IL-0043-04

R05-8410-01

US EPA RECORDS CENTER REGION 5
449973

ECOLOGY AND ENVIRONMENT, INC.

FIELD INVESTIGATION TEAM

SITE SAFETY PLAN

A. GENERAL INFORMATION

SITE: Triem Steel & Processing, Inc. TDD NO: R5-8410-01

WSTS NO: IL-0043

LOCATION: 26th & State St. Chicago Heights, IL 60411

PLAN PREPARED BY: Sue Ryan DATE: April 4, 1985

APPROVED BY: Paul D. Moss DATE: 4-5-85

OBJECTIVE (including description of work to be performed):

A site inspection of the above named facility will be conducted. No sampling will be done at this time.

PROPOSED DATE OF INVESTIGATION: Tuesday April 9, 1985

BACKGROUND REVIEW: Complete: ____ Preliminary: X

DOCUMENTATION SUMMARY: OVERALL HAZARD: Serious: ____ Moderate: ____

Low: X Unknown: ____

B. SITE/WASTE CHARACTERISTICS

WASTE TYPE(S): Liquid X Solid X Sludge X Gas X

CHARACTERISTIC(S): Corrosive X Ignitable ____ Radioactive ____

Volatile ____ Toxic X Reactive ____ Unknown ____ Other (Name) X PERSISTENT

FACILITY DESCRIPTION: The facility is a closed and abandoned steel manufacturing plant, and adjacent closed landfill. The landfill property now belongs to Bloom Township.

Principal Disposal Method (type and location): Landfill & Water Treatment System (while in operation)

Unusual Features (dike intergrity, power lines, terrain, etc.):

To be determined prior to beginning inspection

Status: (active, inactive, unknown)

inactive (operating as of 11/82)

exact date of plant closing is unknown, but believed to be in 1983. 2/83

The landfill has been closed & covered for ~7 years

History: (Worker or non-worker injury; complaints from public; previous agency action):

Nearby residents complained of gas in their homes in 1977. Sampling of a shower drain, abandoned well casing and soil (3-4' deep) showed high methane and CO_2 levels. It was determined not to be a gas main leak & the landfill appeared to be the only other source. No complaints have been made since then.

C. HAZARD EVALUATION

(Use Hazard Evaluation of Chemicals sheets for specific or representative chemicals present.):

Since both the plant and landfill have been closed, the hazard at this time is low. FIT members will stop at the old building and meet with the current tenants (A portion of the building is now leased to 4M Steel) to gather information about earlier (Triem) operations. IEPA personnel have visited the landfill on numerous occasions

D. SITE SAFETY WORK PLAN

PERIMETER ESTABLISHMENT: Map/Sketch Attached hospital route only Site Secured? no

Perimeter Identified? no Zone(s) of Contamination Identified? no

Perimeter will be established prior to start of inspection

PERSONAL PROTECTION

Level of Protection: A ____ B ____ C ____ D X

Modifications: No modifications

Surveillance Equipment and Materials:

The conditions at the site do not warrant the use of site entry equipment

Steel Toed Boots, Personal Dosimeter.

DECONTAMINATION PROCEDURES: see bottom of page

Special Equipment, Facilities, or Procedures: No special equipment will be needed

SITE ENTRY PROCEDURES: FIT members will meet Bloom Township & IEPA representatives at the Township Offices & proceed to the landfill. Am Steel will also be visited.

Team Member	Responsibility
Sue Ryan	Team Leader & Safety Coordinator
Dave Vaughan	Team Member

WORK LIMITATIONS (Time of day, etc.): The inspection will be conducted during daylight hours.

INVESTIGATION-DERIVED MATERIAL DISPOSAL: All disposable material will be double bagged, labeled as potentially hazardous and left on site.

