Facility Name: WT-11 David City Terminal EPA Facility Identifier: 1000 0004 7843

Plan Sequence Number: 20153

Section 1. Registration Information

Source Identification

Facility Name: WT-11 David City Terminal

Parent Company #1 Name: Koch Fertilizer Storage & Terminal

Submission Type: Resubmission Receipt Date: January 2000 Status: Deregistered Deregistration Effective Date: October 2001

Facility Identification

Facility ID: 1000 0004 7843

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 791524002

Facility Location Address

Street 1: East Side of NE Hwy 15

Street 2: N/A City: **David City** State: NE ZIP: 68632 ZIP4: N/A

County: Butler

Facility Latitude and Longitude

Latitude (decimal): 41.176667 Longitude (decimal): -97.099444

Local Emergency Planning Committee and Regulations

LEPC: **Butler County LEPC**

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

Facility Name: WT-11 David City Terminal EPA Facility Identifier: 1000 0004 7843

Plan Sequence Number: 20153

Process Chemicals

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

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

Program Level: Program Level 3 process

Chemical Name: Propane
CAS Number: 74-98-6
Flammable/Toxic: Flammable

Process NAICS

NAICS Code: 49319

NAICS Description: Other Warehousing and Storage

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

regulated substance(s)?):

Community Plan (Is facility included in N/A written community emergency response plan?):

Facility Plan (Does facility have its own Yes written emergency response plan?):

Response Actions (Does ER plan Yes include specific actions to be taken in response to accidental releases of

Public Information (Does ER plan Yes include procedures for informing the public and local agencies responding to

accidental release?):

Healthcare (Does facility's ER plan

Yes

include information on emergency health care?):

Facility Name: WT-11 David City Terminal EPA Facility Identifier: 1000 0004 7843

Plan Sequence Number: 20153

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):

David City Fire Department

(000) 000-0911