

04-08-265395

State of Wisconsin Substance Release Notification Form

24 Hour Emergency Hotline Number: 1-800-943-0003

LE Form

563598-8040

<b>Date &amp; Mil. Time of Incident:</b> 8/23/2000 1030		<b>Date &amp; Mil. Time Reported</b> 8/23/2000 1535		<b>Spill File #</b> ner08232000_01	
<b>Person Reporting/Representing:</b> Kerry DeKeyser				<b>Phone # (920) 898-2700</b> extension 2306	
<b>Responsible Party/Spiller</b> Tecumseh Products Co.				<b>Phone # (920)898-2700</b>	
<b>Contact Name</b> Kerry DeKeyser				<b>Phone # (920)898-2700</b> extension 2306	
<b>Address</b> 1604 Michigan Ave.			<b>City, State, Zip Code</b> New Holstein, WI 53061		
<b>Substance Involved</b> Gasoline		<b>Amount &amp; Units Released</b> 10-15 gallons - 20-30 gallons		<b>Amount Recovered</b> all	
<input type="checkbox"/> Solid <input type="checkbox"/> Semisolid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas Color: _____ Odor: _____					
<b>Exact Location (Inc. address, facility name, mileage, bldg. #,etc)</b> Above address, on the east side of the property. <i>1604 Michigan Ave. East side of facility</i>					
<b>City</b> New Holstein		<b>County</b> Calumet		<b>Lat/Long</b>	
<b>DNR Region</b> NER		____ 1/4 ____ 1/4 sec ____ NR ____ (E/W)		<b>Weather Cond.</b>	
<b>Cause of Incident:</b> Malfunction in a diaphragm pump that was transferring gasoline to a storage tank.				<b>Action Taken by Spiller:</b> <input type="checkbox"/> No Action Taken <input type="checkbox"/> No Action Needed <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Cleanup Method: Excavate and remove affected soil - <i>3 to 5</i> yards of soil removed <i>ins. &amp; absorbents</i> <input checked="" type="checkbox"/> Waste Destination: <i>W.M. Ridge Creek</i> <input type="checkbox"/> Containment <input checked="" type="checkbox"/> Contractor Hired Name: unknown, will find out if we want to call back to ask. <input type="checkbox"/> Other:	
<b>Spilled Substance Impact To:</b> Check ( ) all that apply: <input type="checkbox"/> Air <input type="checkbox"/> Potential <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Potential <input type="checkbox"/> Groundwater <input type="checkbox"/> Potential <input type="checkbox"/> Surface Water <input type="checkbox"/> Potential Name: <input type="checkbox"/> Storm Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Concrete/Asphalt <input type="checkbox"/> Potential <input type="checkbox"/> Private Well <input type="checkbox"/> Potential <input type="checkbox"/> Contained/Recovered <input type="checkbox"/> Other:		<b>Spill Source:</b> <input type="checkbox"/> Transportation Accident, Fuel Tank Spill <input type="checkbox"/> Transportation Accident, Load Spill <input checked="" type="checkbox"/> Industrial Facility <input type="checkbox"/> Paper Mill <input type="checkbox"/> Chemical Co. <input type="checkbox"/> Ag Coop/Facility/Food Factory/Facility <input type="checkbox"/> Gas/Service Station/Garage/Auto Dealer/Repair Shop <input type="checkbox"/> Pipeline/Terminal/Tank Farm/Oil Jobber/Wholesaler <input type="checkbox"/> Public Property (city, state, church, school, etc.) <input type="checkbox"/> Utility Co. Power Generating/Transfer Facility <input type="checkbox"/> Private Property (home/farm) <input type="checkbox"/> Construction, Evacuation, Wrecking, Quarry, Mine <input type="checkbox"/> Airport Facility <input type="checkbox"/> Railroad Facility <input type="checkbox"/> Other:			
Injuries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes how many?		Has an evacuation occurred? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Potential? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are there any resource damages? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Potential? What kinds?					
Other agencies notified (check first column if notified) check both columns if on the scene <input checked="" type="checkbox"/> Fire Department <input type="checkbox"/> Local DNR <input type="checkbox"/> EPA <input type="checkbox"/> Local Law Enforcement <input type="checkbox"/> Div. Emerg. Mgt. <input type="checkbox"/> Nat'l Resp Ctr 800-442-8802 <input type="checkbox"/> LEPC or Local Emer. Mgt. <input type="checkbox"/> Coast Guard <input type="checkbox"/> Chemtrec 800-424-9300 <input type="checkbox"/> Level A/Level B Team <input type="checkbox"/> DHFS 608-258-0099 <input type="checkbox"/> Other:				<b>Incident Commander, if known:</b>	
Prepared by: Tom Collier		Phone: 608-261-4939		Date: 8/23/2000	
Person Notified: E-mailed to Roxanne Chronert, no warden notified as cleanup is complete.		Phone: 920-492-5592		Date: 8/23/2000	
Investigated by:		Sign		Date	
Spill Coordinator Signoff:		Date:		Transferred to: ERP <input type="checkbox"/> DATCP <input type="checkbox"/> Date: <i>NO</i> Case #	
				Incident Closed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date: <i>10-27-00</i> NFA Letter Sent? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Spill Packet Sent? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No To:	

