State of Wisconsin
Department of Natural Resources

Substance Release Notification Form
Form 4400-91 (Rev. 10-03, e-form) Page 1 of 2

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

0405-531399

Date & Military Time Of Incident: 07152004 1500	**Date & Military Time Reported:** 07162004 1145	**Spill File #** NER07152004_01 **BRRTS #** 0405531399
Person Reporting: JACKIE POWELL	**Representing:** FT JAMES OPERATING CO	**Phone #** (920) 438-4212 **Fax #** ( )
Responsible Party (RP) / Spiller: FT JAMES OPERATING CO	**RP Decision Based On:**	**Phone #** (920) 438-4212 **Fax #** ( )
RP Address: 1919 SOUTH BROADWAY		**City** GREEN BAY **State** WI **Zip Code**
RP Contact Name & Title: Jackie Powell		**Phone #** (920) 438-4212 **Fax #** ( )
Substance Involved: HYDROGEN FLOURIDE, CHLOROFORM, BIPEHNYL	**Amount & Units Released:** CONTINUOUS RELEASE Unknown	**Amount & Units Recovered:** NONE

☐ Solid ☐ Semisolid ☐ Liquid ☒ Gas **Color:** **Odor:**

Exact Location Of Incident: (including street name, bldg. #, mileage, etc.) ~~AT THEIR LOCATION~~ 1919 S. Broadway	**Facility Name / Property Owner:** Ft. James Operating Co
☒ City ☐ Village ☐ Township GREEN BAY **County** BROWN	**Latitude/Longitude**
DNR Region: NER **1/4 1/4 Sec T N R** ☐ E ☐ W	**Weather Conditions:**

Cause Of Incident:
CONTINUOUS RELEASE

Spilled Substance Impact To: (check **X** all that apply)

☒ Air	☐ Potential	☐ Groundwater	☐ Potential
☐ Concrete/Asphalt	☐ Potential	☐ Private Well	☐ Potential
☐ Contained/Recovered		☐ Sanitary Sewer	☐ Potential
		☐ Soil	☐ Potential
		☐ Storm Sewer	☐ Potential
		☐ Surface Water	☐ Potential

Name:
☐ Other:

Spill Cause/Site:
- ☐ Ag Coop/Food Factory
- ☐ Airport Facility ☐ Railroad Facility
- ☐ Construction, Excavation, Wrecking, Quarry, Mine
- ☐ Gas/Service Station/Garage/Auto Dealer/Repair Shop
- ☐ Hydraulic Line Break
- ☒ Industrial Facility ☐ Paper Mill ☐ Chemical Co.
- ☐ Pipeline/Terminal/Tank Farm/Oil Jobber/Wholesaler
- ☐ Private Property (home/farm)
- ☐ Public Property (city, state, church, school, etc.)
- ☐ Transportation Accident, Fuel Tank Spill
- ☐ Transportation Accident, Load Spill
- ☐ Utility Co. Power Generating/Transfer Facility
- ☐ Other:

Action Taken By Spiller:
- ☐ Cleanup Method:
  - ☐ Absorbent
  - ☐ Excavation
  - ☐
- ☐ Containment
- ☐ Contractor Hired

Name:
- ☐ Monitor
- ☒ No Action Needed
- ☐ No Action Taken
- ☐ Waste Destination:
- ☒ Other: Went into the air

Injuries? ☐ Yes ☒ No If **yes** how many? **Has An Evacuation Occurred?** ☐ Yes ☒ No **Potential?** ☐ Yes ☒ No

Are There Any Resource Damages? ☐ Yes ☒ No ☐ Potential **What Kind?**

Other Agencies Notified: (check first column, if notified; check both columns, if on the scene)

☐ ☐ Fire Department	☒ ☐ Local DNR	☐ ☐ EPA
☐ ☐ Local Law Enforcement	☐ ☐ Div. Emerg. Mgt.	☒ ☐ Nat'l Resp Ctr 800-442-8802
☐ ☐ LEPC or Local Emer. Mgt.	☐ ☐ Coast Guard	☐ ☐ Chemtrec 800-424-9300
☐ ☐ Level A/Level B Team	☐ ☐ DHFS 608-258-0099	☐ ☐ Other:

Incident Commander:
Phone # ( )

Prepared By: ANN BAUER FROM NRC REPORT RECEIVED DATE ABOVE	**Phone #** 6082665214	**Date:** 07242004	**Rpt'd To DATCP?** ☐ Yes ☒ No **Date:** **Transferred to DATCP** ☐ Yes ☒ No **Date:**
Person Notified: ROXANNE CHRONERT	**Phone #** EMAIL	**Date:** 07242004 **Time:**	**Spill Packet Sent?** ☐ Yes ☒ No **Date:** **To:**
Investigated By:	**Sign:**	**Date:**	**Transferred to ERP** ☐ Yes ☒ No **Date:** **Case #**
Spill Coordinator Signoff:		**Date:** 7-28-04	**NFA Letter Sent?** ☐ Yes ☒ No **Date:** **Incident Closed?** ☒ Yes ☐ No **Date:** 7-15-04

☒ **See Additional Comments On Reverse** (Please, print page 2 of 2)

Date and Military Time Of Incident:	Responsible Party:
Additional Comments :	
Case Activity Report: ☐ Yes ☐ No CAR#:	(Please, attach copy of all CAR and other documentation)
Enforcement Action: ☐ Yes ☐ No (Explain Below)	

Chronert, Roxanne N.

