

#04-05-038053

STATE DIV. EMERGENCY GOVT. 6/18/264-3232  
U.S. NAT'L. RESPONSE CENTER 800/424-8802  
CHEMTREC/PESTICIDES/CHLORINE 800/424-9300TOXIC AND HAZARDOUS  
INCIDENT REPORT  
FORM 2200-45 REV. 7-79

800707-01

DATE OF INCIDENT <b>7-7-80</b>	DAY OF WEEK <b>MONDAY</b>	TIME OF INCIDENT <b>1000 AM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM	REPORTED BY (NAME) <b>TOM GESTRICK</b>	TELEPHONE NUMBER <b>414 / 433 - 2038</b>
DATE REPORTED <b>7-7-80</b>	DAY OF WEEK <b>MONDAY</b>	TIME REPORTED <b>122 PM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM	AGENCY OR FIRM REPORTING <b>PROCTER &amp; GAMBEL</b>	REPORTED THRU DIV. EMERGEN. GOVT. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
SUBSTANCE INVOLVED <b>SULFURIC ACID</b>	QUANTITY <b>1000</b>	UNITS <b>GALS</b>	PERSON OR FIRM RESPONSIBLE <b>PROCTER &amp; GAMBEL 501 EASTMANN</b>	
SUBSTANCE INVOLVED	QUANTITY	UNITS	CONTACT NAME <b>TOM GESTRICK</b>	TELEPHONE NUMBER <b>414 / 433 - 2038</b>
PHYSICAL CHARACTERISTICS <input type="checkbox"/> SOLID <input checked="" type="checkbox"/> LIQUID COLOR _____ <input type="checkbox"/> SEMISOLID <input type="checkbox"/> GAS COLOR _____			ADDRESS - STREET OR ROUTE <b>501 EASTMANN</b> CITY, STATE, ZIP CODE <b>GREEN BAY WIS 53010 1980</b>	
CAUSE OF INCIDENT <b>FAULTY TANK ON TANKER TRUCK</b>			ACTION TAKEN BY SPILLER <input type="checkbox"/> NO ACTION <input type="checkbox"/> NO NOTIFICATION <input type="checkbox"/> DELAYED NOTIFICATION <input checked="" type="checkbox"/> TAKEN <input checked="" type="checkbox"/> CONTAINMENT; TYPE <b>PIT PUMPED INTO TANKER</b> <input checked="" type="checkbox"/> CLEANUP; METHOD <b>REMOVED TOP TWO FEET SOIL</b> <input checked="" type="checkbox"/> DISPOSAL; LOCATION <b>MSD &amp; LAND FILL</b> <input type="checkbox"/> FIRE DEPARTMENT ACTION <input type="checkbox"/> CONTRACTOR HIRED; NAME <input checked="" type="checkbox"/> OTHER ACTION <b>NEUTRALIZER OF LIME ON GROUND AND ANHYDROUS AMMONIA FOR LIQUID IN TANKER.</b>	
EXACT LOCATION DESCRIPTION (INTERSECTION, MILEAGE, ETC.) <b>WEST LOT OF PROCTER &amp; GAMBELS PROP</b>			TEMPERATURE <b>85</b> °F WIND SPEED <b>15</b> MPH DIRECTION OF WIND <b>S</b> PRECIPITATION: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO DIRECTION OF SPILL MOVEMENT <b>INTO GROUND</b>	
COUNTY LOCATION <b>BROWN</b>	TWP, R., SECTION, TOWN, RANGE _____, _____, _____, _____, _____		DISTRICT PERSON NOTIFIED <b>ELGIN E. HUNTER JR</b> TELEPHONE NUMBER <b>414 / 497 - 4023</b>	
DNR DISTRICT <b>LMD</b>	DNR AREA <b>GB</b>	SURFACE WATERS AFFECTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> POT	PERSON INVESTIGATING <b>ELGIN E. HUNTER JR</b> TELEPHONE NUMBER <b>414 / 497 - 4023</b>	
