



department of water, air and waste management

October 18, 1985

RECORD COPY

Title Name _____

Senders Initials _____

Mr. Robert McKern
Iowa Paint Manufacturing Company
P.O. Box 1417
Des Moines, Iowa 50305

Re: Uncontrolled Hazardous Waste Site
Iowa Paint Manufacturing Co. Warehouse
IA T200010106

Dear Mr. McKern:

The Iowa Department of Water, Air and Waste Management (DWAMM) is currently working in conjunction with the U.S. Environmental Protection Agency (USEPA) to identify and assess potential and/or confirmed sites where hazardous wastes or substances were disposed of prior to their regulation or where wastes were disposed of without regard for human health or the environment. This program is being carried out under the authority of the Resource Conservation and Recovery Act (RCRA) and the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA).

Each state has developed a list of potential sites where improper hazardous waste disposal has occurred. Sites may be placed on the list by several means including CERCLA 103(c) notification and through knowledge of the site by state or federal agencies or by information provided by other knowledgeable parties. Regardless of the source of information, all sites are independently evaluated by USEPA or DWAMM.

As you may know the referenced site has been listed as a site where wastes may have been disposed or managed prior to their regulation or without regard for human health or the environment. This department has completed its preliminary assessment of this site.

This warehouse was used for a short time to house hazardous wastes in 1983 prior to shipping. No spillage occurred.

Based on all of the information currently available, we do not believe that this site poses a threat to public health or environmental hazard. We are presently planning no further action at this site. If additional information is received that would lead us to believe that this site does pose a threat to public health or environmental hazard, we will take additional actions to reevaluate this site.

TOC:LH:blb

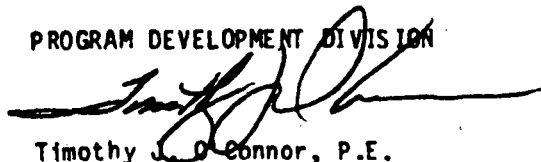
Mr. Robert McKern
Iowa Paint Manufacturing Company
Des Moines, Iowa
October 18, 1985
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You should be advised that this assessment is specific to the uncontrolled site program and does not preclude any additional actions on the part of other USEPA or DWAAM programs or regulations.

If you have any questions about the contents of this letter or any concerns regarding this matter, please feel free to contact me or Lynn Hall at (515)281-6614.

Sincerely,

PROGRAM DEVELOPMENT DIVISION



Timothy J. D. Connor, P.E.
Program Coordinator
Uncontrolled Sites Task Force

TJO:b1b/PDW291001.01

cc: Peter Culver, USEPA, Region VII
Region 5

EPA		POTENTIAL HAZARDOUS WASTE SITE FINAL STRATEGY DETERMINATION		REGION VII	SITE NUMBER IAT 200010106	
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-333), 401 M St., SW, Washington, DC 20460.						
I. SITE IDENTIFICATION						
A. SITE NAME <i>Iron Paint Manufacturing Company Warehouse</i>		B. STREET <i>4565 E 14th St.</i>				
C. CITY <i>Lawrence</i>		D. STATE <i>IA</i>		E. ZIP CODE <i>50705</i>		
II. FINAL DETERMINATION						
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		X				
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE (If yes, complete Section III.)						
C. REMEDIAL ACTION (If yes, complete Section IV.)						
D. ENFORCEMENT ACTION (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 FINAL STRATEGY DETERMINATION <i>Warehouse was used for waste only for a short time in 1983. No spills occurred.</i>						
F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)			G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)			
H. PREPARER INFORMATION						
1. NAME <i>Lynn L. Hall</i>		2. TELEPHONE NUMBER <i>515/281-6614</i>		3. DATE (mo., day, & yr.) <i>10/9/85</i>		
III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE						
List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.						
A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS				
	\$					
	\$					
	\$					
	\$					
	\$					
	\$					
	\$					
	\$					
	\$					
D. TOTAL ESTIMATED COST		\$				

		POTENTIAL HAZARDOUS WASTE SITE SITE IDENTIFICATION		I. IDENTIFICATION <small>01 STATE 02 SITE NUMBER</small>	
II. SITE NAME AND LOCATION					
<small>01 SITE NAME (Legal, common, or descriptive name of site)</small> Iowa Paint Mfg. Co.		<small>02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER</small> East 14th Street facility			
<small>03 CITY</small> Des Moines	<small>04 STATE</small> Ia.	<small>05 ZIP CODE</small> 50315	<small>06 COUNTY</small> POLK	<small>07 COUNTY CODE</small> 77	<small>08 CONG DIST</small>
<small>09 DIRECTIONS TO SITE (Starting from nearest public road)</small> 					
III. RESPONSIBLE PARTIES					
<small>01 OWNER (if owner)</small> Iowa Paint Mfg.		<small>02 STREET (Business, residential, mailing)</small> PO Box 1417			
<small>03 CITY</small> Des Moines	<small>04 STATE</small> Ia	<small>05 ZIP CODE</small> 50315	<small>06 TELEPHONE NUMBER</small> 		
<small>07 OPERATOR (if known and different from owner)</small> SAME		<small>08 STREET (Business, residential, mailing)</small> 			
<small>09 CITY</small> 	<small>10 STATE</small> 	<small>11 ZIP CODE</small> 	<small>12 TELEPHONE NUMBER</small> 		
<small>13 TYPE OF OWNERSHIP (Check one)</small> <input checked="" type="checkbox"/> A PRIVATE <input type="checkbox"/> B FEDERAL <input type="checkbox"/> C STATE <input type="checkbox"/> D COUNTY <input type="checkbox"/> E MUNICIPAL <input type="checkbox"/> F OTHER <input type="checkbox"/> G UNKNOWN					
IV. HOW IDENTIFIED					
<small>01 DATE IDENTIFIED</small> MONTH DAY YEAR	<small>02 IDENTIFIED BY (Check all that apply)</small> <input type="checkbox"/> A CITIZEN COMPLAINT <input type="checkbox"/> B INDUSTRY <input type="checkbox"/> C STATE LOCAL GOVERNMENT <input type="checkbox"/> D AERIAL RECONNAISSANCE <input type="checkbox"/> E RCRA INSPECTION <input type="checkbox"/> F SURFACE IMPOUNDMENT ASSESSMENT <input type="checkbox"/> G OTHER EPA IDENTIFICATION <input checked="" type="checkbox"/> H OTHER Unknown				
V. SITE CHARACTERIZATION					
<small>01 TYPE OF SITE (Check all that apply)</small> <input checked="" type="checkbox"/> A STORAGE <input type="checkbox"/> B TREATMENT <input type="checkbox"/> C DISPOSAL <input type="checkbox"/> D UNAUTHORIZED DUMPING <input type="checkbox"/> E OTHER					
<small>02 SUMMARY OF KNOWN PROBLEMS (Provide narrative description)</small> Temporary storage of waste received from Polk City Dump Site.					
<small>03 SUMMARY OF ALLEGED OR POTENTIAL PROBLEMS (Provide narrative description)</small> 					
VI. INFORMATION AVAILABLE FROM					
<small>04 CONTACT</small> Mr. Robert McKoon		<small>05 AGENCY</small> Iowa Paint		<small>03 TELEPHONE NUMBER</small> 	
<small>04 PREPARED BY</small> Bill Youngquist		<small>05 AGENCY</small> IRAWA		<small>06 ORGANIZATION</small> FS-CAB	
		<small>07 TELEPHONE NUMBER</small> 515 281 3499		<small>08 DATE</small> 9. 84	