EPA Facility Identifier: 1000 0005 7715 Plan Sequence Number: 1000010472

# **Section 1. Registration Information**

#### Source Identification

Facility Name: Metro Wastewater Reclamation District

Parent Company #1 Name: N/A

Submission Type: Resubmission
Receipt Date: August 2009
Status: Deregistered
Deregistration Effective Date: August 2011

**Facility Identification** 

Facility ID: 1000 0005 7715

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 79956686

**Facility Location Address** 

 Street 1:
 6450 York Street

 Street 2:
 N/A

 City:
 Denver

 State:
 CO

 ZIP:
 80229

ZIP4: 7499 County: Adams

Facility Latitude and Longitude

Latitude (decimal): 39.811111 Longitude (decimal): -104.953611

Local Emergency Planning Committee and Regulations

LEPC: Adams County

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

Facility Name: Metro Wastewater Reclamation District

EPA Facility Identifier: 1000 0005 7715 Plan Sequence Number: 1000010472

### **Process Chemicals**

Program Level: Program Level 2 process
Chemical Name: Sulfur dioxide (anhydrous)

CAS Number: 7446-09-5 Flammable/Toxic: Toxic

Program Level: Program Level 2 process

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

### **Process NAICS**

NAICS Code: 22132

NAICS Description: Sewage Treatment Facilities

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: August 2006

Time Accident Began (HH:MM): 08:00
NAICS Code of Process Involved: 22132

NAICS Description: Sewage Treatment Facilities
Release Duration: 001 Hours 00 Minutes

### Release Event

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

EPA Facility Identifier: 1000 0005 7715 Plan Sequence Number: 1000010472

### Release Source

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

### Weather Conditions at the Time of Event

Wind Speed: 3.7
Units: Miles/h
Direction: S
Temperature: 72
Atmospheric Stability Class: D
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

Facility Name: Metro Wastewater Reclamation District

EPA Facility Identifier: 1000 0005 7715 Plan Sequence Number: 1000010472

### **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

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

Facility Name: Metro Wastewater Reclamation District

EPA Facility Identifier: 1000 0005 7715 Plan Sequence Number: 1000010472

### Chemicals in Accident History

Quantity Released (lbs):
Percent Weight:

Chemical Name: Sulfur dioxide (anhydrous)

CAS Number: 7446-09-5 Flammable/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

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N/A N/A

N/A

N/A

#### 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):

S. Adams County Fire Protection Dis

(303) 288-0835