Cerclis #
NJD002188811

EPA

POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION	SITE NUMBER (to be assigned by Hq)
II	NJ000003204

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II *(Preliminary Assessment)*. File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force *(EN-335)*; 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: Pfizer Incorporated (Sites A & B)

B. STREET *(or other identifier)*: 100 Jefferson Road

C. CITY: PARSIPPANY

D. STATE: N.J.

E. ZIP CODE: 07054

F. COUNTY NAME: MORRIS

G. OWNER/OPERATOR *(if known)*

1. NAME: Leeming/Pacquin Divisions of Pfizer Inc.

2. TELEPHONE NUMBER: (201) 887-2100

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4 MUNICIPAL ☒ 5 PRIVATE ☐ 6 UNKNOWN

I. SITE DESCRIPTION

Abandoned septic system (site A) and surface leachfield (site B)

J. HOW IDENTIFIED *(i.e., citizen's complaints, OSHA citations, etc.)*

NJDEP site visit on 3/12/80

K. DATE IDENTIFIED *(mo., day, & yr.)*: 3-12-80

L. PRINCIPAL STATE CONTACT

1. NAME: Tom Brady

2. TELEPHONE NUMBER: (609)-292-9120

II. PRELIMINARY ASSESSMENT *(complete this section last)*

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4 NONE ☐ 5 UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED *(no hazard)*

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED *(low priority)*

C. PREPARER INFORMATION

1. NAME: Richard Ramon

2. TELEPHONE NUMBER: (212)-264-1573

3. DATE *(mo., day, & yr.)*: 7-17-80

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE *(Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)*

☒ 2. INACTIVE *(Those sites which no longer receive wastes.)*

☐ 3. OTHER *(specify)*: *(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)*

B. IS GENERATOR ON SITE?

☐ 1. NO ☒ 2. YES *(specify generator's four-digit SIC Code)*:

C. AREA OF SITE *(in acres)*: 1

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE *(deg.—min.—sec.)*

2. LONGITUDE *(deg.—min.—sec.)*

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☒ 2. YES *(specify)*:

252509

T2070-2 (10-79)

Continue On Reverse

Continued From Front

IV. CHARACTERIZATION OF SITE ACTIVITIES

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE	X	5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify): Septic tank		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING	X	7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY	X	8. OTHER (specify): SITE B - surface leach field site A - subsurface drain field
				X	9. OTHER (specify): site A - Septic tank		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [X] 2. LIQUID [X] 3. SOLID [X] 4 SLUDGE [ ] 5. GAS

B. WASTE CHARACTERISTICS

[ ] 1. UNKNOWN [X] 2. CORROSIVE [ ] 3. IGNITABLE [X] 4 RADIOACTIVE [ ] 5 HIGHLY VOLATILE
[X] 6. TOXIC [ ] 7 REACTIVE [X] 8 INERT [X] 9 FLAMMABLE

[ ] 10. OTHER (specify):

C. WASTE CATEGORIES

1 Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
[ ] (1) PAINT, PIGMENTS	[X] (1) OILY WASTES	[ ] (1) HALOGENATED SOLVENTS	[ ] (1) ACIDS	[ ] (1) FLYASH	[ ] (1) LABORATORY PHARMACEUT.
[X] (2) METALS SLUDGES	[X] (2) OTHER (specify): oil sludges	[ ] (2) NON-HALOGNTD. SOLVENTS	[ ] (2) PICKLING LIQUORS	[ ] (2) ASBESTOS	[ ] (2) HOSPITAL
[ ] (3) POTW		[ ] (3) OTHER (specify):	[ ] (3) CAUSTICS	[ ] (3) MILLING/ MINE TAILINGS	[ ] (3) RADIOACTIVE
[ ] (4) ALUMINUM SLUDGE			[ ] (4) PESTICIDES	[ ] (4) FERROUS SMLTG. WASTES	[ ] (4) MUNICIPAL
[ ] (5) OTHER (specify):			[ ] (5) DYES/INKS	[ ] (5) NON-FERROUS SMLTG. WASTES	[ ] (5) OTHER (specify):
			[ ] (6) CYANIDE	[ ] (6) OTHER (specify):	
			[ ] (7) PHENOLS		
			[ ] (8) HALOGENS		
			[ ] (9) PCB		
			[ ] (10) METALS		
			[ ] (11) OTHER (specify)		

 Continue On Page 3

Continued From Page 2

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE *(place in descending order of hazard)*.