NAME OF SURFACE WATER <b>FOX RIVER</b>	NEAREST SURF. WATER <b>600+ FT.</b>	NEAREST STORM SEWER <b>N/A FT.</b>	LIST HUMAN HAZARDS OR CASUALTIES <input type="checkbox"/> REAL <input checked="" type="checkbox"/> POTENTIAL <input type="checkbox"/> NONE	
GROUNDWATERS AFFECTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> POT	NEAREST WELL <input type="checkbox"/> PRIV. <input type="checkbox"/> MUNIC. _____ FT.		ENVIRONMENTAL HAZARD/DAMAGE <input type="checkbox"/> REAL <input checked="" type="checkbox"/> POTENTIAL <input checked="" type="checkbox"/> VEGETATION <b>IF NOT NEUTRALIZED THE</b> <input type="checkbox"/> FISH <input checked="" type="checkbox"/> WILDLIFE <b>LIQUID IS VERY CORROSIVE</b> <input checked="" type="checkbox"/> BIRDS <b>TO ANYTHING LISTED IF CONTACT IS</b> <input type="checkbox"/> OTHER <b>MADE...</b> <input type="checkbox"/> NONE	
DATE DISTRICT NOTIFIED <b>7-7-80</b>	DAY OF WEEK <b>MONDAY</b>	TIME DISTRICT NOTIFIED <b>122 PM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM	COMMENTS: PERSON FILING THIS REPORT (PRINT NAME) <b>ELGIN E. HUNTER JR</b> SIGNATURE <i>Elgin E. Hunter Jr.</i> DATE SIGNED <b>7-8-80</b>	
DATE INVESTIGATED <b>7-7-80</b>	DAY OF WEEK <b>MONDAY</b>	TIME INVESTIGATED <b>400 PM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM		
ACTION TAKEN BY DNR <input type="checkbox"/> NO ACTION <input checked="" type="checkbox"/> INVESTIGATION <input type="checkbox"/> 29.29 ENFORCEMENT <input type="checkbox"/> CONTAINMENT; TYPE <input type="checkbox"/> CLEANUP; METHOD <input checked="" type="checkbox"/> SUPERVISE CLEANUP (PERSON) <b>ELGIN E. HUNTER JR</b> <input checked="" type="checkbox"/> DISPOSAL; LOCATION <b>MSD AFTER NEUTRALIZED</b> <input checked="" type="checkbox"/> SPILLER REQUIRED TO TAKE ACTION; TYPE <b>CLEAN UP</b> <input type="checkbox"/> CONTRACTOR HIRED BY DNR; NAME <input type="checkbox"/> DNR SPILL EXPENSE SENT TO MADISON CENTRAL OFFICE. <input type="checkbox"/> EVIDENCE COLLECTED: <input type="checkbox"/> PHOTOGRAPHS <input type="checkbox"/> STATEMENTS OF WITNESSES <input type="checkbox"/> SAMPLES <input type="checkbox"/> OTHER				
OTHER AGENCIES ON SCENE LOCAL _____ STATE <b>DNR</b> FEDERAL _____				
ADDITIONAL COMMENTS: <b>ACID SPILL WAS 95% AT TIME OF THE SPILL. 4000 GALS WAS INITIAL SPILL. 3000 GALS RECOVERED AND NEUTRALIZED WITH ANHYDROUS AMMONIA AND TAKED TO MSD. 1000 GALS WAS IN ANOTHER TANKER THAT LEAKED OUT INTO THE GROUND. THE GROUND IS VERY HARD AND COMPACTED MATERIAL. THE ENTIRE AREA WAS LIMED DOWN AND THE TOP TWO FEET OF MADISON GROUND REMOVED. AREA SAFE TO WALK ON NOW. DNR DID A GOOD JOB.</b>				



