



Nevada State Fire Marshal and State Emergency Response Commission HAZMAT Notice of Change

107 Jacobsen Way, Carson City, Nevada 89711 – Phone: (775) 684-7524 – Fax: (775) 684-7518

(Name of Company) & (Company # & Facility #)

(Physical Address of Facility in Nevada, City, Zip)

I / We are notifying the Nevada State Fire Marshal Division of the following change: (From boxes #1 through # 7, select **ONLY** one)

1. **SOLD BUSINESS** - No longer in business and storing previously reported hazardous materials.
Effective Date: mm/dd/yyyy

(Sold To)

- Previously reported hazardous materials were part of the sale.
- Previously reported hazardous materials were disposed of **prior to** the sale. A completed Termination of Hazardous Materials Form is attached.

2. **CLOSED BUSINESS** - No longer in business and storing previously reported hazardous materials.
Effective Date: mm/dd/yyyy

- Previously reported hazardous materials were **used up** prior to closing business. (A Termination of Hazardous Materials Form **is not** required)
- Previously reported hazardous materials were **disposed of** prior to closing business. (A Termination of Hazardous Materials Form **is** required and attached)

3. **MATERIALS PREVIOUSLY REPORTED ARE NO LONGER CONSIDERED HAZARDOUS PER IFC**

Effective Date: mm/dd/yyyy

Per International Fire Code regulations, I am not required to report. I do not have any other chemicals or substances that are considered hazardous to report.

4. **DO NOT MEET THE THRESHOLD PLANNING QUANTITIES FOR TIER II / INTERNATIONAL FIRE CODE**

Effective Date: mm/dd/yyyy

We are no longer required to report hazardous materials as we have reduced our inventory.

5. **OTHER:**

Effective Date: mm/dd/yyyy

(State reason. *If Hazardous Materials were disposed of attach a completed Termination of Hazardous Materials Form*)

6. **BUSINESS NAME CHANGE ONLY – BUSINESS NOT SOLD**

Effective Date: mm/dd/yyyy

The name of the business has been changed to:

(New Name)

The Federal Tax ID number **DID NOT** change. *(If Federal Tax ID number did change, we consider it a sale, therefore please select item 1. Sold Business above)*

Previously reported hazardous materials have **NOT** changed; therefore, a Termination of Hazardous Materials Form is not applicable.

NOTE: The completed Notice of Change form, **regardless** of the type of change, must be notarized. This notarized form is required before **any** changes can be made to your business record **or** business account.

In the case where your business account needs to be closed and cleared from the state reporting system, this notarized form is required to start the process. **Otherwise**, your account will remain active and fees will continue to accumulate. Outstanding fees over 90 days in arrears are subject to collection as outlined in NRS 353C.

SIGNATURE (Sign in front of Notary)

Signature – Title

Date

Print Name

JURAT

State of _____)

County of _____)

The Hazmat Notice of Change form was signed and sworn to (or affirmed) before me on

_____, 20_____

By _____ and _____

Notary Public