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD *(mark 'X')*	C. ALLEGED INCIDENT *(mark 'X')*	D. DATE OF INCIDENT *(mo., day, yr.)*	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE				
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY		X	1968	A twp public supply well had to be closed due to contamination by metamine + chloroform
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER	X			
8. CONTAMINATION OF SURFACE WATER	X			Headwaters of Eastman Creek is on Pfizer Property
9. DAMAGE TO FLORA/FAUNA				
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL	X			
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY				
20. INCOMPATIBLE WASTES				
21. MIDNIGHT DUMPING				
22. OTHER *(specify)*:				

Continue On Reverse

SITE INSPECTION REPORT NJ000003204 | II

GENERAL INSTRUCTIONS. Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log Book. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency, Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

FUNCERCLIS NJD002188811

A. SITE NAME	B. STREET (or other identifier)		
Pfizer Incorporated (Sites A & B)	100 Jefferson Road		
C. CITY	D. STATE	E. ZIP CODE	F. COUNTY NAME
Parsippany	N.J.	07054	Morris

G. SITE OPERATOR INFORMATION

1. NAME	2. TELEPHONE NUMBER		
Leeming/Pacquin Divisions of Pfizer Inc.	(201) 887-2100		
3. STREET	4. CITY	5. STATE	6. ZIP CODE
100 Jefferson Rd.	Parsippany	N.J.	07054

H. REALTY OWNER INFORMATION (if different from operator of site)

1. NAME	2. TELEPHONE NUMBER	
Same		
3. CITY	4. STATE	5. ZIP CODE

I. SITE DESCRIPTION

Abandoned septic system (site A) and surface leachfield (site B)

J. TYPE OF OWNERSHIP

[ ] 1. FEDERAL [ ] 2. STATE [ ] 3. COUNTY [ ] 4. MUNICIPAL [X] 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.)	B. APPARENT SERIOUSNESS OF PROBLEM
	[ ] 1. HIGH [ ] 2. MEDIUM [ ] 3. LOW [ ] 4. NONE

C. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE
Thomas Brady, Wayne Howitz	Prin. Envir. Tech. & Envir. Specialist

3. ORGANIZATION	4. TELEPHONE NO. (area code & no.)
TSIU NJ.DEP	(609) 292-9368

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Richard A Venes	Plant Engineer	Plant
Max Schubert	Parsippany Twp. Health Officer	Township Building (201) 334-3600

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Leeming/Pacquin Div. of Pfizer Inc.			see attached Eckhardt Info. sheet

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
N/A			

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
N/A		

G. DATE OF INSPECTION (mo., day, & yr.): 3/12/80

H. TIME OF INSPECTION: 10:30 AM

I. ACCESS GAINED BY: (credentials must be shown in all cases) [X] 1. PERMISSION [ ] 2. WARRANT

J. WEATHER (describe): Cool, clear, rain on preceeding day

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

Continue On Page 3

IV. SAMPLING INFORMATION (continued)

PHOTOS

1. TYPE OF PHOTOS
[ ] a. GROUND [ ] b. AERIAL

2. PHOTOS IN CUSTODY OF:

SITE MAPPED?

[X] YES, SPECIFY LOCATION OF MAPS

attached

COORDINATES

1. LATITUDE (deg.-min.-sec.)
40° 51' 30"

2. LONGITUDE (deg.-min.-sec.)
74° 25' 30"

V. SITE INFORMATION

SITE STATUS

[ ] 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if intermittently.)

