OMB Approved No. 2900-0075
Respondent Burden: 15 minutes

Department of Veterans Affairs

STATEMENT IN SUPPORT OF CLAIM

PRIVACY ACT INFORMATION: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA Programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine maximum benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to obtain evidence in support of your claim for benefits (38 U.S.C. 501(a) and (b)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN *(Type or print)*	SOCIAL SECURITY NO.	VA FILE NO. C/CSS -

The following statement is made in connection with a claim for benefits in the case of the above-named veteran:

Tinnitus - DC 6260, second.

I CERTIFY THAT the statements on this form are true and correct to the best of my knowledge and belief.

SIGNATURE	DATE SIGNED	
ADDRESS	TELEPHONE NUMBERS *(Include Area Code)*	
	DAYTIME	EVENING

PENALTY: The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false.

The following statement is made in connection with a claim for benefits in the case of the above-named veteran:

EVIDENCED BY:

JUN, 1988: -EXPSOURE to CHEMICAL PLANT EXPLOSION and the TOXIC CHEMICAL POLYSTYRENE:
-Veteran at RTC, Great Lakes, May 4, 1988 to July 4, 1988.
-Vet is Company Yeoman (mail delivery man) in Boot Camp.
-While delivering mail while running across the base; I was almost knocked off my feet by the Traco Inc. Chemical Plant explosion adjacent to the base.
-I completed the mail delivery, and returned to my Barracks.
-Round trip delivery took approximately twenty (20) additional minutes and I was breathing heavily from running before, during, and after the explosion.
-Upon return, I notified my Company Commanders: AE2 Sullivan, BM1 Van-Cleave, and the other CCs present; STS1 Rayburn.
-They phoned the Quarter Deck, and the Base Commander ordered everyone inside, and no one was to go outside for 24 hours.

INVENTORY OF EVIDENCE (chronologically):

-1988; ENLISTMENT EXAM.....CLEAN & NORMAL.
-1988; DIVER MEDICAL EXAM.....FIT FOR DIVER DUTY.
-1988; FOUR NEWS ARTICLE(S).....June, 1988 TOXIC CHEMICAL PLANT EXPLOSION.
-1988-94 DUTY ASSIGNMENTS.....USS KIRK; USS CONQUEST; & USS FLETHCER.
-1989 AVIATION FIRE FIGHTING.....TRAINING RECORD FOR AVIATION NOISE EXPOSURE.
-1988-94; SERVICE MEDICAL RECORDS.....HX, TX, DX, IN VA'S POSSESION.
-1994; SEPARATION EXAM.....REFLECTS SIGNIFICANT THRESHOLD SHIFT IN HEARING.
-1995; C&P EXAM & RATING DECISION.....CHRONIC DX; S/C Chronic Rhinitis w/ Bronchitis.
-1997; EVAL & MGMT REPORT.....S/C + DX FOR CHRONIC SINUSITIS.
-1998-10 V.A. TREATMENT RECORDS.....REVIEW FOR CHRONICITY of TX.
-2010; DR. KUHL EMAIL OF APPT.....DR. KUHL "YOU RECEIVED CHEMICAL BURN TO AIRWAYS".
-2011; OTOLARYNGOLOGIST/ENT.....MEDICAL & NEXUS OPINION RE: CHEMICAL EXPLOSION.
-2011; NEUROLOGIST NOTE.....OSA DX & NEXUS OPINION.
-2013; TRAVIS AFB HOSPTIAL STAY.....DX EUSTACHIAN TUBE DYSFUNTION.
-2013; DR. SOSTARCIH COMMENT/AUDIO.....HEARING LOSS; HEARING AIDS ISSUED; DR. STATEMENT " CERTAINLY BASED ON COMPARISON OF ENLISTMENT AND SEPARATION EXAMS HE INCURRED A SIGNIFICANT THRES-HOLD SHIFT IN EACH EAR.
-2013; AUDIOLOSIT EMAIL EXCHANGE.....AUDIOLOIST DX TINNITIS.
-2013; DR. WHITE COMMENT AT APPT....."LOOKING AT THE AUDIO GRAM IT LOOKS LIKE YOU HAD AN INJURY TO YOUR HEARING".
-2014; CONGRESS RESEARCH FOR VA.....PUBLIC LAW COMMISSIONING NIHL RESEARCH BY CONGRESS, REFLECTING: AGE NOT FACTOR UNTIL 60 YEARS; CLINICAL HALLMARK NOISE NOTCH; NIHL DIRECTLY PROPORTIONAL TO TIME WEIGHTED AVG EXPSOURE RISK; INADEQUATE CONVERVASTION PROGRAMS; EXPOSURE TO "CHEMICAL AGENTS, LIKE STYRENE INCREASE LIKELYHOOD OF NIHL; SUFFICIENT EVIDENCE MILITARY NIHL.
-2014; STATEMENT IN SUPPORT CLAIM.....SIGNIFICANT OTHER STATEMENT.