EPA Facility Identifier: 1000 0002 6795 Plan Sequence Number: 1000007280

# **Section 1. Registration Information**

### Source Identification

Facility Name: Benjamin Moore & Company, Newark,

NJ Plant

Parent Company #1 Name: Benjamin Moore & Company

Submission Type: Resubmission
Receipt Date: June 2009
Status: Deregistered
Deregistration Effective Date: April 2014

**Facility Identification** 

Facility ID: 1000 0002 6795

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 2456242

Facility Location Address

Street 1: 134 Lister Avenue

 Street 2:
 N/A

 City:
 Newark

 State:
 NJ

 ZIP:
 07105

 ZIP4:
 N/A

 County:
 Essex

Facility Latitude and Longitude

Latitude (decimal): 40.740278 Longitude (decimal): -074.133056

Local Emergency Planning Committee and Regulations

LEPC: Newark City OEM

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: Benjamin Moore & Company, Newark, NJ Plant

EPA Facility Identifier: 1000 0002 6795 Plan Sequence Number: 1000007280

#### **Process Chemicals**

Program Level: Program Level 3 process

Chemical Name: Vinyl acetate monomer [Acetic acid

ethenyl ester]

CAS Number: 108-05-4 Flammable/Toxic: Toxic

### **Process NAICS**

NAICS Code: 32551

NAICS Description: Paint and Coating Manufacturing

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: March 2005
Time Accident Began (HH:MM): 10:15
NAICS Code of Process Involved: 32551

NAICS Description: Paint and Coating Manufacturing

Release Duration: 000 Hours 05 Minutes

### Release Event

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

## Release Source

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

Facility Name: Benjamin Moore & Company, Newark, NJ Plant

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### Weather Conditions at the Time of Event

Wind Speed: N/A
Units: Miles/h
Direction: N/A
Temperature: 45
Atmospheric Stability Class: N/A
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:

Water Contamination:

N/A

Soil Contamination:

N/A

Other Environmental Damage:

N/A

### **Initiating Event**

Initiating Event: Equipment Failure

EPA Facility Identifier: 1000 0002 6795 Plan Sequence Number: 1000007280

### **Contributing Factors**

**Equipment Failure:** N/A Human Error: N/A Improper Procedures: N/A N/A Overpressurization: **Upset Condition:** N/A By-Pass Condition: N/A 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 Revised Maintenance: Yes Revised Training: N/A Revised Operating Procedures: N/A New Process Controls: N/A New Mitigation Systems: N/A Revised Emergency Response Plan: N/A Changed Process: N/A Reduced Inventory: N/A N/A None: Other Changes Introduced: N/A

### Chemicals in Accident History

Quantity Released (lbs): 150
Percent Weight: 100

Chemical Name: Vinyl acetate monomer [Acetic acid

ethenyl ester]

CAS Number: 108-05-4 Flammable/Toxic: Toxic

EPA Facility Identifier: 1000 0002 6795 Plan Sequence Number: 1000007280

# **Section 9. Emergency Response**

### Written Emergency Response (ER) Plan

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

Yes

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

Yes

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

Yes

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

Yes

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

Yes

### **Local Agency**

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

Newark O.E.M

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

(973) 733-3660