Facility Name: DFA Dairy Brands Fluid, LLC dba PET Dairy

EPA Facility Identifier: 1000 0010 9116 Plan Sequence Number: 1000092470

Section 1. Registration Information

Source Identification

Facility Name: DFA Dairy Brands Fluid, LLC dba PET

Dairy

Parent Company #1 Name: DFA Dairy Brands Fluid, LLC

Submission Type: Resubmission Receipt Date: February 2021

Facility Identification

Facility ID: 1000 0010 9116

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: 4350704

Facility Location Address

Street 1: 1350 West Fairfield Road

 Street 2:
 N/A

 City:
 High Point

 State:
 NC

 ZIP:
 27263

 ZIP4:
 N/A

 County:
 Guilford

Facility Latitude and Longitude

Latitude (decimal): 35.923361 Longitude (decimal): -80.012389

Local Emergency Planning Committee and Regulations

LEPC: Guilford County LEPC

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

Facility Name: DFA Dairy Brands Fluid, LLC dba PET Dairy

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Process Chemicals

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

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

Process NAICS

NAICS Code: 31151

NAICS Description: Dairy Product (except Frozen)

Manufacturing

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident: October 2024

Time Accident Began (HH:MM): 12:00
NAICS Code of Process Involved: 311511

NAICS Description: Fluid Milk Manufacturing
Release Duration: 001 Hours 36 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: Yes Process Vessel: N/A Transfer Hose: N/A Valve: N/A Pump: N/A Joint: N/A Other Release Source: N/A

Facility Name: DFA Dairy Brands Fluid, LLC dba PET Dairy

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Weather Conditions at the Time of Event

Wind Speed: 7.0
Units: Miles/h
Direction: N
Temperature: 70
Atmospheric Stability Class: F
Precipitation Present: N/A
Unknown Weather Conditions: N/A

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:

Soil Contamination:

Other Environmental Damage:

N/A

Initiating Event

Initiating Event: Equipment Failure

EPA Facility Identifier: 1000 0010 9116 Plan Sequence Number: 1000092470

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: 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 N/A Revised Maintenance: 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 N/A None: Other Changes Introduced: N/A

Chemicals in Accident History

Quantity Released (lbs): 1300
Percent Weight: 100

Chemical Name: Ammonia (anhydrous)

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

EPA Facility Identifier: 1000 0010 9116 Plan Sequence Number: 1000092470

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):

City of High Point Fire Dept.

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

(000) 000-0911