Facility Name: NCCC-Montgomery Community College MG6222

FACILITY IDENTIFICATION:
NCCC-Montgomery Community College MG6222
Dept:
1011 Page Street
Troy, NC 27371 USA
County: Montgomery
Latitude: 35.412832
Longitude: -79.97077

[ ] All facility information (not including chemical information) is identical to last year's submission

IDENTIFICATION NUMBERS:
Dun & Bradstreet: 093334225
NAICS: 611210 (Junior Colleges)
SIC: 8222 (JUNIOR COLLEGES & TECH INSTITU)
State ID: MG6222

Is the facility manned? [x] Manned [ ] Unmanned
Maximum No. of Occupants: 1700

REGULATORY INFORMATION:
Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? [ ] Yes [x] No
Subject to Chem. Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Mgmt. Pgm.)? [ ] Yes [x] No

CONTACT INFORMATION:
Montgomery Community College,
Contact Type 1: Owner / Operator
Address: 1011 Page Street, Troy, NC, 27371 USA
Phones: Work: 910-576-6222
Email: frickw@montgomery.edu

Frick, Wanda
Title: Dir of Facilities Contact Type 1: Emergency Contact Contact Type 2: Tier II Information Contact
Address: , , , USA
Email: frickw@montgomery.edu

Harris, Connie
Title: Purchasing/Evening Coord Contact Type 1: Emergency Contact Contact Type 2: Emergency Contact
Address: , , , USA
Email: harrisc@montgomery.edu

CHEMICAL DESCRIPTIONS:
CHEM NAME:  FUEL OIL NO. 2
CAS: 68476-34-6

[ ] Identical to previous year
[ ] TRADE SECRET
[ ] Pure   [x] Mix   [ ] Solid   [x] Liquid   [ ] Gas   [ ] EHS

PHYSICAL & HEALTH HAZARDS:
[x] Fire   [x] Sudden Release of Pressure   [ ] Reactivity   [ ] Immediate (acute)   [ ] Delayed (chronic)

INVENTORY:
[ ] Below Reporting Thresholds
Max Amt: 118400 pounds   Max Daily Amt code: 10 (100,000 - 499,999 pounds)
Avg Amt: 118400 pounds   Avg Daily Amt code: 10 (100,000 - 499,999 pounds)
Max quantity in largest container: 74000 pounds
No. of days on-site: 365

STORAGE LOCATIONS:
[ ] Confidential
Container Type: Below ground tank   Pressure: Ambient pressure   Temp: Ambient temperature   Location: UST #1 Bldg
100 (1 x 10000 gal)   Amount: 10000 gallons

Container Type: Below ground tank   Pressure: Ambient pressure   Temp: Ambient temperature   Location: UST #2 Bldg
200 (1 x 6000 gal)   Amount: 6000 gallons

CHEMICALS IN INVENTORY STATE FIELDS:
No additional chemical information is required by North Carolina

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CHEM NAME:  PROPANE
CAS: 74-98-6

[ ] Identical to previous year
[ ] TRADE SECRET
[ ] Pure   [ ] Mix   [ ] Solid   [x] Liquid   [x] Gas   [ ] EHS

PHYSICAL & HEALTH HAZARDS:
[x] Fire   [x] Sudden Release of Pressure   [x] Reactivity   [x] Immediate (acute)   [ ] Delayed (chronic)

INVENTORY:
[ ] Below Reporting Thresholds
Max Amt: 7650 pounds   Max Daily Amt code: 05 (5,000 - 9,999 pounds)
Avg Amt: 7650 pounds   Avg Daily Amt code: 05 (5,000 - 9,999 pounds)
Max quantity in largest container: 4500 pounds
No. of days on-site: 365

STORAGE LOCATIONS:
[ ] Confidential
Container Type: Above ground tank   Pressure: Greater than ambient pressure   Temp: Less than ambient temp. / not cryog
Location: Bldg 300 (1 x 1000 gal)   Amount: 1000 gallons

Container Type: Above ground tank   Pressure: Greater than ambient pressure   Temp: Less than ambient temp. / not cryog
Location: Bldg 200 (1 x 300gal)   Amount: 300 gallons

Container Type: Above ground tank   Pressure: Greater than ambient pressure   Temp: Less than ambient temp. / not cryog
Location: Bldg 100 Front (1 x 100 gal)   Amount: 100 gallons

Container Type: Above ground tank   Pressure: Greater than ambient pressure   Temp: Less than ambient temp. / not cryog
Location: Bldg 100 Back  (3 x 100 gal)   Amount: 300 gallons

CHEMICALS IN INVENTORY STATE FIELDS:
No additional chemical information is required by North Carolina

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FACILITY STATE FIELDS:
No additional information is required by North Carolina
Facility Name:  NCCC-Montgomery Community College   MG6222

STATE / LOCAL FEES: None.

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

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 3, 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.

Dr. Mary Chesson, Interim President
Name and official title of owner/operator
OR owner/operator's authorized representative
Signature
Date signed

2/6/2015