

RTK Coordinator Instructions

- One 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 www.nj.gov 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 www.nj.gov 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. Follow your RTK Coordinator’s instructions.
- **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

The image is a screenshot of the NJ.gov website. At the top, the browser address bar shows 'https://nj.gov/'. Below the browser, the website header includes the NJ.gov logo and navigation links for 'Governor Phil Murphy' and 'Lt. Governor Sheila Oliver'. A main navigation bar contains various categories like 'About NJ', 'Business', 'Education', etc. The 'Login' and 'Register' links are circled in red. Below the navigation bar is a large banner image of a lake with trees in autumn and a monument in the background. The banner text reads 'Best Fall Getaways in New Jersey' with a 'LEARN MORE' button. At the bottom, there is a 'Spotlights' section with several small image thumbnails.

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”

The screenshot shows the official website for the State of New Jersey. The page features a navigation menu with links for 'myNJ Home', 'myNJ Business', and 'myNewJersey'. A red circle highlights the 'enter authorization code' link in the top navigation bar. Below the navigation, there are sections for 'DOH Applications', 'New Jersey Events', and 'New Jersey Lottery'. The footer contains contact information and a copyright notice for 2008.

The screenshot shows an email from 'rtksurvey' to 'vignia.brenton'. The subject is 'Authorization code for DOH RTK Survey'. The email body contains the following text:

Dear Ginnie,

Important DOH RTK Survey Registration Information

Your authorization code for the DOH RTK Survey role is below. This code is personalized for you and need only be used one time to provide access to your DOH RTK Survey information via the myNewJersey portal. After you enter it in step 8 below, you won't need to enter it again.

Your authorization code is: **268C2895ARCA**

Please follow these instructions carefully.

If you have already registered for the myNewJersey portal, go to <http://www.state.nj.us/> and follow the instructions starting at step 6.

1. Open an Internet browser, type <http://www.state.nj.us/> in the address box and press the Enter key.
2. You will see the New Jersey home page. You need to register here before you can access information that's personalized for you.
3. Click 'register' near the upper left part of the page.
4. On the 'Create Your myNewJersey Account' page, enter the requested information. Be sure to include a challenge question and valid email address in case you forget 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 verify that you know your ID and password.
6. Click 'login' near the upper left part of the page, and enter your ID and password on the 'Log On to myNewJersey' page.
7. Once you're logged in, click the 'enter authorization code' link to the right of the welcome message.
8. Copy this code 268C2895ARCA and paste it into the box labeled 'Enter your authorization code', and click the 'Finished' button.
9. The system will log you out.

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

The screenshot shows the myNewJersey portal interface. At the top, the browser address bar displays the URL <https://portal1.state.nj.us/http://portal20.state.nj.us:8080/pr>. The page header includes the text "THE OFFICIAL WEB SITE FOR THE STATE OF NEW JERSEY" and navigation links for "Services A to Z", "Departments/Agencies", and "FAQs". Below the header, there are tabs for "myNJ Home", "myNJ Business", and "myNewJersey". A user greeting "Welcome Ginnie Brenton" is displayed, along with links for "logout", "change profile", "enter authorization code", "choose start page", "content", "layout", and "help".

The main content area features several sections:

- DOH Applications:** A section with a sub-header "Select a link below to access the application:". The link "DOH Right To Know Survey" is circled in red.
- New Jersey Events:** A section with a sub-header "Travel Guide" and links for "Locate Events", "Travel & Tourism Home", and "Add an Event".
- Premier E-Business Services:** A section with the text "If you own a business or represent one in dealings with New Jersey state government, Sign up for Premier E-Business Services".
- myNJ.earthWatch:** A section with the text "View NWS weather for: 08625".

On the right side of the page, there is a "New Jersey Lottery" section with the tagline "Give Your Dreams A Chance". It lists several jackpots:

- The Powerball Jackpot for Saturday, 05/31/2014: **\$ 173 million**
- The Mega Millions Jackpot for Friday, 05/30/2014: **\$ 26 million**
- Pick 6 Lotto Jackpot for Thursday, 05/29/2014: **\$ 17.6 million**
- Jersey Cash 5 Jackpot for Thursday, 05/29/2014: **\$ 50,000**

At the bottom of the page, there is a footer with the "OPRA Open Public Records Act" logo, a "Contact Us" link, and a "Privacy Notice" link. The footer also includes the text "Statewide: NJHome | Services A to Z | Departments/Agencies | FAQs", "Copyright (c) State of New Jersey, 1996-2008", and "This site is maintained by the New Jersey Office of Information Technology". The system tray in the bottom right corner shows the time as 9:40 AM on 5/29/2014.

Click on “All Facilities, My Employer” to begin



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.

All Facilities, My Employer

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.
- Click 'Search Facilities' to obtain a Facility Search screen; your search will be limited to your Employer's Facilities.

View-Access Facilities

(If no Survey Facilities menu items are visible, click on the 'Survey Facilities' menu item to open the sub-menu.)

View-Access Reports

Survey User Reports

View-Access Facilities

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



About RTK

Employer and Facilities:

EIN: 12345678 Employer Name: Right to Know Test Employer Status: none

Facilities

Facilities List - 6 Records

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
12345678	12345678001	RTK Unit - Test Facility #1	Mercer	none	Ongoing	Active	Surveys
12345678	12345678002	RTK TEST FACILITY #2	Mercer	User	Submitted	Active	Surveys
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

List Users

User Search

Add User

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.



