _____	_____
4. _____	_____	28. _____	_____
5. _____	_____	29. _____	_____
6. _____	_____	30. _____	_____
7. _____	_____	31. _____	_____
8. _____	_____	32. _____	_____
9. _____	_____	33. _____	_____
10. _____	_____	34. _____	_____
11. _____	_____	35. _____	_____
12. _____	_____	36. _____	_____
13. _____	_____	37. _____	_____
14. _____	_____	38. _____	_____
15. _____	_____	39. _____	_____
16. _____	_____	40. _____	_____
17. _____	_____	41. _____	_____
18. _____	_____	42. _____	_____
19. _____	_____	43. _____	_____
20. _____	_____	44. _____	_____
21. _____	_____	45. _____	_____
22. _____	_____	46. _____	_____
23. _____	_____	47. _____	_____
24. _____	_____	48. _____	_____
25. _____	_____	49. _____	_____
		50. _____	_____