RTK Coordinator Instructions

- <u>One</u> person from each employer will be the Employer Responsible RTK Official (ERRO)
- This assignment is made by your employer
- If you are the assigned to be the ERRO you need to register with RTK Staff to get online access to your employer's surveys:
 - Call the RTK Infoline at (609) 984-2202 and ask the staff to register you.
 - The RTK staff will add your name to our online system and you will receive an e-mail from "rtksurvey". The e-mail will contain instructions and an authorization code. You will need to have a myNewJersey account set up before you call. Go to <u>www.nj.gov</u> to set up your account before calling. If you already have an account on myNewJersey account you should use that account logon id.
 - After you receive your e-mail with the authorization code go to *myNewJersey* Portal located at <u>www.nj.gov</u> follow instructions in this slide show and in the application.
 - If you would like to assign others one or more of the surveys to complete review slides beginning at slide 42 of this presentation.

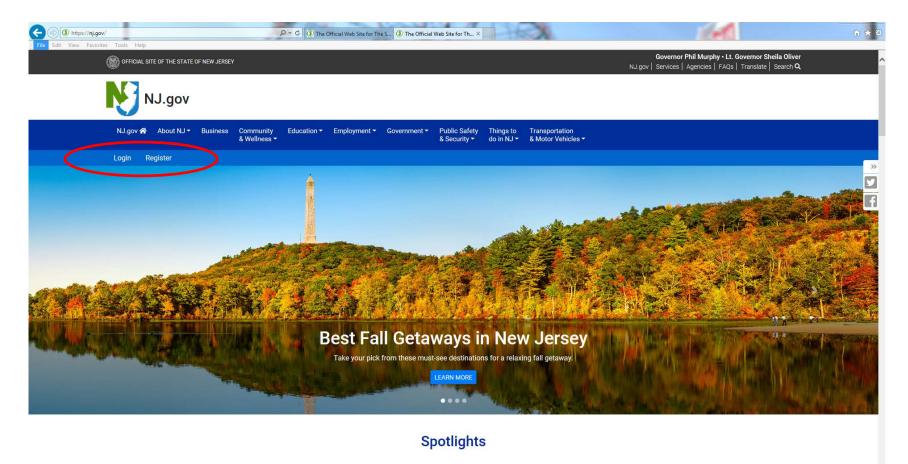
Facility Survey Coordinator Instructions

- The ERRO will assign you one or more facility surveys to complete.
- You will receive an e-mail from "rtksurvey" with an authorization code to use.
- Review the following slides and read instructions provided in the application.
- Complete the surveys assigned to you.
- Save or submit them. <u>Follow your RTK Coordinator's instructions</u>.
- NOTE: once submitted you will not be able to make changes to your survey!!

The RTK Survey online system operates through the *myNewJersey* Portal. You must have a portal account to access the RTK Survey online system.

If you already have an account then click on Login If you need to create an account then click on Register

Follow instructions provided online





Once you are logged into the NJ Portal

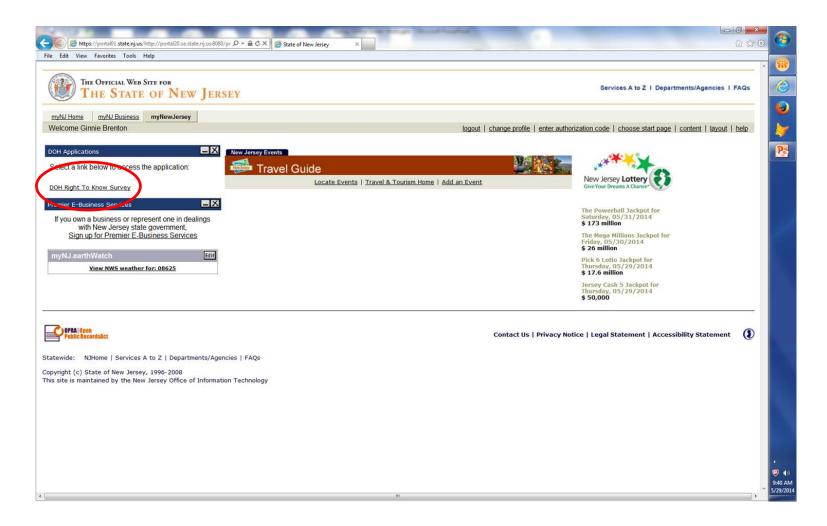
Click on "enter authorization code"

Enter your authorization code from the e-mail sent to you by "rtksurvey"

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Welcome Ginne Brenton logat	nge profie enter authorization code choose bert nage content layout help 🛛 🛓	Authorization code for DOH RTK Survey
DOH Applications EX New Jensey Seeks Select a link below to access the application: Array Guide		rksurvey 12 virolna brenton 05/28/2014 01/54 PM
DCH Right. To Knew Survey	New Jersey Lottery	
Premier E-Rusiness Services	The Powerball Jackpot for Webresday, 05/28/2014	Tear Sinnie,
If you own a business or represent one in dealings with New Jesersy state powerment, Sign up for Premier E-Business Services	\$ 152 million The Hega Hillion Jackpot for Friday, 05/30/2014	Important DOH RIK Survey Registration Information
myNJ.sarthWatch Bit	\$ 26 million Pick 6 Lotto Jackpot for Thursday, 05/29/2014	Your authorization code for the ten for your yole is below. This code is personanced for you and need only so used one time to provide access to your DOH HIK Survey information wia the
View WWS weather for: 08625	\$ 17.6 million Jersey Cash 5 Jackpot for	wydewyersey portaf. After you enter it in step i elow, you won't need to enter it again.
	Wednesday, 05/28/2014 \$ 259,000	
		Flease follow these instructions carefully.
Co	ontact Us Privacy Notice Legal Statement Accessibility Statement	If you have already registered for the myNewVersey portal, go to http://www.state.nj.us/ and follow the instructions starting at step 6.
Statewide: NUHome Services A to Z Departments/Agencies FAQs		 Open an Internet browser, type <u>http://www.state.nj.us/</u> in the address box and press the Enter key. You will see the New Jersey home page. You need to register here before you can access information that's personalized for you. Chief Unsident and the method of the access the access the access the access information that's personalized for you.
Copyright (c) Stats of New Jersey, 1966-2008 This site is maintained by the New Jersey Office of Information Technology		 Click 'Register' near the upper left part of the page. On the 'Dreate Your myBewWersey Account' page, enter the requested information. Be sure to include a challenge question and walid email address in case you forograp your password.
		5. Now that you've created your account, logout. Then click the 'Go to the New Jersey Homepage' link. The next step will werify that you know your ID and password.
		 Click 'Login' near the upper left part of the page, and enter your ID and password on the 'Log On to myNewJersey' page. Once you're logged in, click the 'enter authorization code' link to the right of the welcome message.
		 Copy this code 26802895AFCA and paste it into the box labeled 'Enter your authorization code', and click the 'Finished' button. The system will log you out.
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After you enter your "Authorization Code" successfully the link to the RTK Survey application will appear (you will be instructed to log out and log back into the *myNewJersey* Portal to receive the link)

Click on the link to open the application



Click on "All Facilities, My Employer" to begin

		STATE OF NEW JERSEY DEPARTMENT OF HEALTH RIGHT TO KNOW SURVEY
About RTK	*	Welcome to the New Jersey Department of Health, Right to Know Program electronic survey filing system.
Survey Facilities All Facilities, My Employer	*	Survey Facilities This system is for New Jersey Public Employers who are required to complete a Right to Know Survey.
Search Facilities		To begin, in the 'Survey Facilities' menu, either
View-Access Facilities	۲	Click the 'All Facilities, My Employer' item to obtain a list, in order by Facility ID, of all Facilities for your Employer. Click 'Search Facilities' to obtain a Facility Search screen; your search will be limited to your Employer's Facilities.
View-Access Reports	*	(If no Survey Facilities menu items are visible, eliek on the 'Survey Facilities' menu item to open the sub-menu.) View-Access Facilities
Survey User Reports	۲	This Login provides View-Only Access to Right to Know surveys for all Facilities in the assigned Municipality or Municipalities. To begin, in the 'View-Access Facilities' menu, either:
Fact Sheets	*	 Click 'All Assigned Municipalities' to obtain a list of Assigned Municipalities and a link to list the Facilities in each Municipality Click 'All Assigned Facilities' to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities.
Inspections	*	(If no View-Access Facilities menu items are visible, click on the 'View Access Facilities' menu item to open the sub-menu.)
Survey Facilities View-Access Facilities		
User Management	*	
List Survey Users Search Survey Users Add Survey User		
Logout	*	
Logout		

A list of all your employer's facilities will appear Click on "Surveys" on the far right to open the RTK Survey for that facility.

