EPA Facility Identifier: 1000 0015 4343 Plan Sequence Number: 1000020101

## **Section 1. Registration Information**

#### Source Identification

Facility Name: Southside Water Reclamation Plant

Parent Company #1 Name: Albuquerque Bernalillo County Water

**Utility Author** 

Submission Type: Resubmission
Receipt Date: February 2011
Status: Deregistered
Deregistration Effective Date: September 2011

**Facility Identification** 

Facility ID: 1000 0015 4343

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: 4201 2nd Street SW

Street 2: N/A

City: Albuquerque

 State:
 NM

 ZIP:
 87105

 ZIP4:
 N/A

 County:
 Bernalillo

Facility Latitude and Longitude

Latitude (decimal): 35.022222 Longitude (decimal): -106.660000

Local Emergency Planning Committee and Regulations

LEPC: Bernalillo LEPC

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

EPA Facility Identifier: 1000 0015 4343 Plan Sequence Number: 1000020101

#### **Process Chemicals**

Program Level: Program Level 3 process

Chemical Name: Chlorine
CAS Number: 7782-50-5
Flammable/Toxic: Toxic

Program Level: Program Level 3 process
Chemical Name: Sulfur dioxide (anhydrous)

CAS Number: 7446-09-5 Flammable/Toxic: Toxic

#### **Process NAICS**

NAICS Code: 22132

NAICS Description: Sewage Treatment Facilities

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: November 2008

Time Accident Began (HH:MM): 05:00
NAICS Code of Process Involved: 22132

NAICS Description: Sewage Treatment Facilities
Release Duration: 000 Hours 20 Minutes

#### Release Event

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

EPA Facility Identifier: 1000 0015 4343 Plan Sequence Number: 1000020101

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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: 0
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 0015 4343 Plan Sequence Number: 1000020101

#### **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: No, not notified

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

Improved or Upgraded Equipment: Yes Yes Revised Maintenance: **Revised Training:** N/A N/A **Revised Operating Procedures:** New Process Controls: N/A N/A New Mitigation Systems: 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 0015 4343 Plan Sequence Number: 1000020101

#### Chemicals in Accident History

Quantity Released (lbs): 2
Percent Weight: 1

Chemical Name: Chlorine
CAS Number: 7782-50-5
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

#### 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):

Albuquerque Fire Department

(505) 848-1314