Facility Name: Orange-co of Florida, Inc. EPA Facility Identifier: 1000 0015 8116

Plan Sequence Number: 15984

Section 1. Registration Information

Source Identification

Facility Name: Orange-co of Florida, Inc.

Parent Company #1 Name:

Submission Type:

Receipt Date:

Status:

Deregistration Effective Date:

Orange-co Inc.

First Time

August 1999

Deregistered

December 2001

Facility Identification

Facility ID: 1000 0015 8116

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 47470158

Facility Location Address

Street 1: 2020 US hwy 17 So.

 Street 2:
 N/A

 City:
 Bartow

 State:
 FL

 ZIP:
 33830

 ZIP4:
 2158

 County:
 Polk

Facility Latitude and Longitude

Latitude (decimal): 27.873611 Longitude (decimal): 81.826111

Local Emergency Planning Committee and Regulations

LEPC: District 7 LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Process Chemicals

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

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

Process NAICS

NAICS Code: 11131

NAICS Description: Orange Groves

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: October 1995

Time Accident Began (HH:MM): 21:30
NAICS Code of Process Involved: 11131

NAICS Description: Orange Groves
Release Duration: 003 Hours 00 Minutes

Release Event

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

Release Source

N/A Storage Vessel: Piping: Yes 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: 13.0
Units: Miles/h
Direction: NW
Temperature: 65
Atmospheric Stability Class: F
Precipitation Present: Yes
Unknown Weather Conditions: N/A

On-Site Impacts

Employee or Contractor Deaths: N/A
Public Responder Deaths: N/A
Public Deaths: N/A
Employee or Contractor Injuries: N/A
Public Responder Injuries: N/A
Public Injuries: N/A
On-Site Property Damage (\$): N/A

Known Off-Site Impacts

Deaths: N/A
Hospitalizations: N/A
Public Deaths: N/A
Other Medical Treatments: N/A
Evacuated: N/A
Sheltered-in-Place: N/A
Off-Site Property Damage (\$): N/A

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 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: Yes 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 Only

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: Yes Yes Revised Maintenance: Revised Training: N/A **Revised Operating Procedures:** N/A New Process Controls: Yes New Mitigation Systems: Yes Revised Emergency Response Plan: Yes **Changed Process:** N/A Reduced Inventory: N/A N/A None: Other Changes Introduced: N/A

Chemicals in Accident History

Quantity Released (lbs): 4180
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?):

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):

L.E.P.C-District #7

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

(941) 534-7131