



ANNUAL REPORT ON SCHEDULE 1 CHEMICALS – PAST ACTIVITIES AT THE FACILITY DURING THE PREVIOUS YEAR (FORM S1-1)

Part A : Details of the facility (Note 1)

1. Facility name : CDE CHEMICAL LTD.	3. Permit number : P00099
2. Name of the owner, company or enterprise operating the above facility : CDE CHEMICAL LTD. (Please mark 'X' in one of the following and provide details): <input type="checkbox"/> HKID no. <input type="checkbox"/> Passport no. <input checked="" type="checkbox"/> BR no.: 00800888-000 <input type="checkbox"/> other relevant registration no. (please specify) :	4. Year of past activities reported in this form (i.e. the "reporting year", must be a calendar year) : 2004
	5. Facility address : 10/F, FORTRESS TOWER, 250 KING'S ROAD, NORTH POINT, HONG KONG. Tel no: 2000 0000 Fax no: 2111 1111

Part B : Details of each Schedule 1 chemical produced, stored, consumed by and/or transferred from the facility (Please use a new Form S1-1 for each chemical)

1. IUPAC chemical name (Note 3) : RICIN	3. Structural formula :
2. CAS registry no.(Note 4) : 9009-86-3	
4. Production (Note 5) of the chemical in the reporting year : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (please mark 'X') If yes, please indicate the quantity produced : 500 grams Purpose(s) of production (please mark 'X' if applicable) : <input checked="" type="checkbox"/> Research <input checked="" type="checkbox"/> Medical <input type="checkbox"/> Pharmaceutical <input type="checkbox"/> Protective <input type="checkbox"/> Waste disposal <input type="checkbox"/> Production for other Schedule 1 chemicals <input type="checkbox"/> Others (please specify) :	7. Maximum quantity of the chemical stored at any time during the reporting year : 600 grams Quantity of the above chemical stored at the end of the reporting year : 100 grams
	8. Purpose(s) of storage (please mark 'X' if applicable) : <input checked="" type="checkbox"/> Research <input type="checkbox"/> Medical <input type="checkbox"/> Pharmaceutical <input type="checkbox"/> Protective <input type="checkbox"/> Waste disposal <input type="checkbox"/> Production for other Schedule 1 chemicals <input type="checkbox"/> Others (please specify) :
5. Precursor chemicals listed in Schedules 1, 2 and 3 to the Chemical Weapons Convention used in producing the above Schedule 1 chemical : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (please mark 'X') If yes, please indicate – Precursor IUPAC chemical name : THIONYL DICHLORIDE CAS registry no. : 7719-09-7 Quantity used (in grams) : 10	9. Transfer to/from (Note 5) other facilities located in either Hong Kong or Mainland China during the reporting year : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (please mark 'X') If yes, please indicate the quantity below and submit Form S1-2 for details of the transfer : (a) Transferred from : 30 grams (b) Transferred to : 150 grams
6. Consumption (Note 5) of the chemical in the reporting year : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (please mark 'X') If yes, please indicate the quantity consumed : 80 grams Purpose(s) of consumption (please mark 'X' if applicable) : <input checked="" type="checkbox"/> Research <input type="checkbox"/> Medical <input type="checkbox"/> Pharmaceutical <input type="checkbox"/> Protective <input type="checkbox"/> Waste disposal <input type="checkbox"/> Production for other Schedule 1 chemicals <input type="checkbox"/> Others (please specify) :	10. Import from/export to (Note 5) other State Parties (except Mainland China) of the Chemical Weapons Convention (Note 15) during the reporting year : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (please mark 'X') If yes, please indicate the quantity below and submit Form S1-2 for details of the import/export: (a) Imported : 0 grams (b) Exported : 300 grams

11. Change at the facility or its relevant part(s) during the reporting year compared to previously submitted technical description of the facility (i.e. Form S1) :
 Yes No (please mark 'X') If yes, please submit Form S1 to provide updated information.

Part C : Supporting documents (Guideline 8 and 10)

Please mark 'X' if the following forms are submitted with this report and provide the total number of pages submitted:

<input checked="" type="checkbox"/>	Form S1-1 (including this page)	:	3	pages
<input checked="" type="checkbox"/>	Form S1-2 (for Part B.9 and B.10)	:	1	pages
<input type="checkbox"/>	Form S1 (for Part B.11)	:		pages

Part D : Undertaking by the permit holder

I, the undersigned, hereby declare to the best of my knowledge and belief, that all information provided in this form and in any additional pages attached to this form is true and correct. I also declare that, in submitting this form, I fully understand that Trade and Industry Department reserves at all times the right to release the above information and any information relates to this report, including particulars of the undersigned, to third parties for purposes stated in Section 28(2) of the Chemical Weapons (Convention) Ordinance (Cap. 578).

Name of the permit holder of the facility : **CHEUNG DAI DAI**

Signature of the permit holder and company chop : **CHEUNG DAI DAI**

Date : **10 JANUARY 2005**

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For and on behalf of  
CDE Chemical Ltd.

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For official use only

Date of receipt :

Remarks :