Vista Polymers
A Division of
Vista Chemical Company

Highway 25
Post Office Box 91

Aberdeen, Mississippi 39730-0091
Phone (601) 369-8111

4

July 1, 1992

VISTA

EPCRA Reporting Center
P. O. Box 23779
Washington, DC 20026-3779

Dear Sirs:

Enclosed please find the Form R Reporting Package containing toxic chemical release reporting information for the Vista Polymers, Aberdeen, Mississippi facility, as required under Section 313, Title III of the Superfund Amendments and Reauthorization Act of 1986.

A total of seven (7) reports are included from our facility, concerning the following chemicals:

Chemical Name	CAS Number
Antimony Compounds	N010
Barium Compounds	N040
n-Dioctyl Phthalate	117-84-0
Hydrochloric Acid	7647-01-0
Lead Compounds	N420
Phthalic Anhydride	84-44-9
Vinyl Chloride	75-01-4

Our contact is Kenny Akins, who can be reached at (601) 369-3637. He is available should any questions or problems arise in your processing of this report.

I hereby certify that I have reviewed the attached information and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Sincerely,

R. W. Seymour
Plant Manager

enclosure

hardcopy: Mr. J. E. Maher
Mississippi Emergency Response Commission
P. O. Box 4501 Fondren Station
Jackson, MS 39216-0501

VAB.0001159125

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EPA FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Antimony Compounds

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
P.O. Box 23779
Washington, DC 20026-3779
ATTN: TOXIC CHEMICAL RELEASE INVENTORY

2. APPROPRIATE STATE OFFICE
(See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms)

[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

VAB.0001159126

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United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER	Toxic Chemical, Category, or Generic Name
39730VSTPLPOBOX	Antimony Compounds

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility				
4.3	Technical Contact	Name: KENNETH G. AKINS				Telephone Number (include area code): (601) 369-3637	
4.4	Public Contact	Name: BRUCE L. TREGO				Telephone Number (include area code): (601) 369-3618	
4.5	SIC Code (4-digit)	a. 2821	b. 2869	c. N/A	d.	e.	f.
4.6	Latitude and Longitude	Latitude: Degrees 33	Minutes 48	Seconds 49	Longitude: Degrees 88	Minutes 33	Seconds 34

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 11-527-0654 b. N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. MSD007031230 b. N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a. MS0001970 b. N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company [ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number [ ] NA (9 digits)	10-266-6872

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

N010

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Antimony Compounds

1.3 Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

a. ☐ Produce
b. ☐ Import

If produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impurity

3.2 Process the toxic chemical:

a. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging

3.3 Otherwise use the toxic chemical:

a. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

EPA Form 9350-1 (Rev. 4-92) Previous editions are obsolete

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[X] NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: NA				
5.3.2	Stream or Water Body Name:				
5.3.3	Stream or Water Body Name:				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY CODE: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-site EPA Identification Number (RCRA ID No.): ALD000622464

Off-Site Location Name: Chemical Waste Management, Inc.

Street Address: P. O. BOX 55

City: Emelle

County: Sumter

State: Alabama

Zip Code: 35459

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 1336	1. 0	1. M 40
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. ___ Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

VAB.0001159131

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b: 1 P11; 2; 3; 4; 5; 6; 7; 8	7A.1c	7A.1d	7A.1e
W		4	100 %	Yes ☐ No X
7A.2a	7A.2b: 1; 2; 3; 4; 5; 6; 7; 8	7A.2c	7A.2d	7A.2e
			%	Yes ☐ No ☐
7A.3a	7A.3b: 1; 2; 3; 4; 5; 6; 7; 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1; 2; 3; 4; 5; 6; 7; 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1; 2; 3; 4; 5; 6; 7; 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

VAB.0001159132

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Antimony Compounds

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Chemical Category or Generic Name: Antimony Compounds

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *				
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	1846	1336	1500	1700

8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	
8.9	Production ratio or activity index	1.13

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

VAE 0001159134

IMPORTANT: Type or print; read instructions before completing form)

Approval Expires: 11/92

A

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United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Barium Compounds

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 23779
   Washington, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

