

04-05-315798

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

04-05-315798

<b>Date &amp; Military Time Of Incident:</b> Ongoing		<b>Date &amp; Military Time Reported:</b> 06/17/2002 0805		<b>Spill File #</b>	
<b>Person Reporting:</b> Jacqueline K. Powell		<b>Representing:</b> Fort James		<b>Phone # (920)438-4212</b> <b>Fax # ( )</b>	
<b>Responsible Party (RP) / Spiller:</b> Fort James Operating Company		<b>RP Decision Based On:</b>		<b>Phone # (920)438-4212</b> <b>Fax # ( )</b>	
<b>RP Address:</b> 1919 So. Broadway		<b>City</b> Green Bay		<b>State</b> WI	
<b>RP Contact Name &amp; Title:</b> (Same)		<b>Zip Code</b> 54304		<b>Phone # ( )</b> <b>Fax # ( )</b>	
<b>Substance Involved:</b> Biphenyl; Hydrogen Fluoride; Sulfuric Acid; Chloroform		<b>Amount &amp; Units Released:</b>		<b>Amount &amp; Units Recovered:</b>	
<input type="checkbox"/> Solid <input type="checkbox"/> Semisolid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas		<b>Color:</b>		<b>Odor:</b>	
<b>Exact Location Of Incident:</b> (including street name, bldg. #, mileage, etc.) 1919 So. Broadway				<b>Facility Name / Property Owner:</b> Fort James	
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township		<b>County</b> Brown		<b>Latitude/Longitude</b>	
<b>DNR Region:</b> NER		1/4 1/4 Sec T N R <input type="checkbox"/> E <input type="checkbox"/> W		<b>Weather Conditions:</b>	
<b>Cause Of Incident:</b> Report of continuous release under CERCLA Section 103(f)(2) according to 40CFR 302.8(1) of CERCLA Hazardous Substance. Initial report was made to National Response Center on 06/17/2002. Ms. Jones issued Case Number 611493.					
<b>Spilled Substance Impact To:</b> (check X all that apply)		<b>Spill Cause/Site:</b>		<b>Action Taken By Spiller:</b>	
<input checked="" type="checkbox"/> Air <input type="checkbox"/> Potential <input type="checkbox"/> Concrete/Asphalt <input type="checkbox"/> Potential <input type="checkbox"/> Contained/Recovered <input type="checkbox"/> Groundwater <input type="checkbox"/> Potential <input type="checkbox"/> Private Well <input type="checkbox"/> Potential <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Soil <input type="checkbox"/> Potential <input type="checkbox"/> Storm Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Surface Water <input type="checkbox"/> Potential Name:  <input type="checkbox"/> Other:		<input type="checkbox"/> Ag Coop/Food Factory <input type="checkbox"/> Airport Facility <input type="checkbox"/> Railroad Facility <input type="checkbox"/> Construction, Excavation, Wrecking, Quarry, Mine <input type="checkbox"/> Gas/Service Station/Garage/Auto Dealer/Repair Shop <input type="checkbox"/> Hydraulic Line Break <input type="checkbox"/> Industrial Facility <input checked="" type="checkbox"/> Paper Mill <input type="checkbox"/> Chemical Co. <input type="checkbox"/> Pipeline/Terminal/Tank Farm/Oil Jobber/Wholesaler <input type="checkbox"/> Private Property (home/farm) <input type="checkbox"/> Public Property (city, state, church, school, etc.) <input type="checkbox"/> Transportation Accident, Fuel Tank Spill <input type="checkbox"/> Transportation Accident, Load Spill <input type="checkbox"/> Utility Co. Power Generating/Transfer Facility <input type="checkbox"/> Other:		<input type="checkbox"/> Cleanup Method: <input type="checkbox"/> Absorbent <input type="checkbox"/> Excavation <input type="checkbox"/> <input type="checkbox"/> Containment <input type="checkbox"/> Contractor Hired Name:  <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> No Action Needed <input checked="" type="checkbox"/> No Action Taken <input type="checkbox"/> Waste Destination: <input type="checkbox"/> Other:	
<b>Injuries?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes how many?		<b>Has An Evacuation Occurred?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Potential?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Are There Any Resource Damages?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Potential <b>What Kind?</b>					
<b>Other Agencies Notified:</b> (check first column, if notified; check both columns, if on the scene)				<b>Incident Commander:</b>	
<input type="checkbox"/> Fire Department <input type="checkbox"/> Local Law Enforcement <input type="checkbox"/> LEPC or Local Emer. Mgt. <input type="checkbox"/> Level A/Level B Team		<input checked="" type="checkbox"/> Local DNR <input type="checkbox"/> Div. Emerg. Mgt. <input type="checkbox"/> Coast Guard <input type="checkbox"/> DHFS 608-258-0099		<input type="checkbox"/> EPA <input checked="" type="checkbox"/> Nat'l Resp Ctr 800-442-8802 <input type="checkbox"/> Chemtrec 800-424-9300 <input type="checkbox"/> Other:	
<b>Prepared By:</b> C. R. Egtvedt		<b>Phone #</b> 920/492-5594		<b>Date:</b> 06/17/2002	
<b>Person Notified:</b> RICK WULK		<b>Phone #</b> 7 AXED		<b>Date:</b> 6/17/2002	
<b>Investigated By:</b>		<b>Sign:</b>		<b>Date:</b>	
<b>Spill Coordinator Signoff:</b> Kathryn M. Edmunds		<b>Date:</b> 6/17/02		<b>Transferred To:</b> ERP <input type="checkbox"/> DATCP <input type="checkbox"/> <b>Date:</b> Case #	
				<b>Rpt'd To DATCP?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				<b>Time:</b> 1358	
				<b>Incident Closed?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b> 6/17/02	
				<b>NFA Letter Sent?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Spill Packet Sent?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>To:</b>	