[X] 2. INACTIVE (Those sites which no longer receive wastes.)

[ ] 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

IS GENERATOR ON SITE?

[ ] 1. NO [X] 2. YES (specify generator's four-digit SIC Code):

A. AREA OF SITE (in acres)
less than 1 acre per site

D. ARE THERE BUILDINGS ON THE SITE?
[ ] 1. NO [X] 2. YES (specify): Site A-under warehouse & parking lot. Site B under parking lot.

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
1. MAIL		1. PILE		1. FILTRATION		1. LANDFILL
2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
3. BARGE		3. [illegible]		3. VOLUME REDUCTION		3. OPEN DUMP
4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
5. PIPELINE	X	5. TANK, BELOW GROUND		5. CHEM./PHYS./TREATMENT		5. MIDNIGHT DUMPING
6. OTHER (specify):		6. OTHER (specify): Septic tank		6. BIOLOGICAL TREATMENT		6. INCINERATION
				7. WASTE OIL REPROCESSING	X	7. UNDERGROUND INJECTION
				8. SOLVENT RECOVERY	X	8. OTHER (specify): Site B-surface leach field. Site A-sub-surface drain field
			X	9. OTHER (specify): Site A-Septic Tank		

SUPPLEMENTAL REPORTS. If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this form.

[ ] 1. STORAGE [ ] 2. INCINERATION [ ] 3. LANDFILL [ ] 4. SURFACE IMPOUNDMENT [ ] 5. DEEP WELL

[ ] 6. CHEM/BIO/PHYS TREATMENT [ ] 7. LANDFARM [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

WASTE TYPE

[X] 1. LIQUID [X] 2. SOLID [X] 3. SLUDGE [ ] 4. GAS

WASTE CHARACTERISTICS

[ ] 1. CORROSIVE [X] 2. IGNITABLE [ ] 3. RADIOACTIVE [X] 4. HIGHLY VOLATILE

[X] 5. TOXIC [ ] 6. REACTIVE [X] 7. INERT [X] 8. FLAMMABLE

[ ] 9. OTHER (specify):

WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

Yes, see attached Eckhardt sheet.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
(1) PAINT, PIGMENTS	X (1) OILY WASTES	(1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY, PHARMACEUT.
X (2) METALS SLUDGES	X (2) OTHER (specify) Oil sludges	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify)	(3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER (specify)			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify)
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			X (11) OTHER (specify) see attached Eckhardt list.		

VII. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

[ ] A. HUMAN HEALTH HAZARDS

 Continue On Page 5

[ ] C. WORKER INJURY/EXPOSURE

[X] D. CONTAMINATION OF WATER SUPPLY

Mr. Schubert stated that a township public supply well had to be closed in 1968 due to contamination by metamine and chloroform. This well was located a few hundred feet from the Pfizer Plant, and the source of the pollution was found to be Pfizer.

A present well is still operated by Pfizer on their property and has a cross-connection with the township's public supply.

[ ] F. CONTAMINATION OF FOOD CHAIN

[X] F. CONTAMINATION OF GROUND WATER

Both systems used percolation for ultimate disposal of liquids, and were in use for nine years.

[X] G. CONTAMINATION OF SURFACE WATER

Headwaters of Eastman's Creek is on Pfizer property, any leachate from septic system may find it's way to stream.

I. FISH KILL

J. CONTAMINATION OF AIR

K. NOTICEABLE ODORS

X L. CONTAMINATION OF SOIL

In 1964, township disapproved further use of site "A" septic system because of constant plugging up of system with solids. Township has no record of either systems or contaminated soils ever being removed, although company says tanks and fields were removed before parking lots installed.