VAB.0001159135

EPA Form 9350-1 (Rev. 5/14/92) - Previous editions are obsolete

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EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility

		Name	Telephone Number (include area code)
4.3	Technical Contact	KENNETH G. AKINS	(601) 369-3637
4.4	Public Contact	BRUCE L. TREGO	(601) 369-3618

		a.	b.	c.	d.	e.	f.
4.5	SIC Code (4-digit)	2821	2869	N/A			

		Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
4.6	Latitude and Longitude	33	48	49	88	33	34

4.7	Dun & Bradstreet Number(s) (9 digits)	a.	11-527-0654
		b.	N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a.	MSD007031230
		b.	N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a.	MS0001970
		b.	N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a.	N/A
		b.	

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA (9 digits)	10-266-6872

A

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

N040

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Barium Compounds

1.3 Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

a. ☐ Produce
b. ☐ Import

If produce or import:
c. ☐ For on-site use/processing
d. ☐ For sale/distribution
e. ☐ As a byproduct
f. ☐ As an impurity

3.2 Process the toxic chemical:

a. ☐ As a reactant
b. ☒ As a formulation component
c. ☐ As an article component
d. ☐ Repackaging

3.3 Otherwise use the toxic chemical:

a. ☐ As a chemical processing aid
b. ☐ As a manufacturing aid
c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 04 (Enter two-digit code from instruction package.)

[redacted]

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER

39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name

Barium Compounds

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[X] NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name NA				
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

VAB.0001159138

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

VAB.0001159139

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

EPA FORM R

United States Environmental Protection Agency

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-site EPA Identification Number (RCRA ID No.): ALD000622464

Off-Site Location Name: Chemical Waste Management, Inc.

Street Address: P. O. Box 55

City: Emelle | County: Sumter

State: Alabama | Zip Code: 35459 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 462	1. 0	1. M 40
2. na	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 2 Off-site EPA Identification Number (RCRA ID No.): TXD982290140

Off-Site Location Name: Technical Environmental Systems, Inc.

Street Address: 500 Battleground Road

City: La Porte | County: Harris

State: Texas | Zip Code: 77571 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 125	1. 0	1. M 10
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] and indicate which Part II, Section 6.2 page this is, here. [1] (example: 1, 2, 3, etc.)

VAB.0001159140

EPA Form 9350-1 (Rev. 4/30/92) - Previous editions are obsolete

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 3 Off-site EPA Identification Number (RCRA ID No.): ALD070513767

Off-Site Location Name: M & M Chemical and Equipment Company, Inc.

Street Address: Highway 11 North

City: Attalla | County: Etowah

State: Alabama | Zip Code: 35954 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 32	1. 0	1. M 56
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 4 Off-site EPA Identification Number (RCRA ID No.): ALD981020894

Off-Site Location Name: Fisher Industrial Service, Inc.

Street Address: Route 9, Box 398-M

City: Gadsden | County: Etowah

State: Alabama | Zip Code: 35903 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 4	1. 0	1. M 56
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] **and indicate which Part II, Section 6.2 page this is, here.** [2] **(example: 1, 2, 3, etc.)**

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b: 1 P19; 2; 3; 4; 5; 6; 7; 8	7A.1c	7A.1d	7A.1e
L		3	0 %	Yes ☐ No X
7A.2a	7A.2b: 1 P11; 2; 3; 4; 5; 6; 7; 8	7A.2c	7A.2d	7A.2e
W		4	100 %	Yes ☐ No X
7A.3a	7A.3b: 1; 2; 3; 4; 5; 6; 7; 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1; 2; 3; 4; 5; 6; 7; 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1; 2; 3; 4; 5; 6; 7; 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Barium Compounds

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER	A
39730VSTPLPOBOX	
Chemical Category, or Generic Name	
Barium Compounds	

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *				
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site	40	36	40	20
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	198	587	600	300

8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	
8.9	Production ratio or activity index	1.13

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

A

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
P.O. Box 23779
Washington, DC 20026-3779
ATTN: TOXIC CHEMICAL RELEASE INVENTORY