Note: Only Facilities with "Facility Status" = Active will have RTK Survey(s) to complete

					STATE OF NEW JERS DEPARTMENT OF		New Je		ith of Health	
About RTK	*	Employ	/er and Fa	cilities:	RIGHT TO KNOW S	OURVEY				
		EIN: 1	12345678	Employer Name:	Right to Know Test Employer			Star	tus: r	ione
Facilities	\$				Facilities List - 6 Record	s			\sim	
All Facilities, My Employer Search Facilities		EIN	Facility ID	Facility Name		County	Hazardous Chemicals Reported	2013 Survey Status	Facility Status	Surveys
		12345678	12345678000	RTK Test Facility		Mercer	User	Submitted	Active	Surveys
Fact Sheets	*	12345678	12345678001	RTK Unit - Test Facilit	y #1	Mercer	none	Ongoing	Active	Surveys
English Fact Sheets		12345678	12345678002	RTK TEST FACILITY	#2	Mercer	User	Submitted	Active	Surveys
Spanish Fact Sheets		12345678	12345678003	RTK Test Facility #3 -	Convention Center	Atlantic	none	Ongoing	Active	Surveys
		12345678	12345678004	RTK Test Facility # 4 -	- DPW GARAGE	Burlington	none	Not Started	Active	Surveys
User Management	*	12345678	12345678005	RTK TEST FACILITY	# 5 - RECREATION CENTER	Camden	none	Not Started	Active	Surveys
List Users User Search Add User		1								
Logout	\$									
Logout										

If you prefer to perform a search for a particular facility or group of facilities (i.e. all facilities from one county, city, or street, etc.) then click on "Search Facilities" and enter your search criteria.

					STATE OF NEW JERSE DEPARTMENT OF J RIGHT TO KNOW S	HEALTH	New J		th of Health	
About RTK	۲	Facility	Search							
		EIN:*	12345	678	Facility Id:*					
Facilities	\$	Facility Na	ime:		Facility Addr	ess:				
Search Facilities	>	Facility Cit	ty:		Facility Zip:					
		County Co	de: Select	County -	SIC:		NA	CS:		
Fact Sheets	٢	COMU Co	de: Select	Municipality -	Survey Year:	Year	•			
English Fact Sheets				Searc	h					
Spanish Fact Sheets										
	~			1	Facilities List - 6 Records		h			
User Management	۲	EIN	Facility ID	Facility Name		County	Hazardous Chemicals	2013 Survey	Facility	Surveys
List Users							Reported	Status	Status	
User Search		12345678	12345678000	RTK Test Facility		Mercer	User	Submitted	Active	Surveys
Add User		12345678	12345678001	RTK Unit - Test Facilit	/ #1	Mercer	none	Ongoing	Active	Surveys
		12345678	12345678002	RTK TEST FACILITY	¥2	Mercer	User	Submitted	Active	Surveys
Logout	۲	12345678	12345678003	RTK Test Facility #3 -	Convention Center	Atlantic	none	Ongoing	Active	Surveys
		12345678	12345678004	RTK Test Facility # 4 -	DPW GARAGE	Burlington	none	Not Started	Active	Surveys
		12345678	12345678005	RTK TEST FACILITY	# 5 - RECREATION CENTER	Camden	none	Not Started	Active	Surveys
				1				1	1	



Click on the

+ to open the survey and start to complete it.

				(DEPAR	STATE OF NEW JE TMENT OF	F H EALTH		
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About RTK	۲	Facility	and Surve	eys:							
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Facilities	\$	Return	to Facilities Lis	t							
All Facilities, My Employer								Survey List			
Search Facilities		Survey Year	Status	Add	Edit	View	Hazardous Chemicals Reported	Created By	Date Created	Last Changed By	Date Last Changed
Fact Sheets	\$	2013	Not Started	E							
English Fact Sheets Spanish Fact Sheets											
User Management	*										
List Users											
User Search											
Add User											
Logout	*										
Logout											

You must complete all sections of the Cover Page

				STATE DEPARTME	NT O	F HEALTH	NJHeat New Jersey Department of	th			
			0	R іGHT то	Клож	SURVEY					
About RTK	*			Survey	Year:						
				(Meets requirements		kplace Survey)					
Facilities	\$	Please fill in fields as indicated									
All Facilities, My Employer	~	Save Save And Go To L	ist Submit	Save And Go To I	nventory	Printable Survey					
Search Facilities		Facility ID SIC / NAIC	S Co/Mun	Due Date	(A) Faci	lity Location					
		12345678001 9131 / 1111	11 1111	7/15/2014		UNIT - TEST FACILITY	#1				
Fact Sheets	\$	Facility Mailing Address:			135 BROAD STREET						
English Fact Sheets		RTK Unit - Test Facility #1			TRENTON						
Spanish Fact Sheets		ATTN: RTK COORDINATOR									
opunion ruce onecto		ATTN: RTK COORDINATOR									
User Management	\$	135 BROAD STREET TRENTON NJ 08625									
	~										
List Users											
User Search Add User		3. Are there any substances or	materials present a	at this facility that are	C. Num	ber of Employees at this f	facility *	100			
Aud User		on the Right to Know Hazard	ous Substance Lis	t? *	Num	ber of employees expose	d or potentially exposed				
Logout		Yes			to ha	zardous chemicals at this	s facility *				
Logout	ĉ	 Indicate the nature of the ope Other 	rations conducted	at this facility *		ou reporting Products wit	th Unknown Ingredients?	*			
Logout		Other Nature of Operations:	·		• Y	es No	vith Unknown Ingredients				
		Test Facility			E. Empl	oyer Email Address *	with Unknown ingredients	2			
		,				urvey@doh.state.nj.us					
		G. CERTIFICATION OF RESP		AI				J			
		I certify under penalty of law			familiar wi	th the information submitt	ted in this document and	all attachments			
		and that based on my inquiry true, accurate and complete.		•							
		Last Changed By: Simi Oct	ania-Pole	Name: Ginni	e Brenton		Signature * 🗹 Dat	te: 05/16/2014			
		Title * RTK Coordinator		Telephone Nu	imber *	609-984-2202	Ext.:				
		 POLICE AND FIRE DEPAR Enter the respective phone r (Do NOT list 911 as the phone) 	umbers, name an	d addresses (include 2	Zip Code) o	of your local fire and police	e departments.				
		POLICE DEPARTMENT:			FIRE	DEPARTMENT:					
		Telephone Number * 609	-555-1212		Teler	hone Number * 609-5	555-1321				
			000 1212								

When you have completed entering information on the Cover page of your RTK Survey Click on the system "SAVE" button to save your information.

You can also choose "Save And Go To List" or "Save and Go To Inventory".

<u>Do NOT</u> Use other commands such as those in the tool box bar as they are outside this application and will <u>not</u> work properly.

O Not use		ate.nj.us/DOH_RTK/SurveyCover.do?paramete 🔎 – 🚔 🖒 🗙 🧭 State of New Jersey
/	File Edit View Favorites	State of New Jersey DEPARTMENT OF HEALTH Right to Know Survey
	About RTK	Survey Year :
	Facilities	(Meets requirements of the Workpiace survey)
	All Facilities, My Employer Search Facilities	Save Save And Go To List Submit Save And Go To Inventory Printable Survey Use Facility ID SIC / NAICS Co / Mun Due Date (A) Facility Location
	Search Facilities	12345678001 9131 / 111111 1111 7/15/2014 RTK UNIT - TEST FACILITY #1
	Fact Sheets English Fact Sheets	Facility Mailing Address: 135 BROAD STREET RTK Unit - Test Facility #1 TRENTON
	Spanish Fact Sheets	ATTN: RTK COORDINATOR ATTN: RTK COORDINATOR
	User Management	135 BROAD STREET TRENTON NJ 08625
	List Users User Search	
	Add User	B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? * C. Number of Employees at this facility * 100 Mumber of employees exposed or potentially exposed 60
	Logout	 Yes No Indicate the nature of the operations conducted at this facility * Are you reporting Products with Unknown Ingredients? *
	Logout	Other • Yes • No Other Nature of Operations: Add/Edit Products with Unknown Ingredients
		Test Facility F. Employer Email Address * rtksurvey@doh.state.nj.us
		G. CERTIFICATION OF RESPONSIBLE OFFICIAL
		I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.
		Last Changed By: Simi Octania-Pole Name: Ginnie Brenton Signature * Date: 05/16/2014 Title * RTK Coordinator Telephone Number * 609-984-2202 Ext.
		 H. POLICE AND FIRE DEPARTMENTS Enter the respective phone numbers, name and addresses (include Zip Code) of your local fire and police departments. (Do NOT list 911 as the phone number)
		POLICE DEPARTMENT: FIRE DEPARTMENT:
		Telephone Number * 609-555-1212 Telephone Number * 609-555-1321

If you have more than one union representing employees at this facility you can report additional unions by clicking on the link "AddEdit Information for Additional Unions" in Section I located on the Survey Cover page.