*[Handwritten signature]* 10/27/00

Additional Comments on Reverse

2022-08-04

10-6-20  
15:58

To: Kay De Keyser  
Subject message. will be sending RP Packet. Please  
submit WFA Info.

2022-08-04



**DNR IMMEDIATE RESPONDER:** Please tear off this section for Department of Natural Resources' records & attach to State of Wisconsin Substance Release Notification Form (Form 4400-91).

I acknowledge delivery of this letter and information to:

Tecumseh Products Co

Person /Company Responsible for spill

Kerry De Keyser

Contact Name

1604 MI Ave

Mailing Address

New Holstein 53061

City/State/Zip Code

8-23-00

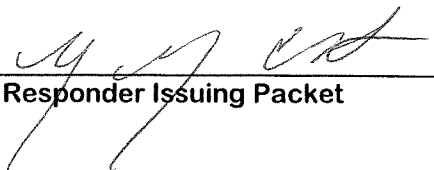
Date of Spill

1604 MI Ave

Location of Spill/Municipality

gasoline

Substance Released



DNR Immediate Responder Issuing Packet

10-6-00

Date Issued



**TECUMSEH PRODUCTS COMPANY**  
ENGINE AND TRANSMISSION GROUP



NEW HOLSTEIN OPERATIONS  
1604 MICHIGAN AVENUE  
NEW HOLSTEIN, WISCONSIN 53061-1175

PHONE: 920-898-2700  
FAX: 920-898-2701

October 12, 2000

Wisconsin Department of Natural Resources  
NER Spills Coordinator  
Roxanne Nelezen Chronert  
P.O. Box 10448  
Green Bay, WI 54307-0448

Dear Ms. Chronert:

Subject: Requested Information Pertaining to Gasoline Spill

The following is in response to your request for information regarding the gasoline spill that occurred at our facility on August 23, 2000. Attached is a narrative report detailing the events surrounding the spill and the actions taken to clean up the spill. As noted in the report:

- The spill occurred at approximately 10:30 am, Wednesday, August 23
- An estimated 20-30 gallons of gasoline was spilled through a vent pipe
- The spill occurred on the east side of the facility at the above address
- The power was disconnected to the pump to stop the spill, spill residue inside the plant was drummed for disposal, and about 5 yards of contaminated soil was excavated and disposed of through Waste Management Ridgeview Landfill (Waste approval and disposal documentation attached)
- A copy of a site map is included showing the location of the spill
- The spill was contained entirely within the boundaries of the plant and there was no contact with stormwater runoff

If you have any further questions regarding this gasoline spill, please call me, David Oughton at (920) 898-2700.

Sincerely yours,

Tecumseh Products Company  
New Holstein Operations

David Oughton  
Environmental Engineer

Enclosures

cc: Kerry DeKeyser  
Bob Murtha

Aviation Gasoline Release Wednesday August 23, 2000

On Tuesday evening (8/22/00 ) a thunderstorm knocked out the PLC controlling the aviation gasoline feed pump to the assembly engine test line. Maintenance worked on the PLC Tuesday evening to allow assembly to fill the assembly day tank.

