

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

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(Important: Type or print; read instructions before completing form.)



U.S. Environmental Protection Agency

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

EPA FORM
R**PART I.
FACILITY
IDENTIFICATION
INFORMATION**

(This space for your optional use.)

Public reporting burden for this collection of information is estimated to vary from 30 to 34 hours per response, with an average of 32 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), US EPA, 401 M St., SW, Washington, D.C. 20460 Attn: TRI Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget Paperwork Reduction Project (2070-0093), Washington, D.C. 20503.

1.	1.1 Are you claiming the chemical identity on page 3 trade secret? [] Yes (Answer question 1.2; Attach substantiation forms.) [X] No (Do not answer 1.2; Go to question 1.3.)	1.2 If "Yes" in 1.1, is this copy: [] Sanitized [] Unsanitized	1.3 Reporting Year 19 <u>90</u>
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2. CERTIFICATION (Read and sign after completing all 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

R. W. Seymour/Plant Manager

Signature

Date signed

June 25, 1991

3. FACILITY IDENTIFICATION

3.1	Facility or Establishment Name	
	39730VSTPLPOBOX VISTA POLYMERS P. O. BOX 91, HWY 25 ABERDEEN MS	
	39730	
	State	
	TRI Facility Identification Number	

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 G)

3.2	This report contains information for (Check only one): a. [X] An entire facility b. [] Part of a facility.					
3.3	Technical Contact Kenneth G. Akins				Telephone Number (include area code) 601-369-3637	
3.4	Public Contact Bruce L. Trego				Telephone Number (include area code) 601-369-3618	
3.5	SIC Code (4 digit) a. 2821		b. 2869	c. n/a	d.	e. f.
3.6	Latitude Degrees Minutes Seconds 33 48 49			Longitude Degrees Minutes Seconds 88 33 34		
3.7	Dun & Bradstreet Number(s) a. 11-527-0654				b. N/A	
3.8	EPA Identification Number(s) (RCRA I.D. No.) a. MSD007031230				b. N/A	
3.9	NPDES Permit Number(s) a. MS0001970				b. N/A	
3.10	Receiving Streams or Water Bodies (enter one name per box) a. James Creek				b. N/A	
	c.				d.	
	e.				f.	
3.11	Underground Injection Well Code (UIC) Identification Number(s) a. N/A b.					

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company Vista Chemical Company	4.2	Parent Company's Dun & Bradstreet Number 10-266-6872
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(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART II. OFF-SITE LOCATIONS TO WHICH TOXIC
CHEMICALS ARE TRANSFERRED IN WASTES

(This space for your optional use.)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)			
1.1 POTW name N/A		1.2 POTW name	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE).			
2.1 Off-site location name Chemical Waste Management, Inc.		2.2 Off-site location name Technical Environmental Systems, Inc.	
EPA Identification Number (RCRA ID. No.) ALD000622464		EPA Identification Number (RCRA ID. No.) TXD982290140	
Street Address P. O. Box 55		Street Address 500 Battleground Road	
City Emelle	County Sumter	City La Porte	County Harris
State Alabama	Zip 35459	State Texas	Zip 77571
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [X] No	
2.3 Off-site location name Chemical Waste Management, Inc.		2.4 Off-site location name N/A	
EPA Identification Number (RCRA ID. No.) LAD000777201		EPA Identification Number (RCRA ID. No.)	
Street Address Route 2, John Brandon Road		Street Address	
City Carlyss	County Calcasieu	City	County
State Louisiana	Zip 70663	State	Zip
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [] No	
2.5 Off-site location name		2.6 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [] Yes [] No		Is location under control of reporting facility or parent company? [] Yes [] No	
[] Check if additional pages of Part II are attached. How many? _____			

(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

1.1	[Reserved]
1.2	CAS Number (Enter only one number exactly as it appears on the 313 list. Enter NA if reporting a chemical category.) N/A
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.) Lead Compounds
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is checked "Yes." Generic name must be structurally descriptive.)

MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

2. Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)

3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

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

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

04 (enter code)

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

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year)		B. Basis of Estimate (enter code)	C. % From Stormwater
		A.1 Reporting Ranges 1-10 11-499 500-999	A.2 Enter Estimate		
5.1 Fugitive or non-point air emissions	5.1a	[] [] []	N/A	5.1b ☐	
5.2 Stack or point air emissions	5.2a	[] [] []	7	5.2b ☒ E	
5.3 Discharges to receiving streams or water bodies (Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	5.3.1 ☐	5.3.1a [] [] []	N/A	5.3.1b ☐	5.3.1c N/A %
	5.3.2 ☐	5.3.2a [] [] []		5.3.2b ☐	5.3.2c %
	5.3.3 ☐	5.3.3a [] [] []		5.3.3b ☐	5.3.3c %
5.4 Underground Injection	5.4a	[] [] []	N/A	5.4b ☐	
5.5 Releases to land	5.5.1 On-site landfill	5.5.1a [] [] []	N/A	5.5.1b ☐	
	5.5.2 Land treatment/application farming	5.5.2a [] [] []		5.5.2b ☐	
	5.5.3 Surface impoundment	5.5.3a [] [] []		5.5.3b ☐	
	5.5.4 Other disposal	5.5.4a [] [] []		5.5.4b ☐	

[] (Check if additional information is provided on Part IV-Supplemental Information.)

(Important: Type or print; read instructions before completing form.)

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EPA FORM R

PART III. CHEMICAL-SPECIFIC INFORMATION
(continued)

(This space for your optional use.)

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/yr)		B. Basis of Estimate (enter code)	C. Type of Treatment/Disposal (enter code)
	A.1 Reporting Ranges 1-10 11-499 500-999	A.2 Enter Estimate		
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.) ☐ 1 ☐	[] [] []	N/A	6.1.1b ☐	
6.2.1 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐ 1	[] [] []	2629	6.2.1b ☐ 0	6.2.1c ☐ M ☐ 7 ☐ 2
6.2.2 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐ 3	[] [] []	30	6.2.2b ☐ 0	6.2.2c ☐ M ☐ 7 ☐ 2
6.2.3 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐	[] [] []	N/A	6.2.3b ☐	6.2.3c ☐ M ☐

☐ (Check if additional information is provided on Part IV-Supplemental Information.)

7. WASTE TREATMENT METHODS AND EFFICIENCY

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

A. General Wastestream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes No
7.1a ☐ W	7.1b ☐ P ☐ 1 ☐ 1	7.1c ☐ 4	7.1d [] []	7.1e 100 %	7.1f [] [] ☒ X
7.2a ☐	7.2b ☐ ☐ ☐	7.2c ☐	7.2d [] []	7.2e %	7.2f [] []
7.3a ☐	7.3b ☐ ☐ ☐	7.3c ☐	7.3d [] []	7.3e %	7.3f [] []
7.4a ☐	7.4b ☐ ☐ ☐	7.4c ☐	7.4d [] []	7.4e %	7.4f [] []
7.5a ☐	7.5b ☐ ☐ ☐	7.5c ☐	7.5d [] []	7.5e %	7.5f [] []
7.6a ☐	7.6b ☐ ☐ ☐	7.6c ☐	7.6d [] []	7.6e %	7.6f [] []
7.7a ☐	7.7b ☐ ☐ ☐	7.7c ☐	7.7d [] []	7.7e %	7.7f [] []
7.8a ☐	7.8b ☐ ☐ ☐	7.8c ☐	7.8d [] []	7.8e %	7.8f [] []
7.9a ☐	7.9b ☐ ☐ ☐	7.9c ☐	7.9d [] []	7.9e %	7.9f [] []
7.10a ☐	7.10b ☐ ☐ ☐	7.10c ☐	7.10d [] []	7.10e %	7.10f [] []

☐ (Check if additional information is provided on Part IV-Supplemental Information.)

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Wastes Prior to Treatment or Disposal		C. Index	D. Reason for Action (enter code)
☐ M	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-)) ☐ + ☐ - %	☐ R

(Important: Type or print; read instructions before completing form.)

 EPA U.S. Environmental Protection Agency	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	Public reporting burden for this collection of information is estimated to vary from 30 to 34 hours per response, with an average of 32 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), US EPA, 401 M St., SW, Washington, D.C. 20460 Attn: TRI Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget Paperwork Reduction Project (2070-0093), Washington, D.C. 20503.
EPA FORM R	PART I. FACILITY IDENTIFICATION INFORMATION	(This space for your optional use.)