From: Rao, Rajesh
Sent: Friday, July 30, 2004 9:53 AM
To: Chronert, Roxanne N.
Subject: RE: Stack Volume Increase

Rox,

I finally have all the information needed to address this issue. This by the way in not a spill. A CIRCLA requirement triggered this report. Give me a call at your convenience.

Raj

P Rajesh Rao
Air Management Engineer
Wisconsin Department of Natural Resources
Northeast Region, Green Bay
(*) phone: (920) 492-5590
(*) fax: (920) 492-5913
(*) e-mail: rajesh.rao@dnr.state.wi.us

-----Original Message-----
From: Chronert, Roxanne N.
Sent: Thursday, July 22, 2004 2:05 PM
To: Drew, James
Cc: Rao, Rajesh
Subject: RE: Stack Volume Increase

Jim, the air engineer for Fort James West is Rao Rajesh. He can be contacted at 920-492-5590. I think all the air staff are at a meeting today, but leave him a message. He is quick to return phone messages. Rox

Roxanne Nelezen Chronert
Spills Coordinator - Hydrogeologist
Wisconsin Department of Natural Resources
1125 N Military Avenue - PO Box 10448
Green Bay WI 54307-0448
phone: (920) 492-5592
fax: (920) 492-5859
e-mail: Roxanne.chronert@dnr.state.wi.us
Visit us on the web at www.dnr.wi.gov

-----Original Message-----
From: James Drew [mailto:drewjm@dhfs.state.wi.us]
Sent: Wednesday, July 21, 2004 10:51 AM
To: Chronert, Roxanne N.
Cc: Knobeloch, Lynda; Otto, William
Subject: Stack Volume Increase

Roxannne:
On July 15, Fort James Paper in GB reported to the NRC upper threshold increases for releases of 3 substances: Hydrogen Flouride, Chloroform and Biphenyl. Is there a person in your regional air management unit who could make a few comments on this reporting procedure and what it means in terms of permitted limits, modeling, community impact, etc. Get back when you have a few minutes.
Thanks. Later. Jim

****

Chronert, Roxanne N.

From: Bauer, Ann on behalf of LE Hotline (DNR)
Sent: Saturday, July 24, 2004 8:23 AM
To: Chronert, Roxanne N.
Cc: Ann Bauer; Duty Officer WEM; James Drew
Subject: spill ner07152004_01

ner07152004_01.doc

When we received this I put it in the continuous release folder. It is now in the spills folder, in report form.

P Ann Bauer
HOTLINE - DISPATCH
Special Operations
Bureau of Law Enforcement
Wisconsin Department of Natural Resources
(*) phone: (608) 266-5214
(*) fax: (608) 267-9717
(*) e-mail: ann.bauer@dnr.state.wi.us

-----Original Message-----
From: Chronert, Roxanne N.
Sent: Thursday, July 22, 2004 1:51 PM
To: LE Hotline (DNR)
Cc: Goetsch, Byron J; Woodbury, David O
Subject: FW: Stack Volume Increase

Did the hotline receive the notification from the NRC on the 7-15-04 incident at Fort James West that was called into the NRC on 7-16-04? If so did it get forwarded out to the region. I do not remember seeing a copy come out. Thanks Rox

Roxanne Nelezen Chronert
Spills Coordinator - Hydrogeologist
Wisconsin Department of Natural Resources
1125 N Military Avenue - PO Box 10448
Green Bay WI 54307-0448
phone: (920) 492-5592
fax: (920) 492-5859
e-mail: Roxanne.chronert@dnr.state.wi.us
Visit us on the web at www.dnr.wi.gov

-----Original Message-----
From: James Drew [mailto:drewjm@dhfs.state.wi.us]
Sent: Wednesday, July 21, 2004 10:51 AM
To: Chronert, Roxanne N.

Cc: Knobeloch, Lynda; Otto, William
Subject: Stack Volume Increase

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Thanks. Later. Jim

* * * * * * * * *

NATIONAL RESPONSE CENTER - FLASH FAX
xxxGOVERNMENT USE ONLYxxxGOVERNMENT USE ONLYxxx
DO NOT RELEASE this information to the public without
permission from the NATIONAL RESPONSE CENTER 1-800-424-8802

Rej
SSQO

Incident Report # 728498

INCIDENT DESCRIPTION

xReport taken by: CIV JOHNSON at 11:39 on 16-JUL-04
Incident Type: CONTINUOUS
Incident Cause: OTHER
Affected Area:
The incident occurred on 15-JUL-04 at 15:00 local time.
Affected Medium: AIR ATMOSPHERE

REPORTING PARTY

Name: JACKIE POWELL
Organization: FT. JAMES OPERATING CO.
Address: 1919 SOUTH BROADWAY
GREEN BAY, WI 54304
FT. JAMES OPERATING CO. called for the responsible party.
PRIMARY Phone: (920)4384212
Type of Organization: PRIVATE ENTERPRISE

SUSPECTED RESPONSIBLE PARTY

Name: JACKIE POWELL
Organization: FT. JAMES OPERATING CO.
Address: 1919 SOUTH BROADWAY
GREEN BAY, WI 54304
PRIMARY Phone: (920)4384212
Type of Organization: PRIVATE ENTERPRISE

INCIDENT LOCATION

1919 SOUTH BROADWAY County: BROWN
City: GREEN BAY State: WI

RELEASED MATERIAL(S)

DESCRIPTION OF INCIDENT

CALLER IS REPORTING A CONTINUOUS RELEASE A CHANGE TO THE UPPER BOUNDS FOR THREE CHEMICALS.

