Dear Supplier,

We ask that you complete this “Information for Regulatory Approval” form to the best of your ability. The information requested may, or may not, be part of your Safety Data Sheet, but is required by Infineum to ensure that our products comply with national and/or global chemical control regulations, which is consistent with our duty as a Responsible Care® company.

There are two parts to this form: Part 1 and 2. The first part focuses on the product’s core safety, health, environmental and regulatory information. Whilst the second part is supporting information, but is equally important to allow Infineum to make a complete regulatory assessment of the product.

In addition, please provide the following documents:

1. The most recent English language SDS that comply with:
   * Annex II of EU REACH;
   * OSHA HCS 2012; and/or
   * GHS (with “full building blocks”)
2. REACH Compliance Certificate for the relevant countries, if required according to Part 2 of this form.

Thank you for your cooperation.

Infineum Product Stewardship and Regulatory Compliance

**PART 1**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A.** | **SUPPLIER INFORMATION** | | | | | | | | | | |
| **Supplier Name** | | | | | | Click to enter text | | | | | |
| **Product Name** | | | | | | Click to enter text | | | | | |
| **Country of Manufacture** | | | | | | Click to enter text | | | | | |
| **Country of Supply** *(if different from Manufacture)* | | | | | | Click to enter text | | | | | |
|  | | | | | | | | | | | |
| **Regulatory Contact Details** | | | | | | | | | | | |
| **Prepared by** | | | | | | Click to enter text | | | | | |
| **Date** | | | | | | Click to select date | | | | | |
| **Position** | | | | | | Click to enter text | | | | | |
| **Email** | | | | | | Click to enter text | | | | | |
|  | | | | | | | | | | | |
| **B.** | **GENERAL INFORMATION** | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. Is the product a  substance or  mixture? | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. If a substance, specify the type (tick one box): | | | | | | | | | | | |
|  | | Mono-constituent | | Multi-constituent | | | UVCB |  | | | |
|  | | | | | | | | | | | |
| 1. For base oils, is the DMSO Extract <3% (IP346 method)? | | | | | | | Yes | | No | | |
| If yes, please provide the IP346 certification\* (unless information is stated on the SDS). | | | | | | | | | | | |
| If no, state the aromatic content of and test method conducted on the base oil (e.g. CNB/SH/T 0838-2010): | | | | | | | | | | | |
|  | | Click to enter text | | | | | | | | |  |
|  | | | | | | | | | | | |
| *Note \*: Required for base oils, petroleum distillates, minerals oils, or products containing these materials. Certification is required in order to confirm an EU classification of “not carcinogenic”. Infineum does not purchase these materials without such certification.* | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. State overall GHS classification of product: | | | | | | | | | | | |
|  | | **Physical** | Click to enter C&L. Provide in full GHS building block, if available | | | | | | | |  |
|  | | **Human Health** | Click to enter C&L. Provide in full GHS building block, if available | | | | | | | |  |
|  | | **Environmental** | Click to enter C&L. Provide in full GHS building block, if available | | | | | | | |  |
|  | | | | | | | | | | | |
| 1. Specify the product’s method of classification (tick all that apply): | | | | | | | | | | | |
|  | | Test data on product | | | Read-across from a similar product | | | | | Calculation | |
|  | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **C.** | | **COMPOSITION INFORMATION** | | | | | | | |
|  | | | | | | | | | |
| 1. Provide total (100%) product composition and, if applicable, indicate if any of the constituents is a polymer. Otherwise, at a minimum, state all hazardous substances as defined by EU CLP, U.S. OSHA, or GHS disclosure requirements. Add additional rows to the table, if necessary. | | | | | | | | | |
|  | | | | | | | | | |
|  | **Chemical Name** | | | **CAS No. / Other Identifier** | **Mass% / Range** | **Function of constituent** | **Polymer?** | **GHS Classification**  *(Hazard Class, Category & Statement)* |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | Click to enter text | | | Click to enter text | Click to enter value | Select option or enter text | Yes / No | Click to enter C&L |  |
|  | | | | | | | | | |
| 1. Is the product or any of its constituents represented by an alternate CAS Number, or any other state approval or inventory reference number (e.g., Accession number)? | | | | | | | | | |
|  | | | Yes *(provide details in Section D below)* | | | No | | | |
|  | | | | | | | | | |
| **D.** | | **NATIONAL CHEMICAL INVENTORY STATUS** | | | | | | | |
|  | | | | | | | | | |
| 1. Complete the status of the product (including all of its constituents) on the national chemical inventories listed below. | | | | | | | | | |
|  | | | | | | | | | |
| 1. Indicate in the “Additional Information” column if the product and/or any of its constituents is/are: | | | | | | | | | |
| * represented by an alternate CAS number (or any other state approval or inventory reference number); | | | | | | | | | |
| * exempt from listing on the inventory or new substance notification; | | | | | | | | | |
| * subject to any known restrictions on import or sale (e.g., tonnage band, conditions of introduction/use, importer-specific approval). | | | | | | | | | |
|  | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | |
|  | | **Inventory** | | | **Listed** | | **Not Listed** | | **Other\*** | | **Additional Information** | | | |  |
