CHEMICAL NOMINATION FORM

Requestor Name				
Organization				
Site Name				
Name of Chemical				
Check the appropriate box:	New PPRTV Requested PPRTV Update Requested			
Type of value(s) needed (check the appropriate box):	RfD Cancer All	RfC Subchi	ronic values	
What type of sites is this chemic Superfund Brownfields Federal Facility RCRA (select "Permitting" or " Other (list type) RCRA Site Categories:			pelow)	
If known: Contamination concentrations				
Number of sites in your Region	with contaminati	ion		
Exposure Pathway (check all that apply):	Inhalation	Ingestion	Dermal	

Other Information (explain in 250 words or less):					
Additional Information (examples):					