INCIDENT DETAILS

Building ID:
Type of Fixed Object: MANUFACTURING FACILITY
Power Generating Facility: NO
Generating Capacity:
Type of Fuel:
NPDES:
NPDES Compliance: UNKNOWN
Continuous Release Type: STATISTICALLY SIGNIFICANT INCREASE
Initial Continuous Release Number: 611493
Continuous Release Permit:

DAMAGES

Fire Involved: NO Fire Extinguished: UNKNOWN

INJURIES: Hospitalized: Empl/Crew: Passenger:

FATALITIES: Empl/Crew: Passenger: Occupant:
EVACUATIONS: Who Evacuated: Radius/Area:
Damages:

Closure Type	Description of Closure	Hours Closed	Direction of Closure
Air: N			
Road: N			Major Artery: N
Waterway: N			
Track: N			

Media Interest: NONE Community Impact due to Material: NO

REMEDIAL ACTIONS

NONE
Release Secured: NO
Release Rate:
Estimated Release Duration:

WEATHER

ADDITIONAL AGENCIES NOTIFIED

Federal: EPA
State/Local:
State/Local On Scene:
State Agency Number: NO REPORT #

NOTIFICATIONS BY NRC

ATSDR WI ATTN: JAMES DREW		
	16-JUL-04 11:44	(608)2662663
CONT. RELEASE ATTN: L. BEASLEY		
	16-JUL-04 11:44	(703)6039086
CONT. RELEASE ATTN: B. SANDSTROM		
	16-JUL-04 11:44	(312)8866028
U.S. EPA V		
		(312)3532318
NOAA 1ST CLASS BB RPTS FOR WI		
	16-JUL-04 11:44	(206)5266344
NATIONAL RESPONSE CENTER HQ		
		(202)2672100
WI DEPT NAT RES BUREAU OF LAW ENF		
	16-JUL-04 11:44	(608)2662598

ADDITIONAL INFORMATION

CALLER WILL NOTIFY LEPC, SERC, FOLLOWUP WITH EPA.

CONTINUOUS RELEASE MATERIAL

CHRIS Code: NCC Official Material Name: NO CHRIS CODE
Also Known As: HYDROGEN FLOURIDE
Upper Bounds: 200 POUND(S)/DAY

xxx END INCIDENT REPORT 728498 xxx

CONTINUOUS RELEASE MATERIAL

CHRIS Code: NCC Official Material Name: NO CHRIS CODE
Also Known As: CHLOROFORM
Upper Bounds: 260 POUND(S)/DAY

CONTINUOUS RELEASE MATERIAL

CHRIS Code: NCC Official Material Name: NO CHRIS CODE
Also Known As: BIPHENYL
Upper Bounds: 610 POUND(S)/DAY

Report any problems or Fax number changes by calling 1-800-424-8802
PLEASE VISIT OUR WEB SITE AT http://www.nrc.uscg.mil

DEPARTMENT OF HEALTH AND FAMILY SERVICES
HFS-32 (Rev. 8/97)

STATE OF WISCONSIN

FACSIMILE COVER MESSAGE

CONFIDENTIALITY: This facsimile transmission is intended only for use of the individual or entity to which it is addressed. It may contain information which is privileged, confidential, or exempt from disclosure under applicable law.

If the reader of this message is not the intended recipient, you are notified that any review, use, copying, or dissemination or distribution of the contents other than to the addressee of the communication, is strictly prohibited.

If you received this communication in error, notify us immediately by telephone and return the original message to us through the United States Postal Service to the address we will provide.

TO: R. Wekzen-Chmuert
Name

DNR/WER S+R Coord.		Facsimile Telephone Number: (920) 492-5859
Location: Green Bay, WI	Room Number	Telephone Number

FROM (Sender): J. Drew
Name

WI HSEHS Coord	Number of Pages Including This Cover Sheet: 4	Facsimile Telephone Number
Location: Madison, WI		Telephone Number

OPERATOR

07/22/04

[ ] Destroy Originals

[ ] Return Originals to Sender

COMMENTS/INSTRUCTIONS

Roy:

Here is the NRC Rpt we discussed.

Thanks,
Jim

THE FACSIMILE MACHINE COPIES ONLY ONE SIDE OF THE DOCUMENT.
Call sender (Telephone Number) if there is a problem with transmission.

Chronert, Roxanne N.

From: Chronert, Roxanne N.
Sent: Thursday, July 22, 2004 2:05 PM
To: Drew, James
Cc: Rao, Rajesh
Subject: RE: Stack Volume Increase

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Thanks. Later. Jim

CR-ERNS#: 728498

Georgia-Pacific

Georgia-Pacific Corporation
Consumer Products Division

1919 South Broadway
P.O. Box 19130
Green Bay, WI 54307-9130
(920) 435-8821
(920) 438-2364 fax
www.gp.com

July 13, 2004

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Mr. William Sandstrom
EPA, Region 5
CR-ERNS Coordinator
Emergency & Remedial Response Section
77 West Jackson Street
Chicago, IL 60604

RE: Continuous Release Report – CR-ERNS#: 728498
Fort James Operating Company, Green Bay Broadway Mill

Dear Mr. Sandstrom:

On July 16, 2004, Fort James Operating Company made a telephone notification to the NRC to report a Statistically Significant Increase (SSI) over the continuous release upper bound for chloroform, biphenyl and hydrogen fluoride. The SERC and LEPC were also notified. The upper bound values reported at that time were incorrect and have been revised to more accurately reflect the frequency and quantity of the releases.

