Facility Name: Matheson - Cohoes

EPA Facility Identifier: 1000 0022 6034

Plan Sequence Number: 1000115382

Section 1. Registration Information

Source Identification

Facility Name: Matheson - Cohoes

Parent Company #1 Name: N/A

Submission Type: Resubmission Receipt Date: June 2024

Facility Identification

Facility ID: 1000 0022 6034

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 15 Green Mountain Drive

 Street 2:
 N/A

 City:
 Cohoes

 State:
 NY

 ZIP:
 12047

 ZIP4:
 N/A

 County:
 Albany

Facility Latitude and Longitude

Latitude (decimal): 42.800556 Longitude (decimal): -73.727222

Local Emergency Planning Committee and Regulations

 LEPC:
 N/A

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: Matheson - Cohoes EPA Facility Identifier: 1000 0022 6034 Plan Sequence Number: 1000115382

Process Chemicals

Program Level 3 process Program Level: Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7 Flammable/Toxic: Toxic

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: Arsine 7784-42-1 CAS Number: Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 49311

General Warehousing and Storage **NAICS** Description:

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

regulated substance(s)?):

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

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

Response Actions (Does ER plan N/A include specific actions to be taken in response to accidental releases of

Public Information (Does ER plan N/A include procedures for informing the public and local agencies responding to

accidental release?): Healthcare (Does facility's ER plan N/A

include information on emergency health care?):

Facility Name: Matheson - Cohoes

EPA Facility Identifier: 1000 0022 6034

Plan Sequence Number: 1000115382

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):

Town of Colonie Fire Services

(518) 783-2712