State of Wisconsin Substance Release Report (Cont'd)  
Form 4401-91 Rev 12-01

Date and Military Time Of Incident:	Responsible Party:
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Additional Comments :

Case Activity Report:  Yes  No CAR#: (Please, attach copy of all CAR and other documentation)

Enforcement Action:  Yes  No (Explain Below)



Fax Cover Sheet

Georgia-Pacific Corporation  
Consumer Products

1919 South Broadway  
P.O. Box 19130  
Green Bay, WI 54307-9130  
(920) 435-8821  
(920) 438-2804  
www.gp.com

To: Roxanne Chronert Date: 6/17/02

Fax Number: 920-492-5859 Total No. of Pages: 3

Location/Department: NE Region Coordinator

From: Jackie Powell

Location/Department: Georgia-Pacific, Green Bay West Mill

Comments: Roxanne,

Please see attached form that I used for the continuous release reporting obligation under CERCLA Section 103(f)(2). Please contact me at 920-438-4212 if you have any additional questions. Thank you.

Jackie Powell  
Environmental Engineer

Emergency situations should be reported via the 24-hour Spill Hotline: 1-800-943-0003

Notice: Hazardous substance discharges must be reported immediately according to the "Spills Law", s. 292.11, Wis. Stats. Section NR 706.05(1)(b), Wis. Adm. Code requires that hazardous substance discharges are to be reported by one of three methods: telephoning the Department (toll free Spill Hotline number above), telefaxing a report to the Department or visiting a Department office in person. If you choose to notify the Department by telefax, you should use this form to be sure that all necessary information is included. However use of this form is not mandatory. Under s. 292.99, Wis. Stats., the penalty for violating ch. 292, Wis. Stats., shall be no less than \$10 nor more than \$5000 for each violation. Each day of continued violation is a separate offense. It is not the Department's intention to use any personally identifiable information from this form for any purpose other than program administration. However, information submitted on this form may also be made available to requesters under Wisconsin's Open Records Law (ss. 19.31 - 19.39, Wis. Stats.).