DATE OF INCIDENT <b>7-7-80</b>		DAY OF WEEK <b>MONDAY</b>		TIME OF INCIDENT <b>1000 AM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM		REPORTED BY (NAME) <b>TOM GESTRICK</b>		TELEPHONE NUMBER <b>414 / 433 - 2038</b>		
DATE REPORTED <b>7-7-80</b>		DAY OF WEEK <b>MONDAY</b>		TIME REPORTED <b>122 PM</b> <input type="checkbox"/> AM <input type="checkbox"/> PM		AGENCY OR FIRM REPORTING <b>PROCTER &amp; GAMBEL</b>		REPORTED THRU DIV. EMERGEN. GOVT. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
SUBSTANCE INVOLVED <b>SULFURIC ACID</b>			QUANTITY <b>1000</b>		UNITS <b>GALS</b>		PERSON OR FIRM RESPONSIBLE <b>PROCTER &amp; GAMBEL 501 EASTMANN</b>			
SUBSTANCE INVOLVED			QUANTITY		UNITS		CONTACT NAME <b>TOM GESTRICK</b>		TELEPHONE NUMBER <b>414 / 433 - 2038</b>	
PHYSICAL CHARACTERISTICS <input type="checkbox"/> SOLID <input checked="" type="checkbox"/> LIQUID <input type="checkbox"/> SEMISOLID <input type="checkbox"/> GAS COLOR _____ ODOR _____						ADDRESS - STREET OR ROUTE <b>501 EASTMANN</b>				
CAUSE OF INCIDENT <b>FAULTY TANK ON TANKER TRUCK</b>						CITY, STATE, ZIP CODE <b>GREEN BAY WIS</b>				
<input type="checkbox"/> TRANSP. RELATED <input checked="" type="checkbox"/> FACILITY RELATED <input type="checkbox"/> SPCC PLAN YES <input type="checkbox"/> NO <input type="checkbox"/> NA						ACTION TAKEN BY SPILLER <input type="checkbox"/> NO ACTION <input type="checkbox"/> TAKEN <input type="checkbox"/> NO NOTIFICATION <input type="checkbox"/> DELAYED NOTIFICATION				
EXACT LOCATION DESCRIPTION (INTERSECTION, MILEAGE, ETC.) <b>WEST LOT OF PROCTER &amp; GAMBLE'S PROP</b>						<input checked="" type="checkbox"/> CONTAINMENT; TYPE <b>PIT PUMPED INTO TANKER</b>				
COUNTY LOCATION <b>BROWN</b>						<input checked="" type="checkbox"/> CLEANUP; METHOD <b>REMOVED TOP TWO FEET SOIL</b>				
DNR DISTRICT <b>LMD</b> DNR AREA <b>GB</b>						<input checked="" type="checkbox"/> DISPOSAL; LOCATION <b>MSD &amp; LAND FILL</b>				
SURFACE WATERS AFFECTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> POT						<input type="checkbox"/> FIRE DEPARTMENT ACTION				
NAME OF SURFACE WATER <b>FOX RIVER</b>						<input type="checkbox"/> CONTRACTOR HIRED; NAME _____				
NEAREST SURF. WATER <b>600+ FT.</b>						<input checked="" type="checkbox"/> OTHER ACTION <b>NEUTRALIZER OF LIME ON GROUND</b>				
NEAREST STORM SEWER <b>N/A FT.</b>						WEATHER CONDITIONS <b>AND ANHYDROUS AMMONIA FOR LIQUID IN TANKER.</b>				
GROUNDWATERS AFFECTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> POT						TEMPERATURE <b>85</b> °F				
DATE DISTRICT NOTIFIED						WIND SPEED <b>15</b> MPH DIRECTION OF WIND <b>S</b>				
DAY OF WEEK <b>MONDAY</b>						PRECIPITATION: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
TIME DISTRICT NOTIFIED <b>122 PM</b>						DIRECTION OF SPILL MOVEMENT <b>INTO GROUND</b>				
DATE INVESTIGATED <b>7-7-80</b>						DISTRICT PERSON NOTIFIED <b>ELGIN E. HUNTER JR</b>				
DAY OF WEEK <b>MONDAY</b>						TELEPHONE NUMBER <b>414 / 497 - 4023</b>				
