DOT US Department of Transportation

PHMSA Pipeline and Hazardous Materials Safety Administration

OPS Office of Pipeline Safety

Central Region

Principal Investigator Allan Beshore and Gery Bauman

Senior Accident InvestigatorBryan LouqueRegion DirectorDavid BarrettDate of Report12/15/2011

Subject Failure Investigation Report – TEPPCO Propane Fire

Operator, Location, & Consequences

Date of Failure 9/18/2005

Commodity Released Propane

City/County & State Monroe/Butler, OH

OpID & Operator Name 19237 TE Products Pipeline Company, LLC

Unit # & Unit Name 4213 Allegheny

SMART Activity # 116286

Milepost / Location Todhunter Terminal

Type of Failure Leak caused by incorrect operation

Fatalities 1

Injuries 0

Description of area

impacted

Terminal property, did not affect an HCA

Total Costs \$5,901,302 (Appendix A)

Failure Investigation Report – TEPPCO Propane Fire

9/18/2005

Executive Summary

A TEPPCO employee was killed during an explosion and fire at a TEPPCO (Enterprise) terminal in Ohio. Propane leaked from the drain line of a propane/water separator. The cause of the accident is Incorrect Operations. OPS conferred with the Occupational Safety and Health Administration (OSHA) and agreed that OSHA would investigate the failure.

System Details

The Todhunter Terminal is operated by TE Products Pipeline Company, LLC (TEPPCO) as part of the larger Enterprise Operating Products, LLC pipeline network. Todhunter receives highly volatile liquids (HVLs) through a pipeline originating in the Gulf Coast area. Incoming HVLs can be stored in underground caverns or aboveground tanks. The pipeline supplying Todhunter extends past the terminal to another TEPPCO facility in Lebanon, OH. Three pipelines exit Todhunter. One delivers jet fuel supplies to the Cincinnati airport. A bi-directional pipeline runs from the terminal to Lebanon, OH and then on to Lima, OH. The third pipeline primarily transports propane to the northeast market.

Due to extensive damage to terminal equipment, jet fuel transport to the Cincinnati airport was accomplished by truck until the terminal was fully operational. There were no other supply impacts as a result of the failure.

Events Leading up to the Failure

Three TEPPCO employees were working at the terminal. Among other things, the employees were withdrawing propane from an underground cavern. Water typically mixes with propane while it is stored underground. The propane must be dehydrated before it can be shipped to the northeast market. The propane and water mix from the cavern flows into a separator tank. Since water is heavier than propane, the water settles to the bottom of the tank and "dry" propane exits near the top. Sensors on the separator tank monitor the water level to alert operating personnel that water must be drained through a 2" pipe leaving the bottom of the tank. By opening a ¼ turn valve on the 2" piping, the water flows to a sump where it evaporates over time. TEPPCO employees were instructed to slightly open the ¼ turn valve and allow water to flow out until hearing a distinctive change in the sound of the flow. This audible change combined with a slight "jump" on the valve indicated that propane had begun flowing out of the tank and it was time to close the valve. Water had been drained from the tank several times during the hours before the failure.

At approximately 10:50 pm on 9/18/2005, all three TEPPCO employees were in the control room when an alert indicated that water needed to be drained from the separator tank. One of the employees left the control room to drain the water. After a few minutes the two employees remaining in the control room heard a loud hissing and could see a vapor cloud in the vicinity of the separator tank.

Emergency Response

One employee left the control room to look for the employee who had left to drain the water. However, he was driven away from the failure location by the vapor cloud. The other employee in the control room activated the facility emergency shut-down system and then moved away from the vapor cloud. Although the details are not known for certain, ignition and more than one explosion occurred. The two TEPPCO employees called 911 and manually closed valves in an attempt to limit the flow of propane to the fire.

The local fire department arrived on the scene. Working cooperatively with TEPPCO employees, the fire department extinguished structure fires, but allowed escaping propane to burn until the source of

Failure Investigation Report - TEPPCO Propane Fire

9/18/2005

propane was depleted. The remains of the third TEPPCO employee were found near the separator tank water drain valves.

