Facility Name: Merchants Cold Storage

EPA Facility Identifier: 1000 0019 1525

Plan Sequence Number: 1000089083

# **Section 1. Registration Information**

### Source Identification

Facility Name: Merchants Cold Storage
Parent Company #1 Name: The Merchants Company

Submission Type: Resubmission
Receipt Date: August 2020
Status: Deregistered
Deregistration Effective Date: February 2023

**Facility Identification** 

Facility ID: 1000 0019 1525

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 8184749

**Facility Location Address** 

Street 1: 1340 Boling Street

 Street 2:
 N/A

 City:
 Jackson

 State:
 MS

 ZIP:
 39209

 ZIP4:
 N/A

 County:
 Hinds

Facility Latitude and Longitude

Latitude (decimal): 32.347556 Longitude (decimal): -090.237694

Local Emergency Planning Committee and Regulations

LEPC: Hinds County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 Yes

 CAA Title V:
 N/A

Facility Name: Merchants Cold Storage

EPA Facility Identifier: 1000 0019 1525

Plan Sequence Number: 1000089083

#### **Process Chemicals**

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

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

#### **Process NAICS**

NAICS Code: 42441

NAICS Description: General Line Grocery Merchant

Wholesalers

# **Section 6. Accident History**

No records found.

# **Section 9. Emergency Response**

### Written Emergency Response (ER) Plan

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

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

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

Public Information (Does ER plan N/A 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?):

Facility Name: Merchants Cold Storage

EPA Facility Identifier: 1000 0019 1525

Plan Sequence Number: 1000089083

### 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):

Jackson Fire Department

(601) 960-2093