1.	1.1 Are you claiming the chemical identity on page 3 trade secret? ☐ Yes (Answer question 1.2; Attach substantiation forms.) ☒ No (Do not answer 1.2; Go to question 1.3.)	1.2 If "Yes" in 1.1, is this copy: ☐ Sanitized ☐ Unsanitized	1.3 Reporting Year 19 <u>90</u>
----	--	---	------------------------------------

2. CERTIFICATION (Read and sign after completing all 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
R. W. Seymour/Plant Manager

Signature *R. W. Seymour* Date signed June 25, 1991

3. FACILITY IDENTIFICATION Facility or Establishment Name <u>39730VSTPLPOBOX</u> <u>VISTA POLYMERS</u> <u>P. O. BOX 91, HWY 25</u> <u>ABERDEEN MS</u> <u>39730</u> State <u>MS</u> TRI Facility Identification Number _____	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 G)
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3.2	This report contains information for (Check only one): a. ☒ An entire facility b. ☐ Part of a facility.					
3.3	Technical Contact <u>Kenneth G. Akins</u>				Telephone Number (include area code) <u>601-369-3637</u>	
3.4	Public Contact <u>Bruce L. Trego</u>				Telephone Number (include area code) <u>601-369-3618</u>	
3.5	SIC Code (4 digit) a. <u>2821</u>		b. <u>2869</u>	c. <u>n/a</u>	d. _____	e. _____
3.6	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	88	33	34
3.7	Dun & Bradstreet Number(s) a. <u>11-527-0654</u>			b. <u>N/A</u>		
3.8	EPA Identification Number(s) (RCRA I.D. No.) a. <u>MSD007031230</u>			b. <u>N/A</u>		
3.9	NPDES Permit Number(s) a. <u>MS0001970</u>			b. <u>N/A</u>		
3.10	Receiving Streams or Water Bodies (enter one name per box) a. <u>James Creek</u>			b. <u>N/A</u>		
	c. _____			d. _____		
	e. _____			f. _____		
3.11	Underground Injection Well Code (UIC) Identification Number(s) a. <u>N/A</u>			b. _____		

4. PARENT COMPANY INFORMATION	
4.1 Name of Parent Company <u>Vista Chemical Company</u>	4.2 Parent Company's Dun & Bradstreet Number <u>10-266-6872</u>

(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART II. OFF-SITE LOCATIONS TO WHICH TOXIC
CHEMICALS ARE TRANSFERRED IN WASTES

(This space for your optional use.)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)

1.1 POTW name N/A		1.2 POTW name	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip

2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE).

2.1 Off-site location name Chemical Waste Management, Inc.		2.2 Off-site location name Technical Environmental Systems, Inc.	
EPA Identification Number (RCRA ID. No.) ALD000622464		EPA Identification Number (RCRA ID. No.) TXD982290140	
Street Address P. O. Box 55		Street Address 500 Battleground Road	
City Emelle	County Sumter	City La Porte	County Harris
State Alabama	Zip 35459	State Texas	Zip 77571
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [X] No	

2.3 Off-site location name Chemical Waste Management, Inc.		2.4 Off-site location name N/A	
EPA Identification Number (RCRA ID. No.) LAD000777201		EPA Identification Number (RCRA ID. No.)	
Street Address Route 2, John Brandon Road		Street Address	
City Carlyss	County Calcasieu	City	County
State Louisiana	Zip 70663	State	Zip
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [] No	
2.5 Off-site location name		2.6 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [] Yes [] No		Is location under control of reporting facility or parent company? [] Yes [] No	
[] Check if additional pages of Part II are attached. How many? _____			

