Facility Name: Marshall Ridge Renewable Energy

EPA Facility Identifier: 1000 0025 2503 Plan Sequence Number: 1000108744

Section 1. Registration Information

Source Identification

Facility Name: Marshall Ridge Renewable Energy

Parent Company #1 Name:

Submission Type:

Receipt Date:

N/A

First Time

January 2024

Facility Identification

Facility ID: 1000 0025 2503

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 1146 245th Street

Street 2: N/A

City: State Center

 State:
 IA

 ZIP:
 50247

 ZIP4:
 N/A

 County:
 Marshall

Facility Latitude and Longitude

Latitude (decimal): 41.998094 Longitude (decimal): -93.204770

Local Emergency Planning Committee and Regulations

LEPC: Marshall County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 N/A

 CAA Title V:
 N/A

Facility Name: Marshall Ridge Renewable Energy

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Process Chemicals

Program Level: Program Level 1 process

Chemical Name: Methane
CAS Number: 74-82-8
Flammable/Toxic: Flammable

Process NAICS

NAICS Code: 32512

NAICS Description: Industrial Gas Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: September 2023

Time Accident Began (HH:MM): 13:50
NAICS Code of Process Involved: 32512

NAICS Description: Industrial Gas Manufacturing Release Duration: 000 Hours 01 Minutes

Release Event

Gas Release: N/A
Liquid Spill/Evaporation: N/A
Fire: Yes
Explosion: N/A
Uncontrolled/Runaway Reaction: N/A

Release Source

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

Facility Name: Marshall Ridge Renewable Energy

EPA Facility Identifier: 1000 0025 2503 Plan Sequence Number: 1000108744

Meather	Conditions	at the	Time of	Event
vveautei	Conditions	at the	i ii ii e Oi	

Wind Speed: 3.0
Units: Miles/h
Direction: N
Temperature: 70
Atmospheric Stability Class: F
Precipitation Present: N/A
Unknown Weather Conditions: N/A

On-Site Impacts

Employee or Contractor Deaths:

Public Responder Deaths:

O
Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

O
Public Injuries:

O
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:

Water Contamination:

N/A

Soil Contamination:

Other Environmental Damage:

N/A

Initiating Event

Initiating Event: Unknown

EPA Facility Identifier: 1000 0025 2503 Plan Sequence Number: 1000108744

Contributing Factors

Equipment Failure: N/A N/A Human Error: Improper Procedures: N/A N/A Overpressurization: **Upset Condition:** N/A By-Pass Condition: N/A Maintenance Activity/Inactivity: N/A 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: Yes 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 N/A None: Other Changes Introduced: N/A

Chemicals in Accident History

Quantity Released (lbs):2585Percent Weight:N/AChemical Name:MethaneCAS Number:74-82-8Flammable/Toxic:Flammable

EPA Facility Identifier: 1000 0025 2503 Plan Sequence Number: 1000108744

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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):

State Center Fire Department

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

(641) 483-2610