



North Carolina Department of Environment and Natural Resources
Division of Waste Management

Pat McCrory
Governor

Dexter R. Matthews
Director

John E. Skvarla, III
Secretary

March ~~23~~²⁵, 2013

Certified Mail

Tom Scribner, President
Southern States Cooperative, Inc.
P.O. Box 26234
6606 West Broad Street
Richmond, Virginia 23230

Re: **REQUEST FOR INFORMATION ON CHEMICAL USAGE & STORAGE**
FCX Chemicals (Former)
Interior to 217 Klumac Road
Salisbury, Rowan County, North Carolina

Dear Mr. Scribner:

The Inactive Hazardous Sites Branch (IHSB) of the Division of Waste Management (Division) of the North Carolina Department of Environment and Natural Resources has been investigating the occurrence of regulated hazardous substances (including but not limited to Dieldrin) at levels above the unrestricted use standards detected in soils near your former business operation.

Pursuant to § 130A-310.1(f) of the North Carolina General Statutes (NCGS), the Division, upon reasonable notice, may require any person to furnish to the Division any information, document, or record in that person's possession or under that person's control that relates to:

- 1) The identification, nature, and quantity of material that has been or is generated, treated, stored, or disposed of at an inactive hazardous substance or waste disposal site or that is transported to an inactive hazardous substance or waste disposal site;
- 2) The nature and extent of a release or threatened release of a hazardous substance or hazardous waste at or from an inactive hazardous substance or waste disposal site; and/or,
- 3) Information relating to the ability of a person to pay for or to perform a cleanup.

In addition, pursuant to § 130A-310.1(g) of the NCGS, a person who is required to furnish any information, document, or record with regard to the above shall either allow the Division to inspect and copy all information, documents and records or shall copy and furnish to the Division all information, documents, and records at the expense of the person. As used herein, "and" and "or" have both conjunctive and disjunctive meanings.

Notice of Request for Information

Within forty-five (45) days of your receipt of this "Notice of Request for Information," please submit to the IHSB copies of all information, documents, and records in whatever form in your possession or under

your control that relate to any known or suspected environmental contamination of soil, air, or groundwater at or from the facility. This environmental data request will include but is not limited to the following:

- 1) A copy of all information, including stored, used, and generated chemicals and material safety data sheets related to operations at Southern States Cooperative, Inc. and any disposal practices utilized for waste chemicals or mixtures.
- 2) Documents and records showing any known or suspected release, disposal, or discharge into soil, air, or groundwater of any reportable quantity of a hazardous substance or a hazardous waste at the facility or any property where contamination from the facility has come to be located.
- 3) If they exist, all environmental due diligence information generated for the facility or any property where contamination from the facility has come to be located. Examples of the information sought include (without limitation) property transaction screens; Phase I, Phase II, and Phase III Environmental Site Assessments (ESAs), internal and external memoranda concerning environmental contamination, reports of environmental contamination, documents prepared for actual or potential lenders concerning environmental contamination, and environmental audits and checklists.
- 4) All environmental assessment data of soil, groundwater, air, and other media at the facility and/or any property where contamination from the facility has come to be located. This information also includes (without limitation) environmental reports generated for or directed by local, state, or federal regulatory authorities.
- 5) Any other information considered relevant by Southern States Cooperative, Inc.

To comply with state law, an owner, operator, or responsible party that knows or should know of the existence of release of a hazardous substance or waste at a site must submit to the Division all site data that is known or readily available to the owner, operator, or responsible party. The owner, operator, or responsible party must certify under oath that, to the best of his knowledge and belief, the data is complete and accurate.

Your prompt attention to this matter is requested. All documents submitted to the Division in relation to this work must be provided in both paper and in an electronic format designated by the Division (see the Inactive Hazardous Sites Branch website located at <http://portal.ncdenr.org/web/wm/sf/ihome> for current specifications on electronic document submittal), within forty-five (45) days of receipt of this letter.

If you have any questions, please call me at (704) 663-1699, ext. 2182. Thank you in advance for your cooperation.

Sincerely,



Trudy Beverly, L.G.
Hydrogeologist, Western Region
NCDENR - Division of Waste Management
Superfund Section - Inactive Hazardous Sites Branch
Mooresville Regional Office

Cc: Corporation Service Company, 327 Hillsborough St., Raleigh, NC 27603

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Tom W. Stone</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: TOM SCRIBNER PRESIDENT SOUGHERN STATES COOPERATIVE INC PO BOX 26234 6606 W BROAD ST RICHMOND VA 23230		B. Received by (Printed Name) <i>Tom W. Stone</i> C. Date of Delivery APR 01 2013	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
7008 1140 0002 2715 9821		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
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Street, Apt. # or PO Box N	SOUGHERN STATES COOPERATIVE INC
City, State, ZIP	PO BOX 26234
	6606 W BROAD ST
	RICHMOND VA 23230
	1HW-TB-2013-03-25

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DURORESVILLE, NC 28715
MAR 2 2013
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PS Form 3806, August 2008

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Mooresville, NC 28115

DENR MRO IHSB

APR 15 2013

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1HW-TB-2013.03.25

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PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047