



# CR-ERNS Report -- Addendum to Form R

CR-ERNS #:

**Source Information:** For EACH source of a release from your facility, provide the following information on a SEPARATE sheet.

**Name of Source:**

Indicate whether the release from this source is either:  
 continuous without interruption \_\_\_\_\_ OR routine, anticipated, intermittent \_\_\_\_\_

Pattern of the Release: Identify below how you established the pattern of release and calculated release estimates.

\_\_\_\_\_ Past release data      \_\_\_\_\_ Knowledge of the facility's operations and release history      \_\_\_\_\_ Engineering Estimates  
 \_\_\_\_\_ AP-42      \_\_\_\_\_ Best professional judgement      \_\_\_\_\_ Other (explain)

Environmental Medium affected by the release from this source:

\_\_\_\_\_ Air      \_\_\_\_\_ Surface Water      \_\_\_\_\_ Soil or Ground Water

Air

If release is to air, please indicate stack height OR surface area of the release.

\_\_\_\_\_ Stack Height      OR      \_\_\_\_\_ Surface Area

Surface Water

If release is to Surface Water, please indicate name, type and specific information of the water body:

Name of water body \_\_\_\_\_

If stream: \_\_\_\_\_ Stream Order      OR      \_\_\_\_\_ Average flow rate (ft<sup>3</sup>/sec)

If lake: \_\_\_\_\_ Surface area (ac)      AND      \_\_\_\_\_ Average Depth (m)

Soil or Ground Water

Indicate distance of closest water well: \_\_\_\_\_

**Hazardous Substance Information:**

Name of Hazardous Substance:	CASRN#	Upper Bound (in lbs. or kg per day)	Lower Bound	Number of Days Release Occurs (per year)	Months of the Release