

Section 1. Registration Information

Source Identification

Facility Name:	Moss Point Mill
Parent Company #1 Name:	International Paper
Submission Type:	First Time
Receipt Date:	June 1999
Status:	Deregistered
Deregistration Effective Date:	September 2001

Facility Identification

Facility ID:	1000 0010 3416
--------------	----------------

Dun and Bradstreet Numbers (DUNS)

Facility DUNS:	8159717
----------------	---------

Facility Location Address

Street 1:	6901 Grierson Street
Street 2:	N/A
City:	Moss Point
State:	MS
ZIP:	39563
ZIP4:	1550
County:	Jackson

Facility Latitude and Longitude

Latitude (decimal):	30.413167
Longitude (decimal):	-88.4945

Local Emergency Planning Committee and Regulations

LEPC:	Jackson County LEPC
OSHA PSM:	Yes
EPCRA 302:	Yes
CAA Title V:	Yes

Process Chemicals

Program Level:	Program Level 3 process
Chemical Name:	Chlorine dioxide [Chlorine oxide (ClO ₂)]
CAS Number:	10049-04-4
Flammable/Toxic:	Toxic

Process NAICS

NAICS Code:	32211
NAICS Description:	Pulp Mills

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:	August 1998
Time Accident Began (HH:MM):	11:00
NAICS Code of Process Involved:	32211
NAICS Description:	Pulp Mills
Release Duration:	000 Hours 10 Minutes

Release Event

Gas Release:	N/A
Liquid Spill/Evaporation:	Yes
Fire:	N/A
Explosion:	N/A
Uncontrolled/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/A
Temperature:	N/A
Atmospheric Stability Class:	N/A
Precipitation Present:	N/A
Unknown Weather Conditions:	Yes

On-Site Impacts

Employee or Contractor Deaths:	0
Public Responder Deaths:	0
Public Deaths:	0
Employee or Contractor Injuries:	1
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:	N/A
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:	Human Error
-------------------	-------------

Contributing Factors

Equipment Failure:	N/A
Human Error:	N/A
Improper Procedures:	Yes
Overpressurization:	N/A
Upset Condition:	N/A
By-Pass Condition:	N/A
Maintenance Activity/Inactivity:	Yes
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:	No, not notified
-------------------------------	------------------

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment:	N/A
Revised Maintenance:	Yes
Revised Training:	N/A
Revised Operating Procedures:	Yes
New Process Controls:	N/A
New Mitigation Systems:	N/A
Revised Emergency Response Plan:	N/A
Changed Process:	N/A
Reduced Inventory:	N/A
None:	N/A
Other Changes Introduced:	N/A

Chemicals in Accident History

Quantity Released (lbs):	1
Percent Weight:	1.2
Chemical Name:	Chlorine dioxide [Chlorine oxide (ClO ₂)]
CAS Number:	10049-04-4
Flammable/Toxic:	Toxic

Accident History ID: Accident 2

Date of Accident:	October 1997
Time Accident Began (HH:MM):	08:45
NAICS Code of Process Involved:	32211
NAICS Description:	Pulp Mills
Release Duration:	001 Hours 00 Minutes

Release Event

Gas Release:	N/A
Liquid Spill/Evaporation:	Yes
Fire:	N/A
Explosion:	N/A
Uncontrolled/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:	Yes
Joint:	N/A
Other Release Source:	N/A

Weather Conditions at the Time of Event

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:	0
Public Responder Deaths:	0
Public Deaths:	0
Employee or Contractor Injuries:	1
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:	N/A
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
-------------------	-------------------

Contributing Factors

Equipment Failure:	Yes
Human Error:	N/A
Improper Procedures:	Yes
Overpressurization:	N/A
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:	No, not notified
-------------------------------	------------------

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment:	Yes
Revised Maintenance:	N/A
Revised Training:	Yes
Revised Operating Procedures:	Yes
New Process Controls:	N/A
New Mitigation Systems:	N/A
Revised Emergency Response Plan:	N/A
Changed Process:	N/A
Reduced Inventory:	N/A
None:	N/A
Other Changes Introduced:	N/A

Chemicals in Accident History

Quantity Released (lbs):	1
Percent Weight:	1.2
Chemical Name:	Chlorine dioxide [Chlorine oxide (ClO ₂)]
CAS Number:	10049-04-4
Flammable/Toxic:	Toxic

Section 9. Emergency Response

Written Emergency Response (ER) Plan

Community Plan (Is facility included in written community emergency response plan?):	N/A
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):

Jackson County Emergency Management

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

(228) 475-8848