	Favorites Tools Help	FK/SurveyCover.do?paramete	X D A + Q	State of New Jersey	🧯 Survey	y Details ×				û 1
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	(DEPARTMEN	T OF HEALT	H NJHealth						
		RIGHT TO R	NOW SURVEY							
۲		Survey Y								
	Please fill in fields as indicated	(Meets requirements of	the Vi					STREET, STREET, STREET, STREET, ST	and heater a	e
® over	Save Save And Go To List	Submit Save And Go To Inv	ventory Printable Su	irvey		https://www20.state.nj.us/DOH_RTK/SurveyCover.do? View Favorites Tools Help	paramete D * # C × C State of New Je	ersey 💈 Survey Details	×	
uye.	Facility ID SIC / NAICS	Co / Mun Due Date	(A) Facility Location			POLICE DEPARTMEN	NT:		FIRE DEPARTMENT	:
	12345678001 9131 / 111111	1111 7/15/2014	RTK UNIT - TEST FA	ICILITY #1		Telephone Number *	609-555-1212		Telephone Number *	609-555-1321
۲	Facility Mailing Address:		135 BROAD STREE TRENTON	r						
	RTK Unit - Test Facility #1 ATTN: RTK COORDINATOR					Department Name *	Any Police Departr	nent	Department Name *	Any Fire Department
	ATTN: RTK COORDINATOR 135 BROAD STREET					Address *	1 Main Street		Address *	2 Main Street
۲	TRENTON NJ 08825					City *	Anytown		City *	Anytown
						State *, Zip *	NJ - 08600		State *, Zip *	NJ • 08055
		terials present at this facility that are	C. Number of Employee	at this facility * 100	_					
_	on the Right to Know Hazardou Yes C No	s Substance List? "	Number of employees to hazardous chemics	exposed or potentially exposed 60		I. UNION REPRESENTA	ATIVE *			
۲	D. Indicate the nature of the operat Other	ions conducted at this facility *	E. Are you reporting Pro	ducts with Unknown Ingredients? *		Are employees at this f	facility represented by a	a union? * 🔹 📍 Yes 🌼 N	lo (If 'Yes', all informa	tion in this section must be ente
	Other Nature of Operations:		Yes ^(C) No Add/Edit Pr	oducts with Unknown Ingredients		Union Rep. Name	Robert Union		Union Address	1 Union Circle
	Test Facility		F. Employer Email Addr	ess *		Union Name (Abbrev)	CWA	Local Number 36	City	Any town
			rtksurvey@doh.sta	te.nj.us		Telephone Number	609-555-8787		State Zin	NU
	G. CERTIFICATION OF RESPON		and the state of t	n submitted in this document and all attachr						
	and that based on my inquiry o			nation, I believe that the submitted informat		This Survey Has Repo	rted <u>1</u> Additional Uni	on(s).	Add/Edit Information f	or Additional Unions
	true, accurate and complete.		-	5		J. FACILITY EMERGEN	CY CONTACT			
	Last Changed By: Ginnie Brer Title * RTK Coordinator	ton Name: Ginnie I Telephone Num		Signature * 2 Date: 05/16/20 Pxt :	/14				Telephone Number	609-555-2323
			003-304-220			Contact Name *	Mary Emergency		Telephone Number *	609-555-2323
	H. POLICE AND FIRE DEPARTN Enter the respective phone nur	nbers, name and addresses (include Zip	o Code) of your local fire a	ind police departments.		K. PART OF FACILITY C	OVERED (Check box	if applicable)		
	(Do NOT list 911 as the phone	number)				This survey only or	overs part of the facility	The rest of the facility is	occupied by (specify nan	ne of employer):
	POLICE DEPARTMENT: Telephone Number * 609-5	55-1212	FIRE DEPARTMENT	609-555-1321				. The reactor the facility is	occupied by (specify flat	ie or employer).
		Police Department	Department Name *	Any Fire Department	_	NJ Department of H				
		n Street	Address *	2 Main Street	-	* Denotes required information	tion			
	City* Anyto	wn	City *	Anytown		NOTE: You are requ	uired to send a copy of	this survey to your Coun	ty Lead Agency, local hea	Ith department, local fire and polic
	State *, Zip * NJ	▼ 08600	State *, Zip *	NJ 💌 08055				ng Committee. You must	keep a copy of the surve	y in your Right to Know Central File
	I. UNION REPRESENTATIVE *					make it available to	vour employees.			
		presented by a union? * 🔍 Yes 🔅 N		tion in this section must be entered.)	_					
		rt Union	Union Address	1 Union Circle						
	Union Name (Abbrev) CWA		City	Any town						
		55-8787	State	1.00						
	This Survey Has Reported 1		dd/Edit Information 1	or Additional Unices						
	J. FACILITY EMERGENCY CON									
		Emergency	Telephone Number *	609-555-2323						
	K. PART OF FACILITY COVERE									
		rt of the facility. The rest of the facility is	occupied by (specify nan	ne of employer):						
	NJ Department of Health * Denotes required information									
		end a copy of this survey to your Count	tul and Anoney Jacob has	Ith department level fire and police	_					
		ergency Planning Committee. You must		y in your Right to Know Central File and						
	Same And Ca Talling	Submit Save And Go To Inv	(anton)							
	Save Save And Go To List	J Submit J Save And Go To my	remory							

After you click on "AddEdit Information for Additional Unions" from the cover page then Click on "Add A Union" button and a new line will appear where you will enter the additional union information.

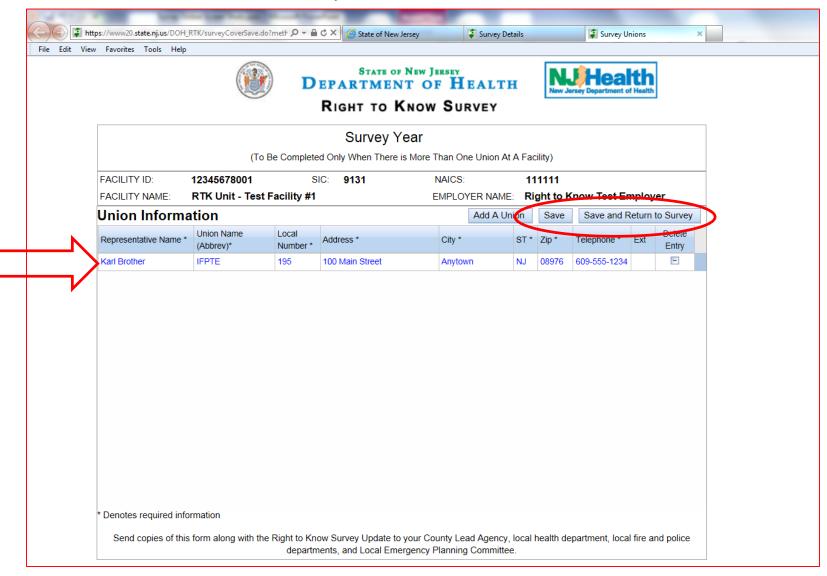
			Survey Y	⁄ear					
	(T	o Be Complete	ed Only When There		ne Union At A Fa	acility)			
FACILITY ID:	12345678001	s	IC: 9131	NAICS:	1	11111			
FACILITY NAME:	RTK Unit - Tes	t Facility #1		EMPLOYER NAME: Right to Know Test Employe					
Union Informa	ation			(Add A Union	Save	Save and F	Return	to S
Representative Name *	Union Name (Abbrev)*	Local Number *	Address *	City *	ST	* Zip *	Telephone *	Ext	E

Enter additional Union Information into the boxes provided

Then click on "Save"

Continue to "Add A Union" until all union's are entered.

Then click on "Save and Return to Survey"



How Do I Add Products With Unknown Ingredients

Click on Products with Unknown Ingredients in section E located on the Survey Cover Page

)	DEPARTME		F HEALT	H NJHea	th Mealth			
About RTK	*				RIGHT TO Survey (Meets requirements	Year						
Facilities	₽I	ease fill in fields a	as indicated									
All Facilities, My Employer		Save Save	And Go To List	Submit	Save And Go To I	nventory	Printable Surv	vey				
Search Facilities		Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Faci	lity Location					
		12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1						
Fact Sheets	* Fa	acility Mailing Ad	ddress:			135 BROAD STREET TRENTON						
English Fact Sheets Spanish Fact Sheets		RTK Unit - Test ATTN: RTK CO ATTN: RTK CO 135 BROAD ST	ORDINATOR			IKE	NTON					
User Management	*	TRENTON N	IJ 08625									
List Users User Search Add User	B.		ubstances or mate Know Hazardous		t this facility that are ? *		ber of Employees a	at this facility * exposed or potentially exposed	100 d 60			
Logout	_	Yes				to ha	zardous chemicals	at this facility *				
Logout	х D.	Other Other Nature of	ture of the operatio	rs conducted a	at this facility *	E. Are y	es 🔍 No	icts with Unknown Ingredients				
		Test Facility					oyer Email Addree urvey@doh.state	e.* .nj.us				
	G.	CERTIFICATIO	ON OF RESPONS	IBLE OFFICIA	L							
			d on my inquiry of t					submitted in this document an ation, I believe that the submit				
			By: Simi Octania	Pole	Name: Ginni				ate: 05/16/2014			
		Title * RTK (Coordinator		Telephone Nu	imber *	609-984-2202	Ext.:				
	H.	Enter the respe	FIRE DEPARTME ective phone numb 11 as the phone n	ers, name and	addresses (include 2	Zip Code) o	of your local fire and	d police departments.				
		POLICE DEPA	ARTMENT:			FIRE	DEPARTMENT:					
		Telephone Nu	mber * 609-55	5-1212		Telep	hone Number *	609-555-1321				

Click on "Add A Product" Enter Product Name, Manufacturer's name, Address, City, State, and zip into the boxes.