(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)					
1.1	[Reserved]				
1.2	CAS Number (Enter only one number exactly as it appears on the 313 list. Enter NA if reporting a chemical category.) 85-44-9				
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.) Phthalic Anhydride				
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is checked "Yes." Generic name must be structurally descriptive.)				
2. MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)					
2.	Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)				
3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)					
3.1	Manufacture the chemical:	a. ☐ Produce	If produce or import:		
		b. ☐ Import	c. ☐ For on-site use/processing	d. ☐ For sale/distribution	e. ☐ As a byproduct
3.2	Process the chemical:	a. ☒ As a reactant	b. ☐ As a formulation component	c. ☐ As an impurity	
		d. ☐ Repackaging only			
3.3	Otherwise use the chemical:	a. ☐ As a chemical processing aid	b. ☐ As a manufacturing aid	c. ☐ Ancillary or other use	
4. MAXIMUM AMOUNT OF THE CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR					
05 (enter code)					
5. RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE					
You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year)		B. Basis of Estimate (enter code)	C. % From Stormwater
		A.1 Reporting Ranges 1-10 11-499 500-999	A.2 Enter Estimate		
5.1 Fugitive or non-point air emissions	5.1a	☐ ☐ ☐	N/A	5.1b ☐	
5.2 Stack or point air emissions	5.2a	☐ ☐ ☐	N/A	5.2b ☐	
5.3 Discharges to receiving streams or water bodies (Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	5.3.1 ☐	5.3.1a ☐ ☐ ☐	N/A	5.3.1b ☐	5.3.1c N/A %
	5.3.2 ☐	5.3.2a ☐ ☐ ☐		5.3.2b ☐	5.3.2c %
	5.3.3 ☐	5.3.3a ☐ ☐ ☐		5.3.3b ☐	5.3.3c %
5.4 Underground Injection	5.4a	☐ ☐ ☐	N/A	5.4b ☐	
5.5 Releases to land	5.5.1 On-site landfill	5.5.1a ☐ ☐ ☐	N/A	5.5.1b ☐	
	5.5.2 Land treatment/application farming	5.5.2a ☐ ☐ ☐		5.5.2b ☐	
	5.5.3 Surface impoundment	5.5.3a ☐ ☐ ☐		5.5.3b ☐	
	5.5.4 Other disposal	5.5.4a ☐ ☐ ☐		5.5.4b ☐	
[] (Check if additional information is provided on Part IV-Supplemental Information.)					

(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION
 (continued)

(This space for your optional use.)

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/yr)		B. Basis of Estimate (enter code)	C. Type of Treatment/Disposal (enter code)
	A.1 Reporting Ranges 1-10 11-499 500-999	A.2 Enter Estimate		
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.) ☐ ☐	[] [] []	N/A	6.1.1b ☐	
6.2.1 Other off-site location (enter location number from Part II, Section 2.) ☐ ☐	[] [] []	2024	6.2.1b ☐ M	6.2.1c ☐ M ☐ 7 ☐ 2
6.2.2 Other off-site location (enter location number from Part II, Section 2.) ☐ ☐	[] [] []	N/A	6.2.2b ☐	6.2.2c ☐ M ☐ ☐
6.2.3 Other off-site location (enter location number from Part II, Section 2.) ☐ ☐	[] [] []		6.2.3b ☐	6.2.3c ☐ M ☐ ☐
[] (Check if additional information is provided on Part IV-Supplemental Information.)				

7. WASTE TREATMENT METHODS AND EFFICIENCY
☒ Not Applicable (NA) - Check if no on-site treatment is applied to any waste stream containing the chemical or chemical category

A. General Wastestream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes No
7.1a ☐	7.1b ☐ ☐ ☐	7.1c ☐	7.1d []	7.1e %	7.1f [] []
7.2a ☐	7.2b ☐ ☐ ☐	7.2c ☐	7.2d []	7.2e %	7.2f [] []
7.3a ☐	7.3b ☐ ☐ ☐	7.3c ☐	7.3d []	7.3e %	7.3f [] []
7.4a ☐	7.4b ☐ ☐ ☐	7.4c ☐	7.4d []	7.4e %	7.4f [] []
7.5a ☐	7.5b ☐ ☐ ☐	7.5c ☐	7.5d []	7.5e %	7.5f [] []
7.6a ☐	7.6b ☐ ☐ ☐	7.6c ☐	7.6d []	7.6e %	7.6f [] []
7.7a ☐	7.7b ☐ ☐ ☐	7.7c ☐	7.7d []	7.7e %	7.7f [] []
7.8a ☐	7.8b ☐ ☐ ☐	7.8c ☐	7.8d []	7.8e %	7.8f [] []
7.9a ☐	7.9b ☐ ☐ ☐	7.9c ☐	7.9d []	7.9e %	7.9f [] []
7.10a ☐	7.10b ☐ ☐ ☐	7.10c ☐	7.10d []	7.10e %	7.10f [] []
[] (Check if additional information is provided on Part IV-Supplemental Information.)					