TEPPCO notified the National Response Center at 4:32 pm on 9/19/2005 (Appendix B).

Findings and Contributing Factors

OPS conferred with the Occupational Safety and Health Administration (OSHA) and agreed that OSHA would investigate the failure. An OSHA press release dated March 20, 2006 summarizes the OSHA investigation (Appendix C) - "...OSHA issued citations alleging 15 serious violations with penalties totaling \$103,000 and two repeat violations with \$70,000 in proposed penalties for failure to comply with federal workplace safety and health standards. Among the serious violations cited were inadequate standard operating procedures for handling propane gas, lack of self-closing valves, lack of training for employees, and use of radio-phones that were not intrinsically safe in hazardous locations. Alleged repeat violations included failure to perform inspections and tests on equipment that controlled the flow of water and propane, lack of written mechanical integrity procedures and failure to correct items found during mandated internal compliance audits of the facility..."

Appendices

- A TEPPCO Accident Report to PHMSA
- B NRC Report
- C OSHA Press Release, dated March 20, 2006

NOTICE: This report is required by 49 CFR Part 195. Failure to report can result in a civil penalty not to exceed \$25,000 for each violation for each day that such violation persists except that the maximum civil penalty shall not exceed \$500,000 as provided in 49 USC 60122 OMB No. 2137-0047

U.S. Department of Transportation Research and Special Programs Administration

ACCIDENT REPORT – HAZARDOUS LIQUID PIPELINE SYSTEMS

| Report Date | |
|----------------|--|
| No | |
| (DOT Use Only) | |

INSTRUCTIONS

Important: Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the Office Of Pipeline Safety Web Page at http://ops.dot.gov.

| you can obtair | one from the Office Of Pipe | eline Safety Web Page at | http://ops.do | <u>.gov</u> . | |
|--|---|---|---|-------------------------|--|
| PART A – GENERAL REPORT IN | Check one or mo Original R | ore boxes as appropriate: eport Supplemental | Poport Fi | inal Papart | |
| d. Operator street address e. Operator address C IMPORTANT: IF THE SPILL IS S COMPLETE THIS PAGE ONLY, U | ification Number (if known) / / pipeline, enter Owner's OPS 5-dig ity, County, State and Zip Code MALL, THAT IS, THE AMOUNT IS JNLESS THE SPILL IS TO WATE | it Identification Number (if know | vn) / | / / 5 BARRELS, | |
| REPORTABLE UNDER §195.50 A | 45 REVISED IN CT 2001. | | | | |
| 2. Time and date of the accident | | 5. Losses (Estimated) | | > | |
| / / / / / / / mor | / / / / / nth dav vear | Public/Community Los | sses reimburse | ed by operator | |
| Location of accident | , , | Public/private property | | a by operator. | |
| (If offshore, do not complete a t | hrough d. See Part C.1) | Cost of emergency resp | \ | | |
| a. Latitude: | Longitude: | | | | |
| (if not available, see instructions for he | ow to provide specific location) | Other Costs | Cost of environmental remediation \$ | | |
| b. | | (describe) | Ψ_ | | |
| b. City, and County or Parish | | (describe) | | | |
| CState and Zip Code | | Operator Losses: | | | |
| d. Mile post/valve station o | | Value of product lost | Value of product lost \$ | | |
| (whichever gives more a | | Value of operator prope | perty damage \$ | | |
| | | Other Costs | \$_ | | |
| 4. Telephone report | | (describe) | | | |
| <u> </u> | month day year | Total Costs | \$_ | | |
| | \rightarrow | | | | |
| 6. Commodity Spilled Yes (If Yes, complete Parts a through of the second | | | c. Estimated a involved : | amount of commodity | |
| a. Name of commodity spilled | | | Barrels | | |
| b. Classification of commodity's | pilled: | | | (check only if spill is | |
| | kic fluid which is a gas at ambient o | | | n one barrel) | |
| CO ₂ or other non-flammable, non-toxic fluid which is a gas at ambient conditions Gasoline, diesel, fuel oil or other petroleum product which is a liquid at ambient conditions | | | Amounts: Spilled : | | |
| Crude oil | | | | | |
| 0.11050 500 01111 001110 | NI V (5 II () 5 I |) [(5) 11 11 | Recovere | | |
| | NLY (5 gallons to under 5 barrel | | _ | - | |
| Corrosion Natural F | • | • | e Force Damag | | |
| Material and/or Weld Failure | | Incorrect Ope | eration | Other | |
| PART B – PREPARER AND AUTI | HORIZED SIGNATURE | | | | |
| (type or print) Preparer's Name and Title |) | | Area Code and | Felephone Number | |
| Preparer's E-mail Address | | | Area Code and F | Facsimile Number | |
| Authorized Signature | (type or print) Name a | and Title Date | Area Code and | Telephone Number | |

