Facility Name: Tuscan - Lehigh Dairies, Inc. EPA Facility Identifier: 1000 0013 0743

Plan Sequence Number: 41445

# **Section 1. Registration Information**

### Source Identification

Facility Name: Tuscan - Lehigh Dairies, Inc.
Parent Company #1 Name: Dean Foods Company

Submission Type: Corrections
Receipt Date: December 2004
Status: Deregistered
Deregistration Effective Date: October 2005

**Facility Identification** 

Facility ID: 1000 0013 0743

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 111269551

**Facility Location Address** 

Street 1: 750 Union Avenue

 Street 2:
 N/A

 City:
 Union

 State:
 NJ

 ZIP:
 07083

 ZIP4:
 N/A

 County:
 Union

Facility Latitude and Longitude

Latitude (decimal): 40.707222 Longitude (decimal): -074.248611

Local Emergency Planning Committee and Regulations

LEPC: Union County OEM

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

### **Process NAICS**

NAICS Code: 31151

NAICS Description: Dairy Product (except Frozen)

Manufacturing

# **Section 6. Accident History**

## Accident History ID: Accident 1

Date of Accident: September 2000

Time Accident Began (HH:MM): 01:10
NAICS Code of Process Involved: 31151

NAICS Description: Dairy Product (except Frozen)

Manufacturing

Release Duration: 000 Hours 10 Minutes

### Release Event

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

### Release Source

 Storage Vessel:
 N/A

 Piping:
 N/A

 Process Vessel:
 N/A

 Transfer Hose:
 N/A

 Valve:
 N/A

 Pump:
 N/A

 Joint:
 N/A

Other Release Source: Evaporator

## Weather Conditions at the Time of Event

Wind Speed: N/A

Units: Meters/second

Direction:N/ATemperature:N/AAtmospheric Stability Class:N/APrecipitation Present:N/AUnknown Weather Conditions:Yes

### 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:

Water Contamination:

Soil Contamination:

Other Environmental Damage:

N/A

### **Initiating Event**

Initiating Event: Equipment Failure

## **Contributing Factors**

**Equipment Failure:** Yes 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: No, not notified

## Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: Yes 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 N/A None: Other Changes Introduced: N/A

## Chemicals in Accident History

Quantity Released (lbs): 50
Percent Weight: 100

Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7 Flammable/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):

Union Fire Department

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

(908) 851-5420