

Attachment 28 to

GNRO-2012/00039

**ER Reference - GGNS. 2010e. Grand Gulf Nuclear Station,
SARA/Title III 2009 Hazardous Chemical Inventory,
Correspondence GEXO-2010/00131. February 26, 2010**



Entergy Operations, Inc.
P.O. Box 756
Port Gibson, MS 39150
Tel 601 437 2800

February 26, 2010

Mr. Roderick Devoual, Director
Claiborne County Emergency Planning Committee
P.O. Box 558
Port Gibson, MS 39150

SUBJECT: Grand Gulf Nuclear Station
SARA/Title III 2009
Hazardous Chemical Inventory

GEXO- 2010/ 00131

Dear Mr. Devoual:

We have attached the Grand Gulf Nuclear Station's 2009 Chemical Inventory Forms.

2009 changes:

1. Deleted- Nalco PCL 361
2. Added- Nalco 3D Trasar 3DT121
3. Added- Nalco 73551 Biosurfactant

An electronic copy has been sent to Mississippi Emergency Management Agency (MEMA).

If you have any questions concerning this report, please contact Rosie Bevely, at 601-437-2497.

Sincerely,

A handwritten signature in black ink that reads "Christopher Q. Lewis".

Christopher Lewis
Manager, Emergency Preparedness
Grand Gulf Nuclear Station

Handwritten initials in black ink, appearing to be "RWB/JML/rwb".
RWB/JML/rwb

Attachment: Chemical Inventory Forms





Entergy

GEXO-2010/

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Entergy Operations, Inc.

P.O. Box 756

Port Gibson, MS 39150

Tel 601 437 2800

cc:

Mr. Kelvin Shaifer, Chief w/a
Claiborne County Fire Department
P.O. Box 338
Port Gibson, MS 39150

Mr. J. Goldstein (K-WPO-12E) w/a
Mr. M.J. Larson w/o
Mr. J. R. Douet w/o
Mr. J. G. Browning w/o
Mr. K. Higginbotham w/o
File [CHEM]
File [CENTRAL] [12]



**Tier Two Emergency and Hazardous Chemical Inventory
Reporting Period From January 1 to December 31, 2009**

Facility Identification Name Grand Gulf Nuclear Station (GGNS) Street 7003 Bald Hill Road City Port Gibson County Claiborne State MS Zip 39150 Latitude _____ Longitude _____ Country USA	Owner/Operator Name Name Entergy Operations Phone 601-368-5000 Mail Address P. O. Box 21995 City Jackson State MS Zip 39286 Country USA
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Mailing Address (if different from facility address) Street P.O. Box 756 City Port Gibson State MS Zip 39150 Country USA NAICS Code 221113 Dun & Brad Number 61-616-9751	Emergency Contact Name Shift Manager Title _____ Phone _____ 24 Hr. Phone 601-437-2374 Name _____ Title _____ Phone _____ 24 Hr. Phone _____
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Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS _____ Trade Secret <input type="checkbox"/> Chem. Name 3D Trasar 3DT121 Check All That Apply <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	05 Max. Daily Amount (code) 05 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Chemical Injection Area
			A	1	4	Unit 1 Cooling Tower
			O	1	4	Standby Service Water Basin
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 124-38-9 Trade Secret <input type="checkbox"/> Chem. Name Carbon Dioxide Check All That Apply <input checked="" type="checkbox"/> Pure <input type="checkbox"/> Mix <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	2	6	Protected Fenced Area

Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 10, and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete. Richard Scarbrough / Chemistry Manager <i>Richard Scarbrough</i> Name and official title of owner/operator OR owner/operator's authorized representative Signature Date signed 2/25/2010	Optional Attachments <input type="checkbox"/> I have attached a site plan <input type="checkbox"/> I have attached a list of site coordinate abbreviations <input type="checkbox"/> I have attached a description of dikes and other safeguards measures
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Chemical Description	Physical and Health Hazards	Inventory	Storage Codes and Locations (Non-Confidential)			
			Container Type	Pressure	Temperature	
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7440-44-0 Trade Secret <input type="checkbox"/> Chem. Name Charcoal (Activated Carbon) Check All That Apply: Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	6	Unit 1 Radwaste Building
			D	1	4	Protected Fenced Area
			D	2	4	Unit 1 Warehouse
			C	2	4	Water Treatment Building
			C	2	4	Ionics Trailer
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7782-50-5 Trade Secret <input type="checkbox"/> Chem. Name Chlorine Check All That Apply: Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS <input checked="" type="checkbox"/>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	02 Max. Daily Amount (code) 02 Avg. Daily Amount (code) 365 No. of Days On-site (days)	L	2	4	Sewage Treatment Plant
			L	2	4	Site (Potable) Water Plant
			L	2	4	Utility Group Maintenance Bldg
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 68476-34-6 Trade Secret <input type="checkbox"/> Chem. Name Diesel Fuel OIL # 2 Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	06 Max. Daily Amount (code) 06 Avg. Daily Amount (code) 365 No. of Days On-site (days)	B	1	4	Unit I Diesel Generator Tanks
			B	1	4	Energy Services Center (ESC)
			A	1	4	Vehicle Maintenance Shop
			A	1	4	Protected Fenced Area
			A	1	4	Plant Site Area
Additional storage locations for Diesel Fuel OIL # 2			C	1	4	Fire Water Pump House
			C	1	4	Unit I Diesel Generator Day Tanks