|  | | **Australia** (AIIC) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Canada** (DSL) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Canada** (NDSL) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **China** (IECSC) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Japan** (METI / ENCS) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Japan** (ISHL) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Korea** (KECI / MOE / MoEL or published gazettes) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **New Zealand** (NZIoC) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Philippines** (PICCS) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **Taiwan** (TCSI) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **USA** (TSCA: Active Inventory) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | **USA** (TSCA: Inactive Inventory) | | |  | |  | |  | | Click to enter text | | | |  |
|  | | | | | | | | | | | | | | | |
| *Note \*: Includes exempt constituents, China’s simplified or record notification, Australia’s exempted, reported, or assessed introduction, Canada’s transitional inventory status, New Zealand’s HSNO Approval No., etc.* | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **E.** | **REACH-LIKE REGISTRATION INFORMATION** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| 1. For the following region/country, confirm if: | | | | | | | | | | | | | | | |
| • all of the product’s registrable substances have been (pre-)registered; and/or | | | | | | | | | | | | | | | |
| • Only Representative (OR) service will be provided to Infineum (including the OR contact details). | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | **Region** | | **Registered** | | | | | **OR Service** | | | | | | |  |
|  | **European Union** | | **Yes** | **No** | | **Exempted** | | **Yes** | | **No** | | **Not Applicable** | | **Subject to request** |  |
|  |  |  | |  | |  | |  | |  | |  |  |
|  | 1. If yes to the registered question, does it cover the uses required by Infineum and/or our customers? Tick all that apply.   For “Other”, specify the registered use. | | | | | | | | | Lubricant additive / lubricant use | | |  |
| Fuel additive / fuel use | | |
| Intermediate use | | |
| Other: | Click to enter registered use | |
|  | 1. If no to the OR service question, are you willing to supply Infineum with the required compositional information so that, if necessary, we can submit our own registration(s) for the relevant substance(s)? | | | | | | | | | Yes | | |  |
| No | | |
|  | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
|  | **Region** | **OR Service Details** | | | | | | | | | | |  |
|  | **European Union** | **OR Service Provider** | | Click to enter text | | | | **Name of OR Contact** | | | Click to enter text | |  |
|  | **Address** | | Click to enter text | | | | **Email of OR Contact** | | | Click to enter text | |  |
|  | **Country** | **Registered** | | | | **OR Service** | | | | | | |  |
|  | **Turkey** | **Yes** | **No** | | **Exempted** | **Yes** | **No** | | **Not Applicable** | | | **Subject to request** |  |
|  |  |  | |  |  |  | |  | | |  |  |
|  | 1. If yes to the registered question, does it cover the uses required by Infineum and/or our customers? Tick all that apply.   For “Other”, specify the registered use. | | | | | | | Lubricant additive / lubricant use | | | |  |
| Fuel additive / fuel use | | | |
| Intermediate use | | | |
| Other: | Click to enter registered use | | |
|  | 1. If no to the OR service question, are you willing to supply Infineum with the required compositional information so that, if necessary, we can submit our own registration(s) for the relevant substance(s)? | | | | | | | Yes | | | |  |
| No | | | |
|  | **OR Service Details** | | | | | | | | | | |  |
|  | **OR Service Provider** | | Click to enter text | | | | **Name of OR Contact** | | | Click to enter text | |  |
|  | **Address** | | Click to enter text | | | | **Email of OR Contact** | | | Click to enter text | |  |
|  | **Country** | **(Pre-) Registered** | | | | **OR Service** | | | | | | |  |
|  | **United Kingdom**  (England, Scotland & Wales) | **Yes** | **No** | | **Exempted** | **Yes** | **No** | | **Not Applicable** | | | **Subject to request** |  |
|  |  |  | |  |  |  | |  | | |  |  |
|  | 1. If yes to the registered question, does it cover the uses required by Infineum and/or our customers? Tick all that apply.   For “Other”, specify the registered use. | | | | | | | Lubricant additive / lubricant use | | | |  |
| Fuel additive / fuel use | | | |
| Intermediate use | | | |
| Other: | Click to enter registered use | | |
|  | 1. If no to the OR service question, are you willing to supply Infineum with the required compositional information so that, if necessary, we can submit our own registration(s) for the relevant substance(s)? | | | | | | | Yes | | | |  |
| No | | | |
|  | **OR Service Details** | | | | | | | | | | |  |
|  | **OR Service Provider** | | Click to enter text | | | | **Name of OR Contact** | | | Click to enter text | |  |
|  | **Address** | | Click to enter text | | | | **Email of OR Contact** | | | Click to enter text | |  |
|  | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
|  | **Country** | **(Pre-) Registered** | | | | **OR Service** | | | | | | |  |
|  | **South Korea** | **Yes** | **No** | | **Exempted** | **Yes** | **No** | | **Not Applicable** | | | **Subject to request** |  |
|  |  |  | |  |  |  | |  | | |  |  |
|  | 1. If yes to the registered question, does it cover the uses required by Infineum and/or our customers? Tick all that apply.   For “Other”, specify the registered use. | | | | | | | Lubricant additive / lubricant use | | | |  |
