

Section 1. Registration Information

Source Identification

| | |
|--------------------------------|----------------------|
| Facility Name: | ConAgra Frozen Foods |
| Parent Company #1 Name: | ConAgra Frozen Foods |
| Submission Type: | First Time |
| Receipt Date: | June 1999 |
| Status: | Deregistered |
| Deregistration Effective Date: | April 2002 |

Facility Identification

| | |
|--------------|----------------|
| Facility ID: | 1000 0004 6434 |
|--------------|----------------|

Dun and Bradstreet Numbers (DUNS)

| | |
|----------------|-----------|
| Facility DUNS: | 101728525 |
|----------------|-----------|

Facility Location Address

| | |
|-----------|-------------------------|
| Street 1: | 5391 Three Notch'd Road |
| Street 2: | N/A |
| City: | Crozet |
| State: | VA |
| ZIP: | 22932 |
| ZIP4: | N/A |
| County: | Albemarle |

Facility Latitude and Longitude

| | |
|----------------------|------------|
| Latitude (decimal): | 38.07 |
| Longitude (decimal): | -78.687778 |

Local Emergency Planning Committee and Regulations

| | |
|--------------|-----|
| LEPC: | N/A |
| OSHA PSM: | Yes |
| EPCRA 302: | Yes |
| CAA Title V: | N/A |

Process Chemicals

| | |
|------------------|-------------------------|
| Program Level: | Program Level 3 process |
| Chemical Name: | Ammonia (anhydrous) |
| CAS Number: | 7664-41-7 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Ammonia (anhydrous) |
| CAS Number: | 7664-41-7 |
| Flammable/Toxic: | Toxic |

Process NAICS

| | |
|--------------------|-------------------------------------|
| NAICS Code: | 311412 |
| NAICS Description: | Frozen Specialty Food Manufacturing |

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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|---|-----|
| Community Plan (Is facility included in written community emergency response plan?): | N/A |
| Facility Plan (Does facility have its own written emergency response plan?): | Yes |
| Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?): | Yes |
| Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?): | Yes |
| Healthcare (Does facility's ER plan include information on emergency health care?): | Yes |

Local Agency

Agency Name (Name of local agency
with which the facility ER plan or
response activities are coordinated):

Crozet Volunteer Fire Department

Agency Phone Number (Phone number
of local agency with which the facility
ER plan or response activities are
coordinated):

(804) 823-4758