Chemical Description	Physical and Health Hazards	Inventory	Storage Codes and Locations (Non-Confidential)			
			Container Type	Pressure	Temperature	
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 107-21-1 Trade Secret <input type="checkbox"/> Chem. Name Ethylene Glycol Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	2	6	Unit 1 Radwaste Building
			D	1	4	Unit 1 Warehouse Chemical Storage Area
			E	1	4	Vehicle Maintenance Shop
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 57018-52-7 Trade Secret <input type="checkbox"/> Chem. Name Fire Fighting Foam (Propylene Glycol T-Butyl Ether) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	P	1	4	Various Plant Locations
			D	1	4	Unit 2 Warehouse
			R	1	4	Unit 1 Auxiliary Building
			R	1	4	Unit 1 Containment Building
			R	1	4	Unit 1 Radwaste Building
Additional storage locations for Fire Fighting Foam (Propylene Glycol T-Butyl Ether)			R	1	4	Unit 1 Turbine Building
			R	1	4	Unit 2 Turbine Building
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 75-69-4 Trade Secret <input type="checkbox"/> Chem. Name Freon Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	L	2	4	Various Plant Locations

Chemical Description	Physical and Health Hazards	Inventory	Storage Codes and Locations (Non-Confidential)			
			Container Type	Pressure	Temperature	
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 8006-61-9 Trade Secret <input type="checkbox"/> Chem. Name Gasoline Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	1	4	Various Plant Locations
			P	1	4	Various Plant Locations
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 25155-23-1 Trade Secret <input type="checkbox"/> Chem. Name Hydraulic Fluid Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Unit 1 Turbine Building
			D	1	4	Unit 1 Warehouse Chemical Storage Area
			R	1	4	Unit 1 Containment Building
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 115-86-6 Trade Secret <input type="checkbox"/> Chem. Name Hydraulic Fluid Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Unit 1 Turbine Building
			D	1	4	Unit 1 Warehouse Chemical Storage Area
			R	1	4	Unit 1 Containment Building
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 1333-74-0 Trade Secret <input type="checkbox"/> Chem. Name Hydrogen Check All That Apply: Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	L	2	4	Various Plant Locations
			A	2	7	Hydrogen Tank Farm

Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 69011-18-3 Trade Secret <input type="checkbox"/> Chem. Name Ion Exchange Resin (Anion) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	05 Max. Daily Amount (code) 05 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	2	5	Unit 1 Turbine Building
			C	2	5	Unit 1 Radwaste Building
			C	2	5	Unit 1 Auxiliary Building
			C	2	5	Unit 1 Containment Building
			L	2	4	Ionics Trailer
Additional storage locations for Ion Exchange Resin (Anion)			I	1	4	Unit 1 Warehouse
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 69011-20-7 Trade Secret <input type="checkbox"/> Chem. Name Ion Exchange resin (Cation) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	05 Max. Daily Amount (code) 05 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	2	5	Unit 1 Turbine Building
			C	2	5	Unit 1 Radwaste Building
			C	2	5	Unit 1 Auxiliary Building
			C	2	5	Unit 1 Containment Building
			L	2	4	Ionics Trailer
Additional storage locations for Ion Exchange resin (Cation)			I	1	4	Unit 1 Warehouse

Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 64742-54-7 Trade Secret <input type="checkbox"/> Chem. Name Lubricating Oil Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	05 Max. Daily Amount (code) 05 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Vehicle Maintenance Shop
			D	1	4	Unit 1 Warehouse Chemical Storage Area
			D	1	4	Vehicle Maintenance Shop
			D	1	4	Various Plant Locations
			A	1	4	East Plant Yard
Additional storage locations for Lubricating Oil			C	1	5	Unit 1 Turbine Building
			C	1	5	Unit 1 Diesel Generator Building
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 111-30-8 Trade Secret <input type="checkbox"/> Chem. Name Nalco 7338 Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	O	1	4	Standby Service Water Basin
			O	1	4	Unit 2 Warehouse
			O	1	4	Chemical Injection Area
<input type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS Trade Secret <input type="checkbox"/> Chem. Name Nalco 73551 Biosurfactant Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	1	4	Unit 1 Cooling Tower
			O	1	4	Standby Service Water Basin

Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 2809-21-4 Trade Secret <input type="checkbox"/> Chem. Name Nalco Sure -Cool 1393 Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Chemical Injection Area
			O	1	4	Unit 1 Cooling Tower
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7727-37-9 Trade Secret <input type="checkbox"/> Chem. Name Nitrogen Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	2	7	Hydrogen Tank Farm
			L	2	4	Various Plant Locations
			A	2	7	Protected Fenced Area
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7782-44-7 Trade Secret <input type="checkbox"/> Chem. Name Oxygen Check All That Apply: Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input checked="" type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	2	7	Hydrogen Tank Farm
			L	2	4	Various Plant Locations
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 12182-56-8 Trade Secret <input type="checkbox"/> Chem. Name Sand Blast Grit Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	J	1	4	Unit 1 Warehouse
			J	1	4	Various Plant Locations

Chemical Description	Physical and Health Hazards	Inventory	Storage Codes and Locations (Non-Confidential)			
			Container Type	Pressure	Temperature	
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7631-90-5 Trade Secret <input type="checkbox"/> Chem. Name Sodium Bisulfite Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	O	1	4	Chemical Injection Area
			O	1	4	Standby Service Water Basin
			O	1	4	Unit 1 Cooling Tower
			A	1	4	Unit 1 Cooling Tower
			O	1	4	Sewage Treatment Plant
Additional storage locations for Sodium Bisulfite			E	1	4	Unit 2 Warehouse
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7647-14-5 Trade Secret <input type="checkbox"/> Chem. Name Sodium Chloride (Salt) Check All That Apply: Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	1	4	Site [Potable] Water
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 1310-73-2 Trade Secret <input type="checkbox"/> Chem. Name Sodium Hydroxide (50%) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	05 Max. Daily Amount (code) 05 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Water Treatment Building
			E	1	4	Unit 1 Warehouse Chemical Storage Area

Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7681-52-9 Trade Secret <input type="checkbox"/> Chem. Name Sodium Hypochlorite (12.5%) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	C	1	4	Chemical Injection Area
			C	1	4	Unit 1 Cooling Tower
			O	1	4	Chemical Injection Area
			O	1	4	Unit 1 Cooling Tower
			A	1	4	Unit 1 Cooling Tower
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7664-93-9 Trade Secret <input type="checkbox"/> Chem. Name Sulfuric Acid Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input checked="" type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	06 Max. Daily Amount (code) 06 Avg. Daily Amount (code) 365 No. of Days On-site (days)	A	1	4	Unit 1 Cooling Tower
			A	1	4	Protected Fenced Area
			E	1	4	Standby Service Water Basin
			E	1	4	Unit 1 Warehouse Chemical Storage Area
			R	1	4	Unit 1 Warehouse
Additional storage locations for Sulfuric Acid			R	1	4	Various Plant Locations
			O	1	4	Standby Service Water Basin
			E	1	4	Unit 2 Warehouse
			O	1	4	Unit 2 Warehouse
			E	1	4	Energy Services Center
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 64742-53-6 Trade Secret <input type="checkbox"/> Chem. Name Transformer Oil Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	06 Max. Daily Amount (code) 06 Avg. Daily Amount (code) 365 No. of Days On-site (days)	R	2	5	Various Plant Locations
			D	1	4	Unit 1 Warehouse Chemical Storage Area

Chemical Description	Physical and Health Hazards	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential)
<input checked="" type="checkbox"/> Check if all of the information for this chemical is identical to the information submitted last year CAS 7646-85-7 Trade Secret <input type="checkbox"/> Chem. Name Zinc Chloride (Nalco 7384) Check All That Apply: Pure <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/>	<input type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (acute) <input checked="" type="checkbox"/> Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	O	1	4	Unit 2 Warehouse
			O	1	4	Standby Service Water Basin
			O	1	4	Unit 1 Cooling Tower
			A	1	4	Unit 1 Cooling Tower