			0	(
			Survey Y						
(To Be		y When You Are Una	-				ame Subst	ance)	
FACILITY ID:	12345678001	SIC:	9131	NAIC		111111			
FACILITY NAME:	RTK Unit - Te	-			OYER NAME.	Right to Kr	now Test	Employ	/er
Products with	Unknown	Ingredients	Informati	ion	Add A Produ	uct Save	Save an	d Return	to Surve
Product Trade Name		Manufacturer or Supp	lier Name	Address		City	ST *	Zip *	Delete Entry
									-

After all "Products with Unknown Ingredients" information has been entered either: Click on "Save" and then "Add A Product" continue until all products with unknown ingredients have been added OR Click on "Save and Return to Survey"





RIGHT TO KNOW SURVEY

				Survey \	rear					
(To B	e Completed Only	y When You A	Are Una	able to Identify S	Specific Chemic	cal Componen	ts of a Tra	ade Name Sub	stance)	
FACILITY ID:	12345678001		SIC:	9131	NAIC	S:	11111	1		
FACILITY NAME:	RTK Unit - Te	st Facility #	#1		EMPL	OYER NAME:	Right	to Know Tes	t Emplo	yer
Products with	n Unknown	n Ingredi	ients	Informat	tion	Add A Prod	uct Sa	ave Save a	nd Returr	n to Survey
Product Trade Name		Manufacturer	or Supp	olier Name	Address		City	ST	* Zip *	Delete Entry
ABC Floor Scrubber		Any Company	,		1 Elm Street		Trenton	NJ	08638	E

Send copies of this form along with the Right to Know Survey Update to your County Lead Agency, local health department, local fire and police

When you are ready to enter your inventory

Click on "Save And Go To Inventory" to enter your inventory of products with hazardous ingredients

		STATE OF NEW JERSEY DEPARTMENT OF HEALTH New Jersey Department of Health
About RTK	*	RIGHT TO KNOW SURVEY SURVEY Year (Meets requirements of the Workplace Survey) Please fill in fields as indicated
Facilities	*	Save Save And Go To List Submit Save And Go To Inventory Printable Survey
All Facilities, My Employer	-	
Search Facilities		
Fact Sheets	*	12345678001 9131 / 11111 1111 7/15/2014 RTK UNIT - TEST FACILITY #1 Facility Mailing Address: 135 BROAD STREET 135 BROAD STREET
English Fact Sheets Spanish Fact Sheets		RTK Unit - Test Facility #1 TRENTON ATTN: RTK COORDINATOR ATTN: RTK COORDINATOR 135 BROAD STREET 135 BROAD STREET
User Management	*	TRENTON NJ 08625
List Users User Search Add User		 B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? * C. Number of Employees at this facility * Number of employees exposed or potentially exposed
Logout	~	Yes No to hazardous chemicals at this facility * E Are you reporting Products with Unknown Ingredients? *
Logout	â	D. Indicate the nature of the operations conducted at this facility ^ Other Other Nature of Operations: E. Are you reporting Products with Unknown Ingredients? * Other Nature of Operations:
		Test Facility F. Employer Email Address *
		rtksurvey@doh.state.nj.us
		G. CERTIFICATION OF RESPONSIBLE OFFICIAL
		I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.
		Last Changed By: Simi Octania-Pole Name: Ginnie Brenton Signature * 🗹 Date: 05/16/2014
		Title * RTK Coordinator Telephone Number * 609-984-2202 Ext.:
		 POLICE AND FIRE DEPARTMENTS Enter the respective phone numbers, name and addresses (include Zip Code) of your local fire and police departments. (Do NOT list 911 as the phone number)
		POLICE DEPARTMENT: FIRE DEPARTMENT:
		Telephone Number * 609-555-1212 Telephone Number * 609-555-1321

Click on "Add Product" to begin.

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About RTK	۲					Surve	/Year				
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Facilities	\$	Please fill in fields as in									
All Facilities, My Employer			123456			SIC: 9131	NAICS		111111		
Search Facilities				nit - Test Fa	-			YER NAME:	_		
		Instructions: If proc									s area, to open
Products	\$	that product second for						n to create a p	roduct record		
Show All Products		Add Product Retur	n to Sur	vey Cover	Save	Validate All					
		Product Name		Manufacture	er	Purpose	Location	Container	Inventory	Unit	Employees Exposed
Fact Sheets	\$										2
English Fact Sheets											
Spanish Fact Sheets											
Jser Management	\$										
List Users											
User Search											
Add User											
Logout	*										
Logout											

Complete <u>ALL</u> Product Information Then Click on SAVE

Products Show All Products Show All Products Fact Sheets English Fact Sheets Spanish Fact Sheets User Management List Users User Search Add User Inter product information into each column above	About RTK Survey Year (Meets requirements of the Workplace Survey) Facilities Please fill in fields as indicated All Facilities Facilities Please fill in fields as indicated Facilities Facilities Facilities Facilities Products Facilities Facilities Facilities Facilities Products Facilities Facilities Facilities Instructions: If products are listed, click the 'Edit' button for a product or click the product name in the menu's Products area, to open that product record for editing. If no products are listed, click the 'Add Product' button to create a product record. Add Product Return to Survey Cover Save Validate All Product Steets AAA Cleaner ABC Company Cleaning Products Closet Can 10 to 99 Pounds - 122 User Management Cleaning Product information into each column above then click on SAVE Enter product information into each column above then click on SAVE							ST Depart	MENT OF	HEALTH	New Jer		alth t of Health
Facilities Please fill in fields as indicated All Facilities, My Employer Search Facilities Please fill in fields as indicated Products FACILITY ID: 12345678001 SIC: 9131 NAICS: 111111 FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Products Instructions: If products are listed, click the 'Edit' button for a product, or click the product name in the menu's Products area, to oper that product record for editing. If no products are listed, click the 'Add Product' button to create a product record. Fact Sheets Product Return to Survey Cover Save Validate All Product Name Manufacturer Purpose Location Container Inventory Unit Employees Exposed Spanish Fact Sheets AAA Cleaner ABC Company Cleaning Products- General Closet Can 10 to 99 Poids - 12 List Users User Management Add User Enter product information into each column above then click on SAVE Into SAVE	Facilities Please fill in fields as indicated All Facilities, My Employer Search Facilities Please fill in fields as indicated Products FACILITY ID: 12345678001 SIC: 9131 NAICS: 111111 FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Products Instructions: If products are listed, click the 'Edit' button for a product, or click the product name in the menu's Products area, to open that product record for editing. If no products are listed, click the 'Add Product' button to create a product record. Add Products Product Name Manufacturer Purpose Location Container Inventory Unit Employees Spanish Fact Sheets Spanish Fact Sheets AAA Cleaner ABC Company Cleaning Products- General Closet Can 10 to 99 Pounds - 12 12 List Users List Users List Users Enter product information into each column above then click on SAVE Enter click on SAVE						0	RIGHT	TO KNOW	SURVEY			
All Facilities FACILITY ID: 12345678001 SIC: 9131 NAICS: 111111 FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Instructions: If products are listed, click the 'Edit button for a product, or click the product name in the menu's Products area, to oper that product record for editing. If no products are listed, click the 'Add Product' button to create a product record. Add Product Return to Survey Cover Save Validate All Product Name Manufacturer Purpose Location Container Inventory Unit Employees English Fact Sheets Spanish Fact Sheets <td>All Facilities FACILITY ID: 12345678001 SIC: 9131 NAICS: 111111 Instructions: If products are listed, click the 'Edit' button for a product, or click the product meet a product second. Instructions: Imployees Fact Sheets Fact Sheets Spanish Fact Sheets AAA Cleaner ABC Company Cleaning Products Close</td> <td>About RTK</td> <td>*</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>ace Survey)</td> <td></td> <td></td> <td></td>	All Facilities FACILITY ID: 12345678001 SIC: 9131 NAICS: 111111 Instructions: If products are listed, click the 'Edit' button for a product, or click the product meet a product second. Instructions: Imployees Fact Sheets Fact Sheets Spanish Fact Sheets AAA Cleaner ABC Company Cleaning Products Close	About RTK	*							ace Survey)			
All Facilities, My Employer Search Facilities FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Products FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Instructions: If no products are listed, click the 'Edit' button for a product, or click the product here or direct the product record. Add Product Return to Survey Cover Save Validate All Fact Sheets Fact Sheets AAA Cleaner ABC Company Cleaning Products- General Closet Can 10 to 99 Pounds - solids 12 User Management Add User Enter product information into each column above then click on SAVE Enter product information Into each column above then click on SAVE	All Facilities, My Employer Search Facilities FACILITY NAME: RTK Unit - Test Facility #1 EMPLOYER NAME: Right to Know Test Employer Instructions: If products are listed, click the 'Edit' button for a product, or click the product name in the menu's Products area, to open that products Show All Product Show All Product Fact Sheets Fact Sheets User Management Lust Users User Search Add User Logout	Facilities	\$	Please fill	l in fields a	as indicated							
Products Show All Products Fact Sheets Spanish Fact Sheets Spanish Fact Sheets User Management User Search Add User List Users User Search Add User Logout	Products Show All Products Endish Fact Sheets Spanish Fact Sheets User Management List Users User Search Add User Logout Instructions: If products are listed, click the 'Edit' button for a product, or click the product name in the menu's Products area, to open that product record for editing. If no products are listed, click the 'Add Product' button to create a product record. Add Product Return to Survey Cover Save Validate All Product Name Manufacturer Purpose Location Cleaning Products Closet Can 10 to 99 Pounds- Interpretation Cleaning Products Closet Can 10 to 99 Pounds- Interpretation Cleaning Products </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>••••</td> <td></td> <td></td> <td></td> <td>ow Test E</td> <td>mployer</td>							••••				ow Test E	mployer
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English Fact Sheets Spanish Fact Sheets User Management List Users User Search Add User Logout AAA Cleaner ABC Company Cleaning Products- General Closet Closet Can 10 to 99 Poulhds- total List Users User Search Add User Enter product information into each column above then click on SAVE	English Fact Sheets Spanish Fact Sheets Spanish Fact Sheets User Management List Users User Search Add User Logout Company Closet Closet Closet Closet Can 10 to 99 Pounds - solids solids Temperature Closet Closet Can 10 to 99 Pounds - solids Temperature Closet Closet Can Temperature Can Temperature Closet Can Closet Can Temperature Can Temperature Closet Closet Can Can Temperature Closet Can Can Temperature Temperature Closet Can Can Temperature Temperature Closet Can Temperature Closet Can Temperature Temperature Closet Can Closet Can Temperature Closet Can Temperature Can Temperature Closet Can Temperature Closet	Show All Products		I	Product Na	ame	Manufacturer	Purpose	Location	Container	Inventory	Unit	
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Logout	Logout					R	Ĩ,	General	1	1	7	solids	7
User Search Add User Enter product information into each column above then click on SAVE	Logout		*				\setminus \setminus			/ /			
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		Logout					τηε	en CIICK	on SAVE				

After you SAVE your product information this screen will appear

Click on "Add Substance" to add the first hazardous ingredient

NOTE: Only ingredients on the RTK Hazardous Substance List (HSL) will be accepted.