| Fuel additive / fuel use | | | |
| Intermediate use | | | |
| Other: | Click to enter registered use | | |
|  | 1. If no to the OR service question, are you willing to supply Infineum with the required compositional information so that, if necessary, we can submit our own registration(s) for the relevant substance(s)? | | | | | | | Yes | | | |  |
| No | | | |
|  | **OR Service Details** | | | | | | | | | | |  |
|  | **OR Service Provider** | | Click to enter text | | | | **Name of OR Contact** | | | Click to enter text | |  |
|  | **Address** | | Click to enter text | | | | **Email of OR Contact** | | | Click to enter text | |  |
|  | | | | | | | | | | | | | |

**PART 2**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A.** | **NORTH AMERICA REGULATORY INFORMATION** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. **UNITED STATES** | | | | | | | | | | | | | | | | | | | | |
| 1. Does the product contain any of the following minerals? If it contains any of the conflict minerals, provide a statement that the product complies with Dodd-Frank Securities Act, 17 CFR 240.13(p)(1). | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | **Conflict Minerals** | | | **Yes** | | **No** | |  | | **Other Minerals** | | | | | | **Yes** | **No** | |  | |
|  | **Tin** (Sn) | | |  | |  | |  | | **Cobalt** (Co) | | | | | |  |  | |  | |
|  | **Tantalum** (Ta) | | |  | |  | |  | | **Nickel** (Ni) | | | | | |  |  | |  | |
|  | **Tungsten** (W) | | |  | |  | |  | | | | | | | | | | | | |
|  | **Gold** (Au) | | |  | |  | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. Does the product contain any nanoscale materials that are subject to one-time reporting under TSCA? | | | | | | | | | | | | | | | | | | | | |
| Yes | | | No | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | <https://www.federalregister.gov/documents/2017/01/12/2017-00052/chemical-substances-when-manufactured-or-processed-as-nanoscale-materials-tsca-reporting-and> | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. Is this product and/or any of its constituents subject to the following regulatory requirements? If yes, state the substance name, its approximate weight% and the regulation number. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | **Regulatory Requirements** | | **Yes** | | | **No** | | **Regulation No.** | | | | | **Substance Name** | | | | | **Wt%** | |  |
|  | 1. **TSCA Polymer Exempt** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **TSCA 12(b) Export Notification** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **TSCA Significant New Use Rule** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **TSCA Consent Order** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **TSCA Section 4 Test Rules or Orders** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **TSCA 6(h) Rules** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **SARA/Title III** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **California Proposition 65** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **NJ Spill Law** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **NJ Right-To-Know** | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | 1. **Other** *(Please specify)* | |  | | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value | |  |
|  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. **CANADA** | | | | | | | | | | | | | | | | | | | | |
| 1. Does the product contain any nanomaterials that are subject to reporting? | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | <https://www.canada.ca/en/health-canada/services/chemical-substances/nanomaterials.html> | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. Is this product and/or any of its constituents subject to the following regulatory requirements? If yes, state the substance name and its approximate weight%, and the relevant Canada Gazette citation. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | **Regulatory Requirements** | | | | **Yes** | | **No** | | **Canada Gazette** | | | | | **Substance Name** | | | | | **Wt%** |  |
|  | **National Pollutant Release Inventory** | | | |  | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value |  |
|  | **Significant New Activity Notice** | | | |  | |  | | Click to enter text | | | | | Click to enter text | | | | | Click to enter value |  |
|  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **B.** | **EMEA REGULATORY INFORMATION** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| 1. **EUROPEAN UNION (EU)** | | | | | | | | | | | | | | | | | | | | |
| 1. State whether or not the product contains any substance mentioned in the regulatory lists shown below. If yes, state the substance name and the approximate weight%. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | **Regulatory Requirements** | | | | | | | | | | **Yes** | **No** | | | **Substance Name** | | | | **Wt%** |  |
|  | 1. **Candidate List of Substances of Very High Concern (SVHC)**   <http://echa.europa.eu/candidate-list-table> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **Registry of SVHC intentions**   <http://echa.europa.eu/candidate-list-table> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **List of substances included in Annex XIV of REACH (Authorisation List)**   <https://echa.europa.eu/authorisation-list> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **Substances restricted under REACH (Annex XVII)**   <https://echa.europa.eu/authorisation-list> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **Regulation (EU) No. 649/2012 concerning the export and import of hazardous chemicals (Annex I / PIC)**   <http://echa.europa.eu/information-on-chemicals/pic/chemicals> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **Regulation (EC) No. 1005/2009 on substances that deplete the ozone layer (Annex I & Annex II)** <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32009R1005> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | 1. **Regulation (EC) 2019/1021 on persistent organic pollutants (Annex I - IV)** <https://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX%3A32019R1021> | | | | | | | | | |  |  | | | Click to enter text | | | | Click to enter value |  |
