Plan Sequence Number: 11394

Section 1. Registration Information

Source Identification

Facility Name: UAP Northwest, Pasco

Parent Company #1 Name: Tri-River Chemical Co., Inc. dba UAP

Northwest

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: January 2002

Facility Identification

Facility ID: 1000 0011 9203

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 102307576

Facility Location Address

Street 1: 1220 N. Oregon Ave.

 Street 2:
 N/A

 City:
 Pasco

 State:
 WA

 ZIP:
 99301

 ZIP4:
 N/A

 County:
 Franklin

Facility Latitude and Longitude

Latitude (decimal): 46.249722 Longitude (decimal): -119.091667

Local Emergency Planning Committee and Regulations

LEPC: Franklin County LEPC

 OSHA PSM:
 N/A

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Plan Sequence Number: 11394

Process Chemicals

Program Level: Program Level 2 process
Chemical Name: Ammonia (conc 20% or greater)

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

Process NAICS

NAICS Code: 42291

NAICS Description: Farm Supplies Wholesalers

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:

Time Accident Began (HH:MM):

NAICS Code of Process Involved:

42291

NAICS Description: Farm Supplies Wholesalers Release Duration: 000 Hours 20 Minutes

Release Event

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

Plan Sequence Number: 11394

Weather Conditions at the Time of Event

Wind Speed: 3.0
Units: Miles/h
Direction: SSE
Temperature: 80
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: 2
Evacuated: 0
Sheltered-in-Place: 10
Off-Site Property Damage (\$): 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: Unknown

Contributing Factors

Equipment Failure: N/A 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: Liquid tank burbed gas from head

space

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: 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: N/A

Chemicals in Accident History

Quantity Released (lbs): 1
Percent Weight: 20

Chemical Name: Ammonia (conc 20% or greater)

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

Plan Sequence Number: 11394

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):

Franklin County D.E.M.

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

(509) 545-3546