Upper bound values for certain individual sources were revised using the 2003 EPCRA Section 313 Toxic Release Inventory (TRI) and the 2003 Air Emissions Inventory Summary Report submitted to the State of Wisconsin Department of Natural Resources, Bureau of Air Management. These changes are footnoted in Section II: Part C., Source Information – Identity and Quantity of Each Hazardous Substance Released From Each Source. A revision to the upper bound for sulfuric acid is also included in this written report as AP-42 procedures were used to calculate the release estimates for 2003. Following is a table that summarizes the revised upper bound values for reported chemicals:

HAZARDOUS SUBSTANCE	CAS NUMBER	CERCLA REPORTABLE QUANTITY	UPPER BOUND CR-ERNS# 728498 (REV)	UPPER BOUND CR-ERNS# 611493
Biphenyl	92-52-4	100	119	109
Hydrogen Fluoride	7664-39-3	100	200	192
Chloroform	67-66-3	10	104	99
Sulfuric Acid	7664-93-9	1000	1338	1260

This correspondence is intended to provide written notification to the EPA Regional Office, SERC, LEPC and WDNR of the changes made to the initial notification that occurred on June 17, 2002[1]. Enclosed are revised forms made in the original submittal.
If you have any further questions, please contact me at 920-438-4212.

Sincerely,
FORT JAMES OPERATING COMPANY

Jacqueline K. Powell
Environmental Engineer

Enclosure

CC: Mr. David Woodbury
Emergency Management Coordinator
101 South Webster Street, LE/5
Madison, WI 53703

Mr. Cullen Peltier
Local Emergency Planning Committee
300 East Walnut Street
Green Bay, WI 54301

Ms. Roxanne Nelezen-Chronert
Wisconsin Department of Natural Resources
1125 North Military Avenue
Green Bay, WI 54307

Mr. Raj Rao
Wisconsin Department of Natural Resources
1125 North Military Avenue
Green Bay, WI 54307

[1] CR-ERNS Number 611493 was assigned to the initial notification made on June 17, 2002.

SECTION I: GENERAL INFORMATION	CR-ERNS Number: 728498
Date of Initial Release: 6/17/02	Date of Initial Call to NRC: 6/17/02

Type of Report: Indicate below the type of report you are submitting.

☐ Initial Written Notification ☐ First Anniversary Follow-up Report ☒ Written Notification of a Change to Initial Notification ☐ Written Notification of a Change to Follow-up Report

Signed Statement: I certify that the hazardous substances releases described herein are continuous and stable in quantity and rate under the definitions in 40 CFR 302.8(a) or 355.4(a)(2)(iii) and that all submitted information is accurate and current to the best of my knowledge.

Russell D. McCollister, Senior Vice President Green Bay Operations
Name and Position

August 13, 2004
Date

Signature

Part A. Facility or Vessel Information

Name of Facility or Vessel: Fort James Operating Company

Person in Charge of Facility or Vessel
Name of Person in Charge: Russell D. McCollister
Position:
Telephone No. (920) 438-2561 Alternate Telephone No. (920) 435-8821

Facility Address or Vessel Port of Registration
Street 1919 South Broadway County Brown
City Green Bay State WI Zip Code 54304

Dun and Bradstreet Number for Facility: 065410656

Facility/Vessel Location

Latitude	Deg 44	Min 29	Sec 00	Vessel LORAN Coordinates	
Longitude	Deg 088	Min 02	Sec 00		

Part B. Population Information

Population Density

Choose the range that describes the population density within a one-mile radius of your facility or vessel (Indicate by placing an "X" in the appropriate blank below).

___ 0 - 50 persons ___ 101 - 500 persons X more than 1000 persons
___ 51 - 100 persons ___ 501 - 1000 persons

Sensitive Populations and Ecosystems Within One Mile Radius

Sensitive Populations or Ecosystems (e.g., schools, hospitals, wetlands, wildlife preserves, etc.)	Distance and direction from facility
Fox River	500 feet East of Facility
Lake Michigan - Green Bay	1 Mile North of Facility
Small Pockets of Wetlands	1/4 - 1 Mile, North, South, West
Various Schools	1/4 - 1 Mile, All Directions

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate.

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: SO1 Stack – #5 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ___X___ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: SO1 Stack - #5 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 52 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.8 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 15,000 ft³/min

  ~~Gas Temperature~~ 130 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: SO1 Stack – #5 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform[1]	67-66-3	0.8 (lbs)	0 (lbs)	365	290 (lbs)	January through December
Biphenyl	92-52-4	15.3 (lbs)	0 (lbs)	365	5,600 (lbs)	January through December

[1] Upper bound revised based on 2003 Air Emissions Inventory calculation.

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: SO2 Stack - #6 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue Production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data	____ Knowledge of the facility/vessel's operations and release history	____ Engineering estimate
____ AP-42 Procedures	____ Best professional judgment	___X___ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: SO2 Stack - #6 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

⊗ **AIR** _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 56 (feet) or meters: **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

⊗ **SURFACE WATER** ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second: **OR**
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

⊗ **SOIL OR GROUND WATER** ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.9 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 19,000 ft³/min

  ~~Gas Temperature~~ 130 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: SO2 Stack - #6 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	2.2 (lbs)	0 (lbs)	365	800 (lbs)	January through December
Biphenyl	92-52-4	9.3 (lbs)	0 (lbs)	365	3,400 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate.

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: SO3 Stack – #7 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production.

3. Identify below how you established the pattern of release and calculated release estimates,

____ Past release data	____ Knowledge of the facility/vessel's operations and release history	____ Engineering estimate
____ AP-42 Procedures	____ Best professional judgment	__X__ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: SO3 Stack - #7 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ___) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 59 (feet) or meters; OR
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ___ (stream ___, lake ___, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ___ or average flow rate: ___ cubic feet/second; OR
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ___ acres and average depth of lake: ___ meters.

