Additional Comments on Reverse

State of Wisconsin Substance Release Notification Form 4-Hour Emergency Hotline Number: 1-800-943-0003 Form 4400-91 Rev. 11-95 Date and Mil. Time of Incident 2/10/97 0900 Date and Mil. Time Reported 2/10/97 1052 Telephone # (414) (084-4421 **Person Reporting** KAREN DEMCAK Representing Agency, Firm, or Citizen MIZIZO CORP. Responsible Party MIRRO CORP Tame KAREN DEMCAK Telephone # (414) 684-4421 **Contact Name** City, State, Zip Code MANITOWICK WI 54220 Amount & Units Released | Amt. Recovered Is this a 304 (11004 42 USC) spill? Substance Involved UNKNOWN 5 POUNDS □ Yes No □ Unknown MERCURY □ Solid 🛛 Semisolid □ Liquid □ Gas Color Silver Odor Exact Location (inc. address, facility name, mileage, bldg. #, etc.) 1512 WASHINGTON PLANT #9 County Maritouse City MANITOWIC Lat/long DNR Region NER 1/4 ¹/₄sec T NR (E/W) Weather Cond. Cause of Incident while Down work on the Floor some Mercure was Found ON THE WOOD UNDERNEATH, States THAT A GAMBING STATION FAILED IN THE PAST CAUSING THE SPILL Spill Source: **Spilled Substance Impact To:** Action Taken By Spiller ☐ Transportation Accident, Fuel Supply Tank Spill Check (all that apply ☐ No Action Taken Air De Potential ☐ Transportation Accident, Load Spill ☐ No Action Needed Soil Potential Industrial Facility

Paper Mill ☐ Chemical Co. ☐ Monitor ☐ Ag Coop/Facility/Food Factory/Facility ☐ Groundwater ☐ Potential ☐ Cleanup Method: ☐ Surface Water ☐ Potential ☐ Gas/Service Station/Garage/Auto Dealer, Repair Shop ☐ Pipeline, Terminal, Tank Farm, Oil Jobber/Wholesaler Waste Destination: Name: ☐ Public Property (city, state, church, school, etc.) ☐ Storm Sewer ☐ Potential SuPERION ☐ Utility Co., Power Generating/Transfer Facility ☐ Containment ☐ Sanitary Sewer ☐ Potential Contractor Hired ☐ Concrete/Asphalt ☐ Potential ☐ Private Property (home/farm) ☐ Construction, Excavation, Wrecking, Quarry, Mine Name: SiPERION ☐ Private Well ☐ Potential ☐ Railroad Facility Contained/Recovered ☐ Airport Facility ☐ Other: □ Other _ □ Other: Injuries? ☐ Yes No If yes, how many? Has an evacuation occurred? □ Yes ♥No Potential? □ Yes □ No Are there any resource damages? ☐ Yes XNo ☐ Potential What kinds? Other Agencies Notified (first column if notified); Check () both columns if on scene Incident Commander, if Local DNR □ □ EPA
 □ □ Div. Emer. Gov. □ □ Nat'l Resp. Ctr. 800-442-8802 ☐ ☐ Fire Department/Hazmat known: □ □ Local Law Enforcement ☐ LEPC or Local Emer. Gov. ☐ ☐ DATCP 608-224-4500 ☐ ☐ Chemtrec 800-424-9300 □ □ Regional Response Team □ □ DHSS 608-266-2830 □ □ Other_ Phone:_ Prepared By: (Print) LANCE P. Byrns (Sign) Your B. Bu Date: 2/17/97 Rpt'd to DATCP? □Yes No Person Notified: LANCE P. Bonns Region Notified: Time: Date: Invstgtd By: (Print) Laves P. Burns (Sign) Site Closed? Yes □No Date: 2/17/97 Transferred to ERP? Spill Coordinator Signoff: Date: NFA Letter Sent? □Yes No □Yes; Case #

0.4-36-223347

State of Wisconsin Substance Release Report (Con't) Form 4400-91 Rev. 11-95

Date and Military Time of Incident 2/12/87 0900 Responsible Party Mirro Corp.	No.
Additional Comments:	
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