Confirmatory laboratory data should be included with this form, if available, to assist the DNR in processing this Hazardous Substance Release Notification.

Complete this form. **TYPE or PRINT LEGIBLY.** FAX it to the appropriate WDNR region (see next page) **IMMEDIATELY** upon discovery of a potential release to the environment from (check one):

- Underground Petroleum Storage Tank System
- Aboveground Petroleum Storage Tank System
- Dry Cleaner Facility (DERP eligibility based on:  Facility owner/operator  Property owner of licensed facility)
- Other - Describe: Continuous Release Reporting under CERCLA Section 103(f)(2)

TO:WDNR, Attn: Roxanne Chronert (Area Code) FAX Number 920-492-5859

1. Discharge reported by:

Name	Firm	Date FAXed to WDNR
<u>Jacqueline K. Powell</u>	<u>Fort James Operating Company</u>	<u>6-17-02</u>
Mailing Address	(Area Code) Telephone Number	
<u>1919 South Broadway, Green Bay, WI</u>	<u>920-438-4212</u>	

2. Site Information

Name of site at which discharge occurred. Include local name of site/business, not responsible party name, unless a residence / vacant property

Fort James Operating Company

Location: Include street address, not PO Box. If no street address, describe as precisely as possible, i.e., 1/4 mile NW of CTHs 60 & 123 on E side of CTH 60

1919 South Broadway, Green Bay, WI, 54304

Municipality (City, Village, Township) Specify municipality in which the site is located, not mailing address/city

Green Bay

County:	Legal Description:
<u>Brown</u>	<u>1/4, 1/4, Section _____, Tn _____, Range _____ E / W (circle one)</u>

3. Responsible Party (RP) and/or RP Representative

Responsible Party Name: Business or owner name that is responsible for ~~cleanup~~ discharge. If more than one, list all. Attach additional pages as necessary

Same as above.

Contact Person Name (if different)	Telephone Number

Mailing Address	City	State	ZIP Code

4. Hazardous Substance Impact Information

Identify and estimate the quantity of the hazardous substance discharged (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Unleaded gasoline _____ gallons | <input type="checkbox"/> Fuel oil _____ gallons  |
| <input type="checkbox"/> Leaded gasoline _____ gallons   | <input type="checkbox"/> Waste oil _____ gallons   |
| <input type="checkbox"/> Diesel _____ gallons            | <input type="checkbox"/> Stoddard solvent _____ gallons  |
| <input type="checkbox"/> Perchloroethylene _____ gallons | <input checked="" type="checkbox"/> Other: (Specify below) Biphenyl 92-52-4 109#/da<br>Hydrogen Fluoride 7664-39-3 192#/da |

- Impacts to the environment (enter "K" for known/confirmed or "P" for potential for all that apply)
- |  |  |
|--|--|
| <input type="checkbox"/> Fire/explosion threat                         | <input type="checkbox"/> Soil contamination  |
| <input type="checkbox"/> Contaminated private wells (# of wells) _____ | <input type="checkbox"/> Surface water impacts   |
| <input type="checkbox"/> Contaminated public wells                     | <input type="checkbox"/> Floating product  |
| <input type="checkbox"/> Groundwater contamination                     | <input checked="" type="checkbox"/> Other (Describe below) Chloroform 67-66-3 99#/da<br>Sulfuric Acid 7664-93-8 1260#/da |

Air releases - continuous - at or above the RQ.

Contamination was discovered as a result of: On what date? 6-17-02

- Tank closure assessment     Site assessment  
 Other - Describe below

Release reporting under CERCLA Section 103(f)(2)

Additional Comments: Include a brief description of immediate actions taken to halt the release and contain or cleanup hazardous substances that have been discharged.