E. EMERGENCY INFORMATION*

LOCAL RESOURCES

Ambulance Daley Ambulance Service 755-4034
Hospital Emergency Room St. James Hospital 756-1000
Poison Control Center Rush Pres. St. Luke 1-800-942-5969
Police Chicago Heights 754-2121
Fire Department Chicago Heights 754-2121
Airport not needed
Explosives Unit not needed
EPA Contact Don Josif 886-0393

SITE RESOURCES

Water Supply } locate prior to start of inspection
Telephone
Radio not needed
Other N/A

EMERGENCY CONTACTS

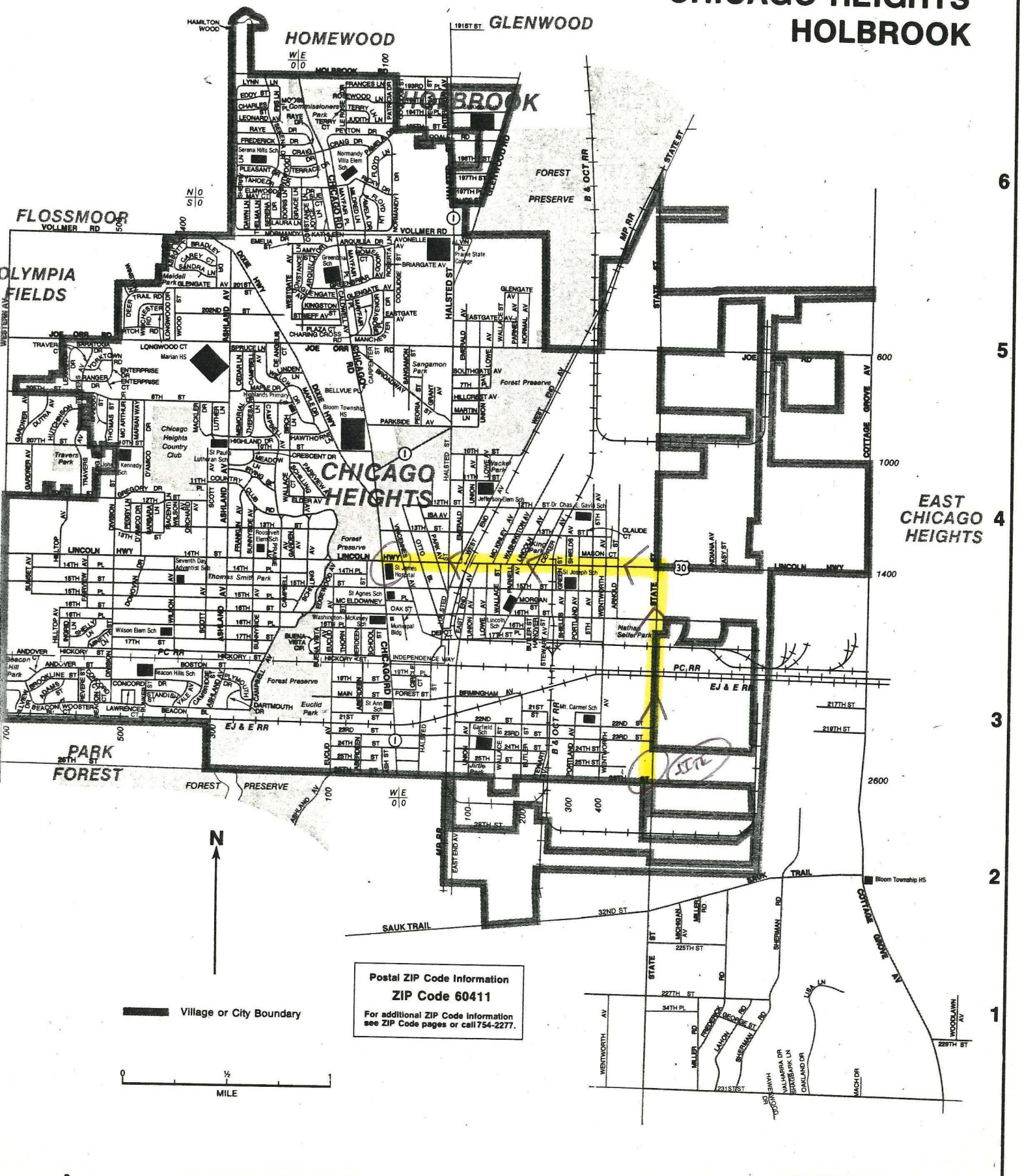
1. Mr. Raymond Harbison (University of Arkansas) ..... (501) 661-5766 or 661-5767
   MED-TOX ..... (501) 370-8263 (24 hours)
2. Regional Safety Coordinator - Paul Moss ..... (312) 358-9342 (24 hours)
3. FIT Leader - Joseph Petrilli ..... (312) 561-7639
4. FIT Office ..... (312) 663-9415
5. E & E 24 Hour Call Line ..... (716) 631-9530 (24 Hours; Cal Forwarding)
6. Regional Health Maintenance Program Contact ..... PMI - (312) 832-8820 8:00 a.m. - 5:00 p.m.
7. Dave Dahlstrom ..... (716) 741-2384 (home)
   Corporate Safety Director (716) 632-4491 (office)
8. Ecology and Environment, Inc. NPMO ..... (703) 522-6065

