

Advice on introduction of a new chemical for non-cosmetic use and introduced at 100 kg (or less) per 12-month period



Australian Government
Department of Health and Ageing
NICNAS

FORM 21-4a

This form should be completed by persons intending to manufacture/import a new chemical for non-cosmetic use and not exceeding 100 kg per 12-month period under subsection 21(4) of the *Industrial Chemicals (Notification and Assessment) Act 1989*.

Please complete form in BLOCK LETTERS and ensure that all supporting documents are enclosed.

Return to: Director
NICNAS
GPO Box 58, Sydney NSW 2001
Telephone (02) 8577 8800 / 1800 638 528 Fax (02) 8577 8888

Applicant

Business Name ABN
Business Address Postcode
Postal Address (if same as Business Address, state AS ABOVE) Postcode
Phone () Fax () Email

Technical Contact

Name Position Company
Business Address (if different to above) Postcode
Postal Address (if same as Business Address, state AS ABOVE) Postcode
Phone () Fax () Email

Chemical

Chemical Name
Marketing or Other Name(s)
CAS Number (if known) - -

Amount of the new chemical intended to be introduced under this exemption for a 12-month period

- Is the new chemical classified as *hazardous* according to the *NOHSC* Approved Criteria for Classifying Hazardous Substances?
 Yes No
- Will the new chemical be present in a formulated product at a concentration which causes the product to be classified as *hazardous* according to *NOHSC* Approved Criteria?
 Yes No
- Will the new chemical be present in a formulated product which itself is classified as *hazardous* according to the *NOHSC* Approved Criteria irrespective of the chemical?
 Yes No

Note: Under the Regulations, manufacturers and importers must maintain a dossier of safety information on non-cosmetic chemicals/products which are exempt under subsection 21(4)(bii) of the Act from notification and assessment.

State reasons why the introduction of the new chemical should **not** pose an unreasonable risk to the following:
Attach additional documentation if insufficient room.

(i) occupational health and safety

(ii) public health

(iii) the environment

Declaration

I declare that to the best of my knowledge all the information in this application is true, correct and complete. In relation to the notification statement and/or other documentation accompanying this application, I declare that I am entitled to use and give the Director all data in the statement.

Name

Position

Signature

Date

Note: It is an offence under the Act to supply a statement which is false or misleading.

Is your company a small business with less than 20 employees? **YES** **NO**

If yes, please provide an estimate of the time taken to complete this form:

hrs

mins

August 2004