On Wednesday (8/23/00) 10:30 am the PLC failed to shut the day tank feed pump off after the pump was energized thus forcing gasoline out of the day tank vent. An estimated 20-30 gallons of gasoline was released to the ground from the vent, and approximately 5 gallons of gasoline was released inside the building in the exhaust trenches.

The engine test line was evacuated while clean-up commenced. Spill residue from inside the facility has been drummed for disposal and approximately 5 yards of soil has been excavated and placed in a roll off box for disposal. Clean fill has been placed into the excavation.

The City of New Holstein Fire Department was called to stand ready during the clean up activities. The facility was put back into production for second shift Wednesday 8/23/00.

The WDNR was notified (Mr. Tom Collier 1-800-943-0003) by K. DeKeyser of the release at 3:30 PM on 8/23/00. K. DeKeyser reported the incident indicating the spill had occurred at 10:30 AM and it had been remediated. Mr. Collier indicated the report would be filled, and did not anticipate any further action by WDNR.

K. DeKeyser  
August 24, 2000  
(REVISED 8/28/00 BY KJD)

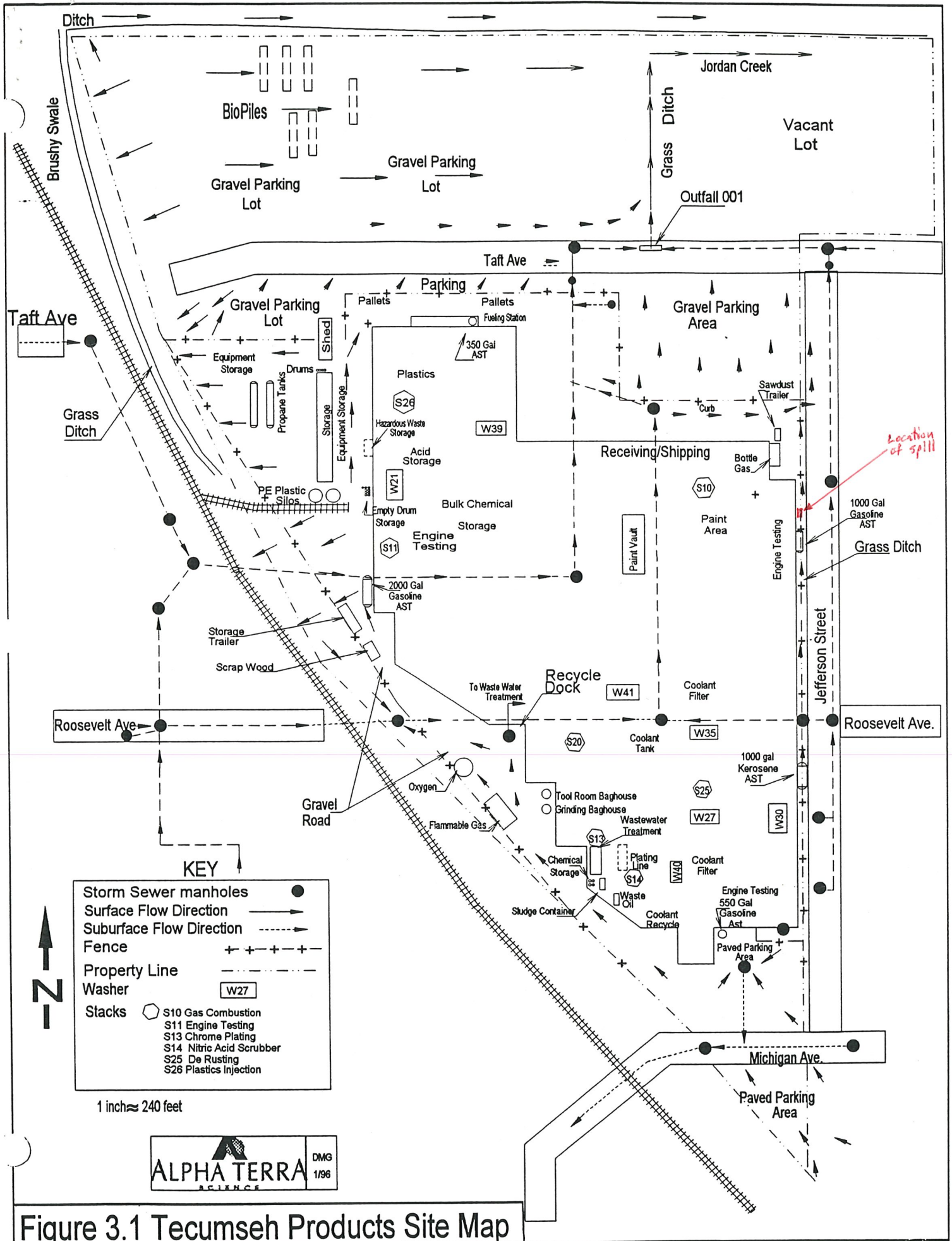


Figure 3.1 Tecumseh Products Site Map



# NORTHERN REGION SPECIAL WASTE MANAGEMENT DECISION

BIO-6

**RIW BIO 491122**  
Waste Profile Sheet Code

I Request For Decision:  Initial  Renewal

GENERATOR NAME: TECUMSEH PRODUCTS CORP.

ADDRESS: 1604 MICHIGAN AVENUE

CITY, STATE: NEW HOLSTEIN, WI 53061

WASTE NAME(S): GASOLINE CONTAMINATED SOIL

PROPOSED MANAGEMENT FACILITY: RIDGEVIEW BIOSITE

PROPOSED INTERMEDIATE TRANSFER FACILITY: \_\_\_\_\_

WMNA REQUESTER: Sara S. Bashaw

TRANSPORTER: \_\_\_\_\_

SIGNATURE: Sara S. Bashaw

II TECHNICAL MANAGER DECISION: (circle one) **APPROVED**