2. APPROPRIATE STATE OFFICE
(See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

PORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
n-Dioctyl Phthalate

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility

4.3	Technical Contact	Name: KENNETH G. AKINS	Telephone Number (include area code): (601) 369-3637
4.4	Public Contact	Name: BRUCE L. TREGO	Telephone Number (include area code): (601) 369-3618

4.5	SIC Code (4-digit)	a. 2821	b. 2869	c. N/A	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		33	48	49	88	33	34

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 11-527-0654
		b. N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. MSD007031230
		b. N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a. MS0001970
		b. N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA	(9 digits) 10-266-6872

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	117-84-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	n-Dioctyl Phthalate
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. [X] Produce b. [ ] Import	If produce or import: c. [X] For on-site use/processing d. [X] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	**Process the toxic chemical:**	a. [ ] As a reactant b. [X] As a formulation component	c. [ ] As an article component d. [ ] Repackaging
3.3	**Otherwise use the toxic chemical:**	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	05	(Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/ year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[X] NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	James Creek		46	M	NA
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

☐ Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER	Toxic Chemical, Category, or Generic Name
39730VSTPLPOBOX	n-Dioctyl Phthalate

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-site EPA Identification Number (RCRA ID No.): ALD070513767

Off-Site Location Name: M & M Chemical and Equipment Company, Inc.

Street Address: Highway 11 North

City: Attalla | County: Etowah

State: Alabama | Zip Code: 35954 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 10429	1. 0	1. M 56
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 2 Off-site EPA Identification Number (RCRA ID No.): ALD981020894

Off-Site Location Name: Fisher Industrial Service, Inc.

Street Address: Route 9, Box 398-M

City: Gadsden | County: Etowah

State: Alabama | Zip Code: 35903 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 6089	1. 0	1. M 56
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] and indicate which Part II, Section 6.2 page this is, here. [1] (example: 1, 2, 3, etc.)

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 3 Off-site EPA Identification Number (RCRA ID No.): ALD000622464

Off-Site Location Name: Chemical Waste Management, Inc.

Street Address: P. O. Box 55

City: Emelle

County: Sumter

State: Alabama

Zip Code: 35459

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 387	1. 0	1. M 40
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. ___ Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] **and indicate which Part II, Section 6.2 page this is, here.** [2] **(example: 1, 2, 3, etc.)**

VAB.0001159151

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1: P19 2: 3: 4: 5: 6: 7: 8:	7A.1c	7A.1d	7A.1e
L		3	0 %	Yes ☐ No ☒
7A.2a	7A.2b 1: B11 2: 3: 4: 5: 6: 7: 8:	7A.2c	7A.2d	7A.2e
W		3	97 %	Yes ☒ No ☐
7A.3a	7A.3b 1: 2: 3: 4: 5: 6: 7: 8:	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b 1: 2: 3: 4: 5: 6: 7: 8:	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b 1: 2: 3: 4: 5: 6: 7: 8:	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: n-Dioctyl Phthalate

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Chemical Category or Generic Name
n-Dioctyl Phthalate

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *	39	46	50	50
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site	21345	16518	19000	19000
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	7999	387	500	500
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)				
8.9	Production ratio or activity index			1.02	

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES	NO
			X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Hydrochloric Acid

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 23779
   Washington, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

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United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY NUMBER	Toxic Chemical, Category, or Generic Name
39730VSTPLPOBOX	Hydrochloric Acid

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility				
4.3	Technical Contact	Name: KENNETH G. AKINS			Telephone Number (include area code): (601) 369-3637		
4.4	Public Contact	Name: BRUCE L. TREGO			Telephone Number (include area code): (601) 369-3618		
4.5	SIC Code (4-digit)	a. 2821	b. 2869	c. N/A	d.	e.	f.
4.6	Latitude and Longitude	Latitude: Degrees: 33	Minutes: 48	Seconds: 49	Longitude: Degrees: 88	Minutes: 33	Seconds: 34

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 11-527-0654
		b. N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. MSD007031230
		b. N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a. MS0001970
		b. N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA: VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits): 10-266-6872

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Hydrochloric Acid

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

7647-01-0

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Hydrochloric Acid

1.3 Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

- a. [X] Produce
- b. [ ] Import

If produce or import:

- c. [ ] For on-site use/processing
- d. [ ] For sale/distribution
- e. [X] As a byproduct
- f. [ ] As an impurity

3.2 Process the toxic chemical:

- a. [ ] As a reactant
- b. [ ] As a formulation component
- c. [ ] As an article component
- d. [ ] Repackaging

3.3 Otherwise use the toxic chemical:

- a. [ ] As a chemical processing aid
- b. [ ] As a manufacturing aid
- c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 [02] (Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Hydrochloric Acid

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	272	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: James Creek		0	M	NA
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

VAB.0001159158

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Hydrochloric Acid

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

VAB.0001159159

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Hydrochloric Acid

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. ___ Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. ___ Off-site EPA Identification Number (RCRA ID No.):

Off-Site Location Name:

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box ☐ and indicate which Part II, Section 6.2 page this is, here. ☐ (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Hydrochloric Acid

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b — 1: A03; 2: ; 3: ; 4: ; 5: ; 6: ; 7: ; 8:	7A.1c	7A.1d	7A.1e
A		1	99.4 %	Yes ☐ No X
7A.2a	7A.2b — 1: C11; 2: ; 3: ; 4: ; 5: ; 6: ; 7: ; 8:	7A.2c	7A.2d	7A.2e
W		1	100 %	Yes X No ☐
7A.3a	7A.3b — 1: ; 2: ; 3: ; 4: ; 5: ; 6: ; 7: ; 8:	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b — 1: ; 2: ; 3: ; 4: ; 5: ; 6: ; 7: ; 8:	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b — 1: ; 2: ; 3: ; 4: ; 5: ; 6: ; 7: ; 8:	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Hydrochloric Acid

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Chemical Category, or Generic Name
Hydrochloric Acid

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *	283	272	300	300
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site	44010	42444	45000	45000
8.7	Quantity treated off-site				

8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	
8.9	Production ratio or activity index	1.11

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

EPA FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Lead Compounds

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 23779
   Washington, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

VAB.0001159164

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United States Environmental Protection Agency

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility

		Name	Telephone Number (include area code)
4.3	Technical Contact	KENNETH G. AKINS	(601) 369-3637
4.4	Public Contact	BRUCE L. TREGO	(601) 369-3618

		a.	b.	c.	d.	e.	f.
4.5	SIC Code (4-digit)	2821	2869	N/A			

		Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
4.6	Latitude and Longitude	33	48	49	88	33	34

4.7	Dun & Bradstreet Number(s) (9 digits)	a.	11-527-0654
		b.	N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a.	MSD007031230
		b.	N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a.	MS0001970
		b.	N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a.	N/A
		b.	

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA	(9 digits) 10-266-6872

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

N420

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Lead Compounds

1.3 Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

- a. [ ] Produce
- b. [ ] Import

If produce or import:

- c. [ ] For on-site use/processing
- d. [ ] For sale/distribution
- e. [ ] As a byproduct
- f. [ ] As an impurity

3.2 Process the toxic chemical:

- a. [ ] As a reactant
- b. [X] As a formulation component
- c. [ ] As an article component
- d. [ ] Repackaging

3.3 Otherwise use the toxic chemical:

- a. [ ] As a chemical processing aid
- b. [ ] As a manufacturing aid
- c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 [05] (Enter two-digit code from instruction package.)

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/ year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name NA				
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

VAB.000159167

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

EPA Form 9350-1 (Rev. 5/14/92) - Previous editions are obsolete.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): ALD000622464

Off-Site Location Name: Chemical Waste Management, Inc.