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Wastes Prior to Treatment or Disposal		C. Index	D. Reason for Action (enter code)
☐ M	Current reporting year (pounds/year)	Prior year (pounds/year) ☐ + ☐ - %	☐ ☐	☐ R

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

Page 1 of 5

(Important: Type or print; read instructions before completing form.)



U.S. Environmental Protection Agency

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

EPA FORM
R**PART I.
FACILITY
IDENTIFICATION
INFORMATION**

(This space for your optional use.)

Public reporting burden for this collection of information is estimated to vary from 30 to 34 hours per response, with an average of 32 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), US EPA, 401 M St., SW, Washington, D.C. 20460 Attn: TRI Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget Paperwork Reduction Project (2070-0093), Washington, D.C. 20503.

1.	1.1 Are you claiming the chemical identity on page 3 trade secret? [] Yes (Answer question 1.2; Attach substantiation forms.) [X] No (Do not answer 1.2; Go to question 1.3.)	1.2 If "Yes" in 1.1, is this copy: [] Sanitized [] Unsanitized	1.3 Reporting Year 19 <u>90</u>
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2. CERTIFICATION (Read and sign after completing all 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

R. W. Seymour/Plant Manager

Signature

Date signed

June 25, 1991

3. FACILITY IDENTIFICATION

3.1	Facility or Establishment Name	
	39730VSTPLPOBOX VISTA POLYMERS P. O. BOX 91, HWY 25 ABERDEEN MS	
	State	39730
	TRI Facility Identification Number	

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 G)

3.2	This report contains information for (Check only one): a. [X] An entire facility b. [] Part of a facility.					
3.3	Technical Contact Kenneth G. Akins			Telephone Number (include area code) 601-369-3637		
3.4	Public Contact Bruce L. Trego			Telephone Number (include area code) 601-369-3618		
3.5	SIC Code (4 digit) a. 2821	b. 2869	c. n/a	d.	e.	f.
3.6	Latitude Degrees Minutes Seconds 33 48 49			Longitude Degrees Minutes Seconds 88 33 34		
3.7	Dun & Bradstreet Number(s) a. 11-527-0654			b. N/A		
3.8	EPA Identification Number(s) (RCRA I.D. No.) a. MSD007031230			b. N/A		
3.9	NPDES Permit Number(s) a. MS0001970			b. N/A		
3.10	Receiving Streams or Water Bodies (enter one name per box) a. James Creek			b. N/A		
	c.			d.		
	e.			f.		
3.11	Underground Injection Well Code (UIC) Identification Number(s) a. N/A			b.		

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company Vista Chemical Company	4.2	Parent Company's Dun & Bradstreet Number 10-266-6872
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(Important: Type or print; read instructions before completing form.)

Page 2 of 5



EPA FORM R
PART II. OFF-SITE LOCATIONS TO WHICH TOXIC
CHEMICALS ARE TRANSFERRED IN WASTES

(This space for your optional use.)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)			
1.1 POTW name N/A		1.2 POTW name	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE).			
2.1 Off-site location name Chemical Waste Management, Inc.		2.2 Off-site location name Technical Environmental Systems, Inc.	
EPA Identification Number (RCRA ID. No.) ALD000622464		EPA Identification Number (RCRA ID. No.) TXD982290140	
Street Address P. O. Box 55		Street Address 500 Battleground Road	
City Emelle	County Sumter	City La Porte	County Harris
State Alabama	Zip 35459	State Texas	Zip 77571
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [X] No	
2.3 Off-site location name Chemical Waste Management, Inc.		2.4 Off-site location name N/A	
EPA Identification Number (RCRA ID. No.) LAD000777201		EPA Identification Number (RCRA ID. No.)	
Street Address Route 2, John Brandon Road		Street Address	
City Carlyss	County Calcasieu	City	County
State Louisiana	Zip 70663	State	Zip
Is location under control of reporting facility or parent company? [] Yes [X] No		Is location under control of reporting facility or parent company? [] Yes [] No	
2.5 Off-site location name		2.6 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [] Yes [] No		Is location under control of reporting facility or parent company? [] Yes [] No	
[] Check if additional pages of Part II are attached. How many? _____			

(Important: Type or print; read instructions before completing form.)