DISAPPROVED

Check if additional information is attached.

If Disapproved, Explain:

If Approved, Complete A, B, C And D Below:

A. Management Method(s):

Bioremediation

B. Precautions, Conditions, or Limitations on Approval

Daily cover, berms, road base, and other features not located on exterior slopes if combined DRO and GRO are less than 250 ppm. Use on exterior slopes if combined DRO and GRO is less than 10 ppm.

C: Decision Expiration Date:

9/11/01

TECH MGR. SIGNATURE

NAME (Print)

Richard L. Payer

DATE:

9/11/00

WMNA MANAGEMENT FACILITY SITE MANAGER DECISION (circle one)

**APPROVED**

DISAPPROVED

Approved, State Any Additional Precautions, Conditions, or Limitations

WMNA INTERMEDIATE TRANSFER FACILITY SITE MANAGER DECISION (circle one)

Sara S. Bashaw

NAME (Print)

Sara S. Bashaw

DATE:

9/11/00

Approved, State Any Additional Precautions, Conditions, or Limitations

WMNA INTERMEDIATE TRANSFER FACILITY SITE MANAGER DECISION (circle one)

NAME (Print)

DATE:

(DRIVER: PLEASE SIGN BELOW)

1741854

REFERENCE NO.

344133

09/12/2000

(PLEASE SIGN HERE)

LOCATION County ST Fct  
 MANITOWO MANITOWOC WI 100

*D. Bett*

GROSS: 25.550

TARE: 17.510

Oper Time Date

In: LMD 11:17 AM 09/12/2000

NET: 8.040

Out: LMD 11:32 AM 09/12/2000

RIDGEVIEW RDF  
 WASTE MANAGEMENT  
 PO BOX 227  
 WHITELAW WI 54247  
 920/732-4473 FAX: 920/732-3758

COMMENTS

GAS CONT SOIL *Tecumseh*

CUSTOMER NO. 7002062	TRUCK NO. 84
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PROFILE NO. BR491122
MANIFEST NO.
PERMIT NO.

CUSTOMER  
 WASTE MANAGEMENT/TRI COUNTY  
 P O BOX 1563  
 FOND DU LAC WI 54936

LOAD CODE	LOAD DESCRIPTION	LOAD QUANTITY	AMOUNT
0	SPECIAL SERVICE	0.00	

CUSTOMER

111-022 - REORDER FROM PRECEPT BUSINESS PRODUCTS • (800) 333-9198