

**INTENDED USE FORM**

This form is required to be kept on file at our facility as per the DOT and Homeland Security Act. These agencies govern the sale, usage and distribution of chemicals and regulate the reporting and recordkeeping procedures.

Please note this form is required one time per chemical per person unless your use changes. Any paid orders that stipulate the requirement of this form are not permitted to be shipped until we have an Intended Use Form on file and it has been approved. A copy of your driver's license is required along with this form (please see space below at bottom of form). Thank you for taking the time to provide this information.

I, \_\_\_\_\_, have ordered the chemical(s) below and have identified my planned usage. Also, I confirm that the chemicals are being used in a safe and proper manner. The end product that you or your company may produce must conform to all local, state and federal rules and guidelines. Please complete and return.

**Chemical Name / Intended Use**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_
- 11. \_\_\_\_\_
- 12. \_\_\_\_\_
- 13. \_\_\_\_\_
- 14. \_\_\_\_\_
- 15. \_\_\_\_\_

\_\_\_\_\_  
**Signature**

**Driver's License:**

\_\_\_\_\_  
**Date**

**Email to: [info@chemsavers.com](mailto:info@chemsavers.com)**