Section 1. Registration Information

Source Identification

Facility Name: HoltraChem Manufacturing Company

Parent Company #1 Name: N/A

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: June 2006

Facility Identification

Facility ID: 1000 0005 8386

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

 Street 1:
 99 Industrial Way

 Street 2:
 N/A

 City:
 Orrington

 State:
 ME

 ZIP:
 04474

 ZIP4:
 N/A

County: Penobscot

Facility Latitude and Longitude

Latitude (decimal): 44.74 Longitude (decimal): -68.825

Local Emergency Planning Committee and Regulations

LEPC: Penobscot County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: HoltraChem Manufacturing Company

EPA Facility Identifier: 1000 0005 8386 Plan Sequence Number: 4551

Process Chemicals

Program Level: Program Level 3 process

Chemical Name: Chlorine
CAS Number: 7782-50-5
Flammable/Toxic: Toxic

Program Level: Program Level 3 process

Chemical Name: Hydrochloric acid (conc 37% or greater)

CAS Number: 7647-01-0 Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 325181

NAICS Description: Alkalies and Chlorine Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: November 1997

Time Accident Began (HH:MM): 16:50
NAICS Code of Process Involved: 325181

NAICS Description: Alkalies and Chlorine Manufacturing

Release Duration: 000 Hours 10 Minutes

Release Event

Gas Release: Yes
Liquid Spill/Evaporation: Yes
Fire: N/A
Explosion: N/A
Uncontrolled/Runaway Reaction: N/A

Release Source

N/A Storage Vessel: Yes Piping: Process Vessel: N/A Transfer Hose: Yes Valve: Yes N/A Pump: Joint: N/A Other Release Source: N/A

Weather Conditions at the Time of Event

Wind Speed: 10.0
Units: Miles/h
Direction: SW
Temperature: 30
Atmospheric Stability Class: D
Precipitation Present: N/A
Unknown Weather Conditions: N/A

On-Site Impacts

Employee or Contractor Deaths:

Public Responder Deaths:

Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

Public Injuries:

On-Site Property Damage (\$):

Known Off-Site Impacts

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 0
Sheltered-in-Place: 0
Off-Site Property Damage (\$): 0

Environmental Damage

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

N/A

Water Contamination:

N/A

Soil Contamination:

N/A

Other Environmental Damage:

N/A

Initiating Event

Initiating Event: Human Error

Contributing Factors

Equipment Failure: N/A Human Error: Yes Improper Procedures: Yes Overpressurization: N/A **Upset Condition:** N/A N/A By-Pass Condition: Maintenance Activity/Inactivity: N/A Process Design Failure: N/A Unsuitable Equipment: N/A **Unusual Weather Condition:** N/A Management Error: N/A Other Contributing Factor: N/A

Off-Site Responders Notified

Off-Site Responders Notified: Notified and Responded

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A Revised Maintenance: N/A Revised Training: Yes **Revised Operating Procedures:** Yes New Process Controls: N/A New Mitigation Systems: Yes Revised Emergency Response Plan: N/A **Changed Process:** N/A N/A Reduced Inventory: N/A Other Changes Introduced: N/A

Chemicals in Accident History

Quantity Released (lbs):1641Percent Weight:100Chemical Name:ChlorineCAS Number:7782-50-5Flammable/Toxic:Toxic

Section 9. Emergency Response

Written Emergency Response (ER) Plan

Community Plan (Is facility included in written community emergency response plan?):

Facility Plan (Does facility have its own written emergency response plan?):

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

Yes Yes

Yes

Yes

Local Agency

Agency Name (Name of local agency with which the facility ER plan or response activities are coordinated):

Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated):

Orrington Volunteer Fire Department

(207) 825-3530