SOIL OR GROUND WATER ___

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.7 (feet) or meters

  Gas Exit Velocity ___ feet/second or meters/second

  Max 11,000 ft³/min.

  Gas Temperature 100 degrees (Fahrenheit, Kelvin, or Celsius)

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water ___ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S03 Stack - #7 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	1.4(lbs)	0(lbs)	365	500(lbs)	January through December
Biphenyl	92-52-4	5.5(lbs)	0(lbs)	365	2,000(lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: SO4 Stack - #8 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue Production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ___X___ Other (explain)

Representative source stack testing

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Name of Source: SO4 Stack - #8 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ___) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 100 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ___ (stream ___, lake ___, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ___ or average flow rate: ___ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ___ acres and average depth of lake: ___ meters.

SOIL OR GROUND WATER ___

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.5 (feet) or meters

  Gas Exit Velocity ___ feet/second or meters/second

  Max. 10,000 ft³/min

  Gas Temperature 90 degrees Fahrenheit, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water ___ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: SO4 Stack - #8 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform[1]	67-66-3	1.1 (lbs)	0 (lbs)	365	380 (lbs)	January through December
Biphenyl[1]	92-52-4	4.2 (lbs)	0 (lbs)	365	1,500 (lbs)	January through December

[1] Upper bound revised based on 2003 Air Emissions Inventory Calculation.

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S05 stack - #9 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption X OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production.

3. Identify below how you established the pattern of release and calculated release estimates.

_____ Past release data

_____ Knowledge of the facility/vessel's operations and release history

_____ Engineering estimate

_____ AP-42 Procedures

_____ Best professional judgment

X Other (explain)

Representative source stack testing.

* *Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: SO5 Stack – #9 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to **EACH** medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 69 (feet) or meters; OR
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; OR
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 4 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 31,000 ft³/min.

  Gas Temperature 110 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-LEANS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S05 Stack – #9 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform[1]	67-66-3	2.0 (lbs)	0 (lbs)	365	730 (lbs)	January through December
Biphenyl[1]	92-52-4	8.1 (lbs)	0 (lbs)	365	2,900 (lbs)	January through December

[1] Upper bound revised based on 2003 Air Emissions Inventory Calculation

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

** Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate.

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S21 Stack - #1 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption X OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue Production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data	____ Knowledge of the facility/vessel's operations and release history	____ Engineering estimate
____ AP-42 Procedures	____ Best professional judgment	X Other (explain)

Representative source stack testing.

* *Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: S21 Stack - #1 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 164 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 4.8 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 51,000 ft³/min

  ~~Gas Temperature~~ 120 degrees (~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S21 Stack – #1 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	3.0(lbs)	0(lbs)	365	1,100(lbs)	January through December
Biphenyl	92-52-4	11.8(lbs)	0(lbs)	365	4,300(lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S33 Stack - #10 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production.

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ___X___ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Name of Source: S33 Stack – #10 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ___) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 71 (feet) or meters; OR
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ___ (stream ___, lake ___, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ___ or average flow rate: ___ cubic feet/second; OR

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ___ acres and average depth of lake: ___ meters.

SOIL OR GROUND WATER ___

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 4.2 (feet) or meters

  Gas Exit Velocity ___ feet/second or meters/second

  Max. 46,259 ft³/min

  Gas Temperature 129 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water ___ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-EARS Number 728498

Part C. Identify and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S33 Stack – #10 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	3.8(lbs)	0(lbs)	365	1,400(lbs)	January through December
Biphenyl[1]	92-52-4	16.9(lbs)	0(lbs)	365	6,100(lbs)	January through December

[1] Upper bound revised based on 2003 Air Emissions Inventory Calculation.

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S43 Stack - #3 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption X OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment X Other (explain)

Representative source stack testing.

* *Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Name of Source: S43 Stack - #3 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 50 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.6 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 18,000 ft³/min

  Gas Temperature 150 degrees (Fahrenheit, Kelvin, or Celsius)

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S43 Stack - #3 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	0.8 (lbs)	0 (lbs)	365	290 (lbs)	January through December
Biphenyl	92-52-4	3.3 (lbs)	0 (lbs)	365	1,200 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S44 Stack – #4 Paper Machine

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Tissue production

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ___X___ Other (explain)

Representative source stack testing.

* *Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: S44 Stack – #4 Paper Machine

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

⊗ AIR _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 53 (feet) or meters; OR
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

⊗ SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; OR
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

⊗ SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 3.7 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. ft³/min 17,000

  Gas Temperature 130 degrees (Fahrenheit), Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S44 Stack – #4 Paper Machine

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	0.8 (lbs)	0 (lbs)	365	280 (lbs)	January through December
Biphenyl	92-52-4	3.0 (lbs)	0 (lbs)	365	1,100 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S31 Stack – Pulp Bleaching Equipment

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Stock preparation.

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ___X___ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: S31 Stack - Pulp Bleaching Equipment

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 49 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 2.8 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 10,000 ft^3/min

  Gas Temperature 96 degrees (Fahrenheit), Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S31 Stack – Pulp Bleaching Equipment

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	60.3 (lbs)	0 (lbs)	365	22,000 (lbs)	January through December
Biphenyl	92-52-4	41.1 (lbs)	0 (lbs)	365	15,000 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: P36 Fugitive Wastewater Treatment Plant Basins

1. Indicate whether the release from this source is either:

continuous without interruption _X_ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Wastewater treatment plant operation.

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment _X_ Other (explain)

Representative source stack testing.

