

04-38-043993
043993

State Div. Emergency Gov't. (608) 266-3232
U.S. Nat'l. Response Center (800) 424-8802
Chemtrec/Pesticides/Chlorine (800) 424-9300

Spill ID Number
890821-02
Y Y M M D D 0-99

04-38-043993

Date of Incident 8-21-89	Day of Week Mon.	Time of Incident 12:15	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	Reported By (Name) M. KOFFMAN	Telephone Number ()
Date Reported N	Day of Week N	Time Reported 5:45	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	Agency or Firm Reporting DEG	Reported thru Div. Emergen. Gov't. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Substance Involved SO2	Quantity 40-50	Units #	Person or Firm Responsible SPECIALTY CHEM PRODUCTS		
Substance Involved	Quantity	Units	Contact Name LEONARD MOORE	Telephone Number (715) 735-9033	

Physical Characteristics

Solid Liquid Gas Semisolid Gas

Color _____ Odor _____

Cause of Incident
Ruptured gas line

Exact Location Description (intersection, mileage, etc.)
AT PLANT FACILITY

County Location
MARINETTE

Groundwaters Affected
 Yes No Potential

Surface Waters Affected
 Yes No Potential

Date District Notified
NO

District Person Notified

Date Investigated

Person Investigating

Action Taken By DNR

No Action Taken Investigation Supervise/Conduct Cleanup

Spiller Required To Take Action; Type _____

Contractor Hired By DNR; Name _____

Amount Recovered _____

29.29 Enforcement

Other Agencies on Scene

Local _____

State _____

Federal _____

Address - Street or Route
2 STANTON ST

City, State, Zip Code
MARINETTE, WI 54143

Action Taken By Spiller

No Action Taken No Notification Investigate

Containment; Type _____

Cleanup; Method _____

Amount Recovered **None**

Monitor _____

Contractor Hired; Name _____

Other Action _____

Spill Location

Industrial Facility/Paper Mill/Chem. Co.

Gas/Service Station/Garage, Auto Dealer, Repair Shop

Ag Coop/Facility/Cheese Factory/Creamery

Other Small Business (bank, grocery, insurance co., etc.)

Public Property (city, county, state, church, school, etc.)

Utility Co., Power Generating/Transfer Facility

Private Property (home/farm)

Pipeline, Terminal, Tank Farm, Oil Jobber/Wholesaler

Transportation Accident, Fuel Supply Tank Spill

Transportation Accident, Load Spill

Construction, Excavation, Wrecking, Quarry, Mine

Other _____

Spilled Substance Destination

Air

Soil

Groundwater

Surface Water

Storm Sewer

Sanitary Sewer

Contained/Recovered

Other _____

Person Filing This Report (print name)
JEFF LABARRA

Signature
Jeff Labarra

Date Signed
8-25-89

Additional Comments:
SO2 gas released to atmosphere ducts ruptured line - has been repaired.

Closed 8/25/89
TA 1/26/18

TOXIC AND HAZARDOUS INCIDENT ALERT FORM

AUG 30 1989

Report Prepared by

Mandy K. Poiran

1) Date of Incident <i>8/21/89</i>	2) Time of Incident <i>1215</i>	3) Reported by <i>Leonard Amore</i>	4) Telephone No. <i>906/863-7976</i> <i>715/735-9033</i>
5) Date Reported <i>8/21/89</i>	6) Time Reported <i>1745</i>	7) Person or Firm Responsible <i>Specialty Chem. Products Corp.</i>	
8) Substance Involved <i>Sulfur Dioxide</i>	9) Quantity (unit) <i>40-50 lbs.</i>	10) Contact Name <i>#3</i>	11) Telephone No. <i>#4</i>
12) Substance Involved	13) Quantity (unit)	14) Address <i>2 Stanton St.</i>	
15) Physical Characteristics <input type="checkbox"/> Solid <input type="checkbox"/> Semisolid Odor _____ <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas Color _____		16) City, State, Zip Code <i>Maine Me 54143</i>	
		17) Weather Conditions Wind Speed _____ Direction _____ Precipitation Yes No Temperature _____ Direction of Spill Movement _____	

18) Exact Location (Highways, Intersections, Mileage, Etc.) <i>#14</i>	19) County <i>Maine Me</i>
---	-------------------------------

20) Cause of Incident <i>Gas return line ruptured - went into atmosphere</i>	21) Transportation Related Transportation Highway Facility Related
---	---

22) If Nuclear Facility - Type of Alert _____ Unusual Event _____ Alert _____ Site Emergency _____ General Emergency _____

23) Surface Water Affected Yes No Potential	24) Ground Water Affected Yes No Potential	Agency	Person Contacted	Telephone No.
25) Distance to - Nearest Water _____ Nearest Well _____ Surface Water Name _____	26) Distance From - Population _____ Medical Care Fac. _____ Correctional Fac. _____ Senior Citizen Center _____	NR Center /Chemtrec Agri DEG/Area Director	<i>Suffie Bader</i>	800-424-8802 Days 266-2141 Pager No. 608-275-9049
27) Local Units on Scene <input type="checkbox"/> EG <input type="checkbox"/> Fire <input type="checkbox"/> Enforcement <input type="checkbox"/> EMS <input type="checkbox"/> Other <input type="checkbox"/> Engineering		DNR DNR		

28) Actions Taken on Scene <i>Replaced gas hose.</i>	DOT/State Patrol	
	H&SS	24 hr. Number 608-266-2830
	NRC	312-932-2500
	PSC	
	DILHR	
	MFGR	