M. PROPERTY DAMAGE

Continue On Page 7

[ ] O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

[ ] P. SEWER/STORM DRAIN PROBLEMS

[ ] Q. EROSION PROBLEMS

[ ] R. INADEQUATE SECURITY

[ ] S. INCOMPATIBLE WASTES

Continue On Reverse

VIII. HAZARD DESCRIPTION (continued)

[ ] I. MIDNIGHT DUMPING

[X] II. OTHER (specify)

All wastes now are routed through an on-site dissolved air flotation unit for seperation/concentration and disposal to Parsippany-Troy Hills STP.

Use of DAF systems rather than biological treatment, such as activated sludge, may indicate inability to be biologically degradeable. If this is the case, very little decomposition o breakdown of the materials would have occured in the septic system, which could have resulted in substantial soil and water contamination over the eight years the system was in use.

Company manufacturers cosmetic products, such as cold creams, toothpaste, etc.

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. RESIDENTIAL AREAS	Less than 50 homes	X	50	1/2 mile
2. COMMERCIAL OR INDUSTRIAL AREAS	Large industrial park Several hundred units	X	10-15	1/2 mile
3. HEAVILY TRAVELLED AREAS	Several heavily travelled roads	X	—	1/2 mile
4. PUBLIC USE AREAS (parks, schools, etc.)	none	X	—	1/2 mile

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
0-1 Foot		potable
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
	On-site	

G. TYPE OF DRINKING WATER SUPPLY

[X] 1. NON-COMMUNITY (≤15 CONNECTIONS) [X] 2. COMMUNITY (specify town) (>15 CONNECTIONS) Parsippany Twp.

[ ] 3. SURFACE WATER [X] 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (Continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')
Pfizer		On site	X	X

I. RECEIVING WATER

1. NAME: Troy Brook

[ ] 2. SEWERS [X] 3. STREAMS/RIVERS [ ] 4. LAKES/RESERVOIRS [ ] 5. OTHER (specify)

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

FW-2

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN

[ ] A. KNOWN FAULT ZONE [ ] B. KARST ZONE [ ] C. 100 YEAR FLOOD PLAIN [ ] D. WETLAND

[ ] E. A REGULATED FLOODWAY [ ] F. CRITICAL HABITAT [ ] G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark "X" to indicate the type(s) of geological material observed and specify where necessary, the component parts.

A. OVERBURDEN	X	B. BEDROCK (specify below)	X	C. OTHER (specify below)
1. SAND		greater than 10 feet		
2. CLAY				
3. GRAVEL				

XIII. SOIL PERMEABILITY

[ ] A. UNKNOWN [ ] B. VERY HIGH (100,000 to 1000 cm/sec.) [ ] C. HIGH (1000 to 10 cm/sec.)

[ ] D. MODERATE (10 to .1 cm/sec.) [X] E. LOW (.1 to .001 cm/sec.) [ ] F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

[ ] 1. YES [ ] 2. NO 3. COMMENTS

H. DISCHARGE AREA

[ ] 1. YES [ ] 2. NO 3. COMMENTS

I. SLOPE

1. ESTIMATED % OF SLOPE: 0-5

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

J. OTHER GEOLOGICAL DATA

Parsippany silt loam - sandy loam substratum

Continue On Reverse

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X') 1. YES	2. NO	3. UNKNOWN
NPDES	USAPA	cooling water process water					

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

[ ] NONE [X] YES (summarize in this space)

Township order to discontinue use of septic system-1964, Company used several haulers between 1964-1975 to dispose of waste materials off-site, than installed DAF unit and trucked material to PAR-Troy STP.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (*Section II*) information on the first page of this form.

EPA

POTENTIAL HAZARDOUS WASTE SITE LOG

SITE NUMBER: NJ000003204

NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.

SITE NAME: PFIZER INCORPORATED 100 JEFFERSON RD.