If the ingredient you enter is not on the RTK HSL the system will send a message "This substance is not on the RTK HSL and is not reportable." If no substances in your product are on the RTK HSL you cannot report the product on your RTK Survey.

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About RTK	*					ey Year						
Facilities	*	Please fill in fields as i	ndicated	(Meets r	equireme	ents of the Wo	orkplace	Survey)				
All Facilities, My Employer	~	FACILITY ID:	12345678001	SIC:	9131		NAICS	:	111111	1		
Search Facilities		FACILITY NAME:	RTK Unit - Test Fac	ility #1			EMPLC	YER NAME:	Right t	o Know	/ Test Em	ployer
Products	*		ng Product Informat n the 'Add Substance' Select then hit enter.	button. To lo	ok up a s	substance b	egin typ	ing in the Sut	stance a	#, Hazar	dous Che	mical Name, o
AAA Cleaner		Add Product Add	Substance Go To S	urvey Cover	Go To	Survey List	Show	All Products	Save	Delete	e Product	Validate All
Show All Products		Product Name	Manufacturer	Purpose		Location		Container	Inve	ntory	Unit	Employees Exposed
Fact Sheets	*	AAA Cleaner	ABC Company	Cleaning Proc General	lucts-	closet		Can	10 to	99	Pounds - solids	12
English Fact Sheets Spanish Fact Sheets												
User Management	\$											
List Users												
User Search												
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To enter hazardous ingredients that are on the RTK Hazardous Substance List Enter the hazardous ingredients by typing into any one of three (3) boxes then hit enter.

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Facilities	\$	Please fill in fiel	ds as i	ndicated										
All Facilities, My Employer		FACILITY ID:		123456780			9131		NAICS	S:	11111	1		
Search Facilities		FACILITY NAM	E:	RTK Unit -	Test Fac	ility #1			EMPL	DYER NAME:	Right	to Know	/ Test Em	ployer
Products	*	Instructions: Substance: C CAS Number f	lick or	h the 'Add S	ubstance'	button. To lo	ok up a s	substar	ce begin ty	bing in the Sul	bstance	#, Hazar	dous Chei	nical Name,
AAA Cleaner		Add Product	Add	Substance	Go To S	urvey Cover	Go To	Survey	List Shov	All Products	Save	Delete	e Product	Validate Al
Show All Products		Product Name		Manufacture	er	Purpose		Locatio	n	Container	Inve	entory	Unit	Employees Exposed
Fact Sheets English Fact Sheets	AAA Cleaner			ABC Compa	any	Cleaning Prod General	ucts-	closet		Can	10 to	0 99	Pounds - solids	12
Spanish Fact Sheets		Substance	e #	ł	Hazardous (Chemical Name			CAS Number	DOT Number	r Mix	ture S	pecial HH C	ode Delete 🔺
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You must now select the % of the mixture that this ingredient represents with respect to the entire product (i.e. 100% of the mixture, 25 % of the mixture, etc.) Click on "Select" in the "Mixture" Column, select the mixture %, then click "SAVE" Check your product's Safety Data Sheet to determine the mixture percentage of each hazardous ingredient.

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About RTK	*					Surv	ey Ye	ear	SURVEY				
Facilities All Facilities, My Employer Search Facilities	*	Please fill in field FACILITY ID: FACILITY NAME	1234567 RTK Uni	it - Test Fac	SIC:	9131		NA	ICS: PLOYER NAME:	Rig	-	ow Test Em	
Products AAA Cleaner	*	Instructions: Substance: CI CAS Number fie Add Product	lick on the 'Add	I Substance' en hit enter.	button. To lo	ok up a)OT Nun	substa	nce begin nd 'Specia	typing in the St	ibstai Is for	nce #, Haz substance	zardous Che	mical Name,
Show All Products Fact Sheets	\$	Product Name	Manufac		Purpose Cleaning Proc	lucts-	Locatio	n	Container		Inventory	Unit Pounds -	Employees Exposed
English Fact Sheets Spanish Fact Sheets		Substance		Hazardous (General Chemical Name ETONE	2	Closet	CAS Num 67-64-1	ber DOT Numb		Mixture Select	solids Special HH C F3,F4	code Delete
User Management List Users User Search Add User	*												
Logout Logout	*												

To Continue Adding Products & Hazardous Ingredients: To add additional products click on "SAVE" to save the first product. Then click on "Add A Product". A new line for product information will appear.

To add additional hazardous substances click on "SAVE" after adding your first hazardous substance ingredient. Then click on "Add Substance" add the next substance + mixture %, then click on "SAVE"



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK	*			(Meets		-		kplace	Survey)					
Facilities	\$	Please fill in fields a	as indicated											
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All Facilities, My Employer Search Facilities		FACILITY NAME:	RTK Unit - Test Fac	cility #1			E	EMPLO	YER NAME:	Right	o Knov	v Test Em	ployer	
			diting Product Information											
Products	\$		c on the 'Add Substance Is. Select then hit enter.											
AAA Cleaner	(Add Product	dd Substance 🛛 Go To S	Survey Cover	Go To	Survey	List	Show	All Products	Save	Delet	e Product	Valida	te All
Show All Products		Product Name	Manufacturer	Purpose		Locatio	n		Container	Inve	ntory	Unit	Employ Expose	
Fact Sheets	*	AAA Cleaner	ABC Company	Cleaning Proc General	ducts-	closet			Can	10 te	o 99	Pounds - solids	12	
English Fact Sheets Spanish Fact Sheets		Substance #	Hazardous	Chemical Name	;		CAS N	umber	DOT Number	Mix	ture s	Special HH C	ode De	lete 🔺
Spanish Fact Sheets		0006	AC	ETONE			67-6	64-1	1090	10 to 24	4% (53)	F3,F4		-
User Management	\$	E1												
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User Search														
Add User														
Logout	\$													
Logout														

You can delete a Hazardous Chemical Ingredient by clicking on - under the Column Heading "Delete" or you can delete the entire product by clicking on "Delete Product".

Add Hazardous Chemical Ingredients and or Products by clicking on the "Add Product" / "Add Substance" buttons. For products you want to delete from previous years you will first need to click on the "Edit" button.

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About RTK			e		(Meets I	reauireme	ents of the	Workplace	Survey)			
Constitutions	-	Please fill in FACILITY II		12345678001	SIC:	9131		NAICS		111111		
Facilities	-	FACILITY N		RTK Unit - Test Fac		9131			YER NAME:		ow Test Em	plover
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Scaren Facilities		Substance	: Click	on the 'Add Substance'	button. To lo	ok up a	substance	e begin typ	ing in the Sut	- ostance #, Haz	ardous Che	mical Name,
Products	٨	Add Produ		Select then hit enter.	-		Survey Lis		All Products	Save Del		Validate All
Paint		Add Plodu	Add	Substance Go To S		60 10	Survey Li	ST SHOW	All Products		ele Product	Employees
AAA Cleaner		Product Nam	ne	Manufacturer	Purpose		Location		Container	Inventory	Unit	Exposed
xtreme Carbon Black		Paint		Sherwin Williams, MAB, Dupont	Deodorizer		A hall		Can	100 to 499	Gallons - liquids	23
abc		Subst	ance #	Hazardous	Chemical Name	•	C	AS Number	DOT Number	Mixture	Special HH (Code Delete
Oxygen Show All Products		00	006	AC	ETONE			67-64-1	1090	100%	F3,F4	
		19	916	3-TRIFLUORO	METHYL ANIL	NE		98-16-8	2948	90 to 99%		
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Multi-Delete Option

(To be used when you have completed a large clean out and have multiple products to delete from your inventory.)



