



Form B-3

**Primary Declaration Identification for
Section B: Declaration of Additionally
Planned Activities**

Country Code:
Section: B
Page n of n pages:
Date (ccyy-mm-dd):

Confid.
mark

Please indicate the **year** to which the data relates _____

Please indicate which of the following items are being declared.

Schedule 2 chemicals and facilities related to such chemicals:

Plant sites Yes No

Schedule 3 chemicals and facilities related to such chemicals:

Plant sites Yes No

Date at which the additionally planned activities are due to start (ccyy-mm-dd). _____

(If several additionally planned activities are to be declared enter the earliest date of the first activity to start at the plant site.)

Concentration limits:

Are concentration limits applied to **plant site** declarations? If **YES**, please complete *the Table below*. Yes No

	Production %	Processing %	Consumption %	Export %	Import %
Schedule 2A*					
Schedule 2A					
Schedule 2B					
Schedule 3					