Facility Name: Jat Systems Inc

EPA Facility Identifier: 1000 0022 2243 Plan Sequence Number: 1000073343

Section 1. Registration Information

Source Identification

Facility Name: Jat Systems Inc

Parent Company #1 Name: N/A

Submission Type: Resubmission Receipt Date: October 2018

Facility Identification

Facility ID: 1000 0022 2243

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 13555 Back Valley Rd - D

Street 2: N/A

City: Sale Creek
State: TN
ZIP: 37373

ZIP4: N/A County: Hamilton

Facility Latitude and Longitude

Latitude (decimal): 35.34833 Longitude (decimal): -85.13722

Local Emergency Planning Committee and Regulations

LEPC: Hamilton County LEPC

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

Facility Name: Jat Systems Inc

EPA Facility Identifier: 1000 0022 2243 Plan Sequence Number: 1000073343

Process Chemicals

Program Level: Program Level 3 process Chemical Name: Formaldehyde (solution)

CAS Number: 50-00-0 Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 325613

NAICS Description: Surface Active Agent Manufacturing

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

regulated substance(s)?):

Community Plan (Is facility included in N/A 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

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

Healthcare (Does facility's ER plan N/A

include information on emergency health care?):

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):

Hamilton County LEPC

(423) 209-6900