Section 1. Registration Information

Source Identification

Facility Name: South Pumping Station
Parent Company #1 Name: City of South Bend
Submission Type: Resubmission
Receipt Date: November 2021

Facility Identification

Facility ID: 1000 0023 4249

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 300 Sherwood Ave.

Street 2: N/A

City: South Bend

 State:
 IN

 ZIP:
 46614

 ZIP4:
 N/A

County: St. Joseph

Facility Latitude and Longitude

Latitude (decimal): 41.637464 Longitude (decimal): -086.254211

Local Emergency Planning Committee and Regulations

LEPC: St. Joseph 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 2019
Time Accident Began (HH:MM): 10:45
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 000 Hours 01 Minutes

Release Event

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

Release Source

Yes Storage Vessel: Piping: N/A 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: 5.0
Units: Miles/h
Direction: N
Temperature: 24
Atmospheric Stability Class: B
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: 1
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: Human Error

Contributing Factors

Equipment Failure: N/A Human Error: Yes 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: Yes **Revised Operating Procedures:** Yes 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):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?):

N/A

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

N/A

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

N/A

Healthcare (Does facility's ER plan include information on emergency

N/A

health care?):

Local Agency

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

South Bend Fire Department

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

(574) 235-9255