| PART C – ORIGIN OF THE ACCIDENT (Check all that apply) | | | | |
|--|---|--|--|--|
| Additional location information a. Line segment name or ID | Offshore: Yes No (complete d if offshore) | | | |
| b. Accident on Federal land other than Outer Continental | d. Area Block # | | | |
| Shelf Yes No | State / / or Outer Continental Shelf | | | |
| c. Is pipeline interstate? Yes No | - | | | |
| Location of system involved (check all that apply) Operator's Property | a. Type of leak or rupture | | | |
| Pipeline Right of Way | Leak: Pinhole Connection Failure (complete sec. H5) Puncture, diameter (inches) | | | |
| High Consequence Area (HCA)? Describe HCA | Rupture: Circumferential – Separation | | | |
| Part of system involved in accident | Longitudinal – Tear/Crack, length (inches) | | | |
| Above Ground Storage Tank | Propagation Length, total, both sides (feet) | | | |
| Cavern or other below ground storage facility | N/A Other | | | |
| Pump/meter station; terminal/tank farm piping and equipment, including sumps | b.Type of block valve used for isolation of immediate section: | | | |
| Other Specify: | Upstream: Manual Automatic Remote Control | | | |
| Onshore pipeline , including valve sites Offshore pipeline , including platforms | Check Valve Downstream: Manual Automatic Remote Control Check Valve | | | |
| If failure occurred on Pipeline , complete items a - g: | c. Length of segment isolatedft | | | |
| | d. Distance between valvesft | | | |
| Failure occurred on Body of Pipe Pipe Seam Scraper Trap | e. Is segment configured for internal inspection tools? Yes No | | | |
| Pump Sump Joint | f. Had there been an in-line inspection device run at the point of failure? Yes No Don't Know | | | |
| Component Valve Metering Facility Repair Sleeve Welded Fitting Bolted Fitting | Not Possible due to physical constraints in the system | | | |
| Girth Weld | g. If Yes, type of device run (check all that apply) | | | |
| Other (specify) | High Resolution Magnetic Flux tool Year run: Low Resolution Magnetic Flux tool Year run: | | | |
| Year the component that failed was installed: // | UT tool Year run: | | | |
| Maximum operating pressure (MOP) a. Estimated pressure at point and time of accident: | Geometry too Year run: | | | |
| PSIG | Caliper tool Year run: | | | |
| b. MOP at time of accident: PSIG | Crack tool Year run: | | | |
| c. Did an overpressurization occur relating to the accident? | Hard Spot tool Year run: Other tool Year run: | | | |
| Yes No | Teal full. | | | |
| PART D – MATERIAL SPECIFICATION | PART E – ENVIRONMENT | | | |
| 1. Nominal pipe size (NPS) | 1. Area of accident In open ditch | | | |
| 2. Wall thicknessin. | Under pavement Above ground | | | |
| 3. Specification SMYS | _/ Underground Under water | | | |
| 4. Seam type | Inside/under building Other | | | |
| 5. Valve type | | | | |
| 6. Manufactured byin year / | 2. Depth of cover: inches | | | |
| PART F - CONSEQUENCES | Z. Doput of cover. | | | |
| 1. Consequences (check and complete all that apply) | | | | |
| a. Fatalities Injuries | c. Product ignited Yes No d. Explosion Yes No | | | |
| Number of operator employees: | e. Evacuation (general public only) / / people | | | |
| Contractor employees working for operator: | Reason for Evacuation: | | | |
| General public: | Precautionary by company | | | |
| Totals: | Evacuation required or initiated by public official | | | |
| b. Was pipeline/segment shutdown due to leak? Yes No | f. Elapsed time until area was made safe: / / hr. / / min. | | | |
| If Yes, how long? days hours minutes | <u>/ /</u> hr. <u>/ /</u> min. | | | |
| 2. Environmental Impact | | | | |
| a. Wildlife Impact: Fish/aquatic Yes No Birds Yes No | e. Water Contamination: Yes No (If Yes, provide the following) Amount in water barrels | | | |
| Terrestrial Yes No | Ocean/Seawater No Yes | | | |
| b. Soil Contamination Yes No | Surface No Yes | | | |
| If Yes, estimated number of cubic yards: | • • • • • • • • • • • • • • • • • • • | | | |
| c Long term impact assessment performed. Yes No. | Groundwater No Yes Drinking water No Yes (If Yes check below) | | | |
| c. Long term impact assessment performed: Yes No d. Anticipated remediation Yes No If Yes, check all that apply: Surface water Groundwater | Groundwater No Yes Drinking water No Yes (If Yes, check below.) Private well Public water intake Soil Vegetation Wildlife | | | |