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: P36 Fugitive

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

⊗ **AIR** X (stack ____ or area X) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: ____ feet or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: ____ (square feet) or square meters. 310,000

⊗ **SURFACE WATER** ____ (stream ____, lake ____, or other ____)

- If the release affects any surface water body, give the name of the water body.

  ____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

⊗ **SOIL OR GROUND WATER** ____

If the release is on or under ground, indicate the distance to the closest water well.

____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter ____ feet or meters

  Gas Exit Velocity ____ feet/second or meters/second

  Gas Temperature ____ degrees Fahrenheit, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water ____ feet/second

SECTION II: SOURCE INFORMATION
(continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: P36 Fugitive

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	26.3 (lbs)	0 (lbs)	365	9600 (lbs)	January thru December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate.

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: 001 Outfall

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Wastewater effluent discharge.

3. Identify below how you established the pattern of release and calculated release estimates.

X Past release data Wastewater analysis	____ Knowledge of the facility/vessel's operations and release history	____ Engineering estimate
____ AP-42 Procedures	____ Best professional judgment	____ Other (explain)

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: 001 Outfall

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR ____ (stack ____ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: ____ feet or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: ____ square feet or square meters.

SURFACE WATER X (stream X, lake ____, or other ____)

- If the release affects any surface water body, give the name of the water body.
  Fox River – Lower Fox
- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.
  stream order: ____ or average flow rate: 8500 cubic feet/second: **OR** (June 2002)
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.
  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:
  Inside diameter ____ feet or meters
  Gas Exit Velocity ____ feet/second or meters/second
  Gas Temperature ____ degrees Fahrenheit, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:
  Average Velocity of Surface Water ____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: 001 Outfall

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	0.3 (lbs)	0 (lbs)	365	120 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: Fort James Green Bay West Landfill

1. Indicate whether the release from this source is either:

continuous without interruption _____ OR routine, anticipated, intermittent X .

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Sludge and Ash landfill operation.

3. Identify below how you established the pattern of release and calculated release estimates.

X Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

____ AP-42 Procedures ____ Best professional judgment ____ Other (explain)

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: Fort James Green Bay West Landfill

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR ____ (stack ____ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: ____ feet or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER X

If the release is on or under ground, indicate the distance to the closest water well. 1200 feet.

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter _____ feet or meters
  Gas Exit Velocity _____ feet/second or meters/second
  Gas Temperature _____ degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: Fort James Green Bay West Landfill

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Chloroform	67-66-3	1.5 (lbs)	0 (lbs)	313	470 (lbs.)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S10 Stack - Boiler Stack for Boilers 3 through 8

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Combustion of fossil fuel.

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data ____ Knowledge of the facility/vessel's operations and release history ____ Engineering estimate

_X_ AP-42 Procedures ____ Best professional judgment ____ Other (explain)

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: S10 Stack - Boiler Stack for Boilers 3 through 8

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

⊗ **AIR** _X_ (stack _X_ or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 400 (feet) or meters; **OR**
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

⊗ **SURFACE WATER** ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; **OR**

- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

⊗ **SOIL OR GROUND WATER** ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 12.5 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max. 682,400 ft³/min

  Gas Temperature 330 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S10 Stack - Boiler Stack for Boilers 3 through 8

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Sulfuric Acid	7664-93-9	1,283 (lbs)	0 (lbs)	365	468,378 (lbs)	January through December
Hydrogen Fluoride	7664-39-3	153 (lbs)	0 (lbs)	365	55,905 (lbs)	January through December
Biphenyl	92-52-4	0.002 (lbs)	0 (lbs)	365	0.6 (lbs)	January through December
Chloroform	67-66-3	0.05 (lbs)	0 (lbs)	365	19.4 (lbs)	January through December

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released in Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION II: SOURCE INFORMATION	CR-ERNS Number 728498

Part A: Basis for Asserting the Release is Continuous and Stable in Quantity and Rate

For EACH source of a release of a hazardous substance or mixture from your facility or vessel, provide the following information on a SEPARATE sheet. Photocopy this page if necessary.

Name of Source: S11 Stack – Boiler Stack for Boiler 9

1. Indicate whether the release from this source is either:

continuous without interruption ___X___ OR routine, anticipated, intermittent _____.

2. Identify the activity(ies) that results in the release from this source (e.g., batch process, filling of a storage tank). If malfunction, describe the malfunction and explain why the release from the malfunction should be considered continuous and stable in quantity and rate.*

Combustion of fossil fuel.

3. Identify below how you established the pattern of release and calculated release estimates.

____ Past release data	____ Knowledge of the facility/vessel's operations and release history	____ Engineering estimate
_X_ AP-42 Procedures	____ Best professional judgment	____ Other (explain)

** Note that unanticipated events, such as spills, pipe ruptures, equipment failures, emergency shutdowns, or accidents, do not qualify for reduced reporting under CERCLA section 103(f)(2). Unanticipated events are not incidental to normal operations and, by definition, are not continuous or anticipated and are not sufficiently predictable or regular to be considered stable in quantity and rate.*

SECTION II: SOURCE INFORMATION (continued)	CR-ERNS Number 728498

Name of Source: S11 Stack - Boiler Stack for Boiler 9

Part B: Specific Information on the Source

For the source identified above, provide the following information. Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

AFFECTED MEDIUM. Identify the environmental medium (i.e., air, surface water, soil, or ground water) that is affected by the release from this source. If your source releases hazardous substances to more than one medium (e.g., a wastepile releasing to air and ground water), treat the release to EACH medium as a separate source and complete Section II, Parts A, B, and C, of this format for EACH medium affected.

AIR X (stack X or area ____) If the medium affected is air, please also specify whether the source is a stack or a ground-based area source.

