Facility Name: Lamb Weston American Falls Facility

EPA Facility Identifier: 1000 0002 8052 Plan Sequence Number: 1000111047

# **Section 1. Registration Information**

#### Source Identification

Facility Name: Lamb Weston American Falls Facility

Parent Company #1 Name: Lamb Weston Holdings Inc.

Submission Type: Resubmission Receipt Date: March 2024

**Facility Identification** 

Facility ID: 1000 0002 8052

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: 2975 Lamb-Weston Rd.

Street 2: P.O. Box 489
City: American Falls

 State:
 ID

 ZIP:
 83211

 ZIP4:
 N/A

 County:
 Power

Facility Latitude and Longitude

Latitude (decimal): 42.765556 Longitude (decimal): -112.913333

Local Emergency Planning Committee and Regulations

LEPC: Power County LEPC

OSHA PSM: Yes
EPCRA 302: Yes
CAA Title V: N/A

Facility Name: Lamb Weston American Falls Facility

EPA Facility Identifier: 1000 0002 8052 Plan Sequence Number: 1000111047

#### **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

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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: 311411

NAICS Description: Frozen Fruit, Juice, and Vegetable

Manufacturing

EPA Facility Identifier: 1000 0002 8052 Plan Sequence Number: 1000111047

### **Section 6. Accident History**

No records found.

## **Section 9. Emergency Response**

Written Emergency Response (ER) Plan

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

N/A

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

Yes

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

Yes

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

Yes

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

Yes

### **Local Agency**

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

**Power County Sheriff** 

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

(208) 226-2311