| PART G - LEAK DETEC | | | | | | |
|--|--|----------------------------------|------------------------|--|--|--|
| | detection capability in place? | Yes No | | | | |
| 2. Was the release initially detected by? (check one): | | CPM/SCADA-b | ased system wit | th leak detection | | |
| | | Static shut-in te | est or other press | sure or leak test | | |
| | | Local operating | personnel, prod | cedures or equipment | | |
| | | Remote operati | ng personnel, in | ncluding controllers | | |
| | | Air patrol or gro | und surveillance | e | | |
| | | A third party | | Other (specify) | | |
| 3. Estimated leak duration | n days hours | | | | | |
| PART H – APPARENT C | AUSE primary cause | | k one circle in ea | Part H. Check the box corresponding to the ach of the supplemental categories structions for guidance. | | |
| H1 – CORROSION | a. Pipe Coating | b. Visual Examination | n | c. Cause of Corrosion | | |
| External Corrosi | on Bare Coated | Localized Pitti General Corro | • | Galvanic Atmospheric Stray Current Microbiological | | |
| | Coalca | Other | | _ Cathodic Protection Disrupted | | |
| Internal Corrosic | n | | | Stress Corrosion Cracking Selective Seam Corrosion | | |
| (Complete items a – e | | | | Other | | |
| where applicable.) | d. Was corroded part of | pipeline considered to | be under catho | dic protection prior to discovering accident? | | |
| | | r Protection Started: / | | | | |
| | e. Was pipe previously | | | | | |
| H2 – NATURAL FORCE | | stimated time prior to a | ccident: / | / years / / months Unknown | | |
| 3. Earth Movemer | | Subsidence | Landslide | Øther | | |
| 4. Lightning | | | | | | |
| 5. Heavy Rains/FI | oods => Washouts | Flotation | Mudslide | Scouring Other | | |
| 6. Temperature | => Thermal stress | Frost heave | Frozen compo | | | |
| 7. High Winds | | | $\rightarrow (\Omega)$ | | | |
| | | | \longleftrightarrow | | | |
| H3 — EXCAVATION DA | AMAGE | | \setminus | | | |
| | ation Damage (including their | contractors/Not Third F | Party) | | | |
| 9. Third Party (co | | $\mathcal{N}(\mathcal{D})$ | | | | |
| a. Excavator | General Public Govern | ment Excavator | other than Oper | rator/subcontractor | | |
| b. Type: | Road Work Pipeline | Water Electric | Sewer | Phone/Cable | | |
| | Landouner not forming relates | Forming | Doilroad | | | |
| | Landowner-not farming related | Earming | Railroad | | | |
| | Other liquid or gas transmission | on pipeline operator or | their contractor | | | |
| | Nautical Operations | Other | | | | |
| c. Excavation | | Sub-strata (boring, dired | ctional drilling, e | tc) | | |
| d. Excavation | was an ongoing activity (Mont | h or longer) Yes | No If Y | /es, Date of last contact // | | |
| | or get prior notification of excav | • , | | , | | |
| | | o. <u>/</u> day <u>/</u> | / y | r. No | | |
| Notificatio | n received from: One Ca | all System Excav | rator Cont | tractor Landowner | | |
| f Was ninglir | ne marked as result of location | request for excavation? | ? No | Yes (If Yes, check applicable items i - iv) | | |
| i. Temp | orary markings: Flags anent markings: | | Paint | res (II res, check applicable items I - IV) | | |
| | s were (check one) : Accu | rate Not Accurate |) | | | |
| iv. Were H4 – OTHER OUTSIDE | marks made within required tir FORCE DAMAGE | | | de Network | | |
| | as primary cause of failure =: | | | de Natural | | |
| | her vehicle not relating to exca | vation activity damagin | g pipe | | | |
| | viously Damaged Pipe | | | | | |
| 13. Vandalism | | | | | | |

