EPA Facility Identifier: 1000 0003 3938 Plan Sequence Number: 50170

# **Section 1. Registration Information**

#### Source Identification

Facility Name: Las Vegas Street Wastewater

Treatment Plant

Parent Company #1 Name: Colorado Springs Utilities

Submission Type: Corrections
Receipt Date: November 2007
Status: Deregistered
Deregistration Effective Date: February 2011

**Facility Identification** 

Facility ID: 1000 0003 3938

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 626942353

**Facility Location Address** 

Street 1: 825 Las Vegas Street

Street 2: N/A

City: Colorado Springs

 State:
 CO

 ZIP:
 80903

 ZIP4:
 4350

 County:
 EI Paso

Facility Latitude and Longitude

Latitude (decimal): 38.812220 Longitude (decimal): -104.806111

Local Emergency Planning Committee and Regulations

LEPC: Colorado Springs LEPC

 OSHA PSM:
 N/A

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

EPA Facility Identifier: 1000 0003 3938 Plan Sequence Number: 50170

#### **Process Chemicals**

Program Level: Program Level 2 process

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

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

CAS Number: 7446-09-5 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 2006
Time Accident Began (HH:MM): 22:00
NAICS Code of Process Involved: 22131

NAICS Description: Water Supply and Irrigation Systems

Release Duration: 034 Hours 00 Minutes

### Release Event

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

Plan Sequence Number: 50170

### Release Source

EPA Facility Identifier: 1000 0003 3938

N/A Storage Vessel: Piping: Yes 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 3938 Plan Sequence Number: 50170

### **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:** N/A Human Error: N/A Improper Procedures: N/A Yes Overpressurization: **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: Debris in newly installed pipeline.

#### 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:** Yes **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: Revised Incident Investigation Quality

By Design Report

Facility Name: Las Vegas Street Wastewater Treatment Plant

EPA Facility Identifier: 1000 0003 3938 Plan Sequence Number: 50170

### Chemicals in Accident History

Quantity Released (lbs):2Percent Weight:99.5Chemical 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

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):

Colorado Springs Fire Department

(719) 385-5950