F. EMERGENCY ROUTES

(Give road or other directions; attach map)

Hospital: St. James Hospital 1423 Chicago Rd.
From Site: North on State St. to Lincoln Highway.
West on Lincoln Highway to Chicago Rd.
Hospital is on SE corner of intersection

CHICAGO HEIGHTS
HOLBROOK



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TEAM LEADER: Ryan (TRIEM STERL) TDD: 8404-01 DATES: 4/9/85

Place a check in front of each item taken, and circle the letter that corresponds to the letter affixed to the instrument taken.

____	Airdrive Pump (Geofilter)	A
____	Air Powered Respirators	A B C D E
____	Canon AEL Camera	A B C
____	Conductivity Meter	A B C D
____	Drager Pump	A B C
____	Ear Plugs	
____	Eyewash Bottle	
____	Explosimeter	A B C
____	First Aid Kit	1 2 3 4 5 6 7 8
____	Monitox Cyanide Detector	A
____	HNU	A B
____	Lamp Type 10.2 or 11.7	
____	Level/Tripod and Rod	A B
____	Lifevests	
____	Masterflex Pump and Filter	A B
____	Metal Detector	A B C
____	O_2 Indicator	A B C
____	Organic Vapor Analyses (OVA)	A B
____	pH Meter	A B C D
____	Polaroid 1-step	A B C D
____	Radiation Det. - Mini	A B C D
____	Radiation - Survey Meter	A B C
____	Radiation - Tad.	A B C
____	Radiation - Thyac III/Probe	A B C
____	Resistivity Meter	A
____	Resusciator	A B C
____	Robair Pump System	A
____	Safety Glasses	
____	VAN	A B C
____	Walkie-Talkie	A B C
____	Water-level Indicator	A B C
____	Hard Hats	
____	Ultra twins	

2. Indicate the quantity of each item taken.

SAMPLE BOTTLES:

1/2 gallon____

1 liter ____

8 oz.Jar ____

VOA ____

Metal cans,

Lids and Clips___

PRESERVATIVES:

NaOH_____

HN_3_____

H_2SO_4_____

Other_____

BAILERS:

Stainless_____

Copper_____

PVC_____

DECONTAMINATION EQUIPMENT

(LIST ALL ITEMS TAKEN)

Other Equipment, Generators, Pumps, Shovels, etc.

P.D. Moss (Rev.12/84)

TEAM LEADER: Ryan

3. Indicate the quantity and type of each item taken.

Personal Protective Clothing

Saranax Qty.____
Tyvek Qty.____
Coveralls Qty.____
Butyl Acid Suits Qty.____
Other _____ Qty.____

Gloves

Latex Disposable Qty.____
Butyl Rubber Qty.____
Nitrile Qty.____
Neoprene Qty.____
Viton Qty.____
Winter Drilling Qty.____
Other_____ Qty.____

Boots

Neoprene Qty.____
Latex Disposable Qty.____
Steel-Toe Qty. 2
Other_____ Qty.____

TLD Radiation Badges

Qty. 2

Respirator Cartridges

Other_____ Qty.____
GMC-H Qty.____
GMP Qty.____
APR HEPA Qty.____

Drager Tube

HCN Qty.____
Sulfuric Acid Qty.____
Natural Gas (Methane) Qty.____
Arsenic Trioxide Qty.____
Ammonia Qty.____