RIGHT TO KNOW SURVEY

About RTK

Facility Search

Facilities

Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout


EIN:*	<input type="text" value="12345678"/>	Facility Id:*	<input type="text"/>
Facility Name:	<input type="text"/>	Facility Address:	<input type="text"/>
Facility City:	<input type="text"/>	Facility Zip:	<input type="text"/>
County Code:	Select County ▾	SIC:	<input type="text"/> NAICS: <input type="text"/>
COMU Code:	Select Municipality ▾	Survey Year:	Year ▾
<input type="button" value="Search"/>			

Facilities List - 6 Records

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
12345678	12345678001	RTK Unit - Test Facility #1	Mercer	none	Ongoing	Active	Surveys
12345678	12345678002	RTK TEST FACILITY #2	Mercer	User	Submitted	Active	Surveys
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


Click on the  to open the survey and start to complete it.

File Edit View Favorites Tools Help



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH


RIGHT TO KNOW SURVEY



About RTK Facility and Surveys:

Facilities [Return to Facilities List](#) **Facility ID:** 12345678004 **Facility Name:** RTK Test Facility # 4 - DPW GARAGE **Status:** Active

Survey List

Survey Year	Status	Add	Edit	View	Hazardous Chemicals Reported	Created By	Date Created	Last Changed By	Date Last Changed
2013	Not Started								

Fact Sheets
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 OF NEW JERSEY
DEPARTMENT OF HEALTH

RIGHT TO KNOW SURVEY



About RTK ▾

Facilities ▴

All Facilities, My Employer
Search Facilities

Fact Sheets ▴

English Fact Sheets
Spanish Fact Sheets

User Management ▴

List Users
User Search
Add User

Logout ▴

Logout

Survey Year :
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *

Yes No

D. Indicate the nature of the operations conducted at this facility *

Other

Other Nature of Operations:

C. Number of Employees at this facility *
Number of employees exposed or potentially exposed to hazardous chemicals at this facility *

E. Are you reporting Products with Unknown Ingredients? *

Yes No
[Add/Edit Products with Unknown Ingredients](#)

F. Employer Email Address *

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 * Telephone Number * 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 * Telephone Number *

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

The screenshot shows the RTK Survey application interface. A red arrow on the left points to the browser address bar with the text "DO Not use". Another red arrow on the right points to the "Save" button with the text "Use". The interface includes a navigation menu on the left, a header with the State of New Jersey Department of Health logo, and a main form area with various input fields and buttons.

DO Not use

Use

State of New Jersey
DEPARTMENT OF HEALTH
RIGHT TO KNOW SURVEY

Survey Year :
(Meets requirements of the Workplace survey)

Please fill in fields as indicated

Save Save And Go To List Submit Save And Go To Inventory Printable Survey

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *
 Yes No

C. Number of Employees at this facility * 100
Number of employees exposed or potentially exposed to hazardous chemicals at this facility * 60

D. Indicate the nature of the operations conducted at this facility *
Other
Other Nature of Operations:
Test Facility

E. Are you reporting Products with Unknown Ingredients? *
 Yes No
[Add/Edit Products with Unknown Ingredients](#)

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: Telephone Number * 609-555-1212
FIRE DEPARTMENT: 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.

The screenshot shows the 'RIGHT TO KNOW SURVEY' form from the NJ Department of Health. The form is divided into several sections:

- Facility Information:** Includes fields for Facility ID, SIC/NAICS, Co./Mun, Due Date, and Facility Location. The location is 'RTK UNIT - TEST FACILITY #1, 135 BROAD STREET, TRENTON'.
- Police and Fire Departments:** Two columns of fields for 'POLICE DEPARTMENT' and 'FIRE DEPARTMENT', including Telephone Number, Department Name, Address, City, and State/Zip.
- Section I: UNION REPRESENTATIVE ***: Contains fields for 'Are employees at this facility represented by a union?', 'Union Rep. Name' (Robert Union), 'Union Name (Abbrev)' (CWA), 'Local Number' (36), 'Union Address' (1 Union Circle), 'City' (Any town), 'Telephone Number' (609-555-8787), and 'This Survey Has Reported' (1 Additional Union(s)). A red circle highlights the link 'Add/Edit Information for Additional Unions'.
- Section J: FACILITY EMERGENCY CONTACT**: Includes 'Contact Name' (Mary Emergency) and 'Telephone Number' (609-555-2323).
- Section K: PART OF FACILITY COVERED (Check box if applicable)**: Includes a checked box for 'This survey only covers part of the facility. The rest of the facility is occupied by (specify name of employer): NJ Department of Health'.

At the bottom of the form, there is a note: 'NOTE: You are required to send a copy of this survey to your County Lead Agency, local health department, local fire and police departments, and Local Emergency Planning Committee. You must keep a copy of the survey in your Right to Know Central File and make it available to your employees.' Below the note are buttons for 'Save', 'Save And Go To List', 'Submit', and 'Save And Go To Inventory'.

