

Section 1. Registration Information

Source Identification

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|-------------------------|------------------|
| Facility Name: | IMTT-Bayonne LLC |
| Parent Company #1 Name: | N/A |
| Submission Type: | Resubmission |
| Receipt Date: | January 2024 |

Facility Identification

| | |
|--------------|----------------|
| Facility ID: | 1000 0003 8835 |
|--------------|----------------|

Dun and Bradstreet Numbers (DUNS)

| | |
|----------------|-----------|
| Facility DUNS: | 154325815 |
|----------------|-----------|

Facility Location Address

| | |
|-----------|----------------------|
| Street 1: | 250 East 22nd Street |
| Street 2: | N/A |
| City: | Bayonne |
| State: | NJ |
| ZIP: | 07002 |
| ZIP4: | N/A |
| County: | Hudson |

Facility Latitude and Longitude

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|----------------------|-------------|
| Latitude (decimal): | 40.655556 |
| Longitude (decimal): | -074.111111 |

Local Emergency Planning Committee and Regulations

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|--------------|------------------|
| LEPC: | Bayonne City OEM |
| OSHA PSM: | Yes |
| EPCRA 302: | Yes |
| CAA Title V: | Yes |

Process Chemicals

| | |
|------------------|-------------------------|
| Program Level: | Program Level 3 process |
| Chemical Name: | Butane |
| CAS Number: | 106-97-8 |
| Flammable/Toxic: | Flammable |

Process NAICS

| | |
|--------------------|-------------------------------|
| NAICS Code: | 49319 |
| NAICS Description: | Other Warehousing and Storage |

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): | Bayonne Emergency Response Committee |
| Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated): | (201) 858-6960 |