Report of a continuous release under CERCLA Section 103(f)(2) according to 40 CFR 302.8(i) of CERCLA hazardous substances. Initial report was made to the National Response Center @ 8:05am on 6/17/02 to Ms. Jones. Case Number (CR-ERNS) assigned was 611 493.

Four (4) CERCLA hazardous substances reported: Biphenyl, Chloroform, Sulfuric Acid and Hydrogen Fluoride.

FAX numbers to report non-emergency releases in DNR's five regions are as follows:

**Northeast Region (920-492-5859); Attention - RR Program Assistant:**

Brown, Calumet, Door, Fond du Lac (except City of Waupun - see South Central Region), Green Lake, Kewaunee, Manitowoc, Marinette, Marquette, Menominee, Oconto, Outagamie, Shawano, Waupaca, Waushara, Winnebago Counties

**Northern Region (715-365-8932); Attention - RR Program Assistant:**

Ashland, Barron, Bayfield, Burnett, Douglas, Forest, Florence, Iron, Langlade, Lincoln, Oneida, Polk, Price, Rusk, Sawyer, Taylor, Vilas, Washburn Counties

**South Central Region (608-275-3338); Attention - RR Program Assistant:**

Columbia, Crawford, Dane, Dodge, Fond du Lac (City of Waupun only), Grant, Green, Iowa, Jefferson, Lafayette, Richland, Rock, Sauk Counties

**Southeast Region (414-263-8483); Attention - RR Program Assistant:**

Kenosha, Milwaukee, Ozaukee, Racine, Sheboygan, Walworth, Washington, Waukesha Counties

**West Central Region (715-839-6076); Attention - RR Program Assistant:**

Adams, Buffalo, Chippewa, Clark, Dunn, Eau Claire, Jackson, Juneau, LaCrosse, Marathon, Monroe, Pepin, Pierce, Portage, St. Croix, Trempealeau, Vernon, Wood Counties



**State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES**

Scott McCallum, Governor  
Darrell Bazzell, Secretary  
Ronald W. Kazmierczak, Regional Director

Northeast Region Headquarters  
1125 N. Military Ave., P.O. Box 10448  
Green Bay, Wisconsin 54307-0448  
Telephone 920-492-5916  
FAX 920-492-5859  
TTY 920-492-5912

**WASTE MANAGEMENT AND BUREAU FOR  
REMEDICATION AND REDEVELOPMENT**

**FAX TRANSMITTAL SHEET**

**Date:** June 17, 2002

**TO:**

Name: Rick Wulk

Company/Agency: WDNR - Military

Fax Number: 920/492-5913

**FROM:**

Name: Cynthia R. Egtvedt

Company/Agency: WDNR - Lombardi

Phone Number: 920/492-5594

Pages to follow (excluding cover sheet): 5

**Comments/Message:**

This is a continuous release to air. K. Erdmann requests you follow on this.

Thank you.

# MESSAGE CONFIRMATION

06/17/2002 13:58  
ID=WI DNR NER SOLID WASTE

DATE	S,R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
06/17	01'07"	WDNR NERH	CALLING	06	OK 0000

06/17/2002 13:57 WI DNR NER SOLID WASTE → WDNR NERH NO.498 001



## State of Wisconsin | DEPARTMENT OF NATURAL RESOURCES

Scott McCallum, Governor  
Darrell Buzzell, Secretary  
Ronald W. Kazmierczak, Regional Director

Northeast Region Headquarters  
1125 N. Military Ave., P.O. Box 10448  
Green Bay, Wisconsin 54307-0448  
Telephone 920-492-5916  
FAX 920-492-5859  
TTY 920-492-5912

## WASTE MANAGEMENT AND BUREAU FOR REMEDICATION AND REDEVELOPMENT

### FAX TRANSMITTAL SHEET

Date: June 17, 2002

TO:

Name: Rick Wulk

Company/Agency: WDNR - Military

Fax Number: 920/492-5913