Facility Name: North Island Energy Facility

EPA Facility Identifier: 1000 0006 6974

Plan Sequence Number: 1000044212

# **Section 1. Registration Information**

#### Source Identification

Facility Name: North Island Energy Facility

Parent Company #1 Name:

Submission Type:

Receipt Date:

Status:

Applied Energy LLC

Resubmission

June 2014

Deregistered

Deregistration Effective Date: September 2018

**Facility Identification** 

Facility ID: 1000 0006 6974

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: Rogers & Quay Road

 Street 2:
 Building 353

 City:
 San Diego

 State:
 CA

 ZIP:
 92135

 ZIP4:
 N/A

County: San Diego

Facility Latitude and Longitude

Latitude (decimal): 32.705061 Longitude (decimal): -117.189750

Local Emergency Planning Committee and Regulations

LEPC: Region VI LEPC

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

Facility Name: North Island Energy Facility

EPA Facility Identifier: 1000 0006 6974

Plan Sequence Number: 1000044212

### **Process Chemicals**

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

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

#### **Process NAICS**

NAICS Code: 22133

NAICS Description: Steam and Air-Conditioning Supply

# **Section 6. Accident History**

#### Accident History ID: Accident 1

Date of Accident: November 2012

Time Accident Began (HH:MM): 16:30
NAICS Code of Process Involved: 22133

NAICS Description: Steam and Air-Conditioning Supply

Release Duration: 005 Hours 00 Minutes

#### Release Event

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

#### Release Source

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

Plan Sequence Number: 1000044212

## 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:

Public Responder Deaths:

Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

Public Injuries:

On-Site Property Damage (\$):

# **Known Off-Site Impacts**

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 10
Sheltered-in-Place: 10
Off-Site Property Damage (\$): 0

# **Environmental Damage**

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

Water Contamination:

N/A

Soil Contamination:

N/A

Other Environmental Damage: Some base personnel, exact number is

unknown, were evacuated and

sheltered in place.

Facility Name: North Island Energy Facility

**Initiating Event** 

Initiating Event: **Equipment Failure** 

Contributing Factors

Equipment Failure: Yes Human Error: N/A Improper Procedures: N/A Overpressurization: Yes **Upset Condition:** Yes By-Pass Condition: N/A 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 and Responded

Changes Introduced as a Result of the Accident

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

Other Changes Introduced: The system has been pumped down

and is being decommissioned.

Chemicals in Accident History

Quantity Released (lbs): 720 Percent Weight: 100

Chemical Name: Ammonia (anhydrous)

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

Facility Name: North Island Energy Facility
EPA Facility Identifier: 1000 0006 6974

# Written Emergency Response (ER) Plan

**Section 9. Emergency Response** 

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):

North Island Federal Fire Departmen

Plan Sequence Number: 1000044212

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

(619) 556-0815