|  | | | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. State whether or not the product contains any substances classified as PBT, vPvB and/or an endocrine disruptor, which are present at >=0.1%. If the answer is yes, state the substance name and the approximate weight%. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **PBT / vPvB** | | | | | | | | | | | | | | | | | | | **Yes** | | | | | **No** | | | | | | | | **Substance Name** | | | | | | | | | | | **Wt%** | | |  |
|  | | | **Persistent, Bioaccumulative, Toxic (PBT)** | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | Click to enter text | | | | | | | | | | | Click to enter value | | |  |
|  | | | **Very Persistent, Very Bioaccumulative (vPvB)** | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | Click to enter text | | | | | | | | | | | Click to enter value | | |  |
|  | | | **Endocrine Disruptor** | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | Click to enter text | | | | | | | | | | | Click to enter value | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | | | <http://echa.europa.eu/information-on-chemicals/pbt-vpvb-assessments-under-the-previous-eu-chemicals-legislation> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. State overall WGK classification of product. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | NWG | | | AWG | | | | | | | | | | | | | | WGK1 | | | | | | | | | | | | | | | WGK2 | | | | | | | WGK3 | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | | | <https://www.umweltbundesamt.de/en/topics/chemicals/substances-hazardous-to-waters> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Does the product contain any nanomaterials that meet the EC Recommendation 2022/C 229/01? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | | <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32022H0614(01)> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **REACH CERTIFICATE OF COMPLIANCE / DECLARATION OF CONFORMITY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| With reference to Section E of Part 1 (if relevant): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Provide a certificate or declaration letter indicating that import of all registrable substances in the product, including their forecasted volumes, conform to the requirements of REACH for the following EMEA countries. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | European Union | | | | | | | | | | | | | United Kingdom | | | | | | | | | | | | | | | | | | | | Turkey | | | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Indicate the type of Only Representative (OR) system that is being utilised for the EMEA countries. This is to allow Infineum to evaluate the parties involved in and/or the extent of exchange of information for purpose of obtaining the certificate. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The following are types of OR system: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Direct**: Import/volume information is exchanged between Supplier and Infineum 🡺 *Infineum receives the REACH compliance certificate* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Appointee**: Import/volume information is exchanged between Supplier’s Appointed Consultant and Infineum   🡺 *Infineum receives the REACH compliance certificate* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Final Importer**: Import/volume information is exchanged between Supplier’s Appointed Consultant and Infineum’s Customer *🡺 Final local importer receives the REACH compliance certificate (not Infineum)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Other**: None of the above. If yes, provide a brief explanation of the system in the “Additional Information” column | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | **Type of OR System** | | | | | | **Direct** | | | | **Appointee** | | | | | | | | **Final Importer** | | | | | **Other** | | | | | | | **Additional Information** | | | | | | | | | | | | | | | |  |
|  | | | **European Union** | | | | | |  | | | |  | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | | | | |  |
|  | | | **United Kingdom** | | | | | |  | | | |  | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | | | | |  |
|  | | | **Turkey** | | | | | |  | | | |  | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | | | | |  |
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| **C.** | | | **ASIA PACIFIC REGULATORY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **AUSTRALIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Listed or Assessed Introduction** *(complete if applicable)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is this product and/or any of its constituents subject to the following terms of listing? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **AIIC Terms of Listing** | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | **No** | | | | | | | **Additional Information** | | | | | | | | | | | | |  |
|  | 1. **No terms of listing** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | |  |
