

March, 2018

Governing Board Chairman William A. Burke
South Coast Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765

RE: SCAQMD PR 1410 replace MHF and HF alkylation with a safe alternative within 4 years
TO: Chairman Burke <mwpatrick@aqmd.gov>; CC: Governing Board Members

Dear Chairman Burke:

I support a SCAQMD Rule 1410 that eliminates MHF alkylation within 4 years of rule adoption, replacing it with a safe alternative.

I am a teacher at Casimir Middle School in Torrance, located 1.5 miles from the MHF alkylation unit. Improved HF mitigation measures would be welcome during the transition period, but are not enough. Our densely populated and earthquake prone area is not the right place to harbor two HF alkylation units, especially since there are alternatives.

According to the Chemical Safety Board, a catastrophic MHF release nearly occurred Feb. 18, 2015. Twenty-three schools were in the main debris field formed by that explosion. If things have gone a bit differently, all those students could have been hit by a lethal HF cloud. Hundreds of thousands in adjacent areas would have required treatment for possible exposure. The SCAQMD staff's scientific assessment of MHF, reported to the Working Group on Aug. 2, 2017 and again on August 18, 2017 that MHF safety claims could not be proven.

We can't protect our students. Torrance teachers have duct tape but too many windows and too little time. We can do nothing about ceiling heating ducts or high windows. The day of the explosion, few of us knew about MHF's existence, or what to do. We didn't get proper warning. Some students at North High in Torrance jumped the fence and ran in terror. Seventeen Redondo Beach schools in the main debris field would have been even more unprepared, if possible, than Torrance.

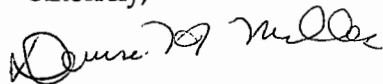
Children face far greater danger from MHF than adults. Their sensitivities aren't reflected in HF toxicity ratings. They receive larger doses from the same exposure because of greater lung surface to weight, are more vulnerable because of the smaller diameter of their airways. Children are more susceptible to toxics absorbed through the skin, like HF is, because of a larger surface area to weight and to gas exposure because of their higher respiration rate. Children sometimes respond differently to chemical exposure than adults and require special treatment to recover. Would they get it?

Child survivors would experience severe and lasting emotional and developmental trauma. Imagine the panic experienced by a child from an experience described by a refinery worker: "The smell was ..intense. I could feel it through my eyes, my nose, it was like a heat wave came over me... I couldn't

breathe... [I was gasping] for air, dizzy... I couldn't talk." A Torrance refinery worker said when he could no longer hold his breath and inhaled during a 1990 release of "a small amount of HF," it "cut the wind off to my lungs...I was just gasping. I started puking right away." Mass casualties could result in our densely populated area; evacuation would be impossible.

MHF/HF should be replaced with a safe technology, with a four year transition period. Our region has tolerated this risk far too long because of false assurances that MHF is "safe."

Sincerely,



Casimir Teacher