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK	*					a			urvev)			
Survey Facilities	\$	Please fi	ill in field	ds as indicated		(i	incere requirements	of the Womplace o	urvey)			
All Facilities, My Employer	~	FACILIT	Y ID:	1234567	8006	\$	SIC: 8211	NAICS:	6	11110		
Search Facilities		FACILIT	Y NAME		ST FACILI	TY #6 - H	IIGH SCHOOL	EMPLOY	er name: R	ight to Kno	w Test Em	ployer
iew-Access Facilities	*	that pro	duct re	cord for editing	. If no prod	ucts are	it' button for a proc listed, click the 'Ad	d Product' button				area, to ope
		Add Pro	oduct	Return to Sur	vey Cover	Save	Validate All	Multi-Delete				
eports for This Survey	*		Product	t Name	Manufacture	r	Purpose	Location	Container	Inventory	Unit	Employees Exposed
ew-Access Reports	*	Edit	WINDE	x	SC JOHNSC	NS	Cleaning Products- General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
	~	Edit	SPRAY	' BUFF	INCREDIBLE	Ξ	Cleaning Products- General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
urvey User Reports	*	Edit	XYZ		123		Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
act Sheets	*	Edit	SUPER	GLUE	ELMER'S		Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
English Fact Sheets Spanish Fact Sheets		Edit	FORTIF SEAL	D: 123456 IAME: RTK TE Ins: If products and it record for editing ct Return to Suit oduct Name INDEX PRAY BUFF 72 IPER GLUE DRTIFICATION FAL	JOHN A. EA	RL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
roducts	\$	Edit	CLORO	X	CLOROX CO	OMPANY	Cleaning Products- General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4
WINDEX		Edit			ALL-PURPO	SE	Cleaning Products- General	JANITOR'S CLOSET	Bottles or jugs (glass)	1 to 9	Gallons - liquids	2
SPRAY BUFF XYZ												
SUPER GLUE												
FORTIFICATION SEAL												
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ALL-PURPOSE CLEANER Show All Products												
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View-Access Facilities

Multi-Delete Option

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Reports for This Survey		Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
iew-Access Reports	V	WINDEX	SC JOHNSONS	Cleaning Products- General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
	~	SPRAY BUFF	INCREDIBLE	Cleaning Products- General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
Survey User Reports	•	XYZ	123	Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
-	•	SUPER GLUE	ELMER'S	Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
English Fact Sheets Spanish Fact Sheets		FORTIFICATION SEAL	JOHN A. EARL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
Products		CLOROX	CLOROX COMPANY	Cleaning Products- General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4
nspections		ALL-PURPOSE CLEANER	ALL-PURPOSE	Cleaning Products- General	JANITOR'S CLOSET	Bottles or jugs (glass)	1 to 9	Gallons - liquids	2
Survey Facilities View-Access Facilities									
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List Survey Users Search Survey Users Add Survey User									
Logout	2								

When you have finished entering all reportable products & hazardous substances (ingredients) Click on "Validate All" to ensure there are no errors or missing information.

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Due du ete	0	Instructions: Substance: C		-												_
Products	*	CAS Number fi	elds. S	Select then	hit enter.	(Note: The '	DOT Nun	nber' a	ind 'Sp	ecial H	H Code' fields	for su	ostance	s are not u	pdate	eable.)
AAA Cleaner		Add Product	Add S	Substance	Go To S	urvey Cover	Go To	Survey	/ List	Show	All Products	Save	Dele	te Product	Va	lidate All
Show All Products		Product Name		Manufacture	er	Purpose		Locati	on		Container	Inv	entory	Unit		ployees losed
Fact Sheets	*	AAA Cleaner		ABC Compa	any	Cleaning Pro General	ducts-	closet			Can	10	to 99	Pounds - solids	12	
English Fact Sheets		Substance	#		Hazardous (Chemical Nam	e		CAS	Number	DOT Number	Mi	dure	Special HH (Code	Delete 🔺
Spanish Fact Sheets		0006			ACE	ETONE			67-	-64-1	1090	10 to 2	4% (53)	F3,F4		-
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Logout	\$															
Logout																

When you have completed your inventory page(s) and you have "SAVED" it Click on 'Go To Survey Cover' to Submit your survey.



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK	*				(Meets re	Surve equireme	-	e ar the Workplace	Survey)					
Facilities	\$	Please fill in field	s as indicated											
All Facilities, My Employer Search Facilities		FACILITY ID: FACILITY NAME		- Test Fac	ility #1	9131			YER NAME:		to Kno	w Test Em		
Products	*	Substance: Cl	Editing Produc ick on the 'Add S elds. Select then	Substance'	button. To loo	ok up a :	substa	nce begin typ	ing in the Sub	stance	#, Haza	ardous Che	mical	Name,
AAA Cleaner		Add Product	Add Substance	Go To S	urvey Cover	Go To	Survey	List Show	All Products	Save	Delet	te Product	Val	date All
Show All Products		Product Name	Manufactur	rer	Purpose		Locati	on	Container	Inve	ntory	Unit	Emp Expo	loyees osed
Fact Sheets	\$	AAA Cleaner	ABC Comp	oany	Cleaning Prod General	ucts-	closet		Can	10 t	o 99	Pounds - solids	12	
English Fact Sheets Spanish Fact Sheets		Substance	#	Hazardous (Chemical Name			CAS Number	DOT Number	Mix	ture	Special HH C	ode I	Delete 🔺
		1809	1,1	1,2,2-TETRA	CHLOROETHA	NE		79-34-5	1702	10 to 24	4% (53)			-
Jser Management	\$	1043		ISOBUTY	L ALCOHOL			78-83-1	1212	60 to	69%	F3		-
List Users		1091		KER	OSENE			8008-20-6	1223	80 to	89%	F2		-
User Search		0006		ACE	ETONE			67-64-1	1090	10 to	24%	F4,F3		-
Add User	*													

Click on "Submit"

		STATE OF NEW JERSEY DEPARTMENT OF HEALTH		
		RIGHT TO KNOW SURVEY		
About RTK	۲	Survey Year :		
		(Meets requirements of the Workplace Survey)		
Facilities	\$	Please fill in fields as indicated		
All Facilities, My Employer		Save Save And Go To List Submit Save And Go To Inventory Printable Survey		
Search Facilities		Facility ID SIC / NAICS Co / Mun Due Date (A) Facility Location		
		12345678001 9131 / 111111 1111 7/15/2014 RTK UNIT - TEST FACILITY #1		
Fact Sheets	\$	Facility Mailing Address: 135 BROAD STREET		
English Fact Sheets		RTK Unit - Test Facility #1		
Spanish Fact Sheets		ATTN: RTK COORDINATOR ATTN: RTK COORDINATOR		
		135 BROAD STREET		
User Management	\$	TRENTON NJ 08625		
List Users				
User Search				
Add User		B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? * 100		
		Ves No No		
Logout	\$	D. Indicate the nature of the operations conducted at this facility * E. Are you reporting Products with Unknown Ingredients? *		
Logout		Other Ves No		
		Other Nature of Operations: Add/Edit Products with Unknown Ingredients Test Facility F. Employer Email Address *		
		Test Facility F. Employer Email Address * rtksurvey@doh.state.nj.us		
		G. CERTIFICATION OF RESPONSIBLE OFFICIAL		
		I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.		
		Last Changed By: Simi Octania-Pole Name: Ginnie Brenton Signature * 🗹 Date: 05/16/2014		
		Title * RTK Coordinator Telephone Number * 609-984-2202 Ext.:		
		 POLICE AND FIRE DEPARTMENTS Enter the respective phone numbers, name and addresses (include Zip Code) of your local fire and police departments. (Do NOT list 911 as the phone number) 		
		POLICE DEPARTMENT: FIRE DEPARTMENT:		
		Telephone Number * 609-555-1212 Telephone Number * 609-555-1321		

Not Ready To Submit Your Survey??

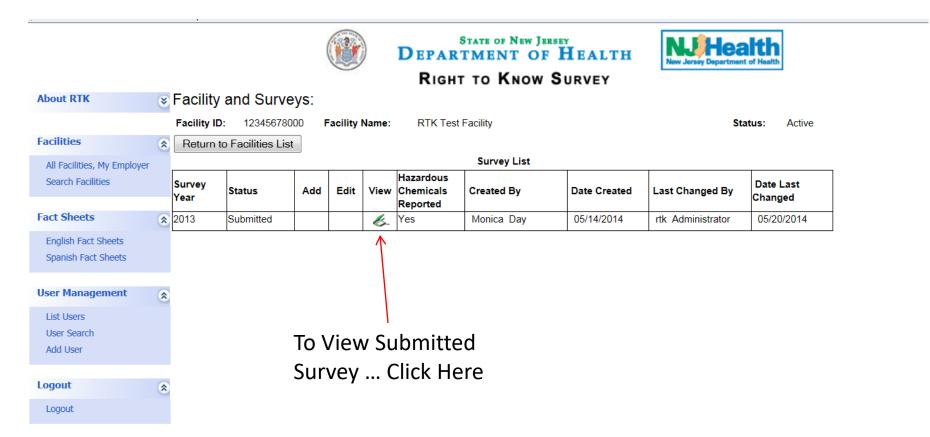
Click on "Save" and you can return to continue completing your survey at a later time.

IMPORTANT NOTE: To ensure data is not lost, be sure to "SAVE" your work <u>often</u> and whenever you leave your computer idle for more than a few minutes.

