EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Section 1. Registration Information

Source Identification

Facility Name: ADC-Gary

Parent Company #1 Name: Anderson Development Company

Submission Type: Resubmission
Receipt Date: June 2004
Status: Deregistered
Deregistration Effective Date: September 2005

Facility Identification

Facility ID: 1000 0015 9017

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 74403296

Facility Location Address

Street 1: 3400 West 4th Avenue

 Street 2:
 N/A

 City:
 Gary

 State:
 IN

 ZIP:
 46406

 ZIP4:
 N/A

 County:
 Lake

Facility Latitude and Longitude

Latitude (decimal): 41.606667 Longitude (decimal): -087.379444

Local Emergency Planning Committee and Regulations

LEPC: Lake County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Process Chemicals

Program Level: Program Level 3 process

Chemical Name: 1,3-Butadiene
CAS Number: 106-99-0
Flammable/Toxic: Flammable

Process NAICS

NAICS Code: 325211

NAICS Description: Plastics Material and Resin

Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: October 2002

Time Accident Began (HH:MM): 20:30
NAICS Code of Process Involved: 325211

NAICS Description: Plastics Material and Resin

Manufacturing

Release Duration: 000 Hours 30 Minutes

Release Event

Gas Release:N/ALiquid Spill/Evaporation:YesFire:N/AExplosion:N/AUncontrolled/Runaway Reaction:N/A

Release Source

Storage Vessel: N/A
Piping: N/A
Process Vessel: N/A
Transfer Hose: N/A
Valve: N/A
Pump: N/A
Joint: N/A

Other Release Source: Faulty Gasket

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Woothor	Conditions	at the	Time of	Evont
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Wind Speed: N/A

Units: Meters/second

Direction: N/A
Temperature: N/A
Atmospheric Stability Class: N/A
Precipitation Present: N/A
Unknown 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:

Water Contamination:

N/A

Soil Contamination:

Other Environmental Damage:

N/A

Initiating Event

Initiating Event: Equipment Failure

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Contributing Factors

Equipment Failure: Yes N/A Human Error: 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: Notified Only

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A Yes Revised Maintenance: Revised Training: Yes **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): 63
Percent Weight: N/A

Chemical Name: 1,3-Butadiene
CAS Number: 106-99-0
Flammable/Toxic: Flammable

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Accident History ID: Accident 2

Date of Accident: May 2001
Time Accident Began (HH:MM): 17:30
NAICS Code of Process Involved: 325211

NAICS Description: Plastics Material and Resin

Manufacturing

Release Duration: 000 Hours 10 Minutes

Release Event

Gas Release:N/ALiquid Spill/Evaporation:YesFire:N/AExplosion:N/AUncontrolled/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

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

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

On-Site	e Impacts
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Employee or Contractor Deaths: 0
Public Responder Deaths: 0
Public Deaths: 0
Employee or Contractor Injuries: 0
Public Responder Injuries: 0
Public Injuries: 0
On-Site Property Damage (\$): 0

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:

Equipment Failure

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

Contributing Factors

Equipment Failure: Yes N/A Human Error: 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: Notified Only

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: Yes Yes Revised Maintenance: 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): 23
Percent Weight: N/A

Chemical Name: 1,3-Butadiene
CAS Number: 106-99-0
Flammable/Toxic: Flammable

EPA Facility Identifier: 1000 0015 9017 Plan Sequence Number: 32991

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):

Gary Fire department

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

(219) 881-4779