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EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

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

2. MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

2. Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)

3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

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

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

07 (enter code)

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

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year)			B. Basis of Estimate (enter code)	C. % From Stormwater	
		A.1 Reporting Ranges 1-10 11-499 500-999		A.2 Enter Estimate			
5.1 Fugitive or non-point air emissions	5.1a	[] [] []	3017	5.1b	0		
5.2 Stack or point air emissions	5.2a	[] [] []	60976	5.2b	M		
5.3 Discharges to receiving streams or water bodies (Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	5.3.1 ☒ a	5.3.1a	[] [] []	12	5.3.1b	M	5.3.1c N/A %
	5.3.2 ☐	5.3.2a	[] [] []	N/A	5.3.2b	☐	5.3.2c %
	5.3.3 ☐	5.3.3a	[] [] []		5.3.3b	☐	5.3.3c %
5.4 Underground Injection	5.4a	[] [] []	N/A	5.4b	☐		
5.5 Releases to land	5.5.1a	[] [] []	N/A	5.5.1b	☐		
5.5.1 On-site landfill	5.5.2a	[] [] []		5.5.2b	☐		
5.5.2 Land treatment/application farming	5.5.3a	[] [] []		5.5.3b	☐		
5.5.3 Surface impoundment	5.5.4a	[] [] []		5.5.4b	☐		
5.5.4 Other disposal							

[] (Check if additional information is provided on Part IV-Supplemental Information.)

(Important: Type or print; read instructions before completing form.)

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EPA FORM R

PART III. CHEMICAL-SPECIFIC INFORMATION
(continued)

(This space for your optional use.)

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/yr)		B. Basis of Estimate (enter code)	C. Type of Treatment/Disposal (enter code)
	A.1 Reporting Ranges 1-10 11-499 500-999	A.2 Enter Estimate		
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.) ☐ 1 ☐	[] [] []	N/A	6.1.1b ☐	
6.2.1 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐	[] [] []	N/A	6.2.1b ☐	6.2.1c ☒ M ☐
6.2.2 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐	[] [] []		6.2.2b ☐	6.2.2c ☒ M ☐
6.2.3 Other off-site location (enter location number from Part II, Section 2.) ☐ 2 ☐	[] [] []		6.2.3b ☐	6.2.3c ☒ M ☐

[] (Check if additional information is provided on Part IV-Supplemental Information.)

7. WASTE TREATMENT METHODS AND EFFICIENCY

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

A. General Wastestream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data?	
					Yes	No
7.1a ☒ W	7.1b ☒ B ☐ 1 ☐ 1	7.1c ☒ 4	7.1d [] []	7.1e 99.9 %	7.1f ☒ X ☐	[] []
7.2a ☐	7.2b ☐ ☐ ☐	7.2c ☐	7.2d [] []	7.2e %	7.2f [] []	[] []
7.3a ☐	7.3b ☐ ☐ ☐	7.3c ☐	7.3d [] []	7.3e %	7.3f [] []	[] []
7.4a ☐	7.4b ☐ ☐ ☐	7.4c ☐	7.4d [] []	7.4e %	7.4f [] []	[] []
7.5a ☐	7.5b ☐ ☐ ☐	7.5c ☐	7.5d [] []	7.5e %	7.5f [] []	[] []
7.6a ☐	7.6b ☐ ☐ ☐	7.6c ☐	7.6d [] []	7.6e %	7.6f [] []	[] []
7.7a ☐	7.7b ☐ ☐ ☐	7.7c ☐	7.7d [] []	7.7e %	7.7f [] []	[] []
7.8a ☐	7.8b ☐ ☐ ☐	7.8c ☐	7.8d [] []	7.8e %	7.8f [] []	[] []
7.9a ☐	7.9b ☐ ☐ ☐	7.9c ☐	7.9d [] []	7.9e %	7.9f [] []	[] []
7.10a ☐	7.10b ☐ ☐ ☐	7.10c ☐	7.10d [] []	7.10e %	7.10f [] []	[] []

[] (Check if additional information is provided on Part IV-Supplemental Information.)

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Wastes Prior to Treatment or Disposal		C. Index	D. Reason for Action (enter code)
☒ M	Current reporting year (pounds/year)	Prior year (pounds/year) ☐ + ☐ - %	☐ ☐	☒ R ☐