Street Address: P. O. Box 55

City: Emelle

County: Sumter

State: Alabama

Zip Code: 35459

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 5043	1. 0	1. M 40
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

VAB.0001159169

EPA Form 9350-1 (Rev. 4/30/92) - Previous editions are obsolete.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour
C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Lead Compounds

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b: 1 P11; 2; 3; 4; 5; 6; 7; 8	7A.1c	7A.1d	7A.1e
W		4	100 %	Yes ☐ No X
7A.2a	7A.2b: 1 P12; 2; 3; 4; 5; 6; 7; 8	7A.2c	7A.2d	7A.2e
A		2	99.99 %	Yes ☐ No X
7A.3a	7A.3b: 1; 2; 3; 4; 5; 6; 7; 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1; 2; 3; 4; 5; 6; 7; 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1; 2; 3; 4; 5; 6; 7; 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

VAB.0001159170

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Lead Compounds

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

VAB.0001159171

EPA

United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Chemical Category, or Generic Name: Lead Compounds

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *	7	7	10	10
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	4016	3511	3500	3000
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)				
8.9	Production ratio or activity index				1.13

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a. C	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	☐	X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

VAB.0001159172

EPA FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

United States Environmental Protection Agency

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Phthalic Anhydride

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 23779
   Washington, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
PHthalic Anhydride

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility
4.3	Technical Contact	Name: KENNETH G. AKINS	Telephone Number (include area code): (601) 369-3637
4.4	Public Contact	Name: BRUCE L. TREGO	Telephone Number (include area code): (601) 369-3618

4.5 SIC Code (4-digit)	a.	b.	c.	d.	e.	f.
	2821	2869	N/A			

4.6 Latitude and Longitude	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	88	33	34

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 11-527-0654
		b. N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. MSD007031230
		b. N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a. MS0001970
		b. N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company: [ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number: [ ] NA (9 digits)	10-266-6872

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Phthalic Anhydride

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)

85-44-9

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

Phthalic Anhydride

1.3 Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:

- a. ☐ Produce
- b. ☐ Import

If produce or import:

- c. ☐ For on-site use/processing
- d. ☐ For sale/distribution
- e. ☐ As a byproduct
- f. ☐ As an impurity

3.2 Process the toxic chemical:

- a. ☒ As a reactant
- b. ☐ As a formulation component
- c. ☐ As an article component
- d. ☐ Repackaging

3.3 Otherwise use the toxic chemical:

- a. ☐ As a chemical processing aid
- b. ☐ As a manufacturing aid
- c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 05 (Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Phthalic Anhydride

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/ year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[X] NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name NA				
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Phthalic Anhydride

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
NA			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Phthalic Anhydride

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-site EPA Identification Number (RCRA ID No.): TXD982290140

Off-Site Location Name: Technical Environmental Systems, Inc.

Street Address: 500 Battleground Road

City: La Porte

County: Harris

State: Texas

Zip Code: 77571

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 325	1. 0	1. M 50
2. NA	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Phthalic Anhydride

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b: 1 A03, 2 P99, 3, 4, 5, 6, 7, 8	7A.1c	7A.1d	7A.1e
A		1	100 %	Yes ☐ No X
7A.2a	7A.2b: 1 P12, 2 P99, 3, 4, 5, 6, 7, 8	7A.2c	7A.2d	7A.2e
A		1	100 %	Yes ☐ No X
7A.3a	7A.3b: 1, 2, 3, 4, 5, 6, 7, 8	7A.3c	7A.3d	7A.3e
			%	Yes ☐ No ☐
7A.4a	7A.4b: 1, 2, 3, 4, 5, 6, 7, 8	7A.4c	7A.4d	7A.4e
			%	Yes ☐ No ☐
7A.5a	7A.5b: 1, 2, 3, 4, 5, 6, 7, 8	7A.5c	7A.5d	7A.5e
			%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER

39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name

Phthalic Anhydride

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Chemical Category, or Generic Name: Phthalic Anhydride

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *				
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	2024	325	500	500

8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	
8.9	Production ratio or activity index	1.02

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a. C	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	☐	X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Toxic Chemical, Category, or Generic Name
Vinyl Chloride

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 23779
   Washington, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 91

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:

ROBERT W. SEYMOUR/PLANT MANAGER

Signature: Robert W. Seymour

Date Signed: 7/1/92

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: VISTA POLYMERS

TRI Facility ID Number: 39730VSTPLPOBOX

Street Address: HIGHWAY 25 SOUTH

City: ABERDEEN

County: MONROE

State: MISSISSIPPI

Zip Code: 39730

Mailing Address (if different from street address): P. O. BOX 91

City: ABERDEEN

State: MISSISSIPPI

Zip Code: 39730

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER	Toxic Chemical, Category, or Generic Name
39730VSTPLPOBOX	Vinyl Chloride

