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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
70765THDWCHIGHW
Toxic Chemical, Category or Generic Name
DICHLORODIFLUOROMETHANE

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
P O Box 3348
Merrifield, VA 22116-3348
ATTN TOXIC CHEMICAL RELEASE INVENTORY

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

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

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

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

1996

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: DOYLE A. HANEY — ENVIRONMENTAL MANAGER

Signature: Doyle A. Haney

Date Signed: 07-24-97

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name		TRI Facility ID Number
THE DOW CHEMICAL COMPANY	LOUISIANA DIVISION	70765THDWCHIGHW

Street Address	
HIGHWAY 1 SOUTH;	P.O. BOX 150

City	County
PLAQUEMINE	IBERVILLE/WBR PAR

State	Zip Code
LA	70765-0150

Mailing Address (if different from street address)	
N/A	

City	
N/A	

State	Zip Code
LA	70765-0150

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
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SECTION 4. FACILITY IDENTIFICATION (continued)

4.2	This report contains information for: (Important check a or b; check c if applicable	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility			
4.3	Technical Contact	Name: DOYLE A. HANEY			Telephone number (include area code): (504) 353-6128		
4.4	Public Contact	Name: DONNA CARVILLE			Telephone number (include area code): (504) 353-1824		
4.5	SIC Code (4-digit)	a. 2812	b. 2821	c. 2869	d. NA	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		030	19	00	091	16	20

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 008187080
		b. NA
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. LAD008187080
		b. NA
4.9	Facility NPDES Permit Number(s) (9 characters)	a. LA0003301
		b. LA0049638
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	THE DOW CHEMICAL COMPANY
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA	001381581

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
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DICHLORODIFLUOROMETHANE

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.)
	000075718
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	DICHLORODIFLUOROMETHANE
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2 1 is checked "yes" Generic Name must be structurally descriptive)
	NA

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.)
	NA

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

(Important: Check all that apply.)

			If produce or import:
3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ 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.)	

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

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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	26000	E	
5.2	Stack or point air emissions	☐ NA	1000	O	
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				
5.4.1	Underground injections on-site to Class I Wells	☒ NA			
5.4.2	Underground injections on-site to Class II-V Wells	☒ NA			
5.5	Disposal to land on-site				
5.5.1A	RCRA Subtitle C landfills	☒ NA			
5.5.1B	Other landfills	☒ 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.**

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

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
5.3.4 Stream or Water Body Name			
5.3.5 Stream or Water Body Name			
5.3.6 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)
NA	

6.1.B POTW Name and Location Information

6.1.B.1 POTW Name	6.1.B.2 POTW Name
Street Address	Street Address
City / County	City / County
State / Zip Code -	State / Zip Code -

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If additional pag s of Part II, Section 5.3 and/or 6.1 are attached, indicate the total number f pag s in this box 0 **and indicate which Part II, S cti n 5.3/6.1 page this is, here.** 1 **(xampl : 1, 2, 3, tc.)**

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
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SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 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.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.2 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.
2.	2.	2.
3.	3.	3.
4.	4.	4.

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If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this b x [1] and indicate which Part II, S ction 6.2 pag this is, h re. [1] (xampl : 1, 2, 3, etc.)

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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 P99, 2 NA	7A.1c	7A.1d	7A.1e
A	3, 4, 5, 6, 7, 8	1	0 %	Yes: X; No:
7A.2a	7A.2b: 1 P99, 2 NA	7A.2c	7A.2d	7A.2e
W	3, 4, 5, 6, 7, 8	3	0 %	Yes: X; N:
7A.3a	7A.3b: 1, 2	7A.3c	7A.3d	7A.3e
NA	3, 4, 5, 6, 7, 8		0 %	Yes: ; N:
7A.4a	7A.4b: 1, 2	7A.4c	7A.4d	7A.4e
	3, 4, 5, 6, 7, 8		%	Ye: ; No:
7A.5a	7A.5b: 1, 2	7A.5c	7A.5d	7A.5e
	3, 4, 5, 6, 7, 8		%	Yes: ; No:

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

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SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☐ **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
NA			

SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **N t 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.
NA				

6.	7.	8.	9.	10.

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SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All quantity estimates can be reported using up to two significant figures.	Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released*	185000	27000	27000	27000
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	0	0	0	0
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0

8.8	Quantity released to the environment as a result of remedial actions, catastropic events, or one-time events not associated with production processes (pounds/year)	0
8.9	Production ratio or activity index	0001.09

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	W39	a. T01	b. NA	c.
8.10.2	NA	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.

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