CITY: PARSIPPANY | STATE: NJ | ZIP CODE:

SUMMARY OF POTENTIAL OR KNOWN PROBLEM

ITEM	DATE OF DETERMINATION OR COMPLETION	RESPONSIBLE ORGANIZATION OR INDIVIDUAL (EPA, State, Contractor, Other)	PERSON MAKING ENTRY TO LOG FORM	DATE ENTERED ON LOG (mo,day,yr)
1. IDENTIFICATION OF POTENTIAL PROBLEM	3-12-80	EPA	R. RAMON	7-18-80
2. PRELIMINARY ASSESSMENT	7-18-80	EPA	R. RAMON	7-18-80
APPARENT SERIOUSNESS OF PROBLEM:	☐ HIGH	☐ MEDIUM ☒ LOW	☐ NONE	☐ UNKNOWN
3. SITE INSPECTION	3-12-80	STATE	R. RAMON	7-18-80
4. EPA TENTATIVE DISPOSITION (check appropriate item(s) below)				
☐ a. NO ACTION NEEDED				
☐ b. INVESTIGATIVE ACTION NEEDED				
☐ c. REMEDIAL ACTION NEEDED				
☐ d. ENFORCEMENT ACTION NEEDED				
5. EPA FINAL STRATEGY DETERMINATION (check appropriate item(s) below)				
☐ a. NO ACTION NEEDED				
☐ b. REMEDIAL ACTION NEEDED				
☐ c. REMEDIAL ACTION NEEDED BUT, NO RESOURCES AVAILABLE				
☐ d. ENFORCEMENT ACTION NEEDED				
☐ (1) CASE DEVELOPMENT PLAN PREPARED				
☐ (2) ENFORCEMENT CASE FILED OR ADMINISTRATIVE ORDER ISSUED				
6. STRATEGY COMPLETED				

EPA Form T2070-1 (10-79)

LEEMING/PACQUIN
DIVISION OF PFIZER INC. • 100 JEFFERSON ROAD • PARSIPPANY, N.J. 07054 • 201-887-2100

April 23, 1980

Mr. Thomas Brady
Toxic Substances Unit
Solid Waste Administration, NJ DEP
32 East Hanover Street - Room 203
Trenton, New Jersey 08608

RE: Inactive Waste Disposal Sites
Parsippany A - Parsippany B-

Dear Mr. Brady:

The on-site disposal site designated as "Parsippany A" in the Waste Disposal Site Survey, which was deactivated in 1964, was excavated as part of a warehouse expansion project in 1970-1971. Both tanks and leach fields were removed and new dirt put in to allow construction. The material was removed from site as part of the project and its disposal site was believed to be ~~Sharkey's Farms.~~

dirt removed?

The site designated as "Parsippany B" was deactivated in 1965. Some excavation occurred in that area at the time of a facility expansion project in 1967, though I cannot say with certainty that the entire field was removed. The area was prepared for pavement and normal site work occurred.

I have been employed at the Parsippany facility continuously since 1957 and the above represents my best recollection of events that occurred.

It is our understanding you have determined that our site does not pose a threat on the environment, and that upon receipt of this confirmation letter your file would be closed on this matter.

Sincerely,

Leonard S. Japowicz

Leonard S. Japowicz
Vice President - Manufacturing

HAZARDOUS WASTE SITE STATUS

Name & Address
PFIZER INC.
100 JEFFERSON RD.
PARSIPPANY, N.J. 07054

Site Number
NJ 0000003204

Staff Responsible
RICHARD RAMON

County
MORRIS

Agency Responsible
____ EPA ____ State ____ None

Preliminary Assessment Rating
LOW

Date of Assessment
7-17-80

Tentative Disposition
NO ACTION NEEDED

Date of Disposition
8-6-80

Site Inspection Requested ____ Yes ____ No

Date of Request

Date of Inspection
3-12-80 DEP

Date of Report
N/A

Site Inspection Rating
N/A

JRB Rating

Sampling Requested ____ Yes ____ No

Date of Request

Date of Sampling

Date of Report

Final Strategy Determination -
(based on sampling results)

Date of Determination

Enforcement by EPA ____ Yes ____ No

Date of Case Development Plan

Enforcement Team Leader

Technical Staff -

Legal Staff -

S&A Field Staff -

FIT Staff -

Enforcement Case Filed Date

Administrative Order Issued Date

Current Location of File	File Holder
✓ Assessment Staff	RICH RAMON
____ Case Development Staff	
____ Enforcement Division	
____ Other	