TIME INVESTIGATED <b>400 PM</b>						PERSON INVESTIGATING <b>ELGIN E. HUNTER JR</b>				
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<input type="checkbox"/> CONTAINMENT; TYPE _____						ENVIRONMENTAL HAZARD/DAMAGE <input type="checkbox"/> REAL <input checked="" type="checkbox"/> POTENTIAL				
<input type="checkbox"/> CLEANUP; METHOD _____						<input checked="" type="checkbox"/> VEGETATION <b>IF NOT NEUTRALIZED THE</b>				
<input checked="" type="checkbox"/> SUPERVISE CLEANUP (PERSON) <b>ELGIN E. HUNTER JR</b>						<input type="checkbox"/> FISH _____				
<input checked="" type="checkbox"/> DISPOSAL; LOCATION <b>MSD AFTER NEUTRALIZED</b>						<input checked="" type="checkbox"/> WILDLIFE <b>LIQUID IS VERY CORROSIVE</b>				
<input checked="" type="checkbox"/> SPILLER REQUIRED TO TAKE ACTION; TYPE <b>CLEAN UP</b>						<input checked="" type="checkbox"/> BIRDS <b>TO ANYTHING LISTED IF CONTACT IS MADE...</b>				
<input type="checkbox"/> CONTRACTOR HIRED BY DNR; NAME _____						<input type="checkbox"/> OTHER _____				
<input type="checkbox"/> DNR SPILL EXPENSE SENT TO MADISON CENTRAL OFFICE.						<input type="checkbox"/> NONE _____				
<input type="checkbox"/> EVIDENCE COLLECTED: <input type="checkbox"/> PHOTOGRAPHS _____ <input type="checkbox"/> STATEMENTS OF WITNESSES _____						COMMENTS: _____				
<input type="checkbox"/> SAMPLES _____ <input type="checkbox"/> OTHER _____						PERSON FILING THIS REPORT (PRINT NAME) <b>ELGIN E. HUNTER JR</b>				
OTHER AGENCIES ON SCENE _____						SIGNATURE <i>Elgin E. Hunter Jr.</i> DATE SIGNED <b>7-8-80</b>				
LOCAL _____										
STATE <b>DNR</b>										
FEDERAL _____										
ADDITIONAL COMMENTS: <b>ACID SPILL WAS 98% AT TIME OF THE SPILL. 4000 GALS WAS INITIAL SPILL. 3000 GALS RECOVERED AND NEUTRALIZED WITH ANHYDROUS AMMONIA AND TAKED TO MSD. 1000 GALS WAS IN ANOTHER TANKER THAT LEAKED OUT INTO THE GROUND. THE GROUND IS VERY HARD AND COMPACTED MATERIAL. THE ENTIRE AREA WAS LIMED DOWN AND THE TOP TWO FEET OF GROUND REMOVED. AREA SAFE TO WALK ON NOW. COM DID A GOOD JOB.</b>										



not sig 7/90

SITE NAME

Proctor & Gamble

MAP SITE NUMBER

Rd. yellow - 57 ; Rd. yellow - 54, 55, 56

LOCATION  
COUNTY

Brown

TOWNSHIP

1/4 1/4 SEC <sup>P.C.1</sup> T 24 N R 2 E

STREET ADDRESS

501 Eastmann

SITE OWNER/MANAGER

ADDRESS

Tom Gestrick  
501 Eastmann  
Green Bay, WI

MUNICIPALITY

☒ CITY ☐ VILLAGE ☐ TOWN

Green Bay

DNR PROGRAM

Solid Waste

DESCRIPTION OF HAZARDOUS SUBSTANCE/CONTAMINATION TYPE

Sulfuric Acid

COMMENTS: AMOUNT OF CONTAMINATION, DATE OF INCIDENT, CLEANUP ACTIONS TAKEN

7/7/80 - A faulty tank on tanker truck caused the spill of sulfuric acid. 4000 gallons was the initial spill. 3000 gallons were recovered and neutralized with anhydrous ammonia and taken to MSD. 1000 gallons was in another tanker that leaked out into the ground. The ground is very hard and compacted material. The entire area was limed down and the top two feet of ground removed.