	STATE OF NEW JERSEY DEPARTMENT OF HEALTH	t of Health		
	RIGHT TO KNOW SURVEY			
About RTK	Survey Year (Meets requirem			
acilities	ease till in fields as indicated			
All Facilities, My Employer	Save And Go To List Submit Save And Go To Inventory Printable Survey			
Search Facilities	Facility ID SIC / NAICS Co / Mun Due Date (A) Facility Location			
	12345678001 9131 / 111111 1111 7/15/2014 RTK UNIT - TEST FACILITY #1			
act Sheets	acility Mailing Address: 135 BROAD STREET			
English Fact Sheets Spanish Fact Sheets	RTK Unit - Test Facility #1 ATTN: RTK COORDINATOR ATTN: RTK COORDINATOR			
Jser Management	135 BROAD STREET TRENTON NJ 08625			
List Users				
User Search Add User	Are there any substances or materials present at this facility that are C. Number of Employees at this facility *	100		
	on the Right to Know Hazardous Substance List? * Number of employees exposed or potentially expos ● Yes ● No to hazardous chemicals at this facility *			
ogout	Indicate the nature of the operations conducted at this facility * E. Are you reporting Products with Unknown Ingredien	ts? *		
Logout	Other View of Constitution			
	Other Nature of Operations: Add/Edit Products with Unknown Ingredie	ents		
	Test Facility F. Employer Email Address * rtksurvey@doh.state.nj.us			
	CERTIFICATION OF RESPONSIBLE OFFICIAL			
	I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document a and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the subn true, accurate and complete.			
	Last Changed By: Simi Octania-Pole Name: Ginnie Brenton Signature * 🗹	Date: 05/16/2014		
	Title * RTK Coordinator Telephone Number * 609-984-2202 Ext.:			
	POLICE AND FIRE DEPARTMENTS Enter the respective phone numbers, name and addresses (include Zip Code) of your local fire and police departments. (Do NOT list 911 as the phone number)			
	POLICE DEPARTMENT: FIRE DEPARTMENT:			

Once your survey is submitted you will not be able to make changes!!

You will be able to view and print your survey



Reports for this survey

(Note: have the survey open)



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK	*	Survey Year (Meets requirements of the Workplace Survey)								
Survey Facilities	\$		ill in fields as indicated							
All Facilities, My Employer Search Facilities			Y NAME: RTK TE	EST FACILITY #6 - I			ER NAME: R	11110 ight to Knov		
View-Access Facilities	*		tions: If products ar duct record for editing oduct Return to Sur	g. If no products are					Products a	irea, to ope
All Assigned Municipalities All Assigned Facilities			Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
Search Facilities		Edit	WINDEX	SC JOHNSONS	Cleaning Products- General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
Reports for This Survey Inventory by Product	\$	Edit	SPRAY BUFF	INCREDIBLE	Cleaning Products- General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
Inventory by Chemical		Edit	XYZ	123	Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
/iew-Access Reports	*	Edit	SUPER GLUE	ELMER'S	Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
Chemicals Present By Local	lity	Edit	FORTIFICATION SEAL	JOHN A. EARL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
Survey User Reports	*	Edit	CLOROX	CLOROX COMPANY	Cleaning Products- General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4
Chemicals Present By EIN						1	1]		
act Sheets	*									
English Fact Sheets Spanish Fact Sheets										
Products	\$									

There are many reports you can generate yourself. One that might be useful when completing your survey, is to generate a report sorted by location. This way you can visit the areas of the facility with a list of what is in each room.

- Select "Inventory by Product"
- Then "Sort By" change from Product Name to Location.
- Select "Generate Products Report" at the bottom right
- You can then select "Open" then from your tool bar "File" then "Print"
- Or you can "Save" the file for future use.





RIGHT TO KNOW SURVEY



Survey Inventory By Product Categ	jory Report	Return To Survey
Facility ID: 12345678006 Facility Survey Year: 2018	Name: RTK TEST FACILITY #6 - HIGH SCHOOL	
Setup Screen		
To Generate This Report for Specific Product Cate To Generate This Report for All Inventory, Leave A	gories, Select Them Using the Selection Fields Below. Il Selection Fields Unselected.	
Products Reported in this Survey	Select V	
Manufacturers Reported in this Survey	Select V	
Purposes Reported in this Survey	Select V	
Product Locations Reported in this Survey	Select V	
Container Types Reported in this Survey	Select V	
Inventory Ranges Reported in this Survey	Select 🗸	
Units of Measure Reported in this Survey	Select V	
Sort This Report By:	Product Location	
Sort Direction:	Ascending V	
L		Generate Products Report

This system is restricted to authorized users. Random audits are routinely performed. Copyright © 2013 New Jersey Department of Health. All Rights Reserved.

Reports – All facilities

Click "Chemicals Present by EIN" if you are interested of making a list of all your facilities with inventory of a particular chemical

	STATE OF NEW JERSEY
	DEPARTMENT OF HEALTH
	RIGHT TO KNOW SURVEY
bout RTK 🛛 📚	
	Welcome to the New Jersey Department of Health, Right to Know Program electronic survey filing system.
Survey Facilities	Survey Facilities
All Facilities, My Employer	This system is for New Jersey Public Employers who are required to complete a Right to Know Survey.
Search Facilities	To begin, in the 'Survey Facilities' menu, either
	Click the 'All Facilities, My Employer' item to obtain a list, in order by Facility ID, of all Facilities for your Employer.
/iew-Access Facilities 🚷	Click 'Search Facilities' to obtain a Facility Search screen; your search will be limited to your Employer's Facilities.
All Assigned Municipalities All Assigned Facilities	(If no Survey Facilities menu items are visible, click on the 'Survey Facilities' menu item to open the sub-menu.)
Search Facilities	
	View-Access Facilities This Login provides View-Only Access to Right to Know surveys for all Facilities in the assigned Municipality or Municipalities.
/iew-Access Reports	To begin, in the 'View-Access Facilities' menu, either:
Chemicals Present By Locality	
	 Click 'All Assigned Municipalities' to obtain a list of Assigned Municipalities and a link to list the Facilities in each Municipality Click 'All Assigned Facilities' to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities.
Survey User Reports 🔗	(If no View-Access Facilities menu items are visible, click on the 'View Access Facilities' menu item to open the sub-menu.)
Chemicals Present By EIN	
act Sheets 🌸	
English Fact Sheets Spanish Fact Sheets	
opanish ruce once to	
Jser Management 🔹 🙊	
List Survey Users	
Search Survey Users	
Add Survey User	
ogout	

For Example: generate a report of all facilities reporting gasoline in a can



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

Report: Chemicals Present in Facilities, By EIN



Setup Screen

The EIN or a Facility, and a Chemical and/or One or More Chemical Attributes Must Be Selected.										
EIN	12345678 Right to Know Test Employer V									
Facility	Select V									
Survey Year	Latest Submitted V									
Chemical	GASOLINE									
	Hint: Start typing the Chemical Name to reach it on the list									
Health Hazard Category	Select V									
Chemical Percent in Mixture	Select V									
Product Container Type	Can									
Product Quantity (Range)	Select V Unit of Measure Select V									
	Generate EIN Report									

Facility Inspection Search

(If your facility has been inspected by the RTK program click "Survey Facilities" to access your inspection report)



STATE OF NEW JERSEY DEPARTMENT OF HEALTH RIGHT TO KNOW SURVEY



About RTK Welcome to the New Jersey Department of Health, Right to Know Program electronic survey filing system. Survey Facilities Survey Facilities * This system is for New Jersey Public Employers who are required to complete a Right to Know Survey. My Facilities To begin, click the 'My Facilities' item in the 'Survey Facilities' menu on the left. (If no Survey Facilities menu items are visible, click on the 'Survey Facilities' menu item to open the sub-menu.) View-Access Facilities ¥ View-Access Facilities View-Access Reports This Login provides View-Only Access to Right to Know surveys for all Facilities in the assigned County or Counties. \$ Chemicals Present By Locality To begin, in the 'View-Access Facilities' menu, either: Click 'All Assigned Municipalities' to obtain a list of Municipalities in your Assigned County or Counties, and a link to list the Facilities Fact Sheets * in each Municipality. Click 'All Assigned Facilities' to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities. **English Fact Sheets** Spanish Fact Sheets (If no View-Access Facilities menu items are visible, click on the 'View Access Facilities' menu item to open the sub-menu.) Inspections \$ Survey Facilities View-Access Facilities Logout \$ Logout

Facility Inspection Search

(Click the "search" button and your list of inspections will appear) Select the facility inspection report you want by clicking on the green folder under view report. Then at the bottom of the page select open or save.

) T	ST. DEPARTI	ATE OF N MENT	ew Jersey OF H	EALT	н			the Health				
RIGHT TO KNOW SURVEY																
About RTK	۲	Inspection S	Search											_		
		EIN	12345678				Facility I	D								
Survey Facilities	\$	Facility Name					County	5	Select	County V						
My Facilities		Facility City					Municipa	ality	Select	Municipalit	y 🗸					
View-Access Facilities	*	Inspection Number			Inspection Dates:	From			Throug	jh						
View-Access Reports	*	Inspection Typ	eInspection	Type 🗸	Inspection Status	Inspe	ected eset Search	_	nspec	torInspec	ctor		~]		
Chemicals Present By Loca	lity				Oedicit		eser Dedicit									
Fact Sheets	\$				Inspecti	ons List -	1 Records					_		_		
English Fact Sheets		Facility ID	Facility Name					Inspect #	Туре	Insp Date	Insptr	Viols	View Report			
Spanish Fact Sheets		12345678005	RTK TEST FACILI	TY # 5 - RE	CREATION C	CENTER		00133	INIT	04/05/2018	cs	Ν	Ċ	1		
Inspections	*													_		
Survey Facilities														\mathbf{N}	Click the g	reen
View-Access Facilities														N	-	
Logout	\$														folder icon	
Logout	0														open inspe	ection
Logout															report	
			This s	ystem is restr	ricted to authoriz	ed users.	Random aud	lits are rout	inely pe	rformed.						