- If identified source is a stack, indicate stack height: 400 (feet) or meters; OR
- If identified source is an area source (e.g., waste pile, landfill, valves, tank vents, pump seals, fugitive emissions), indicate surface area: _____ square feet or square meters.

SURFACE WATER ____ (stream ____, lake ____, or other _____)

- If the release affects any surface water body, give the name of the water body.

  _____

- If the release affects a stream, give the stream order or average flow rate, in cubic feet per second.

  stream order: ____ or average flow rate: ____ cubic feet/second; OR
- If the release affects a lake, give the surface area of the lake in acres and the average depth in meters.

  surface area of lake: ____ acres and average depth of lake: ____ meters.

SOIL OR GROUND WATER ____

If the release is on or under ground, indicate the distance to the closest water well.

_____

Optional Information

The following information is not required in the final rule; however, such information will assist EPA in evaluating the risks associated with the continuous release. If this information is not provided, EPA will make conservative assumptions about the appropriate values. Please note that the units specified below are suggested units. You may use other units; however, be certain that the units are clearly identified.

- For a stack release to air, provide the following information, if available:

  Inside diameter 6.12 (feet) or meters

  Gas Exit Velocity _____ feet/second or meters/second

  Max 210,000 ft³/min

  Gas Temperature 310 degrees ~~Fahrenheit~~, Kelvin, or Celsius

- For a release to surface water, provide the following information, if available:

  Average Velocity of Surface Water _____ feet/second

SECTION II: SOURCE INFORMATION (continued)

CR-ERNS Number 728498

Part C. Identity and Quantity of Each Hazardous Substance or Mixture Released From Each Source

Please provide a SEPARATE sheet for EACH source. Photocopy this page if necessary.

Name of Source: S11 Stack - Boiler Stack for Boiler 9

List each hazardous substance released from the source identified above and provide the following information. (For an example, see Table 1 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Hazardous Substance	CASRN #	Normal Range (in lbs. or kg per day)* Upper Bound	Normal Range (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity Released in Previous Year (in lbs. or kg)*	Months of the Release
Sulfuric Acid[1]	7664-93-9	55.0 (lbs)	0 (lbs)	365	17,386 (lbs)	January through December
Hydrogen Fluoride[1]	7664-39-3	47.3 (lbs)	0 (lbs)	365	15,050 (lbs)	January through December

[1] Upper bound revised based on 2003 Air Emission Inventory Calculation and AP-42.

List each mixture released from the source identified above and provide the following information. (For an example, see Table 2 of Reporting Requirements for Continuous Releases of Hazardous Substances - A Guide for Facilities and Vessels on Compliance.)

Name of Mixture	Name of Hazardous Substance Components	CASRN#	Weight Percentage	Normal Range of Components (in lbs. or kg per day)* Upper Bound	Normal Range of Components (in lbs. or kg per day)* Lower Bound	Normal Range of Mixture (in lbs. or kg per day)* Upper Bound	Normal Range of Mixture (in lbs. or kg per day)* Lower Bound	Number of Releases (per year)	Total Quantity of Mixture Released In Previous Year (in lbs. or kg)	Months of the Release

* *Please be sure to include units where appropriate. Also, if the release is a radionuclide, units of curies (CI) are appropriate.*

SECTION III: HAZARDOUS SUBSTANCE INFORMATION	CR-ERNS Number 728498

Calculation of the SSI Trigger

For EACH hazardous substance or hazardous substance component of a mixture indicated in Section II, Part C, list the names of the releasing sources and their upper bounds. Please use a SEPARATE sheet for EACH hazardous substance. Photocopy this page if necessary.

Name of Hazardous Substance: Chloroform 67-66-3

To calculate the SSI trigger (i.e., the upper bound of the normal range of a release) for the hazardous substance identified above, aggregate the upper bounds of the normal range of the identified hazardous substance across all sources identified in Section II, Part C. If the hazardous substance is also a component of a mixture, be certain to include the upper bound of the component as calculated in Section II, Part C, in your calculation of the SSI trigger.

Name of Source(s)	Upper Bound of the Normal Range of the Release (specify lbs., kg, or Ci)
S10 Stack - Boiler Stack for Boilers 3-8	0.05 lbs.
S01 Stack - #5 Paper Machine	0.8 lbs.
S02 Stack - #6 Paper Machine	2.2 lbs.
S03 Stack - #7 Paper Machine	1.4 lbs.
S04 Stack - #8 Paper Machine	1.1 lbs.
S05 Stack - #9 Paper Machine	2.0 lbs.
S21 Stack - #1 Paper Machine	3.0 lbs.
S31 Stack - Pulp Bleaching Equipment	60.3 lbs.
S33 Stack - #10 Paper Machine	3.8 lbs.
S43 Stack - #3 Paper Machine	0.8 lbs.
S44 Stack - #4 Paper Machine	0.8 lbs.
P36 Fugitive - Wastewater Treatment	26.3 lbs.
001 Outfall - Wastewater Effluent	0.3 lbs.
Landfill Operations - Sludge + Ash	1.5 lbs.
TOTAL - SSI trigger for this hazardous substance release* :	104.35 lbs.

** This method for calculating the SSI trigger for the hazardous substance assumes that all releases of the same hazardous substance or mixture occur simultaneously. To the extent that a hazardous substance is released from your facility from different sources and at different frequencies, you may adjust the SSI trigger as appropriate, so that it more accurately reflects the frequency and quantity of the release. The SSI trigger in the final analysis must reflect the upper bound of the normal range of the release, taking into consideration all sources of the release at the facility or vessel. The normal range of the release includes all releases previously reported or occurring over a 24-hour period during the previous year.*

SECTION III: HAZARDOUS SUBSTANCE INFORMATION	CR-ERNS Number 728498

Calculation of the SSI Trigger

For EACH hazardous substance or hazardous substance component of a mixture indicated in Section II, Part C, list the names of the releasing sources and their upper bounds. Please use a SEPARATE sheet for EACH hazardous substance. Photocopy this page if necessary.

