A

Vista Polymers
A Division of
Vista Chemical Company

Highway 25
Post Office Box 91

Aberdeen, Mississippi 39730
Phone (601) 369-8111

June 25, 1991

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

VISTA

Dear Sirs:

Enclosed please find one (1) microcomputer diskette 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	Report Number	CAS Number
Antimony compounds	00009	NA
Barium compounds	00003	NA
n-Dioctyl Phthalate	00004	117-84-0
Hydrochloric Acid	00005	7647-01-0
Lead compounds	00006	NA
Phthalic Anhydride	00007	85-44-9
Vinyl Chloride	00008	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 these diskettes.

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.0001159328

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Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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.) [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 90

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

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			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	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. VAB 0001159329

4. PARENT COMPANY INFORMATION

4.1 Name of Parent Company: Vista Chemical Company

4.2 Parent Company's Dun & Bradstreet Number: 10-266-6872

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

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

EPA

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.) Antimony Compounds
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	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 chemical:	a. [ ] As a reactant	b. [X] 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

[0][4] (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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release (pounds/year) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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	5.3.1 [ ] 5.3.1a	[ ] [ ] [ ]	N/A	5.3.1b [ ]	5.3.1c N/A %
(Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	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.)

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

EPA

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) A.1 Reporting Ranges 1–10 / 11–499 / 500–999	A. Total Transfers (pounds/yr) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatment/ Disposal (enter code)
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	[ ] [ ] [ ]	1843	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	[ ] [ ] [ ]	3	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 catagory

	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
7.1	a W	b P 1 1	c 4	d [ ]	e 100 %	f [ ]	[X
7.2	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.3	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.4	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.5	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.6	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.7	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.8	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.9	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[
7.10	a [ ]	b [ ]	c [ ]	d [ ]	e %	f [ ]	[

[ ] (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: Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (–))	C. Index	D. Reason for Action (enter code)
M [ ]	_____	_____	[ ] + [ ] – _____ %	[ ] . [ ]	R [ ]

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Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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?	1.2 If "Yes" in 1.1, is this copy:	1.3 Reporting Year
	[ ] Yes (Answer question 1.2; Attach substantiation forms.) [X] No (Do not answer 1.2; Go to question 1.3.)	[ ] Sanitized [ ] Unsanitized	19 90

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

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			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	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

VAB.0001159333

4.1	Name of Parent Company: Vista Chemical Company	4.2	Parent Company's Dun & Bradstreet Number: 10-266-6872

☐ A

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

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

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

EPA

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.) Barium Compounds
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	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 chemical:	a. [ ] As a reactant	d. [ ] Repackaging only	b. [X] As a formulation component	c. [ ] As an article component	
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

[0][4] (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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release (pounds/year) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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 5.3.1 [ ]	5.3.1a	[ ] [ ] [ ]	N/A	5.3.1b [ ]	5.3.1c N/A %
(Enter letter code from Part I Section 3.10 for stream(s) in the box provided.) 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.)

VAB.0001159335

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

EPA

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) A.1 Reporting Ranges 1–10 / 11–499 / 500–999	A. Total Transfers (pounds/yr) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatmen Disposal (enter code)
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	[ ] [ ] [ ]	16	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 . 2	[ ] [ ] [ ]	180	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 . 3	[ ] [ ] [ ]	2	6.2.3b 0	6.2.3c M 7 2

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

7. WASTE TREATMENT METHODS AND EFFICIENCY

[ ] Not Applicabl;e (NA) – Check if no on-site treatment is applied to any waste stream containing the chemical or chemical catagory

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: Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (–))	C. Index	D. Reason for Action (enter code)
M [ ]	_____	_____	[ ] + [ ] – _____ %	[ ] . [ ]	R [ ]

VAB.0001159336

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

EPA FORM **R**

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(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.) [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 90

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

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.	b.	c.	d.	e.	f.
2821	2869	n/a			

3.6	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	88	33	34

3.7	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. VAB 0001159337

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company: Vista Chemical Company	4.2	Parent Company's Dun & Bradstreet Number: 10-266-6872

A

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

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

A

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

EPA

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.) 117-84-0
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.) n-Dioctyl Phthalate
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. [X] Produce	If produce or import: c. [X] For on-site use/processing	d. [X] For sale/ distribution
		b. [ ] Import	e. [ ] As a byproduct	f. [ ] As an impurity
3.2	Process the chemical:	a. [ ] As a reactant	b. [X] 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

[0][5] (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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release (pounds/year) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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 [A]	5.3.1a	[ ] [ ] [ ]	39	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						
5.5.1 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.)

VAB.0001159339

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

EPA

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	C. Type of Treatmen Disposal
	A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A.2 Enter Estimate	(enter code)	(enter code)
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	[ ] [ ] [ ]	7999	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 .	[ ] [ ] [ ]	N/A	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 catagory

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 3	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)
	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))		
M	_____	_____	[ ] + [ ] - _____ %	[ ] . [ ]	R

A

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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.) [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 90

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

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			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	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.

VAB.0001159341

4. PARENT COMPANY INFORMATION

4.1 Name of Parent Company: Vista Chemical Company

4.2 Parent Company's Dun & Bradstreet Number: 10-266-6872

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

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

EPA

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.)
7647-01-0

1.3 Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.)
Hydrochloric Acid

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.)

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. [X] Produce	If produce or import: c. [ ] For on-site use/processing	d. [ ] For sale/ distribution
		b. [ ] Import	e. [X] 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

[0][2] (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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1 Fugitive or non-point air emissions	5.1a	[ ] [ ] [ ]	N/A	5.1b [ ]	
5.2 Stack or point air emissions	5.2a	[ ] [ ] [ ]	283	5.2b [0]	
5.3 Discharges to receiving streams or water bodies 5.3.1 [a]	5.3.1a	[ ] [ ] [ ]	0	5.3.1b [M]	5.3.1c N/A %
Enter letter code from Part I Section 3.10 for stream(s) in the box provided.) 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					
5.5.1 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.)