Vinyl Chloride Qty.____
Other_____ Qty.____

Fully-Encapsulated Suits

I.D. Letters: Qty.____

S.C.B.A's

I.D. Letters: Qty.____

Extra Air Cylinder

I.D. Letters: Qty.____

Robert Shaws

I.D. Letters: Qty.____

Fully-Encapsulated Suits

I.D. Letters: Qty.____

ON-SITE SAFETY LOG

ECOLOGY AND ENVIRONMENT, INC.
CHICAGO

A. ON-SITE MONITORING

	EQUIPMENT USED	BACKGROUND READING IN BREATHING ZONE	CALIBRATED AT	ON-SITE READING IN BREATHING ZONE
1.				
2.				
3.				
4.				
5.				

B. PROTECTIVE CLOTHING WORN: _____

C. SITE NAME: Triem Steel & Processing PROJECT NUMBER: R5-8410-01
DATE: _____
WEATHER CONDITIONS: _____
NAMES OF ATTENDEES AT SITE: _____

D. COMMENTS ON MONITORING OR PROTECTIVE CLOTHING _____

	NAME	SIGNATURE
TEAM LEADER:		
SITE SAFETY OFFICER:		

(P.D. Moss, 1/85)

SITE DOSIMETER LOG

TDD# R5-8410-01 SITE NAME Triem Steel

SITE SAFETY OFFICER Ryan WEEK OF April 8, 1985

NAME AND DOSIM. #	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Ryan SD							
Vaughan							

To the nearest half-hour, record time spent downrange as "S" (e.g., S: 2.5 hrs), time spent in active PDS operation as "P", and any time spent downrange in rescue activity as "R".

Medtox Hotline

1. Twenty-four hour answering service - (501) 370-8263

   What to Report:

   - State: "This is an emergency."
   - Your name, region, and site
   - Telephone number to reach you
   - Name of person injured or exposed
   - Nature of emergency
   - Action taken

2. One of three toxicologists (Drs. Raymond Harbison, Richard Freeman, or Robert James) will contact you. Repeat the information given to the answering service.

3. If a toxicologist does not return your call within 15 minutes, call the following persons in order until contact is made:

   E & E Corporate Headquarters (EST 0830-1700) - (716) 632-4491

   a. Twenty-four hour line - (716) 631-9530

   b. Corporate Safety Director - David Dahlstrom (home - (716) 741-2384)

   c. Assistant Corporate Safety Officer - Steve Sherman (home (716) 688-0084)

Regional Office

Office Phone Number: (312) 663-9415

	Name	Home
Team Leader	Joe Petrilli	(312) 355-5549
Regional Safety Coordinator	Paul Moss	(312) 358-9342

PM:3F

RS-8410-01

IL-0043-04

FIELD INVESTIGATION TEAM
SITE SAFETY PLAN

A. GENERAL INFORMATION

SITE: TRIEM STEEL & PROCESSING, INC. TDD NO: ~~R05-8410-01~~

WSTS NO: IL 0043

LOCATION: 26TH & STATE / CHICAGO HEIGHTS, IL. 60411

PLAN PREPARED BY: KURT SIMS DATE: 6-27-86

APPROVED BY: DATE:

OBJECTIVE (including description of work to be performed):

OFF-SITE INSPECTION & PHOTOGRAPHIC SURVEY FOR FURTHER INFORMATION RE: DRILLING PROPOSAL

PROPOSED DATE OF INVESTIGATION: ~~7-8/9-86~~

BACKGROUND REVIEW: Complete: ✓ Preliminary:

DOCUMENTATION SUMMARY: OVERALL HAZARD: Serious: Moderate: ✓

Low: Unknown:

B. SITE/WASTE CHARACTERISTICS

WASTE TYPE(S): Liquid ✓ Solid ___ Sludge ✓ Gas ___

CHARACTERISTIC(S): Corrosive ✓ Ignitable ___ Radioactive ___

Volatile ✓ Toxic ✓ Reactive ✓ Unknown ___ Other (Name) ___

FACILITY DESCRIPTION: 45 ACRE LANDFILL CAPPED IN 1977. THIS IS AN OLD CLAY PIT. WATER TABLE IS APPARENTLY BELOW FILL.

