EPA Facility Identifier: 1000 0012 7061 Plan Sequence Number: 1000112588

# **Section 1. Registration Information**

#### Source Identification

Facility Name: Pilgrim's Pride - Mt. Pleasant Prepared

Foods

Parent Company #1 Name: Pilgrim's Pride Corporation

Submission Type: Resubmission Receipt Date: April 2024

Facility Identification

Facility ID: 1000 0012 7061

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 808864636

**Facility Location Address** 

Street 1: 1000 South Pilgrim's Street

Street 2: N/A

City: Mt. Pleasant

 State:
 TX

 ZIP:
 75456

 ZIP4:
 N/A

 County:
 Titus

Facility Latitude and Longitude

Latitude (decimal): 33.148392 Longitude (decimal): -094.981425

Local Emergency Planning Committee and Regulations

LEPC: Titus County LEPC

OSHA PSM: Yes
EPCRA 302: Yes
CAA Title V: Yes

EPA Facility Identifier: 1000 0012 7061 Plan Sequence Number: 1000112588

#### **Process Chemicals**

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

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

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

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

#### **Process NAICS**

NAICS Code: 311615

NAICS Description: Poultry Processing

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: January 2018

Time Accident Began (HH:MM): 08:37
NAICS Code of Process Involved: 311615

NAICS Description: Poultry Processing
Release Duration: 001 Hours 04 Minutes

#### Release Event

Gas Release:N/ALiquid Spill/Evaporation:YesFire:N/AExplosion:N/AUncontrolled/Runaway Reaction:N/A

EPA Facility Identifier: 1000 0012 7061 Plan Sequence Number: 1000112588

Dal	0000	Call	roo
Rei	lease	SOU	rce

N/A Storage Vessel: N/A Piping: 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: N/A
Units: N/A
Direction: N/A
Temperature: N/A
Atmospheric Stability Class: N/A
Precipitation Present: N/A
Unknown Weather Conditions: Yes

#### On-Site Impacts

Employee or Contractor Deaths: 0
Public Responder Deaths: 0
Public Deaths: 0
Employee or Contractor Injuries: 1
Public Responder Injuries: 0
Public Injuries: 0
On-Site Property Damage (\$): 0

## **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 0012 7061 Plan Sequence Number: 1000112588

#### **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: Human Error

#### **Contributing Factors**

**Equipment Failure:** N/A Human Error: Yes 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 Only

#### Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A Yes Revised Maintenance: Revised Training: Yes N/A **Revised Operating Procedures:** New Process Controls: N/A New Mitigation Systems: N/A Revised Emergency Response Plan: N/A **Changed Process:** N/A N/A Reduced Inventory: N/A Other Changes Introduced: N/A

EPA Facility Identifier: 1000 0012 7061 Plan Sequence Number: 1000112588

#### Chemicals in Accident History

Quantity Released (lbs): 3977
Percent Weight: 100

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?):

N/A

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):

Mt. Pleasant Fire Department

(903) 575-4167