After you click on “Add/Edit 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.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

Survey Year

(To Be Completed Only When There is More Than One Union At A Facility)

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Union Information

[Add A Union](#)

[Save](#)

[Save and Return to Survey](#)

Representative Name *	Union Name (Abbrev)*	Local Number *	Address *	City *	ST *	Zip *	Telephone *	Ext	Delete Entry
-----------------------	----------------------	----------------	-----------	--------	------	-------	-------------	-----	--------------

* Denotes required information

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 departments, and Local Emergency Planning Committee.

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"

Survey Year
(To Be Completed Only When There is More Than One Union At A Facility)

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Union Information


Representative Name *	Union Name (Abbrev)*	Local Number *	Address *	City *	ST *	Zip *	Telephone *	Ext	Delete Entry
Karl Brother	IFPTE	195	100 Main Street	Anytown	NJ	08976	609-555-1234		<input type="button" value="X"/>

* Denotes required information


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 departments, and Local Emergency Planning Committee.

How Do I Add Products With Unknown Ingredients

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



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK ▾

Facilities ⤴

All Facilities, My Employer
Search Facilities

Fact Sheets ⤴

English Fact Sheets
Spanish Fact Sheets

User Management ⤴

List Users
User Search
Add User

Logout ⤴

Logout

Survey Year

(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *

Yes No

D. Indicate the nature of the operations conducted at this facility *

Other

Other Nature of Operations:

C. Number of Employees at this facility *

Number of employees exposed or potentially exposed to hazardous chemicals at this facility *

E. Are you reporting Products with Unknown Ingredients? *

Yes No

[Add/Edit Products with Unknown Ingredients](#)

F. Employer Email Address *

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 * Telephone Number * 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 * Telephone Number *

Click on “Add A Product”

Enter Product Name, Manufacturer’s name, Address, City, State, and zip into the boxes.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
RIGHT TO KNOW SURVEY



Survey Year						
(To Be Completed Only When You Are Unable to Identify Specific Chemical Components of a Trade Name Substance)						
FACILITY ID:	12345678001	SIC:	9131	NAICS:	111111	
FACILITY NAME:	RTK Unit - Test Facility #1	EMPLOYER NAME:	Right to Know Test Employer			
Products with Unknown Ingredients Information			<input type="button" value="Add A Product"/>	<input type="button" value="Save"/>	<input type="button" value="Save and Return to Survey"/>	
Product Trade Name	Manufacturer or Supplier Name	Address	City	ST *	Zip *	Delete Entry
<input type="text"/>						<input type="button" value="-"/>

* Denotes required information

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 departments, and Local Emergency Planning Committee.

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”



STATE OF NEW JERSEY
 DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

Survey Year

(To Be Completed Only When You Are Unable to Identify Specific Chemical Components of a Trade Name Substance)

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
 FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Products with Unknown Ingredients Information Add A Product **Save** **Save and Return to Survey**



Product Trade Name	Manufacturer or Supplier Name	Address	City	ST *	Zip *	Delete Entry
ABC Floor Scrubber	Any Company	1 Elm Street	Trenton	NJ	08638	[-]

* Denotes required information

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**

RIGHT TO KNOW SURVEY

About RTK

Facilities

- All Facilities, My Employer
- Search Facilities

Fact Sheets

- English Fact Sheets
- Spanish Fact Sheets

User Management

- List Users
- User Search
- Add User

Logout

- Logout

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *
 Yes No

C. Number of Employees at this facility *
Number of employees exposed or potentially exposed to hazardous chemicals at this facility *

D. Indicate the nature of the operations conducted at this facility *
Other
Other Nature of Operations:

E. Are you reporting Products with Unknown Ingredients? *
 Yes No
[Add/Edit Products with Unknown Ingredients](#)


F. Employer Email Address *

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 * Telephone Number * 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 * Telephone Number *

Click on "Add Product" to begin.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK ⌵

Facilities ⌵

All Facilities, My Employer
Search Facilities

Products ⌵

Show All Products

Fact Sheets ⌵

English Fact Sheets
Spanish Fact Sheets

User Management ⌵

List Users
User Search
Add User

Logout ⌵

Logout

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

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 open that product record for editing. If no products are listed, click the 'Add Product' button to create a product record.

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
--------------	--------------	---------	----------	-----------	-----------	------	-------------------

Complete ALL Product Information Then Click on SAVE

THE STATE OF NEW JERSEY DEPARTMENT OF HEALTH

STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

RIGHT TO KNOW SURVEY

NJHealth
New Jersey Department of Health

About RTK

Facilities
All Facilities, My Employer
Search Facilities

Products
Show All Products

Fact Sheets
English Fact Sheets
Spanish Fact Sheets

User Management
List Users
User Search
Add User

Logout
Logout

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

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 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	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	Closet	Can	10 to 99	Pounds - solids	12

Enter product information into each column above then click 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.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK ▾

Facilities ⤴

All Facilities, My Employer
Search Facilities

Products ⤴

AAA Cleaner
Show All Products

Fact Sheets ⤴

English Fact Sheets
Spanish Fact Sheets

User Management ⤴

List Users
User Search
Add User

Logout ⤴

Logout

Survey Year

(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID:	12345678001	SIC:	9131	NAICS:	111111
FACILITY NAME:	RTK Unit - Test Facility #1			EMPLOYER NAME:	Right to Know Test Employer


Instructions: **Editing Product Information:** Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Add Product**Add Substance**Go To Survey CoverGo To Survey ListShow All ProductsSaveDelete ProductValidate All


Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12

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.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK

Facilities

All Facilities, My Employer
Search Facilities

Products

AAA Cleaner
Show All Products

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12

Substance #	Hazardous Chemical Name	CAS Number	DOT Number	Mixture	Special HH Code	Delete
				--Select--		<input type="checkbox"/>

Enter information into any one of these 3 boxes then hit enter. The remaining info should auto fill.

