Facility Name: Bayer Miles Avenue Complex

EPA Facility Identifier: 1000 0003 9228 Plan Sequence Number: 3207

# **Section 1. Registration Information**

## Source Identification

Facility Name: Bayer Miles Avenue Complex

Parent Company #1 Name: Bayer Corporation

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: November 2003

**Facility Identification** 

Facility ID: 1000 0003 9228

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 878011238

**Facility Location Address** 

Street 1: 1884 Miles Avenue

 Street 2:
 N/A

 City:
 Elkhart

 State:
 IN

 ZIP:
 46514

 ZIP4:
 N/A

 County:
 Elkhart

Facility Latitude and Longitude

Latitude (decimal): 41.7

Longitude (decimal): -85.983333

Local Emergency Planning Committee and Regulations

LEPC: Elkhart County LEPC

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

Facility Name: Bayer Miles Avenue Complex

EPA Facility Identifier: 1000 0003 9228 Plan Sequence Number: 3207

#### **Process Chemicals**

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

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

#### **Process NAICS**

NAICS Code: 32541

NAICS Description: Pharmaceutical and Medicine

Manufacturing

## **Section 6. Accident History**

## Accident History ID: Accident 1

Date of Accident: September 1996

Time Accident Began (HH:MM): 12:15
NAICS Code of Process Involved: 32541

NAICS Description: Pharmaceutical and Medicine

Manufacturing

Release Duration: 000 Hours 35 Minutes

#### Release Event

Gas Release:N/ALiquid Spill/Evaporation:YesFire:N/AExplosion:N/AUncontrolled/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

Plan Sequence Number: 3207

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Wind Speed: N/A

Units: Meters/second

Direction:N/ATemperature:N/AAtmospheric Stability Class:N/APrecipitation Present:N/AUnknown Weather Conditions:Yes

## **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:

N/A

Soil Contamination:

Other Environmental Damage:

N/A

#### **Initiating Event**

Initiating Event: Human Error

EPA Facility Identifier: 1000 0003 9228 Plan Sequence Number: 3207

#### **Contributing Factors**

**Equipment Failure:** N/A N/A Human Error: 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: Cut into ammonia pipe thought to be

empty

#### 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 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: Implemented procedure for determining

contents of piping before cutting into.

### Chemicals in Accident History

Quantity Released (lbs): 885
Percent Weight: N/A

Chemical Name: Ammonia (anhydrous)

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

EPA Facility Identifier: 1000 0003 9228 Plan Sequence Number: 3207

## **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):

Elkhart City Fire Dept/HAZMAT Team

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

(219) 293-2175