EPA

POTENTIAL HAZARDOUS WASTE SITE TENTATIVE DISPOSITION

REGION	SITE NUMBER
II	NJD000003204

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: Pfizer Incorporated (Sites A & B)

B. STREET: 100 Jefferson Road

C. CITY: Parsippany

D. STATE: New Jersey

E. ZIP CODE: 07054

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY: EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD	X				
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)					
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR DISPOSITION

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME: Richard Ramon

2. TELEPHONE NUMBER: (212) - 264 - 1573

3. DATE (mo., day, & yr.): 8-6-80

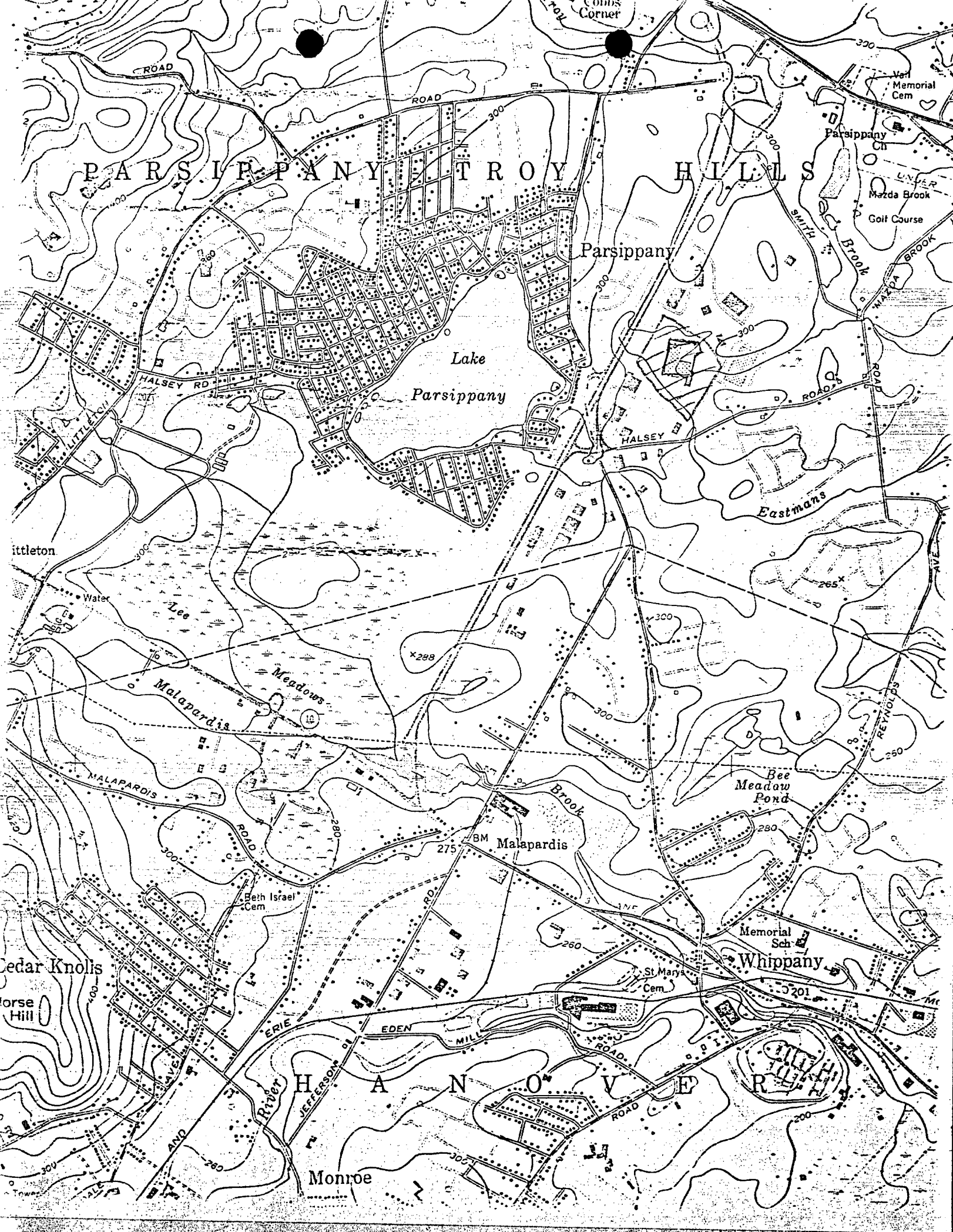
III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo, day, & yr)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1)				
(2)				
(3)				
b. TYPE OF MONITORING				
(1)				
(2)				
c. TYPE OF SAMPLING				
(1)				
(2)				

