

Section 1. Registration Information

Source Identification

Facility Name:	River Valley Cooperative - Olin NH3
Parent Company #1 Name:	Formerly Clarence Cooperative Company
Submission Type:	Corrections
Receipt Date:	February 2009
Status:	Deregistered
Deregistration Effective Date:	October 2010

Facility Identification

Facility ID:	1000 0010 7341
--------------	----------------

Dun and Bradstreet Numbers (DUNS)

Facility DUNS:	22065593
----------------	----------

Facility Location Address

Street 1:	3897 Highway 38
Street 2:	N/A
City:	Olin
State:	IA
ZIP:	52320
ZIP4:	N/A
County:	Jones

Facility Latitude and Longitude

Latitude (decimal):	41.988889
Longitude (decimal):	-091.143056

Local Emergency Planning Committee and Regulations

LEPC:	Region 6 LEPC
OSHA PSM:	N/A
EPCRA 302:	Yes
CAA Title V:	N/A

Process Chemicals

Program Level:	Program Level 2 process
Chemical Name:	Ammonia (anhydrous)
CAS Number:	7664-41-7
Flammable/Toxic:	Toxic

Process NAICS

NAICS Code:	42491
NAICS Description:	Farm Supplies Merchant Wholesalers

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:	October 2009
Time Accident Began (HH:MM):	09:40
NAICS Code of Process Involved:	42491
NAICS Description:	Farm Supplies Merchant Wholesalers
Release Duration:	004 Hours 30 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:	N/A
Process Vessel:	N/A
Transfer Hose:	N/A
Valve:	N/A
Pump:	N/A
Joint:	N/A
Other Release Source:	1000 gallon portable nurse tank

Weather Conditions at the Time of Event

Wind Speed:	5.0
Units:	Miles/h
Direction:	N
Temperature:	46
Atmospheric Stability Class:	D
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:	0
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:	4
Evacuated:	500
Sheltered-in-Place:	50
Off-Site Property Damage (\$):	0

Environmental Damage

Fish or Animal Kills:	N/A
Tree, Lawn, Shrub, or Crop Damage:	N/A
Water Contamination:	N/A
Soil Contamination:	N/A
Other Environmental Damage:	none claimed

Initiating Event

Initiating Event:	Unknown
-------------------	---------

Contributing Factors

Equipment Failure:	N/A
Human Error:	N/A
Improper Procedures:	N/A
Overpressurization:	N/A
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:	act of theft and vandalism (methamphetamines)

Off-Site Responders Notified

Off-Site Responders Notified:	Notified and Responded
-------------------------------	------------------------

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment:	N/A
Revised Maintenance:	N/A
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
None:	N/A
Other Changes Introduced:	Thieves circumvented locking valve covers and left valve partially open

Chemicals in Accident History

Quantity Released (lbs):	3965
Percent Weight:	99
Chemical Name:	Ammonia (anhydrous)
CAS Number:	7664-41-7
Flammable/Toxic:	Toxic

Accident History ID: Accident 2

Date of Accident:	July 2007
Time Accident Began (HH:MM):	06:30
NAICS Code of Process Involved:	42491
NAICS Description:	Farm Supplies Merchant Wholesalers
Release Duration:	000 Hours 30 Minutes

Release Event

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

Release Source

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

Weather Conditions at the Time of Event

Wind Speed:	5.0
Units:	Miles/h
Direction:	NW
Temperature:	60
Atmospheric Stability Class:	D
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:	0
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:	2
Evacuated:	0
Sheltered-in-Place:	0
Off-Site Property Damage (\$):	0

Environmental Damage

Fish or Animal Kills:	N/A
Tree, Lawn, Shrub, or Crop Damage:	N/A
Water Contamination:	N/A
Soil Contamination:	N/A
Other Environmental Damage:	Vaporized into the air

Initiating Event

Initiating Event:	Equipment Failure
-------------------	-------------------

Contributing Factors

Equipment Failure:	N/A
Human Error:	N/A
Improper Procedures:	N/A
Overpressurization:	N/A
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:	Theft for methamphetamine production - circumvented valve locks

Off-Site Responders Notified

Off-Site Responders Notified:	Notified and Responded
-------------------------------	------------------------

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment:	N/A
Revised Maintenance:	N/A
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
None:	N/A
Other Changes Introduced:	This was an act of theft. Incident investigated by Jones County Sheriff. Locking valve covers had been tampered with. River Valley Coop had taken positive actions prior to event to stop thefts.

Chemicals in Accident History

Quantity Released (lbs):	800
Percent Weight:	99
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):

Region 6 LEPC

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

(319) 363-2671