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.



About RTK

Facilities

All Facilities, My Employer
Search Facilities

Products

AAA Cleaner
Show All Products

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
 FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12

Substance #	Hazardous Chemical Name	CAS Number	DOT Number	Mixture	Special HH Code	Delete
0006	ACETONE	67-64-1	1090	--Select--	F3,F4	<input type="checkbox"/>

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

Facilities

All Facilities, My Employer
Search Facilities

Products

AAA Cleaner
Show All Products

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

Survey Year

(Meets requirements of the Workplace Survey)


Please fill in fields as indicated

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Add Product **Add Substance** Go To Survey Cover Go To Survey List Show All Products Save Delete Product Validate All

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12
Substance #	Hazardous Chemical Name		CAS Number	DOT Number	Mixture	Special HH Code	Delete
0006	ACETONE		67-64-1	1090	10 to 24% (53)	F3,F4	<input type="checkbox"/>

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.

**STATE OF NEW JERSEY**
DEPARTMENT OF HEALTH
New Jersey Department of Health

RIGHT TO KNOW SURVEY

About RTK

About RTK

Facilities

All Facilities, My Employer
Search Facilities

Products

Paint
AAA Cleaner
xtreme
Carbon Black
abc
Oxygen
Show All Products

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

Survey Year

(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID:	12345678001	SIC:	9131	NAICS:	111111
FACILITY NAME:	RTK Unit - Test Facility #1	EMPLOYER NAME:	Right to Know Test Employer		

Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Add Product**Add Substance**Go To Survey CoverGo To Survey ListShow All ProductsSave**Delete Product**Validate All

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
Paint	Sherwin Williams, MAB, Dupont	Deodorizer	A hall	Can	100 to 499	Gallons - liquids	23

Substance #	Hazardous Chemical Name	CAS Number	DOT Number	Mixture	Special HH Code	Delete
0006	ACETONE	67-64-1	1090	100%	F3,F4	
1916	3-TRIFLUOROMETHYL ANILINE	98-16-8	2948	90 to 99%		

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

Survey Facilities

All Facilities, My Employer
Search Facilities

View-Access Facilities

Reports for This Survey

View-Access Reports

Survey User Reports

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

Products

WINDEX
SPRAY BUFF
XYZ
SUPER GLUE
FORTIFICATION SEAL
CLOROX
ALL-PURPOSE CLEANER
Show All Products

Inspections

Survey Facilities
View-Access Facilities

Survey Year
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID:	12345678006	SIC:	8211	NAICS:	611110
FACILITY NAME:	RTK TEST FACILITY #6 - HIGH SCHOOL	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 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
Multi-Delete

	Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
Edit	WINDEX	SC JOHNSONS	Cleaning Products-General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
Edit	SPRAY BUFF	INCREDIBLE	Cleaning Products-General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
Edit	XYZ	123	Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
Edit	SUPER GLUE	ELMER'S	Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
Edit	FORTIFICATION SEAL	JOHN A. EARL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
Edit	CLOROX	CLOROX COMPANY	Cleaning Products-General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4
Edit	ALL-PURPOSE CLEANER	ALL-PURPOSE	Cleaning Products-General	JANITOR'S CLOSET	Bottles or jugs (glass)	1 to 9	Gallons - liquids	2

Multi-Delete Option

Browser: https://orion02.oit.state.nj.us/DOH_RTK/SurveyProduct.do?parameter=showMultiDe | Department of Health - Enviro... | myNewJersey | Survey Product List

File Edit View Favorites Tools Help

**STATE OF NEW JERSEY
DEPARTMENT OF HEALTH**
RIGHT TO KNOW SURVEY

Survey Year: _____
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678006** SIC: **8211** NAICS: **611110**
FACILITY NAME: **RTK TEST FACILITY #6 - HIGH SCHOOL** EMPLOYER NAME: **Right to Know Test Employer**

Instructions for Delete: Select the Products to be deleted by checking the checkbox next to each. (Click the checkbox in the header to Select all Products.) Then click the 'Delete Selected' button. Note: The list can be sorted by any column by clicking in the column's header.

Delete Selected **Cancel**

<input type="checkbox"/>	Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
<input checked="" type="checkbox"/>	WINDEX	SC JOHNSONS	Cleaning Products-General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
<input checked="" type="checkbox"/>	SPRAY BUFF	INCREDIBLE	Cleaning Products-General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
<input checked="" type="checkbox"/>	XYZ	123	Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
<input type="checkbox"/>	SUPER GLUE	ELMER'S	Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
<input type="checkbox"/>	FORTIFICATION SEAL	JOHN A. EARL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
<input type="checkbox"/>	CLOROX	CLOROX COMPANY	Cleaning Products-General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4
<input type="checkbox"/>	ALL-PURPOSE CLEANER	ALL-PURPOSE	Cleaning Products-General	JANITOR'S CLOSET	Bottles or jugs (glass)	1 to 9	Gallons - liquids	2

