



United States Environmental Protection Agency Region 7 Facility Assessment Form



Facility Information

Facility ID:

6

Assessment Date:

5/17/2011

mm/dd/yyyy

Source(s) of Facility Information:

☒ RMP☐ Tier II Report☐ RCRIS☐ CERCLIS☐ FRP☐ TRI Report☐ Other

Type of Ownership (check only one):

☐ Federal☐ Municipal☐ State☒ Private

Location Information

Facility Name:

Biokyowa Inc.

Facility Address:

5469 Nash Road

State:

MO

Facility City:

Cape Girardeau

County:

Girardeau

Zip:

63701

Facility Latitude:

37.23972200

Facility Longitude:

-89.60027800

Contact Information

First Name:

Herman

Last Name:

Wienerschnittell

Primary Phone:

573-335-4849

Title:

Commandant

Radiation Information

Radiation Sources On-Site (check only one):

☒ Unknown or not suspected☐ Yes, known radiation sources on site

Description of Source(s):

Isotope:

Radiation Activity:

Radiation License #:

Comments/Summary of Hazardous Materials Stored on Site

Several ASTS: 2 large upright ASTS labled Methane Recovery approx. 10,000 gallons each. 5 horizontal tanks about 5,000 gallons each with ethylene oxide in them



United States Environmental Protection Agency Region 7 Facility Recon Form



Recon Information

Facility ID*:

6

Recon Date:

5/17/2011

*Use facility assessment form ID #

mm/dd/yyyy

On-Site Facility Contact Information

First Name:

Herman

Last Name:

Weinerschnetsell

Primary Phone:

573-335-4849

Title:

Operator

Recon Team Information

Team Lead Name:

Eric Nold

Team Agency:

USEPA

Team Phone:

816-718-4274

Operational Status Information

Facility Status (check only one):

☒ Operational☐ Non-Operational

If Operational (check only one):

☐ Normal/Pre-incident status☒ Operating at reduced capacity

If Non-Operational (check only one):

☐ Not attended☐ Not operating prior to incident☒ Attended - recovery/damage
assessment in progress

Utility Status Information

Electricity Operational:

☐ Yes ☒ No ☐ Unknown

On Backup Power:

☒ Yes ☐ No ☐ Unknown

Sewer Operational:

☐ Yes ☒ No ☐ Unknown

Phones Operational:

☐ Yes ☒ No ☐ Unknown

Water Operational:

☐ Yes ☒ No ☐ Unknown

Process Controls Operational:

☐ Yes ☐ No ☒ Partial ☐ Unknown

Atmospheric Conditions

Wind Direction:

☒ East☐ Northeast☐ South☐ Southwest

Wind Speed (mph):

15

☐ North☐ Northwest☐ Southeast☐ West

Temperature (°F):

68

Photo Documentation

Photos Taken:

☒ Yes☐ No☒ Facility/Release☒ Air Monitoring Locations

Photo Comments:

General Comments



United States Environmental Protection Agency Region 7 Material Release Form



Note: complete additional pages if multiple materials have been released.

Release Information

Facility ID*:

6

Release Date:

05/17/2011

*Use facility assessment form ID #

mm/dd/yyyy

Oil/Hazardous/Radioactive Material and Release Information (including potential release)

Material Name:

Ethylene oxide

Container Type (check only one):

☒ Cylinders(s) ☐ Tote(s) ☐ Pipeline

☐ Drum(s) ☐ Tank(s) ☐ Other(s)

Container Location (check only one):

☐ Inside Building

☒ Outside Building

☐ Inside/Outside Building

Quantity Released:

5000.0

State (check only one):

☒ Gas ☐ Liquid ☐ Solid

Units (check only one):

☐ Cubic feet ☐ Gallons ☒ Pounds

☐ Cubic yards ☐ Kilograms ☐ Tons

Is the Container Pressurized?

☐ Yes ☐ No ☒ Ruptured

Has Fire/Explosion Occurred?

☒ Yes ☐ No ☐ Potential

Release Comments:

Impacted/Potentially Impacted Media

Soil:

☐ Yes

☐ No

Groundwater:

☐ Yes

☐ No

Air:

☒ Yes

☐ No

Surface Water:

☐ Yes

☒ No

(Describe or name impacted surface)

Known/Potential Receptor Impacts

Human Injury/Exposure:

☒ Yes ☐ Potential

☐ No

Environmental:

☒ Yes ☐ Potential

☐ No

Comments:

Fires burning out of control. Huge smoke plumes

Containment/Remediation Actions

Actions Taken:

☐ None required ☐ Spilled chemicals contained/recovered

☐ None taken ☒ Facility evacuated

☐ Unknown ☒ Public evacuated

☐ Site runoff controlled

☐ Other

Security Deficiencies:

☒ Damaged fence/gate

☒ Damaged/inoperable alarm system

☒ Structural damage to building(s)

☐ None

☐ Unknown

Recommended Followup:

☒ Containment and cleanup required

☐ None required

☐ Defer lead for followup activities to other federal or state agency (Name state or federal agency)

☐ Followup with facility owner/operator after damage assessment completed

☐ Notify other local, state, and/or federal agencies/departments (Name local, state, and/or federal agency)

☐ Recommend followup assessment to determine threats to human health and the environment