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Your facility's inspection report will included:

- All violations found during the inspection,
- Detailed notes for each violation,
- A compliance deadline, and
- RTK program contact information

1	New RIGHT TO KNOW COM	v Jersey Departm Right to Kr PO Box 3 Trenton, NJ 08 PLIANCE INSPEC	10W 68 625-0368	TION REPOR	т
NJEIN Number 12345678005	SIC / NAICS 9131 / 611110	Inspection Type Initial	Inspectio 04/	Date 05/2018	Inspection Number 00133
Name of Employer RTK TEST FACI	ILITY # 5 - RECREATION				
Responsible Official (Name				Employer Telep	hans Mumber
RTK TESTER				(609) 888	
Street Address 10 BALTIC DRIV	/E			County Camden	
City, State, Zip Code				County/Municipa	al Code
CAMDEN NJ 08	765			0408	
X No violation The following viol Failure to (Failure to	with this directive may re- cons of the Worker and C lations were noted durin comply with the require comply with the require post the Right to Know comply with the require	community Right ing the inspection ments to submit ments to label co poster (N.J.A.C.	to Know Act were //reinspection: a Right to Know S ontainers (N.J.A.C. 8:59-6.3(d)).	noted. urvey (N.J.A 8:50-5).	LC. 8:59-2).
Employer Representative ()		Telephone Number 609) 292-7216	DOH Inspector Name CHERRELLE SI		lumber (609) 802-8150

Assigning Surveys to others to complete.

- Only the Employer's RTK Coordinator can assign others RTK surveys to complete.
 Surveys can be assigned
 - to another employee
 - to a consultant
 - to more than one person if necessary

Under the "User Management" SectionClick on "Add User"

				RIGHT TO KN	OW SURVEY				
bout RTK	*	Employ	er and Fa	cilities:					
		EIN: 1	2345678	Employer Name: Right to Know Test Emplo	yer		Stat	us: n	ione
acilities	*			Facilities List - 6	Records				
All Facilities, My Employer Search Facilities		EIN	Facility ID	Facility Name	County	Hazardous Chemicals Reported	2013 Survey Status	Facility Status	Surveys
		12345678	12345678000	RTK Test Facility	Mercer	User	Submitted	Active	<u>Surveys</u>
act Sheets	*	12345678	12345678001	RTK Unit - Test Facility #1	Mercer	none	Ongoing	Active	Surveys
English Fact Sheets		12345678	12345678002	RTK TEST FACILITY #2	Mercer	User	Submitted	Active	<u>Surveys</u>
Spanish Fact Sheets		12345678	12345678003	RTK Test Facility #3 - Convention Center	Atlantic	none	Ongoing	Active	<u>Surveys</u>
		12345678	12345678004	RTK Test Facility # 4 - DPW GARAGE	Burlington	none	Ongoing	Active	Surveys
Iser Management	*	12345678	12345678005	RTK TEST FACILITY # 5 - RECREATION CENTER	Camden	none	Not Started	Active	Surveys
List Users User Search Add User		1							

Under "Role" click on "Facility Survey Coordinator" or "Employer Consultant"



Complete all new user information: User Login Name, First, Last name, Title, Email



<

* Add User Facilities * User Login Name EIN 12345678 All Facilities, My Employer Role Facility Survey Coordinator Search Facilities 12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION Fact Sheets \$ 12345678001-RTK Unit - Test Facility #1 >> User Facility 12345678002-RTK TEST FACILITY #2 English Fact Sheets Spanish Fact Sheets << Use

Add

About RTK

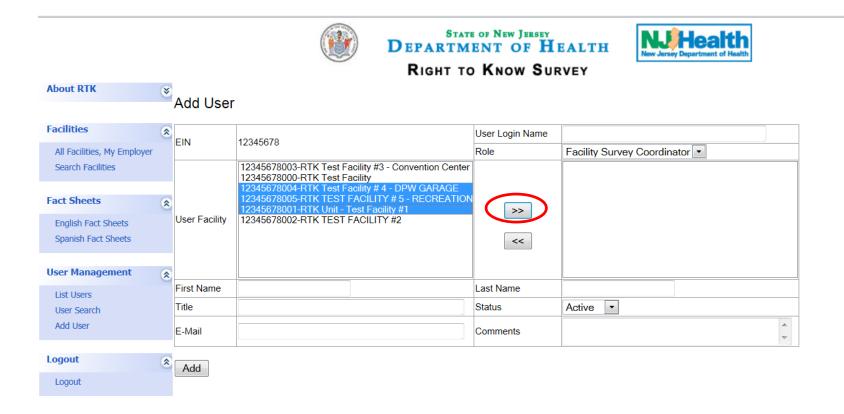
Logout

User Management	\$				
List Users User Search		First Name		Last Name	
		Title	বি	Status	Active
Add User		E-Mail	ব	Comments	A
Logout	*	Add			

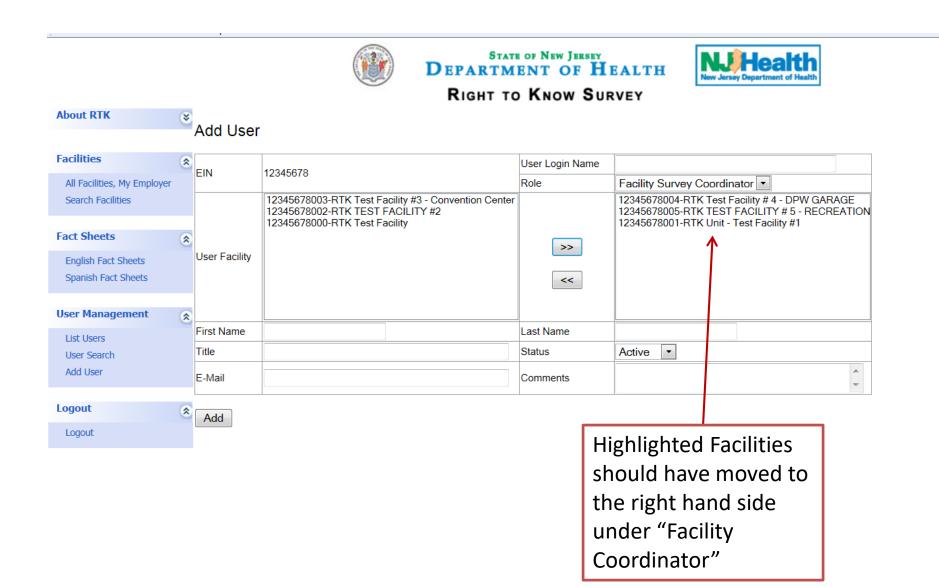
Highlight the facilities you want to transfer by left clicking on your mouse and dragging it over the facility name until it is highlighted

Then click on the >> key.

This will assign the chosen facilities to new user



Check that the highlighted facilities have moved from the left box to the right box.



When you have finished moving the selected surveys

Click on "Add"

The system will now send an e-mail to this person with an "Authorization Code" for them to enter into their *myNewJersey* Portal Account

			E OF NEW JERSEY ENT OF H	
About RTK	Add User			
Facilities All Facilities, My Employer Search Facilities	EIN	12345678 12345678003-RTK Test Facility #3 - Convention Center 12345678002-RTK TEST FACILITY #2	User Login Name Role	Facility Survey Coordinator 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION
Fact Sheets English Fact Sheets Spanish Fact Sheets	Cuser Facility	12345678000-RTK Test Facility	>>	12345678001-RTK Unit - Test Facility #1
User Management	First Name		Last Name	
User Search Add User	Title E-Mail		Status Comments	Active •
Logout Logout	Add			

To remove a person from being able to access a survey they were once assigned... Find the person by Clicking on List Users or User Search, Click on the person's name to open their "User Login Details" Click on Status Arrow and change from "Active" to "INACTIVE" Click on "Add"







Logout

Facilities	*	EIN	12345678	User Login Name	
All Facilities, My Employer			12343010	Role	Facility Survey Coordinator
Search Facilities			12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility		
Fact Sheets	*		12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1	>>	
English Fact Sheets			12345678002-RTK TEST FACILITY #2		
Spanish Fact Sheets				<<	
User Management	*				
List Users		First Name		Last Name	
User Search		Title		Status	Active -
Add User		E-Mail		Comments	Active InActive
Logout	Â	Add		1	

To log out of the system click on logout



STATE OF NEW JERSEY DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY About RTK Employer and Facilities: EIN: 12345678 Employer Name: Right to Know Test Employer Status: none Facilities \$ Facilities List - 6 Records Hazardous 2013 All Facilities, My Employer Facility EIN Facility ID Facility Name Chemicals Survey Surveys County Status Search Facilities Reported Status 12345678 12345678000 RTK Test Facility User Mercer Submitted Active Surveys Fact Sheets 12345678 12345678001 RTK Unit - Test Facility #1 Surveys Mercer none Ongoing Active 12345678 12345678002 RTK TEST FACILITY #2 Mercer User Submitted Active Surveys English Fact Sheets Spanish Fact Sheets 12345678 12345678003 RTK Test Facility #3 - Convention Center Atlantic Active Surveys none Ongoing 12345678 12345678004 RTK Test Facility # 4 - DPW GARAGE Burlington Ongoing Active Surveys none User Management 12345678 12345678005 RTK TEST FACILITY # 5 - RECREATION CENTER Camden Not Started Active Surveys none List Users User Search 1 🖲 🕲 Add User

Logout

\$

If you have questions or need help

- Please call us at (609) 984-2202
- Send us an e-mail at <u>rtksurvey@doh.state.nj.us</u>