Section 1. Registration Information

Source Identification

Facility Name: Linde - Geismar, LA

Parent Company #1 Name: Linde Inc.

Submission Type: Resubmission

Receipt Date: April 2024

Facility Identification

Facility ID: 1000 0014 4426

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 168569788

Facility Location Address

Street 1: Highway 75 Avenue E

 Street 2:
 N/A

 City:
 Geismar

 State:
 LA

 ZIP:
 70734

 ZIP4:
 N/A

 County:
 Ascension

Facility Latitude and Longitude

Latitude (decimal): 30.199444 Longitude (decimal): -091.013333

Local Emergency Planning Committee and Regulations

LEPC: Ascension Parish LEPC

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

Process Chemicals

Program Level: Program Level 3 process
Chemical Name: Formaldehyde (solution)

CAS Number: 50-00-0 Flammable/Toxic: Toxic

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: Methane
CAS Number: 74-82-8
Flammable/Toxic: Flammable

Program Level: Program Level 3 process

Chemical Name: Hydrogen
CAS Number: 1333-74-0
Flammable/Toxic: Flammable

Program Level: Program Level 3 process
Chemical Name: Flammable Mixture

CAS Number: 00-11-11 Flammable/Toxic: Flammable

Flammable Mixture Chemical Components

Chemical Name: Methane
CAS Number: 74-82-8
Flammable/Toxic: Flammable

Chemical Name: Hydrogen
CAS Number: 1333-74-0
Flammable/Toxic: Flammable

Process NAICS

NAICS Code: 32512

NAICS Description: Industrial Gas Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: June 2023
Time Accident Began (HH:MM): 14:05
NAICS Code of Process Involved: 32512

NAICS Description: Industrial Gas Manufacturing Release Duration: 000 Hours 05 Minutes

Release Event

Gas Release:N/ALiquid Spill/Evaporation:N/AFire:N/AExplosion:YesUncontrolled/Runaway Reaction:N/A

Release Source

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

Weather Conditions at the Time of Event

Wind Speed: 6.0
Units: Miles/h
Direction: W
Temperature: 91
Atmospheric Stability Class: F
Precipitation Present: N/A
Unknown Weather Conditions: N/A

On-Site Impacts

Employee or Contractor Deaths:

Public Responder Deaths:

O
Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

O
Public Injuries:

O

On-Site Property Damage (\$): 3000000

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:

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: Yes N/A Overpressurization: **Upset Condition:** N/A By-Pass Condition: N/A Maintenance Activity/Inactivity: Yes 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 and Responded

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: Yes N/A Revised Maintenance: Revised Training: Yes Revised Operating Procedures: Yes New Process Controls: N/A 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:

Chemicals in Accident History

Quantity Released (lbs): 17
Percent Weight: 40

Chemical Name: Formaldehyde (solution)

CAS Number: 50-00-0 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?):

N/A

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

N/A

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

N/A

Healthcare (Does facility's ER plan include information on emergency health care?):

N/A

Local Agency

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

Ascension Parish Offc Emgcy Prpdnss

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

(225) 621-8360