|  | 1. **Specific information requirements** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | |  |
|  | 1. **Defined scope of assessment** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | |  |
|  | 1. **Conditions of introduction or use** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | |  |
|  | 1. **Other legal obligations** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | Click to enter text | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. If yes to any from ii) to v), state in the “Additional Information” column the relevant information required to comply with AICIS record-keeping obligations (if these have not been provided in Section D of Part 1). These include: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * For *Listed Introduction*, the CAS Number of the product and/or its constituents. Or, provide a Written Undertaking for the product to confirm compliance with AIIC. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * For *Assessed Introduction*, the AICIS Approved Chemical Name (AACN) and the specific conditions or restrictions as stated in the assessment certificate, if any. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | | | | <https://www.industrialchemicals.gov.au/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Written Undertaking (Exempted / Reported / Listed Introduction)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Infineum may request for a Written Undertaking if the product and/or its constituents meets the categorisation criteria for exempted or reported introduction. Similar applies to “*listed introduction subject to the terms of the inventory listing*”, i.e. listing ii) to v), if details on the CAS Number are not disclosed to Infineum. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **CHINA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is the product and/or any of its constituents present in the following lists? If yes, state the substance name and the approximate weight%. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Lists** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | | | **No** | | | **Substance Name** | | | | | | **Wt%** | | |  |
|  | | | **2015 MEM Catalogue of 2828 Hazardous Substances** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | Click to enter text | | | | | | Click to enter value | | |  |
|  | | | **MEE List of Toxic Chemicals Severely Restricted to be Imported/Exported in China** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | Click to enter text | | | | | | Click to enter value | | |  |
|  | | | **MEE List of Toxic Chemicals Banned in China** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | Click to enter text | | | | | | Click to enter value | | |  |
|  | | | **MEM List of Hazardous Chemicals for Priority Management** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | Click to enter text | | | | | | Click to enter value | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **JAPAN** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is the product and/or any of its constituents present in the following lists? If yes, state the substance name and the approximate weight%. For CSCL and PRTR Law substances, specify the Class type. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | <http://www.safe.nite.go.jp/english/db.html> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Lists** | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | | **No** | | | | **Substance Name** | | | | | **Wt%** | | |  |
|  | | | **ISHL: Substances Subject to be Notified Names**  (Article 57-2) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | Click to enter text | | | | | Click to enter value | | |  |
|  | | | **ISHL: Substances Subject to be Indicated Names**  (Article 57) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | Click to enter text | | | | | Click to enter value | | |  |
|  | | | **CSCL: Specified Chemical Substance, Monitoring Chemical Substance, Priority Assessment Chemical Substance** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | Click to enter text | | | | | Click to enter value | | |  |
|  | | | **PRTR Law: Designated chemical substance** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | Click to enter text | | | | | Click to enter value | | |  |
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| 1. **SOUTH KOREA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is the product and/or any of its constituents present in the following lists under Korea Chemicals Control Act? If yes, state the substance name and the approximate weight%. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | <http://ncis.nier.go.kr/en/main.do> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Lists** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | | | **No** | | | | | | **Substance Name** | | | **Wt%** | | |  |
|  | | | 1. **Priority Existing Chemical Substance (PEC) or Phase-in substance subject to registration** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
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|  | | | **Lists** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | | | **No** | | | | | | **Substance Name** | | | **Wt%** | | |  |
|  | | | 1. **Toxic Chemical Substance** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
|  | | | 1. **Substance(s) subject to Authorization** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
|  | | | 1. **Restricted Chemical Substance** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
|  | | | 1. **Prohibited Chemical Substance** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
