

Section 1. Registration Information

Source Identification

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|--------------------------------|--|
| Facility Name: | BENTON HARBOR-ST. JOSEPH JOINT WWTP |
| Parent Company #1 Name: | JOINT BOARD OF COMMISSIONERS |
| Submission Type: | Resubmission |
| Receipt Date: | June 2004 |
| Status: | Deregistered |
| Deregistration Effective Date: | May 2008 |

Facility Identification

| | |
|--------------|----------------|
| Facility ID: | 1000 0010 5236 |
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Dun and Bradstreet Numbers (DUNS)

| | |
|----------------|----------|
| Facility DUNS: | 34703603 |
|----------------|----------|

Facility Location Address

| | |
|-----------|-----------------|
| Street 1: | 269 ANCHORS WAY |
| Street 2: | N/A |
| City: | SAINT JOSEPH |
| State: | MI |
| ZIP: | 49085 |
| ZIP4: | N/A |
| County: | Berrien |

Facility Latitude and Longitude

| | |
|----------------------|-------------|
| Latitude (decimal): | 42.192900 |
| Longitude (decimal): | -086.470133 |

Local Emergency Planning Committee and Regulations

| | |
|--------------|---------------------|
| LEPC: | Berrien County LEPC |
| OSHA PSM: | Yes |
| EPCRA 302: | Yes |
| CAA Title V: | N/A |

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: | Sulfur dioxide (anhydrous) |
| CAS Number: | 7446-09-5 |
| Flammable/Toxic: | Toxic |

Process NAICS

| | |
|--------------------|-----------------------------|
| NAICS Code: | 22132 |
| NAICS Description: | Sewage Treatment Facilities |

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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|---|-----|
| 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):

Berrien County Sheriff's Office

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

(616) 983-7141