EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

# **Section 1. Registration Information**

# Source Identification

Facility Name: LCRA - Fayette Power Project
Parent Company #1 Name: Lower Colorado River Authority

Submission Type: Resubmission
Receipt Date: August 2001
Status: Deregistered
Deregistration Effective Date: December 2004

**Facility Identification** 

Facility ID: 1000 0003 3395

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 43226885

**Facility Location Address** 

Street 1: 6549 Power Plant Road

 Street 2:
 N/A

 City:
 LaGrange

 State:
 TX

 ZIP:
 78945

 ZIP4:
 N/A

 County:
 Fayette

Facility Latitude and Longitude

Latitude (decimal): 29.919167 Longitude (decimal): -96.753056

Local Emergency Planning Committee and Regulations

LEPC: Fayette County LEPC

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

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

#### **Process Chemicals**

Program Level: Program Level 2 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: December 1994

Time Accident Began (HH:MM): 13:48
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 000 Hours 05 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: 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

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

# **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: 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 N/A None:

Other Changes Introduced: Line repaired

# Chemicals in Accident History

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

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

# Accident History ID: Accident 2

Date of Accident: September 1994

Time Accident Began (HH:MM): 16:00
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 000 Hours 05 Minutes

#### Release Event

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

#### 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 (\$):

Off-Site Property Damage (\$):

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

0

**Known Off-Site Impacts** 

Deaths:0Hospitalizations:0Public Deaths:0Other Medical Treatments:0Evacuated:0Sheltered-in-Place: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: Equipment Failure

**Contributing Factors** 

Yes **Equipment Failure:** Human Error: N/A Improper Procedures: N/A Overpressurization: N/A **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

EPA Facility Identifier: 1000 0003 3395

Plan Sequence Number: 23895

# Changes Introduced as a Result of the Accident

N/A Improved or Upgraded Equipment: Revised Maintenance: N/A 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 None: N/A

Other Changes Introduced: Repaired section

# Chemicals in Accident History

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

# Accident History ID: Accident 3

Date of Accident: May 1994
Time Accident Began (HH:MM): 10:17
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 000 Hours 03 Minutes

#### Release Event

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

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

# Release Source

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

### 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

EPA Facility Identifier: 1000 0003 3395 Plan Sequence Number: 23895

**Environmental Damage** 

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

Water Contamination:

N/A

Soil Contamination:

N/A

Other Environmental Damage:

N/A

**Initiating Event** 

Initiating Event: Equipment Failure

Contributing Factors

**Equipment Failure:** Yes Human Error: N/A Improper Procedures: N/A Overpressurization: N/A **Upset Condition:** N/A N/A By-Pass Condition: 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: N/A N/A Revised Maintenance: Revised Training: N/A **Revised Operating Procedures:** N/A New Process Controls: N/A N/A New Mitigation Systems: Revised Emergency Response Plan: N/A **Changed Process:** N/A N/A Reduced Inventory: N/A

Other Changes Introduced: Replaced valve stem

Facility Name: LCRA - Fayette Power Project EPA Facility Identifier: 1000 0003 3395

Plan Sequence Number: 23895

# 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?):

Facility Plan (Does facility have its own written emergency response plan?):

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

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

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

Yes

Yes

Yes

## Local Agency

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

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

Fayette County Fire Department

(979) 968-5856