EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

# **Section 1. Registration Information**

Source Identification

Facility Name: Blue Cube Operations LLC -

Plaquemine Site

Parent Company #1 Name:

Submission Type:

Resubmission

Receipt Date:

November 2022

**Facility Identification** 

Facility ID: 1000 0023 1536

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

 Street 1:
 21255 LA-1 South

 Street 2:
 21935 LA-1 South

 City:
 Plaquemine

 State:
 LA

 ZIP:
 70765

 ZIP4:
 0150

 County:
 Iberville

Facility Latitude and Longitude

Latitude (decimal): 30.313897 Longitude (decimal): -091.240605

Local Emergency Planning Committee and Regulations

LEPC: Iberville Parish LEPC

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

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

#### **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: Chloroform [Methane, trichloro-]

CAS Number: 67-66-3 Flammable/Toxic: Toxic

Program Level: Program Level 3 process

Chemical Name: Methyl chloride [Methane, chloro-]

CAS Number: 74-87-3 Flammable/Toxic: Toxic

Program Level: Program Level 3 process
Chemical Name: Hydrogen chloride (anhydrous)

[Hydrochloric acid]

CAS Number: 7647-01-0 Flammable/Toxic: Toxic

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: Isopropyl chloride [Propane, 2-chloro-]

CAS Number: 75-29-6
Flammable/Toxic: Flammable

Program Level: Program Level 3 process
Chemical Name: Propylene [1-Propene]

CAS Number: 115-07-1 Flammable/Toxic: Flammable

Program Level: Program Level 3 process
Chemical Name: 2-Chloropropylene [1-Propene,

2-chloro-]

CAS Number: 557-98-2 Flammable/Toxic: Flammable

Program Level: Program Level 3 process
Chemical Name: 1-Chloropropylene [1-Propene,

1-chloro-]

CAS Number: 590-21-6 Flammable/Toxic: Flammable

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

#### **Process NAICS**

NAICS Code: 32518

NAICS Description: Other Basic Inorganic Chemical

Manufacturing

NAICS Code: 32519

NAICS Description: Other Basic Organic Chemical

Manufacturing

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident:May 2022Time Accident Began (HH:MM):22:30NAICS Code of Process Involved:32518

NAICS Description: Other Basic Inorganic Chemical

Manufacturing

Release Duration: 000 Hours 01 Minutes

#### Release Event

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

#### Release Source

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

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

### Weather Conditions at the Time of Event

Wind Speed: 12.0
Units: Miles/h
Direction: S
Temperature: 71
Atmospheric Stability Class: N/A
Precipitation Present: N/A
Unknown Weather Conditions: N/A

### **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: 0
Sheltered-in-Place: 0
Off-Site Property Damage (\$): 0

### **Environmental Damage**

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

Water Contamination:

Soil Contamination:

Other Environmental Damage:

N/A

#### **Initiating Event**

Initiating Event: Human Error

### **Contributing Factors**

**Equipment Failure:** N/A Human Error: Yes Improper Procedures: N/A N/A Overpressurization: **Upset Condition:** N/A 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: No, not notified

### Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A N/A Revised Maintenance: Revised Training: Yes **Revised Operating Procedures:** N/A 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: N/A

### Chemicals in Accident History

Quantity Released (lbs):1Percent Weight:100Chemical Name:ChlorineCAS Number:7782-50-5Flammable/Toxic:Toxic

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

#### Accident History ID: Accident 2

Date of Accident: April 2022
Time Accident Began (HH:MM): 20:25
NAICS Code of Process Involved: 32518

NAICS Description: Other Basic Inorganic Chemical

Manufacturing

Release Duration: 033 Hours 49 Minutes

#### Release Event

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

#### Release Source

 Storage Vessel:
 N/A

 Piping:
 N/A

 Process Vessel:
 N/A

 Transfer Hose:
 N/A

 Valve:
 N/A

 Pump:
 N/A

 Joint:
 N/A

Other Release Source: Compressor

#### Weather Conditions at the Time of Event

Wind Speed: 12.0
Units: Miles/h
Direction: N
Temperature: 55
Atmospheric Stability Class: N/A
Precipitation Present: N/A
Unknown Weather Conditions: N/A

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

#### **On-Site Impacts**

On-Site Property Damage (\$): 16000000

### **Known Off-Site Impacts**

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 0
Sheltered-in-Place: 6395
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:

**Equipment Failure** 

#### **Contributing Factors**

**Equipment Failure:** N/A N/A Human Error: Improper Procedures: N/A N/A Overpressurization: **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 N/A Revised Maintenance: Revised Training: N/A Revised Operating Procedures: N/A 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: N/A

#### Chemicals in Accident History

Quantity Released (lbs):6512Percent Weight:100Chemical Name:ChlorineCAS Number:7782-50-5Flammable/Toxic:Toxic

EPA Facility Identifier: 1000 0023 1536 Plan Sequence Number: 1000103374

#### Accident History ID: Accident 3

Date of Accident: January 2018

Time Accident Began (HH:MM): 00:15
NAICS Code of Process Involved: 32518

NAICS Description: Other Basic Inorganic Chemical

Manufacturing

Release Duration: 000 Hours 30 Minutes

### Release Event

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

#### Release Source

Storage Vessel: N/A Piping: N/A Process Vessel: Yes 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: S
Temperature: 32
Atmospheric Stability Class: N/A
Precipitation Present: N/A
Unknown Weather Conditions: N/A

#### **On-Site Impacts**

Employee or Contractor Deaths: 0
Public Responder Deaths: 0
Public Deaths: 0
Employee or Contractor Injuries: 1
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

### **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:** N/A N/A Human Error: Improper Procedures: N/A N/A Overpressurization: **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: No, not notified

### Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A N/A Revised Maintenance: Revised Training: Yes **Revised Operating Procedures:** N/A 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: N/A

### Chemicals in Accident History

Quantity Released (lbs):5Percent Weight:100Chemical Name:ChlorineCAS Number:7782-50-5Flammable/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?):

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):

Iberville Parish

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

(225) 687-5104