United States Environmental Protection Agency Region 7 Material Release Form



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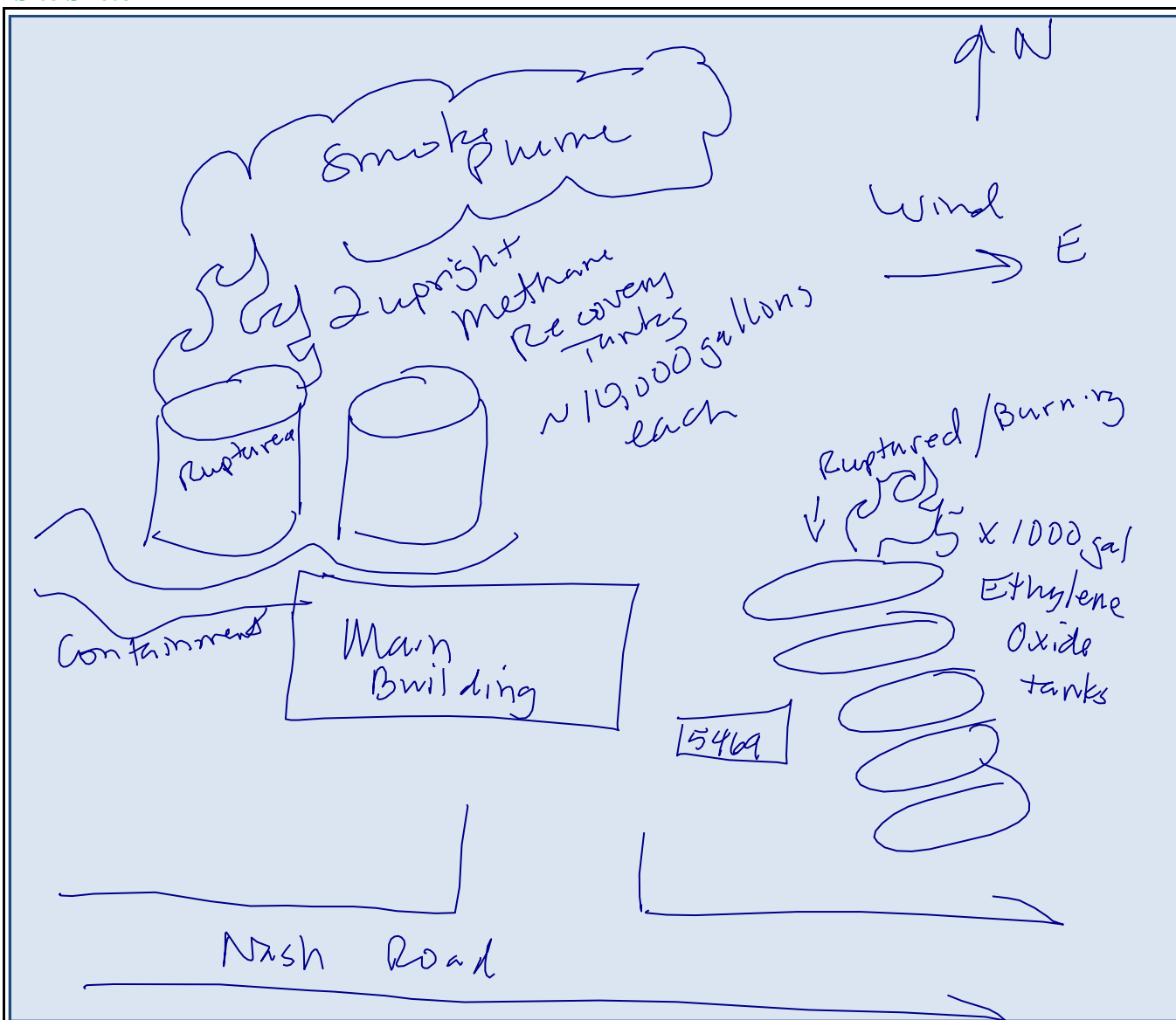
Containment/Remediation Actions Cont.

Priority Followup (check only one):

- ☒ Emergency/immediate (< 24 hours) ☐ Low (> 14 days)
☐ High (1 - 6 days) ☐ No further action
☐ Moderate (7 - 14 days)

Remediation Comments: Down wind monitoring for smoke - product vapors

Site Sketch





United States Environmental Protection Agency
Region 7 Air Monitoring Form



Air Monitoring Form

Facility ID*:

6

*Use facility assessment form ID #

AIR MONITORING		Locations					
		Numeric ID	1	2	3	4	5
		Description					
		Date**	5/17/2011	4/5/2011			
		Time**	14:00	16:00			
Coord.	Latitude	37.230430	37.240210				
	Longitude	-89.600300	-89.600300				
Monitoring Instrument	MultiRAE Plus	VOCs (ppm)	0.00	500.00			
		H2S (ppm)					
		CO (ppm)	150.00	50.00			
		LEL (%)					
	Inst. ID**	BR 549	O2 (%)				
	ToxiRAE Plus	Chlorine (ppm)					
		CO (ppm)					
		Inst. ID**		NH3 (ppm)			
	Draeger CMS	Benzene (ppm)					
		Inst. ID**		Acid Gases (ppm)			
	Ludlum Micro R Meter	Radiation (µR/hr)					
	Inst. ID**						
DataRAM	PM10 (µg/m3)	200.00	50.00				
Inst. ID**	8675309						

**Required Field