Continue On Reverse


PARSIPPANY TROY HILLS
Parsippany
Lake Parsippany
Eastmans
Lee Meadows
Malapardis
Bee Meadow Pond
Brook
Malapardis
Whippany
Monroe
Cedar Knolls
Horse Hill
Parsippany Ch
Mazda Brook
Golf Course
Veil Memorial Cem
Beth Israel Cem
St Marys Cem
Memorial Sch
Water
Tower
Comb Corner
ROAD
HALSEY RD
HALSEY ROAD
MALAPARDIS ROAD
ERIE AVE
EDEN MILL ROAD
JEFFERSON RD
AND
River
SMITH
MAZDA BROOK
REYNOLDS
LITTLETON
ittleton
201
275
BM
300
280
260
265
288
200

SITE: NUMBER 1750 PAGE 1 FOR THIS SITE
PARSIPPANY-A
100 JEFFERSON ROAD
PARSIPPANY,NJ 07054

MORRIS CO.

COMPANY: COMPANY-FACILITY NUMBER 39015
PFIZER, INC.
CONSUMER PRODUCTS DIVISION
PARSIPPANY PLANT
100 JEFFERSON ROAD
PARSIPPANY,NJ 07054

FIRST YEAR USED: 1957
LAST YEAR USED: 1964

HUNDRED TONS:
THOUSAND CUBIC YDS.:
THOUSAND GALLONS: 4200.

COMPOSITION OF WASTE:

HEAVY1

HEAVY4

ORGAN1

ORGAN20

INORG1 INORG2

MISCELLANEOUS HEAVY METALS
MISCELLANEOUS ORGANICS
MISCELLANEOUS INORGANICS
SALTS
IRON, MANGANESE, MAGNESIUM
OILS + OIL SLUDGES

LEGEND: IF LISTED, THEN PRESENT IN WASTED. IF NOT LISTED, THEN ITEM NOT PRESENT, NOT KNOWN IF PRESENT, OR DATA MISSING.

SITE: NUMBER 1751 PAGE 1 FOR THIS SITE
PARSIPPANY-B
100 JEFFERSON ROAD
PARSIPPANY,NJ 07054

COMPANY: COMPANY-FACILITY NUMBER 39015
PFIZER, INC.
CONSUMER PRODUCTS DIVISION
PARSIPPANY PLANT
100 JEFFERSON ROAD
PARSIPPANY,NJ 07054