|  | | | 1. **Substance(s) requiring preparation for accidents** | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | Click to enter text | | | Click to enter value | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is the product and/or any of its constituents present in the following lists under Ministry of Employment and Labour (MOEL) Occupational Safety and Health Act? If yes, state the substance name and the approximate weight%. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For more information, go to: | | | | | | | | | | | | | | | <https://kosha.or.kr/english/legislation/occupationalSafetyAndHealth.do> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Lists** | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | | | **No** | | | | | **Substance Name** | | | | **Wt%** | | |  |
|  | | 1. **Harmful substance Prohibited from being manufactured** (Article 87 of Enforcement Decree) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | Click to enter text | | | | Click to enter value | | |  |
|  | | 1. **Harmful Substances Subject to Permission**   (Article 88 of Enforcement Decree) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | Click to enter text | | | | Click to enter value | | |  |
|  | | 1. **Hazardous substance subject to control/requiring management** (Table 12 of Local Rule on OSHS) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | Click to enter text | | | | Click to enter value | | |  |
|  | | 1. **Harmful agents subject to work environment monitoring** (Table 11-4 Enforcement Regulation) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | Click to enter text | | | | Click to enter value | | |  |
|  | | 1. **Harmful agents subject to workers requiring health examination** (Table 12-2 Enforcement Regulation) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | Click to enter text | | | | Click to enter value | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REACH CERTIFICATE OF COMPLIANCE / DECLARATION OF CONFORMITY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| With reference to Section E of Part 1 (if relevant): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Provide a certificate or declaration letter indicating that import of all registrable substances in the product, including their forecasted volumes, conform to the requirements of K-REACH. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Indicate the type of Only Representative (OR) system that is being utilised in South Korea. This is to allow Infineum to evaluate the parties involved in and the extent of exchange of information for purpose of obtaining the certificate. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| The following are types of OR system: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Direct**: Import/volume information is exchanged between Supplier and Infineum 🡺 *Infineum receives the REACH compliance certificate* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| * **Appointee**: Import/volume information is exchanged between Supplier’s Appointed Consultant and Infineum   🡺 *Infineum receives the REACH compliance certificate* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Final Importer**: Import/volume information is exchanged between Supplier’s Appointed Consultant and Infineum’s Customer *🡺 Final local importer receives the REACH compliance certificate (not Infineum)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * **Other**: None of the above. If yes, provide a brief explanation of the system in the “Additional Information” column | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | **Type of OR System** | | | | | | **Direct** | **Appointee** | | | | | | | | | **Final Importer** | | | | | **Other** | | | | | | | | | **Additional Information** | | | | | | | | | | | | | | |  |
|  | | | | **South Korea** | | | | | |  |  | | | | | | | | |  | | | | |  | | | | | | | | | Click to enter text | | | | | | | | | | | | | | |  |
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| 1. **TAIWAN** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is this product and/or any of its constituents present in the First Batch of 106 Priority Existing Substances for Phase II Registration (Existing Substance Registration) under the Toxic and Concerned Chemical Substance Control Act? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| For more information, refer to Appendix 9 of the Regulation of New and Existing Substance Registration: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <https://law.moj.gov.tw/ENG/LawClass/LawAll.aspx?pcode=O0060043> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. If yes, are you willing to supply Infineum with the required information so that, if necessary, we can undertake the necessary Phase II registration for the relevant substance(s) on behalf of our customers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Are you willing to support Infineum and/or our Taiwan customers with the annual volume reporting requirement under the Regulation of New and Existing Substance Registration via the appointment of a Third-Party Representative (TPR)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | Yes *(provide TPR Contact Details below)* | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | **TPR Contact Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | | | | | **TPR** | | | Click to enter text | | | | | | | | | | | | | | | | | | | | | | | | **TPR Contact** | | | | | | | | | | | | Click to enter text | | |  | | |
|  | | | | | **Address** | | | Click to enter text | | | | | | | | | | | | | | | | | | | | | | | | **Email** | | | | | | | | | | | | Click to enter text | | |  | | |
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