Facility Name: Davis Pipe Inc.

EPA Facility Identifier: 1000 0011 5403 Plan Sequence Number: 9460

Section 1. Registration Information

Source Identification

Facility Name: Davis Pipe Inc.

Parent Company #1 Name: Premiere Pipe and Tube Group

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: June 2012

Facility Identification

Facility ID: 1000 0011 5403

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

 Street 1:
 250 Birch St

 Street 2:
 N/A

 City:
 Blountville

 State:
 TN

 ZIP:
 37617

 ZIP4:
 4758

 County:
 Sullivan

Facility Latitude and Longitude

Latitude (decimal): 36.529917 Longitude (decimal): -82.306028

Local Emergency Planning Committee and Regulations

LEPC: Sullivan Co. Intg. Em. Re Cncl

 OSHA PSM:
 N/A

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: Davis Pipe Inc.

EPA Facility Identifier: 1000 0011 5403 Plan Sequence Number: 9460

Process Chemicals

Program Level: Program Level 1 process

Hydrogen fluoride/Hydrofluoric acid Chemical Name:

(conc 50% or greater) [Hydrofluoric

acid]

CAS Number: 7664-39-3 Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 33121

NAICS Description: Iron and Steel Pipe and Tube Manufacturing from Purchased Steel

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

Community Plan (Is facility included in Yes written community emergency response plan?):

Facility Plan (Does facility have its own written emergency response plan?):

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

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

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

Yes

Yes

Facility Name: Davis Pipe Inc.

EPA Facility Identifier: 1000 0011 5403 Plan Sequence Number: 9460

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):

Sullivan Co. Emer. Mgt

(423) 323-6471