Facility Name: ERAMET MARIETTA INC EPA Facility Identifier: 1000 0007 3065

Plan Sequence Number: 50340

Section 1. Registration Information

Source Identification

Facility Name: ERAMET MARIETTA INC

Parent Company #1 Name: ERAMET MANGANESE ALLIAGE

Submission Type: Resubmission
Receipt Date: December 2007
Status: Deregistered
Deregistration Effective Date: May 2009

Facility Identification

Facility ID: 1000 0007 3065

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 74627592

Facility Location Address

Street 1: 16705 Rt 7 South, Riverview

 Street 2:
 N/A

 City:
 MARIETTA

 State:
 OH

 ZIP:
 45750

 ZIP4:
 0299

County: Washington

Facility Latitude and Longitude

Latitude (decimal): 39.372906 Longitude (decimal): -081.523579

Local Emergency Planning Committee and Regulations

LEPC: Washington County LEPC

OSHA PSM: Yes
EPCRA 302: Yes
CAA Title V: Yes

Facility Name: ERAMET MARIETTA INC EPA Facility Identifier: 1000 0007 3065

Plan Sequence Number: 50340

Process Chemicals

Program Level: Program Level 3 process
Chemical Name: Sulfur dioxide (anhydrous)

CAS Number: 7446-09-5 Flammable/Toxic: Toxic

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

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

Process NAICS

NAICS Code: 331112

NAICS Description: Electrometallurgical Ferroalloy Product

Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: September 2003

Time Accident Began (HH:MM): 11:30
NAICS Code of Process Involved: 331112

NAICS Description: Electrometallurgical Ferroalloy Product

Manufacturing

Release Duration: 000 Hours 01 Minutes

Release Event

Gas Release:YesLiquid Spill/Evaporation:N/AFire:N/AExplosion:N/AUncontrolled/Runaway Reaction:N/A

Release Source

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

Weather Conditions at the Time of Event

Wind Speed: N/A

Units: Meters/second

Direction:N/ATemperature:N/AAtmospheric Stability Class:N/APrecipitation Present:N/AUnknown Weather Conditions:Yes

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: N/A 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: No, not notified

Changes Introduced as a Result of the Accident

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

Facility Name: ERAMET MARIETTA INC EPA Facility Identifier: 1000 0007 3065

Plan Sequence Number: 50340

Chemicals in Accident History

Quantity Released (lbs):
Percent Weight:

Chemical Name: Sulfur dioxide (anhydrous)

CAS Number: 7446-09-5 Flammable/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

1

N/A

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):

Washington County LEPC

(740) 373-5613