Navigation menu (left):
About RTK
Survey Facilities (All Facilities, My Employer, Search Facilities)
View-Access Facilities
Reports for This Survey
View-Access Reports
Survey User Reports
Fact Sheets (English, Spanish)
Products
Inspections (Survey Facilities, View-Access Facilities)
User Management (List, Search, Add Survey User)
Logout

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



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
RIGHT TO KNOW SURVEY



- About RTK
- Facilities
 - All Facilities, My Employer
 - Search Facilities
- Products
 - AAA Cleaner
 - Show All Products
- Fact Sheets
 - English Fact Sheets
 - Spanish Fact Sheets
- User Management
 - List Users
 - User Search
 - Add User
- Logout
 - Logout

Survey Year :
 (Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
 FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**

Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12

Substance #	Hazardous Chemical Name	CAS Number	DOT Number	Mixture	Special HH Code	Delete
0006	ACETONE	67-64-1	1090	10 to 24% (53)	F3,F4	<input type="checkbox"/>

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

Facilities

All Facilities, My Employer
 Search Facilities

Products

AAA Cleaner
 Show All Products

Fact Sheets

English Fact Sheets
 Spanish Fact Sheets

User Management

List Users
 User Search
 Add User

Logout

Logout

Survey Year
 (Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678001** SIC: **9131** NAICS: **111111**
 FACILITY NAME: **RTK Unit - Test Facility #1** EMPLOYER NAME: **Right to Know Test Employer**



Instructions: Editing Product Information: Click on the field you want to edit and make changes. Save when complete. **Adding a Substance:** Click on the 'Add Substance' button. To look up a substance begin typing in the Substance #, Hazardous Chemical Name, or CAS Number fields. Select then hit enter. (Note: The 'DOT Number' and 'Special HH Code' fields for substances are not updateable.)

Product Name	Manufacturer	Purpose	Location	Container	Inventory	Unit	Employees Exposed
AAA Cleaner	ABC Company	Cleaning Products-General	closet	Can	10 to 99	Pounds - solids	12

Substance #	Hazardous Chemical Name	CAS Number	DOT Number	Mixture	Special HH Code	Delete
1809	1,1,2,2-TETRACHLOROETHANE	79-34-5	1702	10 to 24% (53)		<input type="button" value="X"/>
1043	ISOBUTYL ALCOHOL	78-83-1	1212	60 to 69%	F3	<input type="button" value="X"/>
1091	KEROSENE	8008-20-6	1223	80 to 89%	F2	<input type="button" value="X"/>
0006	ACETONE	67-64-1	1090	10 to 24%	F4,F3	<input type="button" value="X"/>

Ready To Submit Your Survey??

Click on "Submit"

**STATE OF NEW JERSEY
DEPARTMENT OF HEALTH**

RIGHT TO KNOW SURVEY

Survey Year :
(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

SaveSave And Go To ListSubmitSave And Go To InventoryPrintable Survey

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *

Yes No

D. Indicate the nature of the operations conducted at this facility *

Other

Other Nature of Operations:

C. Number of Employees at this facility *
Number of employees exposed or potentially exposed to hazardous chemicals at this facility *

E. Are you reporting Products with Unknown Ingredients? *

Yes No
[Add/Edit Products with Unknown Ingredients](#)

F. Employer Email Address *

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 * Telephone Number * 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:
Telephone Number *

FIRE DEPARTMENT:
Telephone Number *


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 often and whenever you leave your computer idle for more than a few minutes.



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK

Facilities
All Facilities, My Employer
Search Facilities

Fact Sheets
English Fact Sheets
Spanish Fact Sheets

User Management
List Users
User Search
Add User

Logout
Logout

Survey Year
(Meets requirem)

Please fill in fields as indicated

Facility ID	SIC / NAICS	Co / Mun	Due Date	(A) Facility Location
12345678001	9131 / 111111	1111	7/15/2014	RTK UNIT - TEST FACILITY #1 135 BROAD STREET TRENTON

Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *
 Yes No

C. Number of Employees at this facility *
Number of employees exposed or potentially exposed to hazardous chemicals at this facility *

D. Indicate the nature of the operations conducted at this facility *
Other
Other Nature of Operations:

E. Are you reporting Products with Unknown Ingredients? *
 Yes No
[Add/Edit Products with Unknown Ingredients](#)

F. Employer Email Address *

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 * Telephone Number * 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 * Telephone Number *

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

You will be able to view and print your survey



RIGHT TO KNOW SURVEY

About RTK

Facility and Surveys:

Facility ID: 12345678000

Facility Name: RTK Test Facility

Status: Active

Facilities

[Return to Facilities List](#)

Survey List

Survey Year	Status	Add	Edit	View	Hazardous Chemicals Reported	Created By	Date Created	Last Changed By	Date Last Changed
2013	Submitted				Yes	Monica Day	05/14/2014	rtk Administrator	05/20/2014

Fact Sheets

[English Fact Sheets](#)
[Spanish Fact Sheets](#)

User Management

[List Users](#)
[User Search](#)
[Add User](#)

Logout

[Logout](#)

To View Submitted Survey ... Click Here

Reports for this survey

(Note: have the survey open)