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [X] An entire facility	b. [ ] Part of a facility				
4.3	Technical Contact	Name: KENNETH G. AKINS				Telephone Number (include area code): (601) 369-3637	
4.4	Public Contact	Name: BRUCE L. TREGO				Telephone Number (include area code): (601) 369-3618	
4.5	SIC Code (4-digit)	a. 2821	b. 2869	c. N/A	d.	e.	f.
4.6	Latitude and Longitude	Latitude: Degrees: 33	Minutes: 48	Seconds: 49	Longitude: Degrees: 88	Minutes: 33	Seconds: 34

4.7	Dun & Bradstreet Number(s) (9 digits)	a.	11-527-0654
		b.	N/A
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a.	MSD007031230
		b.	N/A
4.9	Facility NPDES Permit Number(s) (9 characters)	a.	MS0001970
		b.	N/A
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a.	N/A
		b.	

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	VISTA CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA (9 digits)	10-266-6872

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name
Vinyl Chloride

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 75-01-4
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Vinyl Chloride
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing d. [ ] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	**Process the toxic chemical:**	a. [X] As a reactant b. [ ] As a formulation component	c. [ ] As an article component d. [ ] Repackaging
3.3	**Otherwise use the toxic chemical:**	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	07 (Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Vinyl Chloride

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/ year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	☐ NA	4010	E	
5.2	Stack or point air emissions	☐ NA	26834	M	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name James Creek		27	M	NA
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	☒ NA			
5.5	Releases to land on-site				
5.5.1	Landfill	☒ NA			
5.5.2	Land treatment/ application farming	☒ NA			
5.5.3	Surface impoundment	☒ NA			
5.5.4	Other disposal	☒ NA			

☐ Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Vinyl Chloride

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	6.1.B.__ POTW Name
NA	
Street Address	Street Address
City / County	City / County
State / Zip Code	State / Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

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Range Codes: A = 1 - 10 pounds; B = 11 - 499 pou
C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Vinyl Chloride

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-site EPA Identification Number (RCRA ID No.): TXD982290140

Off-Site Location Name: Technical Environmental Systems, Inc.

Street Address: 500 Battleground Road

City: La Porte | County: Harris

State: Texas | Zip Code: 77571 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 250	1. 0	1. M 72
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name:

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

VAB 000159187

EPA Form 9350-1 (Rev. 4/30/92) - Previous editions are obsolete

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pour
C = 500 - 999 pounds

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER	Toxic Chemical, Category, or Generic Name
39730VSTPLPOBOX	Vinyl Chloride

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b: 1 P41, 2 B11, 3, 4, 5, 6, 7, 8	7A.1c	7A.1d	7A.1e
W		4	84 %	Yes X / No
7A.2a	7A.2b: 1 P42, 2, 3, 4, 5, 6, 7, 8	7A.2c	7A.2d	7A.2e
S		2	99.95%	Yes X / No
7A.3a	7A.3b: 1 F99, 2, 3, 4, 5, 6, 7, 8	7A.3c	7A.3d	7A.3e
A		1	99.99%	Yes X / No
7A.4a	7A.4b: 1, 2, 3, 4, 5, 6, 7, 8	7A.4c	7A.4d	7A.4e
			%	Yes / No
7A.5a	7A.5b: 1, 2, 3, 4, 5, 6, 7, 8	7A.5c	7A.5d	7A.5e
			%	Yes / No

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 39730VSTPLPOBOX

Toxic Chemical, Category, or Generic Name: Vinyl Chloride

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
39730VSTPLPOBOX
Chemical Category, or Generic Name
Vinyl Chloride

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A 1990 (pounds/year)	Column B 1991 (pounds/year)	Column C 1992 (pounds/year)	Column D 1993 (pounds/year)
8.1	Quantity released *	64005	27007	23000	23000
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site	0	250	0	0

8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	
8.9	Production ratio or activity index	1.11

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W58	a. T06	b. T04	c. T01
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a. C	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.