# **Section 1. Registration Information**

#### Source Identification

Facility Name: Water Treatment Plant
Parent Company #1 Name: City of Springfield, Ohio

Submission Type: Resubmission Receipt Date: August 2024

**Facility Identification** 

Facility ID: 1000 0000 8243

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 79426334

**Facility Location Address** 

Street 1: 201 Eagle City Rd.

Street 2: N/A

 City:
 Springfield

 State:
 OH

 ZIP:
 45502

 ZIP4:
 7515

 County:
 Clark

Facility Latitude and Longitude

Latitude (decimal): 39.973611 Longitude (decimal): -083.807500

Local Emergency Planning Committee and Regulations

LEPC: Clark County LEPC

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

#### **Process Chemicals**

Program Level: Program Level 3 process

Chemical Name: Chlorine
CAS Number: 7782-50-5
Flammable/Toxic: Toxic

### **Process NAICS**

NAICS Code: 22131

NAICS Description: Water Supply and Irrigation Systems

## **Section 6. Accident History**

#### Accident History ID: Accident 1

Date of Accident: March 2021
Time Accident Began (HH:MM): 12:40
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 001 Hours 00 Minutes

### Release Event

Gas Release:YesLiquid Spill/Evaporation:N/AFire:N/AExplosion:N/AUncontrolled/Runaway Reaction:N/A

#### Release Source

N/A Storage Vessel: Piping: Yes Process Vessel: N/A Transfer Hose: N/A Valve: N/A Pump: N/A Joint: N/A Other Release Source: N/A

### Weather Conditions at the Time of Event

Wind Speed: 10.0
Units: Miles/h
Direction: SSW
Temperature: 34
Atmospheric Stability Class: F
Precipitation Present: N/A
Unknown Weather Conditions: N/A

### **On-Site Impacts**

Employee or Contractor Deaths:

Public Responder Deaths:

Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

Public Injuries:

On-Site Property Damage (\$):

### **Known Off-Site Impacts**

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 0
Sheltered-in-Place: 0
Off-Site Property Damage (\$): 0

### **Environmental Damage**

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

N/A

Water Contamination:

N/A

Soil Contamination:

N/A

Other Environmental Damage:

N/A

### **Initiating Event**

Initiating Event: Human Error

### **Contributing Factors**

N/A **Equipment Failure:** Human Error: Yes Improper Procedures: Yes N/A Overpressurization: **Upset Condition:** N/A By-Pass Condition: N/A Maintenance Activity/Inactivity: Yes Process Design Failure: N/A Unsuitable Equipment: N/A **Unusual Weather Condition:** N/A Management Error: N/A Other Contributing Factor: N/A

### Off-Site Responders Notified

Off-Site Responders Notified: Notified and Responded

### Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A N/A Revised Maintenance: Revised Training: N/A Revised Operating Procedures: N/A New Process Controls: N/A New Mitigation Systems: N/A Revised Emergency Response Plan: N/A **Changed Process:** N/A Reduced Inventory: N/A Yes None: Other Changes Introduced: N/A

### Chemicals in Accident History

Quantity Released (lbs):1Percent Weight:100Chemical Name:ChlorineCAS Number:7782-50-5Flammable/Toxic:Toxic

# **Section 9. Emergency Response**

### Written Emergency Response (ER) Plan

Community Plan (Is facility included in written community emergency response plan?):

Yes

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):

City of Springfield Fire Division

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

(937) 324-7605