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK

Survey Facilities

All Facilities, My Employer
Search Facilities

View-Access Facilities

All Assigned Municipalities
All Assigned Facilities
Search Facilities

Reports for This Survey

Inventory by Product
Inventory by Chemical

View-Access Reports

Chemicals Present By Locality

Survey User Reports

Chemicals Present By EIN

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

Products

Survey Year

(Meets requirements of the Workplace Survey)

Please fill in fields as indicated

FACILITY ID: **12345678006** SIC: **8211** NAICS: **611110**
FACILITY NAME: **RTK TEST FACILITY #6 - HIGH SCHOOL** 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 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 Exposed
Edit	WINDEX	SC JOHNSONS	Cleaning Products-General	STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	10
Edit	SPRAY BUFF	INCREDIBLE	Cleaning Products-General	2ND FLOR SLOP SINK	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	50
Edit	XYZ	123	Other	STOREROOM	Battery	1 to 9	Pounds - solids	25
Edit	SUPER GLUE	ELMER'S	Adhesives	ART ROOM	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	30
Edit	FORTIFICATION SEAL	JOHN A. EARL	Boiler Treatment	BASEMENT STORAGE	Bottles or jugs (plastic)	10 to 99	Gallons - liquids	5
Edit	CLOROX	CLOROX COMPANY	Cleaning Products-General	JANITOR'S CLOSET	Bottles or jugs (plastic)	1 to 9	Gallons - liquids	4

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.



Survey Inventory By Product Category Report

[Return To Survey](#)

Facility ID: 12345678006

Facility Name: RTK TEST FACILITY #6 - HIGH SCHOOL

Survey Year: 2018

Setup Screen

To Generate This Report for Specific Product Categories, Select Them Using the Selection Fields Below.
To Generate This Report for All Inventory, Leave All Selection Fields Unselected.

Products Reported in this Survey

Manufacturers Reported in this Survey

Purposes Reported in this Survey

Product Locations Reported in this Survey

Container Types Reported in this Survey

Inventory Ranges Reported in this Survey

Units of Measure Reported in this Survey

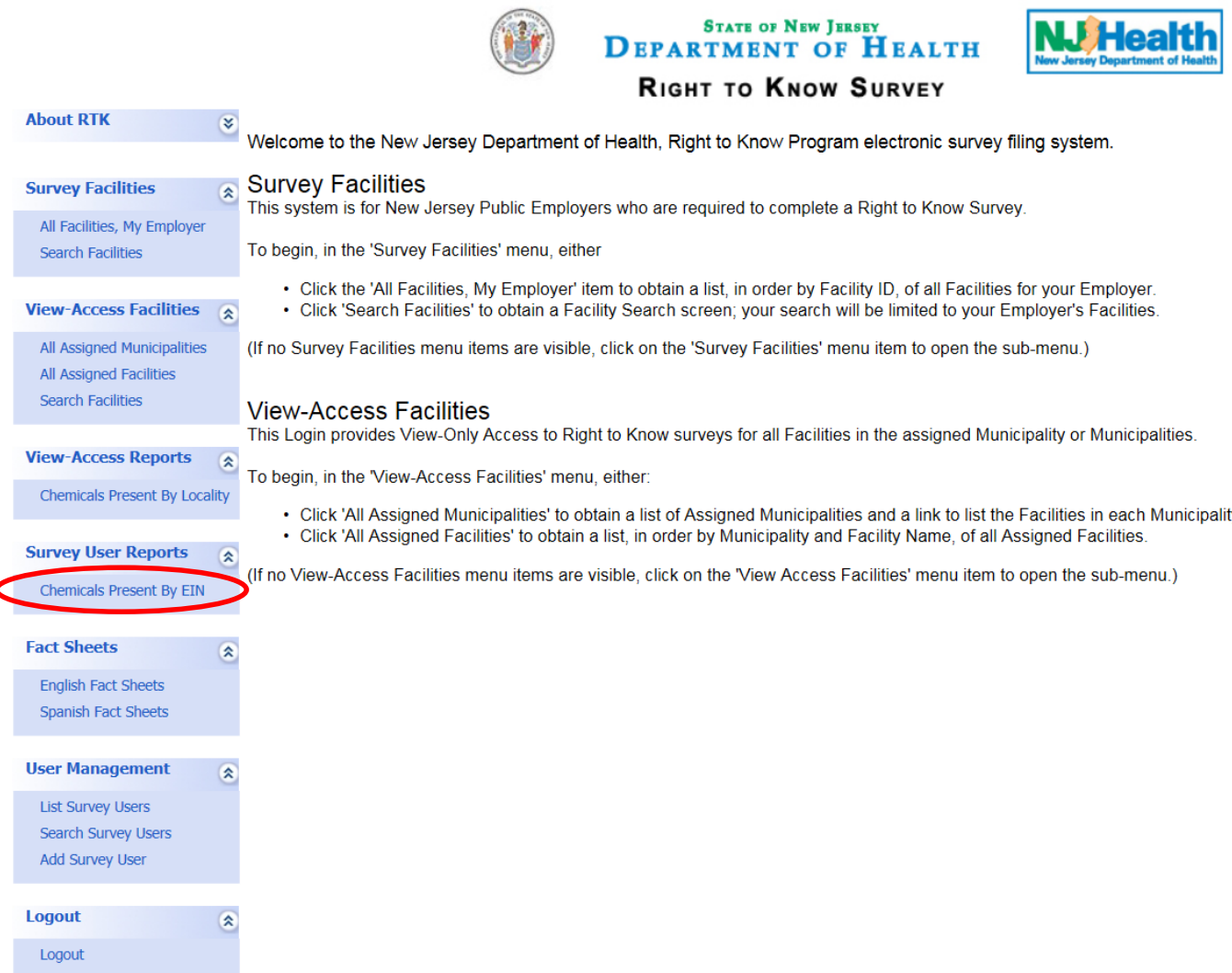
Sort This Report By:

Sort Direction:

[Generate Products Report](#)

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



The screenshot shows the website interface for the New Jersey Department of Health's Right to Know Survey. At the top, there are logos for the State of New Jersey Department of Health and NJHealth. The main heading is "RIGHT TO KNOW SURVEY". The left sidebar contains several menu items: "About RTK", "Survey Facilities", "View-Access Facilities", "View-Access Reports", "Survey User Reports", "Fact Sheets", "User Management", and "Logout". The "Survey User Reports" menu item is circled in red, and its sub-menu item "Chemicals Present By EIN" is also circled in red. The main content area provides instructions for using the system, including sections for "Survey Facilities" and "View-Access Facilities".

About RTK

Welcome to the New Jersey Department of Health, Right to Know Program electronic survey filing system.

Survey Facilities

This system is for New Jersey Public Employers who are required to complete a Right to Know Survey.

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.
- Click 'Search Facilities' to obtain a Facility Search screen; your search will be limited to your Employer's Facilities.

(If no Survey Facilities menu items are visible, click on the 'Survey Facilities' menu item to open the sub-menu.)

View-Access Facilities

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:

- 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.

(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

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Survey Users
Search Survey Users
Add Survey User

Logout

Logout

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

Close

Setup Screen

The EIN or a Facility, and a Chemical and/or One or More Chemical Attributes Must Be Selected.

EIN	<input type="text" value="12345678 Right to Know Test Employer"/>	
Facility	<input type="text" value="-- Select --"/>	
Survey Year	<input type="text" value="Latest Submitted"/>	
Chemical	<input type="text" value="GASOLINE"/>	
	<small>Hint: Start typing the Chemical Name to reach it on the list</small>	
Health Hazard Category	<input type="text" value="-- Select --"/>	
Chemical Percent in Mixture	<input type="text" value="-- Select --"/>	
Product Container Type	<input type="text" value="Can"/>	
Product Quantity (Range)	<input type="text" value="-- Select --"/>	Unit of Measure <input type="text" value="-- Select --"/>

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

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 in each Municipality.
- Click 'All Assigned Facilities' to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities.

(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.

 **STATE OF NEW JERSEY
DEPARTMENT OF HEALTH** 
RIGHT TO KNOW SURVEY

Inspection Search

EIN: Facility ID:


Facility Name: County:

Facility City: Municipality:

Inspection Number: Inspection Dates: From Through

Inspection Type: Inspection Status: Inspector:

Inspections List - 1 Records

Facility ID	Facility Name	Inspect #	Type	Insp Date	Insptr	Viols	View Report
12345678005	RTK TEST FACILITY # 5 - RECREATION CENTER	00133	INIT	04/05/2018	CS	N	

Click the green folder icon to open inspection report

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

Do you want to open or save **Inspection_Report.pdf** (10.7 KB) from **orion02.oit.state.nj.us?**

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

New Jersey Department of Health Right to Know PO Box 368 Trenton, NJ 08625-0368				
RIGHT TO KNOW COMPLIANCE INSPECTION / REINSPECTION REPORT				
NJEN Number 12345678005	SIC / NAICS 9131 / 611110	Inspection Type Initial	Inspection Date 04/05/2018	Inspection Number 00133
Name of Employer RTK TEST FACILITY # 5 - RECREATION CENTER				
Responsible Official (Name and Title) RTK TESTER Consultant			Employer Telephone Number (609) 888-7676	
Street Address 10 BALTIC DRIVE			County Camden	
City, State, Zip Code CAMDEN NJ 08765			County/Municipal Code 0408	
<p>A Right to Know compliance inspection/reinspection was conducted by the New Jersey Department of Health (DOH) at your facility on the above date. Any violations of the Worker and Community Right to Know Act observed during the inspection/reinspection are noted below and were explained to you or your representative. These violations must be corrected by the following deadline: _____</p> <p>Failure to comply with this directive may result in civil administrative penalties of up to \$2,500.00 for each violation.</p>				
<p><input checked="" type="checkbox"/> No violations of the Worker and Community Right to Know Act were noted.</p> <p>The following violations were noted during the inspection/reinspection:</p> <p><input type="checkbox"/> Failure to comply with the requirements to submit a Right to Know Survey (N.J.A.C. 8:59-2).</p> <p><input type="checkbox"/> Failure to comply with the requirements to label containers (N.J.A.C. 8:50-5).</p> <p><input type="checkbox"/> Failure to post the Right to Know poster (N.J.A.C. 8:59-6.3(d)).</p> <p><input type="checkbox"/> Failure to comply with the requirements to provide employee access to information (N.J.A.C. 8:59-7)</p>				
Employer Representative (Name and Title) Cherrelle Shelton Research Scientist		Telephone Number (609) 292-7216	DOH Inspector Name and Telephone Number CHERRELLE SHELTON (609) 802-8150	
Employer Representative Signature Signature Is On File				