Principal Disposal Method (type and location): LANDFILL

Unusual Features (dike intergrity, power lines, terrain, etc.): INSPECTION TO DETERMINE THIS

Status: (active, inactive, unknown) CAPPED IN 1977.

History: (Worker or non-worker injury; complaints from public; previous agency action): RESIDENTIAL COMPLAINT OF METHANE IN HOMES - 1977. NO COMPLAINTS SINCE THEN.
HRS COMPLETED 4/16/86 WITH SCORE 27.81

C. HAZARD EVALUATION

(Use Hazard Evaluation of Chemicals sheets for specific or representative chemicals present.):
LIQUID SLUDGE AS PICKLE LIQUOR & OILY WASTE
BENZENE, SULPHURIC ACID, IRON & ZINC PROBABLE.

D. SITE SAFETY WORK PLAN

PERIMETER ESTABLISHMENT: Map/Sketch Attached YES Site Secured? UNK
Perimeter Identified? NO Zone(s) of Contamination Identified? NO

PERSONAL PROTECTION
Level of Protection: A ___ B ___ C ___ D ✓
Modifications: SINCE SURVEY WILL BE FROM OFF-SITE NO UPGRADING IS EXPECTED.

Surveillance Equipment and Materials:

DECONTAMINATION PROCEDURES: NA

Special Equipment, Facilities, or Procedures: NONE

SITE ENTRY PROCEDURES: NO ENTRY REQUIRED

Team Member	Responsibility
KURT SIMS	LEADER
	TEAM MEMBER

WORK LIMITATIONS (Time of day, etc.): DAYLIGHT OFF-SITE SURVEY

INVESTIGATION-DERIVED MATERIAL DISPOSAL: NA

E. EMERGENCY INFORMATION*

LOCAL RESOURCES

Ambulance DALEY AMBULANCE SERVICE 755-4034
Hospital Emergency Room ST. JAMES HOSP. 756-1000
Poison Control Center RUSH PRES. ST. LUKE 1-800-942-5969
Police CHI. HTS. 754-2121
Fire Department CHI. HTS. 754-2121
Airport NA
Explosives Unit NA
EPA Contact DON JOSIF 886-0393

SITE RESOURCES

Water Supply NA
Telephone
Radio
Other

EMERGENCY CONTACTS

1. Mr. Raymond Harbison (University of Arkansas) ..... (501) 661-5766 or 661-5767
   MED-TOX ..... (501) 370-8263 (24 hours)
2. Regional Safety Coordinator - Paul Moss ..... (312) 541-6635 (Home)
3. Regional Project Manager- Rene Van Someren ..... (312) 763-7335
4. FIT Office ..... (312) 663-9415
5. E & E 24 Hour Call Line ..... (716) 631-9530 (24 Hours; Call Forwarding)
6. Regional Health Maintenance Program Contact ..... PMI - (312) 832-8820
   8:00 a.m. - 5:00 p.m.
7. Paul Jonmaire..... (716) 631-9530 (Response Center)
   Corporate Safety Director (716) 632-4491 (office)
8. Ecology and Environment, Inc. NPMO ..... (703) 522-6065

F. EMERGENCY ROUTES

(Give road or other directions; attach map)

Hospital: ST. JAMES IS AT 1423 CHICAGO RD.
FROM SITE GO NORTH ON STATE ST. TO LINCOLN
HWY. FOLLOW THIS WEST TO CHICAGO RD.
HOSPITAL IS AT THE SE CORNER OF INTERSECTION.

