Heinze, Cody W - DNR

From: Ryan Suennen <ryan.suennen@jci.com>
Sent: Friday, February 24, 2023 10:53 AM
To: Heinze, Cody W - DNR; Michael D. Elliott

Subject: RE: Spill Notification **Attachments:** 10-1-21 Spill location.jpg

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Hi Cody,

Gotcha thanks that helped, that would've been the endpoint spill from near B59. My notes state:

"At 10:19 I got a call that there was a spill by B59 from one of the intermodals managed by endpoint. Based on initial conversations with endpoint it turns out that this intermodal had just been filled with Building 18 foam wastewater. The water was transferred to the intermodal for disposal at US ecology in Texas. It appears that the spill happened when the intermodal was moved and the material foamed up enough from the movement to push out the overfill relief valve/line. it appears that the spill quantity was 5-10 gallons and was contained on the asphalt and is being cleaned up with oil dry. We will move this tanker over a temporary spill berm once the spill is cleaned up."

Attached is a picture showing the location on the site of the spill.

Thanks,

Ryan Suennen

Manager, Environment and Remediation Johnson Controls

715-735-7415 Option 1, ext 84025 direct 715-587-6670 cell Ryan.Suennen@jci.com www.johnsoncontrols.com

Tyco Fire Products One Stanton St. Marinette, WI 54143 USA

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From: Heinze, Cody W - DNR <codyw.heinze@wisconsin.gov>

Sent: Friday, February 24, 2023 10:34 AM

To: Ryan Suennen <ryan.suennen@jci.com>; Michael D. Elliott <michael.elliott@jci.com>

Subject: RE: Spill Notification



Please print or type. Form Approved. OMB No. 2050												050-0039	
\bigcap	, 31	NIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Eme	ergency Response	Phone	4. Manifest		umber 3318	4 F	LE	
	5. 0	Generator's Name and Mailin	g Address	1	Genera	tor's Site Address	(if different t	nan mailing addres	ss)				
	TYCO FIRE PROTECTION PRODUCTS 1 STANTON ST Generators Phone: TE W 54143-2542												
Ш	6.	6. Transporter 1 Company Name						U.S. EPA ID N	U.S. EPA ID Number				
Ш		ZIRDN											
	7. Transporter 2 Company Name							U.S. EPA ID N	U.S. EPA ID Number				
Ш	8. [8. Designated Facility Name and Site Address U.S. EPA ID Number											
	CHEMICAL WASTE MANAGEMENT, INC. 17629 CEDAR SPRINGS LANE Facility's Phone: LINGTON OR 97812-9709							ORD	ORD089452353				
Ш	9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number,					10. Contair	11. Total	11. Total 12. Unit		40.00			
Ш		and Packing Group (if any))			No. Type			Quantity	Wt./Vol.	13. Waste Codes			
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		Non RCRA	Hazardous Waste Sol	1.1		¥ .		16900		2004		****	
Ш,		Special Handling Instructions	conted Miterial			0042	DE	0-247	P		-		
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (ifI am a small quantity generator) is true.												
	Ger	nerator's/Offeror's Printed/Typ			nature	(b) (iii aiii a siiia	ii quantity go	norator) is true.		Mont	n Day	Year	
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<u></u>	18.	Discrepancy											
** : V **	18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection												
>	Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number												
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	Facility's Phone:												
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DESIGNATED	_	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
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	20.	Designated Facility Owner or	Operator: Certification of receipt of hazardous materials cover	ered by the man	ifest exce	pt as noted in Item	18a			3 1 2 2 2 3			
	Prin	ited/Typed Name		Sig	nature		-			Mont	h Day	Year	