| | ERIAL AND/OR | WELD F | AILURES | | | | |
|---|--|-----------------------|-------------------------------------|--|-------------------------------------|-------------------------|------------------|
| Material 14. | Body of Pipe | => | Dent | Gouge | Bend | Arc Burn | Other |
| 15. | Component | => | Valve | Fitting | Vessel | Extruded Outlet | Other |
| 16. | Joint | => | Gasket | O-Ring | Threads | | Other |
| Weld | | | | | | | |
| 17. | Butt | => | Pipe | Fabrication | | | Other |
| 18. | Fillet | => | Branch | Hot Tap | Fitting | Repair Sleeve | Other |
| 19. | Pipe Seam | => | LF ERW HF ERW | DSAW SAW | Seamless Spiral | Flash Weld | Other |
| Comple | te a-g if you i | indicate | any cause in p | oart H5. | | | |
| a. | Type of failure: Constructio Material De | | => Poor Work | rmanship Pr | ocedure not followed | Poor Construct | ion Procedures |
| b. c. | Was failure du Was part whicl | e to pipe on leaked p | lamage sustained ressure tested bef | in transportation to fore accident occur | o the construction or red? Yes, con | fabrication site? Ye | s No |
| | Date of test: | · | | / mo. / | / day | | |
| e. f | Test medium: Time held at te | | ater Inert C re: / <u>/</u> / | /- | | | |
| g. | | • | at point of accide | | F | PSIG | |
| H6 – EQUI | | !/D-li-t [| | Cartalya | I was a second | ion CCADA | Communications |
| 20. Mal | function of Cont | roi/Relier i | =quipment => | Control valve | Instrumentat | | Communications |
| | | | / | Block valve | Relief valve | Power failure | Other |
| | eads Stripped, E | Broken Pip | | Nipples | Valve Threads | Dresser Couplings | Other |
| | al Failure | TION | (=× | Gasket | O-Ring | Seal/Pump Packing | Other |
| H7 – INCORRECT OPERATION 23. Incorrect Operation a. Type: Inadequate Procedures Inadequate Safety Practices Failure to Follow Procedures Other | | | | | | | |
| b. Numb | / - | involved v | whô failed a post-a | accident test: drug | g test: / | _/ alcohol test / | |
| | cellaneous, des | cribe: | | | | | |
| 25. Unknown Still Under Investigation (submit a supplemental report when investigation is complete) | | | | | | | |
| PART I – N | NARRATIVE DE | SCRIPTIC | N OF FACTORS | CONTRIBUTING T | TO THE EVENT | (Attach additional shee | ts as necessary) |
| | | | | | | | |
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NATIONAL RESPONSE CENTER 1-800-424-8802