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"



About RTK

Employer and Facilities:

EIN: 12345678

Employer Name: Right to Know Test Employer

Status: none

Facilities

Facilities List - 6 Records

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
12345678	12345678001	RTK Unit - Test Facility #1	Mercer	none	Ongoing	Active	Surveys
12345678	12345678002	RTK TEST FACILITY #2	Mercer	User	Submitted	Active	Surveys
12345678	12345678003	RTK Test Facility #3 - Convention Center	Atlantic	none	Ongoing	Active	Surveys
12345678	12345678004	RTK Test Facility # 4 - DPW GARAGE	Burlington	none	Ongoing	Active	Surveys
12345678	12345678005	RTK TEST FACILITY # 5 - RECREATION CENTER	Camden	none	Not Started	Active	Surveys

User Management

List Users

User Search

Add User

1

Logout

Logout

Under “Role” click on “Facility Survey Coordinator” or “Employer Consultant”



RIGHT TO KNOW SURVEY

About RTK

Add User

Facilities

All Facilities, My Employer
Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

EIN	12345678	User Login Name	<input type="text"/>
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1 12345678002-RTK TEST FACILITY #2	Role	<div style="border: 2px solid red; border-radius: 50%; padding: 5px;"><input type="text" value="Facility Survey Coordinator"/> Facility Survey Coordinator Employer Consultant</div>
First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>	Status	Active <input type="text"/>
E-Mail	<input type="text"/>	Comments	<input type="text"/>

Add

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



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
RIGHT TO KNOW SURVEY



About RTK

Add User

Facilities

- All Facilities, My Employer
- Search Facilities

Fact Sheets

- English Fact Sheets
- Spanish Fact Sheets

User Management

- List Users
- User Search
- Add User

Logout

Logout

EIN	12345678	User Login Name	
		Role	Facility Survey Coordinator
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1 12345678002-RTK TEST FACILITY #2	>> <<	
First Name		Last Name	
Title		Status	Active
E-Mail		Comments	

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



RIGHT TO KNOW SURVEY

About RTK

Add User

Facilities

All Facilities, My Employer
Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

EIN	12345678	User Login Name	<input type="text"/>
		Role	Facility Survey Coordinator <input type="text"/>
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1 12345678002-RTK TEST FACILITY #2	<input style="border: 2px solid red;" type="button" value=" >> "/> <input style="border: 1px solid gray;" type="button" value=" << "/>	
First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>	Status	Active <input type="text"/>
E-Mail	<input type="text"/>	Comments	<input type="text"/>

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



About RTK



Add User

Facilities



All Facilities, My Employer
Search Facilities

Fact Sheets



English Fact Sheets
Spanish Fact Sheets

User Management



List Users
User Search
Add User

Logout



Logout

EIN	12345678	User Login Name	<input type="text"/>
		Role	Facility Survey Coordinator <input type="text"/>
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678002-RTK TEST FACILITY #2 12345678000-RTK Test Facility	<input type="button" value=">>"/> <input type="button" value="<<"/>	12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1
First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>	Status	Active <input type="text"/>
E-Mail	<input type="text"/>	Comments	<input type="text"/>

Highlighted Facilities should have moved to the right hand side under "Facility Coordinator"

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



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH



RIGHT TO KNOW SURVEY

About RTK

Add User

Facilities

All Facilities, My Employer
Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

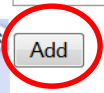
User Management

List Users
User Search
Add User

Logout

Logout

EIN	12345678	User Login Name	<input type="text"/>
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678002-RTK TEST FACILITY #2 12345678000-RTK Test Facility	Role	Facility Survey Coordinator <input type="text"/>
			12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1
First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>	Status	Active <input type="text"/>
E-Mail	<input type="text"/>	Comments	<input type="text"/>



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"



STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
RIGHT TO KNOW SURVEY



About RTK

Add User

Facilities

All Facilities, My Employer
Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

EIN	12345678	User Login Name	<input type="text"/>
		Role	Facility Survey Coordinator
User Facility	12345678003-RTK Test Facility #3 - Convention Center 12345678000-RTK Test Facility 12345678004-RTK Test Facility # 4 - DPW GARAGE 12345678005-RTK TEST FACILITY # 5 - RECREATION 12345678001-RTK Unit - Test Facility #1 12345678002-RTK TEST FACILITY #2	>> <<	
First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>	Status	Active
E-Mail	<input type="text"/>	Comments	InActive

Add

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

All Facilities, My Employer
Search Facilities

Fact Sheets

English Fact Sheets
Spanish Fact Sheets

User Management

List Users
User Search
Add User

Logout

Logout

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
12345678	12345678001	RTK Unit - Test Facility #1	Mercer	none	Ongoing	Active	Surveys
12345678	12345678002	RTK TEST FACILITY #2	Mercer	User	Submitted	Active	Surveys
12345678	12345678003	RTK Test Facility #3 - Convention Center	Atlantic	none	Ongoing	Active	Surveys
12345678	12345678004	RTK Test Facility # 4 - DPW GARAGE	Burlington	none	Ongoing	Active	Surveys
12345678	12345678005	RTK TEST FACILITY # 5 - RECREATION CENTER	Camden	none	Not Started	Active	Surveys

1

If you have questions or need help

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