FIRST YEAR USED: 1957
LAST YEAR USED: 1965

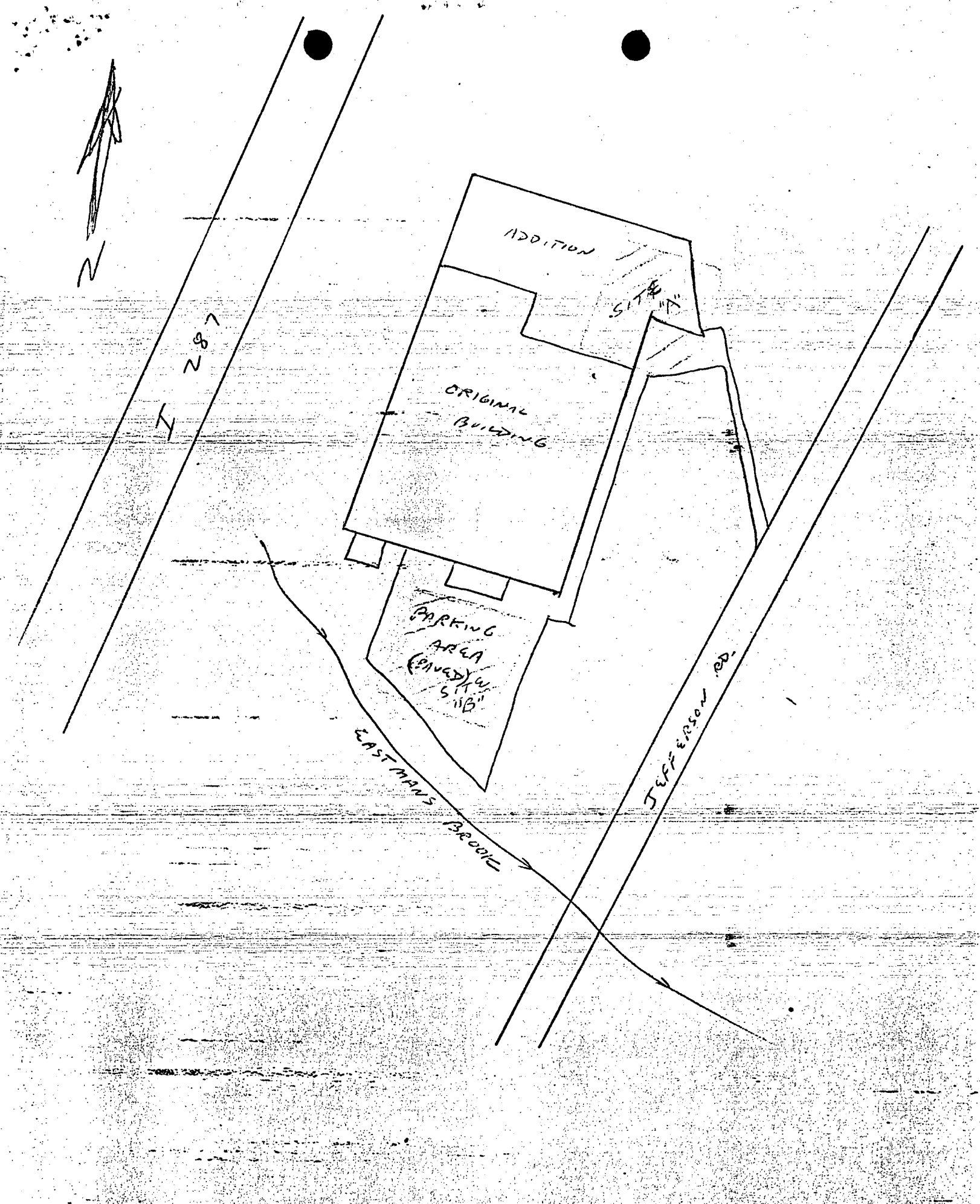
HUNDRED TONS: .
THOUSAND CUBIC YDS.: .
THOUSAND GALLONS: 128

COMPOSITION OF WASTE:

ORGAN1
ORGAN10
ORGAN21
INORG1
INORG2
MISC1
MISC8

MISCELLANEOUS ORGANICS
MISCELLANEOUS INORGANICS
MISCELLANEOUS MATERIALS
AMIDES, AMINES, IMINES
SALTS
ESTERS, ETHERS
WASTES WITH FLASH POINT BELOW 140°F

LEGEND: IF LISTED, THEN PRESENT IN WASTED. IF NOT LISTED, THEN ITEM NOT PRESENT, NOT KNOWN IF PRESENT, OR DATA MISSING.



PITZER INC., PARSIPPANY