VAB.0001159343

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

EPA

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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Transfers (pounds/yr) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatment Disposal (enter code)
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 catagory

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 C 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: Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))	C. Index	D. Reason for Action (enter code)
M [ ]	_____	_____	[ ] + [ ] - _____ %	[ ] . [ ]	R [ ]

VAB.0001159344

A

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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.) [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 90

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

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	a.	b.	c.	d.	e.	f.
SIC Code (4 digit)	2821	2869	n/a			

3.6	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	88	33	34

3.7	a. Dun & Bradstreet Number(s): 11-527-0654	b. N/A
3.8	a. EPA Identification Number(s) (RCRA I.D. No.): MSD007031230	b. N/A
3.9	a. NPDES Permit Number(s): MS0001970	b. N/A
3.10	a. Receiving Streams or Water Bodies (enter one name per box): James Creek	b. N/A
	c.	d.
	e.	f.
3.11	a. Underground Injection Well Code (UIC) Identification Number(s): N/A	b. VAB 0001159345

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company: Vista Chemical Company	4.2	Parent Company's Dun & Bradstreet Number: 10-266-6872

A

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

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

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

EPA

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.)

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

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 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 chemical: a.[ ] As a reactant b.[X] 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

[0][4] (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) A.1 Reporting Ranges 1–10 / 11–499 / 500–999	A. Total Release A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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 5.3.1 [ ]	5.3.1a	[ ] [ ] [ ]	N/A	5.3.1b [ ]	5.3.1c N/A %
(Enter letter code from Part I Section 3.10 for stream(s) in the box provided.) 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.)

VAB.0001159347

EPA

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	C. Type of Treatment Disposal
	A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A.2 Enter Estimate	(enter code)	(enter code)
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 catagory

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)
	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))		
M	_____	_____	[ ] + [ ] - _____ %	[ ] . [ ]	R

VAB.0001159348

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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.) [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 90

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

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			Longitude		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
33	48	49	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. VAB 0001159349

4. PARENT COMPANY INFORMATION

4.1 Name of Parent Company: Vista Chemical Company

4.2 Parent Company's Dun & Bradstreet Number: 10-266-6872

A

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

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

A

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

EPA

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: c. [ ] For on-site use/processing	d. [ ] For sale/ distribution
		b. [ ] Import	e. [ ] As a byproduct	f. [ ] As an impurity
3.2	Process the chemical:	a. [X] 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

[0][5] (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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release (pounds/year) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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 5.3.1 [ ]	5.3.1a	[ ] [ ] [ ]	N/A	5.3.1b [ ]	5.3.1c N/A %
(Enter letter code from Part I Section 3.10 for stream(s) in the box provided.) 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.)

VAB.0001159351

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

EPA

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) A.1 Reporting Ranges 1-10 11-499 500-999	A. Total Transfers (pounds/yr) A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatmen Disposal (enter code)
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 . 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.) 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.) 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

[X] Not Applicabl;e (NA) - Check if no on-site treatment is applied to any waste stream containing the chemical or chemical catagory

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)
	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))		
M [ ]	_____	_____	[ ] + [ ] - _____ %	[ ] . [ ]	R [ ]

VAB.0001159352

A

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(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

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.) [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 90

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

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			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	33	48	49	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.

VAD.0001159353

4. PARENT COMPANY INFORMATION

4.1 Name of Parent Company: Vista Chemical Company

4.2 Parent Company's Dun & Bradstreet Number: 10-266-6872

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

EPA

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

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

[ ] Check if additional pages of Part II are attached. How many? _____

A

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

EPA

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	b. [ ] Import	If produce or import: c. [ ] For on-site use/processing	e. [ ] As a byproduct	d. [ ] For sale/ distribution; f. [ ] As an impurity
3.2	Process the chemical:	a. [X] As a reactant	d. [ ] Repackaging only	b. [ ] As a formulation component		c. [ ] As an article component
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

[0][7] (enter code)

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

			A. Total Release (pounds/year) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A. Total Release A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
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)						
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						
5.5.2 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.)

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

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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) A.1 Reporting Ranges 1-10 / 11-499 / 500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatment Disposal (enter code)
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 catagory

	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
7.1	7.1a W	7.1b B11	7.1c 4	7.1d [ ]	7.1e 99.9 %	7.1f [X]	[ ]
7.2	7.2a	7.2b	7.2c	7.2d [ ]	7.2e %	7.2f [ ]	[ ]
7.3	7.3a	7.3b	7.3c	7.3d [ ]	7.3e %	7.3f [ ]	[ ]
7.4	7.4a	7.4b	7.4c	7.4d [ ]	7.4e %	7.4f [ ]	[ ]
7.5	7.5a	7.5b	7.5c	7.5d [ ]	7.5e %	7.5f [ ]	[ ]
7.6	7.6a	7.6b	7.6c	7.6d [ ]	7.6e %	7.6f [ ]	[ ]
7.7	7.7a	7.7b	7.7c	7.7d [ ]	7.7e %	7.7f [ ]	[ ]
7.8	7.8a	7.8b	7.8c	7.8d [ ]	7.8e %	7.8f [ ]	[ ]
7.9	7.9a	7.9b	7.9c	7.9d [ ]	7.9e %	7.9f [ ]	[ ]
7.10	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)
	Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))		
M	_____	_____	[ ] + [ ] - _____ %	[ ] . [ ]	R