# **Section 1. Registration Information**

### Source Identification

Facility Name: Park 10-Ninety Nine

Parent Company #1 Name:

Submission Type:

Receipt Date:

Newmark

Resubmission

May 2024

**Facility Identification** 

Facility ID: 1000 0018 9538

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: 23623 Colonial Parkway

 Street 2:
 N/A

 City:
 Katy

 State:
 TX

 ZIP:
 77493

 ZIP4:
 N/A

 County:
 Harris

Facility Latitude and Longitude

Latitude (decimal): 29.790121 Longitude (decimal): -95.779401

Local Emergency Planning Committee and Regulations

LEPC: Harris County-

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

### **Process Chemicals**

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

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

### **Process NAICS**

NAICS Code: 49311

NAICS Description: General Warehousing and Storage

# **Section 6. Accident History**

### Accident History ID: Accident 1

Date of Accident: February 2023

Time Accident Began (HH:MM): 16:40
NAICS Code of Process Involved: 49312

NAICS Description: Refrigerated Warehousing and Storage

Release Duration: 022 Hours 45 Minutes

### Release Event

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

#### Release Source

N/A Storage Vessel: Piping: Yes 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: 15.0
Units: Miles/h
Direction: NW
Temperature: 51
Atmospheric Stability Class: D
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:

O
Public Responder Injuries:

O
Public Injuries:

O
On-Site Property Damage (\$):

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

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 0
Sheltered-in-Place: 3054
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: Equipment Failure

### **Contributing Factors**

**Equipment Failure:** Yes Human Error: Yes Improper Procedures: N/A 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 Yes Revised Maintenance: Revised Training: N/A Revised Operating Procedures: N/A New Process Controls: Yes Yes New Mitigation Systems: N/A Revised Emergency Response Plan: **Changed Process:** N/A Reduced Inventory: N/A N/A None: Other Changes Introduced: N/A

### Chemicals in Accident History

Quantity Released (lbs): 24000 Percent Weight: 100

Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7
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):

HCESD 48 Fire Station #4

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

(281) 599-8888