EPA Facility Identifier: 1000 0016 2441 Plan Sequence Number: 1000079994

Section 1. Registration Information

Source Identification

Facility Name: Simplot Grower Solutions - Mayfield

Parent Company #1 Name: Simplot AB Retail Inc

Submission Type: Resubmission
Receipt Date: June 2019
Status: Deregistered
Deregistration Effective Date: August 2022

Facility Identification

Facility ID: 1000 0016 2441

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 521 South 16th Street

 Street 2:
 N/A

 City:
 Mayfield

 State:
 KY

 ZIP:
 42066

 ZIP4:
 N/A

 County:
 Graves

Facility Latitude and Longitude

Latitude (decimal): 36.736309 Longitude (decimal): -088.651996

Local Emergency Planning Committee and Regulations

LEPC: Graves County LEPC

 OSHA PSM:
 N/A

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

EPA Facility Identifier: 1000 0016 2441 Plan Sequence Number: 1000079994

Process Chemicals

Program Level: Program Level 2 process Chemical Name: Ammonia (anhydrous)

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

Process NAICS

NAICS Code: 42491

NAICS Description: Farm Supplies Merchant Wholesalers

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:

Time Accident Began (HH:MM):

NAICS Code of Process Involved:

42491

NAICS Description: Farm Supplies Merchant Wholesalers

Release Duration: 001 Hours 30 Minutes

Release Event

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

Release Source

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

EPA Facility Identifier: 1000 0016 2441 Plan Sequence Number: 1000079994

Weather Conditions at the Time of Event

Wind Speed: 1.5
Units: Miles/h
Direction: SW
Temperature: 80
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 (\$): 100

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: Human Error

EPA Facility Identifier: 1000 0016 2441 Plan Sequence Number: 1000079994

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: Notified and Responded

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: Yes N/A Revised Maintenance: Revised Training: Yes Revised Operating Procedures: N/A New Process Controls: Yes 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): 40000
Percent Weight: 99

Chemical Name: Ammonia (anhydrous)

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

EPA Facility Identifier: 1000 0016 2441 Plan Sequence Number: 1000079994

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 health care?):

N/A

Local Agency

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

Fire Department

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

(270) 247-1441