



Form 46 - Chemical Product Registration

Summary Information Overview

Form Name: **Form 46 - Chemical Product Registration**
Document Number: **403953041**
Date Submitted: **10/10/2024**
Date Approved: **10/10/2024**

Operator Information

Operator Number: **200696**
Operator Name: **SELECT CHEMISTRY LLC**
Operator Address: **1515 WEST SAM HOUSTON PKWY NORTH SUITE 100**
Operator City: **HOUSTON**
Operator State: **TX**
Operator Zip: **77043**
First Name: **HEATH**
Last Name: **GRIZZLE**
Contact Phone: **(713) 986-2529**
Contact Email: **hgrizzle@selectchemistry.com**

Chemical Product Registration

Check this box if this disclosure is filed for Chemical Products in use prior to 7/31/2023 (State Statute 34-60-132.(2) (b))):

The Chemical Product described below contains Trade Secrets as described in Colo. Rev. Stat. § 7-74-102(4) of the Colorado Uniform Trade Secrets Act.:

Add New or Update Existing Product: **New**

Trade Name: **CCA-7017**

Manufacturer: **Select Chemistry**

Chemical Constituents List:

| # | CAS Number | Ingredient Name | Alias 1 | Alias 2 | Alias 3 |
|---|------------|--------------------------------|---------|---------|---------|
| 1 | 7732-18-5 | WATER | | | |
| 2 | 7791-18-6 | Magnesium chloride hexahydrate | | | |
| 3 | 7487-88-9 | Magnesium sulfate | | | |

By submitting this form, I hereby declare that the Chemical Product and its constituents contain no Intentionally added Perfluoroalkyl or Polyfluoroalkyl Substances as described in the Colo. Rev. Stat. § 25-5-1302 ("(7) "Perfluoroalkyl and polyfluoroalkyl substances" or "PFAS chemicals" means a class of fluorinated organic chemicals containing at least one fully fluorinated carbon atom."):

Attachments

Attached Files:

| Doc Num | Attachment name | File name | Uploaded |
|------------|-----------------|-----------|----------|
| No records | | | |

Signature and Certification

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Operator Comments:

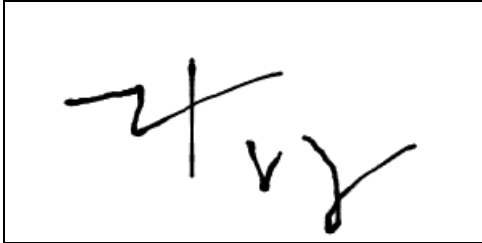
Name: **HEATH GRIZZLE**

Title: **DIRECTOR OF ANALYTICAL**

Email: **hgrizzle@selectchemistry.com**

Phone: **(713) 986-2529**

Signature:



Associated Documents

403953068 - FORM 46 SUBMITTED

1120 Lincoln Street, Suite 801, Denver, CO 80203 P 303.894.2100 www.colorado.gov/cogcc
Jared S. Polis, Governor | Julie Murphy, Director | Scott Cuthbertson, Deputy Director Operations

