Facility Name: WT-8 Algona Terminal EPA Facility Identifier: 1000 0004 8593

Plan Sequence Number: 10516

# **Section 1. Registration Information**

#### Source Identification

Facility Name: WT-8 Algona Terminal

Parent Company #1 Name: KochFertilizer Storage & Terminal

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: August 2000

**Facility Identification** 

Facility ID: 1000 0004 8593

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 791524002

**Facility Location Address** 

Street 1: 1108 240th St.

 Street 2:
 N/A

 City:
 Algona

 State:
 IA

 ZIP:
 50511

 ZIP4:
 N/A

 County:
 Kossuth

Facility Latitude and Longitude

Latitude (decimal): 43.111667 Longitude (decimal): -94.230278

Local Emergency Planning Committee and Regulations

LEPC: Kosuth County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: WT-8 Algona Terminal EPA Facility Identifier: 1000 0004 8593

Plan Sequence Number: 10516

#### **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: Propane
CAS Number: 74-98-6
Flammable/Toxic: Flammable

### **Process NAICS**

NAICS Code: 49319

NAICS Description: Other Warehousing and Storage

# **Section 6. Accident History**

No records found.

# **Section 9. Emergency Response**

### Written Emergency Response (ER) Plan

regulated substance(s)?):

Community Plan (Is facility included in Yes written community emergency response plan?):

Facility Plan (Does facility have its own Yes written emergency response plan?):

Response Actions (Does ER plan Yes include specific actions to be taken in response to accidental releases of

Public Information (Does ER plan Yes include procedures for informing the

public and local agencies responding to accidental release?):

Healthcare (Does facility's ER plan

Yes

include information on emergency health care?):

### 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):

Kossuth County Emergency Mgmt Agenc

(000) 000-0911