Medtox Hotline

1. Twenty-four hour answering service - (501) 370-8263

   What to Report:

   - State: "This is an emergency."
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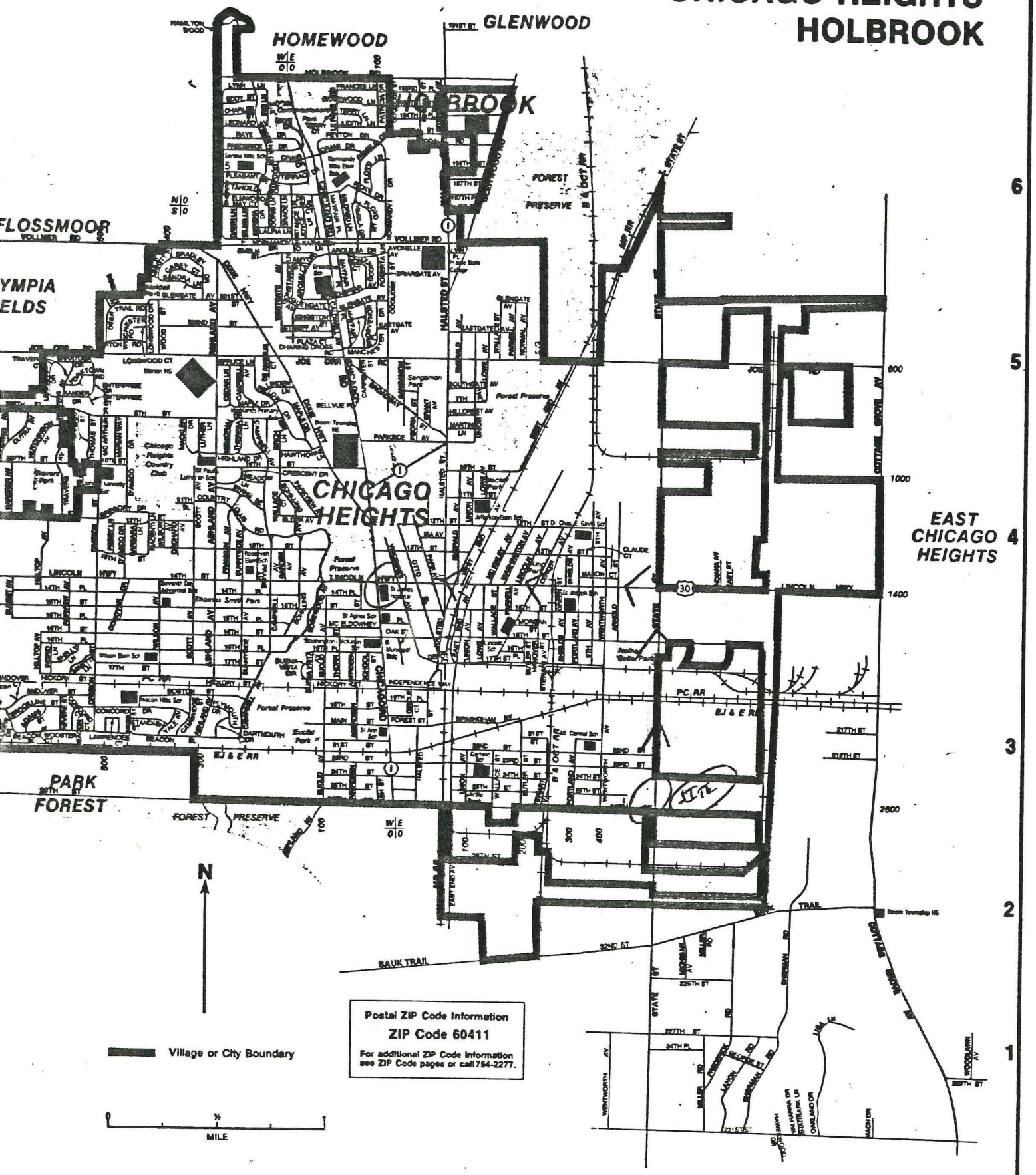
   c. Assistant Corporate Safety Officer - Steve Sherman (home (716) 688-0084)

Regional Office

Office Phone Number: (312) 663-9415

	Name	Home
Team Leader	Rene' Van Someren	(312)763-7335
Regional Safety Coordinator	Paul Moss	(312)541-6635

CHICAGO HEIGHTS
HOLBROOK



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