Facility Name: Keebler- Macon, Georgia EPA Facility Identifier: 1000 0007 0638

Plan Sequence Number: 10806

# **Section 1. Registration Information**

### Source Identification

Facility Name: Keebler- Macon, Georgia
Parent Company #1 Name: Keebler Foods Company

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: January 2004

**Facility Identification** 

Facility ID: 1000 0007 0638

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 1326065

**Facility Location Address** 

Street 1: 4375 Mead Road

 Street 2:
 N/A

 City:
 Macon

 State:
 GA

 ZIP:
 31206

 ZIP4:
 N/A

 County:
 Bibb

Facility Latitude and Longitude

Latitude (decimal): 32.77 Longitude (decimal): -83.64

Local Emergency Planning Committee and Regulations

 LEPC:
 N/A

 OSHA PSM:
 N/A

 EPCRA 302:
 Yes

 CAA Title V:
 Yes

#### **Process Chemicals**

Program Level: Program Level 3 process Chemical Name: Ammonia (anhydrous)

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

Program Level: Program Level 2 process

Chemical Name: Propane
CAS Number: 74-98-6
Flammable/Toxic: Flammable

### **Process NAICS**

NAICS Code: 311812

NAICS Description: Commercial Bakeries

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: January 1997

Time Accident Began (HH:MM): 14:15
NAICS Code of Process Involved: 311821

NAICS Description: Cookie and Cracker Manufacturing

Release Duration: 001 Hours 12 Minutes

### Release Event

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

### Release Source

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

### Weather Conditions at the Time of Event

Wind Speed: 5.0
Units: Miles/h
Direction: E
Temperature: 77
Atmospheric Stability Class: B
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

### **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: 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: Notified and Responded

### Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A Yes Revised Maintenance: **Revised Training:** Yes **Revised Operating Procedures:** Yes 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: Keebler- Macon, Georgia EPA Facility Identifier: 1000 0007 0638

Plan Sequence Number: 10806

### Chemicals in Accident History

Quantity Released (lbs): 300
Percent Weight: N/A

Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7 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

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):

Macon Fire Department

(912) 751-9180