# **Section 1. Registration Information**

### Source Identification

Facility Name:

Parent Company #1 Name:

Submission Type:

Receipt Date:

Status:

Deregistered

November 2022

**Facility Identification** 

Facility ID: 1000 0010 8787

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 606534931

**Facility Location Address** 

 Street 1:
 91-086 Kaomi Loop

 Street 2:
 N/A

 City:
 Kapolei

 State:
 HI

 ZIP:
 96707

 ZIP4:
 1710

ZIP4: 1710 County: Honolulu

Facility Latitude and Longitude

Latitude (decimal): 21.306111 Longitude (decimal): -158.108056

Local Emergency Planning Committee and Regulations

LEPC: CLEAN
OSHA PSM: Yes
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

### **Process NAICS**

NAICS Code: 221112

NAICS Description: Fossil Fuel Electric Power Generation

## **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: April 2010
Time Accident Began (HH:MM): 21:00
NAICS Code of Process Involved: 221112

NAICS Description: Fossil Fuel Electric Power Generation

Release Duration: 000 Hours 01 Minutes

### Release Event

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

#### Release Source

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

### Weather Conditions at the Time of Event

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

Water Contamination:

N/A

Soil Contamination:

Other Environmental Damage:

N/A

### **Initiating Event**

Initiating Event: Human Error

### **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: 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: 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): 5
Percent Weight: 99.7

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?):

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):

**CLEAN** 

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

(808) 674-3388