Name of Hazardous Substance: Biphenyl 92-52-4

To calculate the SSI trigger (i.e., the upper bound of the normal range of a release) for the hazardous substance identified above, aggregate the upper bounds of the normal range of the identified hazardous substance across all sources identified in Section II, Part C. If the hazardous substance is also a component of a mixture, be certain to include the upper bound of the component as calculated in Section II, Part C, in your calculation of the SSI trigger.

Name of Source(s)	Upper Bound of the Normal Range of the Release (specify lbs., kg, or Ci)
S10 Stack - Boiler Stack for Boilers 3 through 8	0.002 lbs.
S01 Stack - #5 Paper Machine	15.3 lbs.
S02 Stack - #6 Paper Machine	9.3 lbs.
S03 Stack - #7 Paper Machine	5.5 lbs
S04 Stack - #8 Paper Machine	4.2 lbs.
S05 Stack - #9 Paper Machine	8.1 lbs.
S21 Stack - #1 Paper Machine	11.8 lbs.
S31 Stack - Pulp Bleaching Equipment	41.1 lbs.
S33 Stack - #10 Paper Machine	16.9 lbs.
S43 Stack - #3 Paper Machine	3.3 lbs.
S44 Stack - #4 Paper Machine	3.0 lbs.

TOTAL - SSI trigger for this hazardous substance release*: 118.502 lbs

** This method for calculating the SSI trigger for the hazardous substance assumes that all releases of the same hazardous substance or mixture occur simultaneously. To the extent that a hazardous substance is released from your facility from different sources and at different frequencies, you may adjust the SSI trigger as appropriate, so that it more accurately reflects the frequency and quantity of the release. The SSI trigger in the final analysis must reflect the upper bound of the normal range of the release, taking into consideration all sources of the release at the facility or vessel. The normal range of the release includes all releases previously reported or occurring over a 24-hour period during the previous year.*

SECTION III: HAZARDOUS SUBSTANCE INFORMATION	CR-ERNS Number 128498

Calculation of the SSI Trigger

For EACH hazardous substance or hazardous substance component of a mixture indicated in Section II, Part C, list the names of the releasing sources and their upper bounds. Please use a SEPARATE sheet for EACH hazardous substance. Photocopy this page if necessary.

Name of Hazardous Substance: Hydrogen Fluoride 7664-39-3

To calculate the SSI trigger (i.e., the upper bound of the normal range of a release) for the hazardous substance identified above, aggregate the upper bounds of the normal range of the identified hazardous substance across all sources identified in Section II, Part C. If the hazardous substance is also a component of a mixture, be certain to include the upper bound of the component as calculated in Section II, Part C, in your calculation of the SSI trigger.

Name of Source(s)	Upper Bound of the Normal Range of the Release (specify lbs., kg, or Ci)
S10 Stack - Boiler Stack for Boilers 3 through 8	153 lbs.
S11 Stack - Boiler Stack for Boiler #9	47.3 lbs

TOTAL - SSI trigger for this hazardous substance release*: 200.3 lbs

** This method for calculating the SSI trigger for the hazardous substance assumes that all releases of the same hazardous substance or mixture occur simultaneously. To the extent that a hazardous substance is released from your facility from different sources and at different frequencies, you may adjust the SSI trigger as appropriate, so that it more accurately reflects the frequency and quantity of the release. The SSI trigger in the final analysis must reflect the upper bound of the normal range of the release, taking into consideration all sources of the release at the facility or vessel. The normal range of the release includes all releases previously reported or occurring over a 24-hour period during the previous year.*

SECTION III: HAZARDOUS SUBSTANCE INFORMATION	CR-ERNS Number 728498

Calculation of the SSI Trigger

For EACH hazardous substance or hazardous substance component of a mixture indicated in Section II, Part C, list the names of the releasing sources and their upper bounds. Please use a SEPARATE sheet for EACH hazardous substance. Photocopy this page if necessary.

Name of Hazardous Substance: Sulfuric Acid 7664-93-9

To calculate the SSI trigger (i.e., the upper bound of the normal range of a release) for the hazardous substance identified above, aggregate the upper bounds of the normal range of the identified hazardous substance across all sources identified in Section II, Part C. If the hazardous substance is also a component of a mixture, be certain to include the upper bound of the component as calculated in Section II, Part C, in your calculation of the SSI trigger.

Name of Source(s)	Upper Bound of the Normal Range of the Release (specify lbs., kg, or Ci)
S10 Stack - Boiler Stack for Boilers 3 through 8	1,283 lbs
S11 Stack - Boiler Stack for Boiler #9	55.0 lbs

TOTAL - SSI trigger for this hazardous substance release* : 1,338.0 lbs

** This method for calculating the SSI trigger for the hazardous substance assumes that all releases of the same hazardous substance or mixture occur simultaneously. To the extent that a hazardous substance is released from your facility from different sources and at different frequencies, you may adjust the SSI trigger as appropriate, so that it more accurately reflects the frequency and quantity of the release. The SSI trigger in the final analysis must reflect the upper bound of the normal range of the release, taking into consideration all sources of the release at the facility or vessel. The normal range of the release includes all releases previously reported or occurring over a 24-hour period during the previous year.*