Facility Name: Cambrex Charles City, Inc

EPA Facility Identifier: 1000 0017 6579

Plan Sequence Number: 1000000895

Section 1. Registration Information

Source Identification

Facility Name: Cambrex Charles City, Inc Parent Company #1 Name: Cambrex Corporation

Submission Type: Resubmission
Receipt Date: June 2009
Status: Deregistered
Deregistration Effective Date: November 2012

Facility Identification

Facility ID: 1000 0017 6579

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 782974257

Facility Location Address

Street 1: 1205 11th Street

Street 2: N/A

City: Charles City

 State:
 IA

 ZIP:
 50616

 ZIP4:
 3466

 County:
 Floyd

Facility Latitude and Longitude

Latitude (decimal): 43.055833 Longitude (decimal): -092.693056

Local Emergency Planning Committee and Regulations

LEPC: NCREPD
OSHA PSM: Yes
EPCRA 302: Yes
CAA Title V: N/A

Facility Name: Cambrex Charles City, Inc

EPA Facility Identifier: 1000 0017 6579

Plan Sequence Number: 1000000895

Process Chemicals

Program Level: Program Level 3 process
Chemical Name: Allylamine [2-Propen-1-amine]

CAS Number: 107-11-9 Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 325199

NAICS Description: All Other Basic Organic Chemical

Manufacturing

Yes

NAICS Code: 325411

NAICS Description: Medicinal and Botanical Manufacturing

Section 6. Accident History

No records found.

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 Yes written emergency response plan?):

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

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

public and local agencies responding to accidental release?):

Healthcare (Does facility's ER plan Yes include information on emergency

health care?):

Facility Name: Cambrex Charles City, Inc

EPA Facility Identifier: 1000 0017 6579

Plan Sequence Number: 1000000895

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):

Charle City Fire Dept

(641) 257-6313