*** For Public Use ***

Information released to a third party shall comply with any applicable federal and/or state Freedom of Information and Privacy Laws

Incident Report # 773011

INCIDENT DESCRIPTION

*Report taken at 16:32 on 19-SEP-05

Incident Type: PIPELINE Incident Cause: UNKNOWN

Affected Area:

The incident occurred on 18-SEP-05 at 22:50 local time.

Affected Medium: AIR ATMOSPHERE

SUSPECTED RESPONSIBLE PARTY

Organization: TEXAS EASTERN PRODUCTS PIPELINE CO

HOUSTON, TX 77252

Type of Organization: PRIVATE ENTERPRISE

INCIDENT LOCATION

3590 YANKEE ROAD County: BUTLER

City: MONROE State: OH

RELEASED MATERIAL(S)

CHRIS Code: PRP Official Material Name: PROPANE

Also Known As:

Qty Released: 0 UNKNOWN AMOUNT

DESCRIPTION OF INCIDENT

PROPANE RELEASED FROM TERMINAL PIPING DUE TO UNKNOWN CAUSES, INVESTIGATION

UNDERWAY.

INCIDENT DETAILS

Pipeline Type: TRANSMISSION

DOT Regulated: NO

Pipeline Above/Below Ground: ABOVE

Exposed or Under Water: NO Pipeline Covered: UNKNOWN

DAMAGES

Fire Involved: YES Fire Extinguished: YES

INJURIES: NO Hospitalized: Empl/Crew: Passenger: FATALITIES: YES Empl/Crew: 1 Passenger: Occupant:

EVACUATIONS: NO Who Evacuated: Radius/Area:

Damages: UNKNOWN

Length of Direction of

<u>Closure Type</u>

<u>Description of Closure</u>

<u>Closure</u>
<u>Closure</u>

Air: N

Road: Y YANKEE ROAD 18 N/S Major Artery: N

Waterway: N Track: N

Passengers Transferred: NO

Environmental Impact: UNKNOWN

Media Interest: HIGH Community Impact due to Material: NO

REMEDIAL ACTIONS

SHUT THE TERMINAL DOWN, ASSESSING DAMAGES

Release Secured: YES

Release Rate:

Estimated Release Duration:

WEATHER

Weather: CLEAR, OF Wind direction: S

ADDITIONAL AGENCIES NOTIFIED

Federal:

State/Local: OH EPA, HAMILTON COUNTY EPA, OSHA

State/Local On Scene:

State Agency Number: NO REPORT #

NOTIFICATIONS BY NRC

DOT CRISIS MANAGEMENT CENTER (PRIMARY)

19-SEP-05 16:38

EPA OEM (PRIMARY)

19-SEP-05 16:42

U.S. EPA V (PRIMARY)

19-SEP-05 16:39

INFO ANALYSIS & INFRA PROTECTION (PRIMARY)

19-SEP-05 16:38

NATIONAL INFRASTRUCTURE COORD CTR (PRIMARY)

19-SEP-05 16:38

NATIONAL INFRASTRUCTURE COORD CTR (INFRASTRUCTURE PROTECTION)

19-SEP-05 16:38

NOAA 1ST CLASS BB RPTS FOR OH (PRIMARY)

19-SEP-05 16:38

NATIONAL RESPONSE CENTER HQ (PRIMARY)

19-SEP-05 16:43

NTSB PIPELINE (PRIMARY)

19-SEP-05 16:38

HOMELAND SEC COORDINATION CENTER (PRIMARY)

19-SEP-05 16:38

RSPA OFFICE OF PIPELINE SAFETY (PRIMARY)

19-SEP-05 16:41

IN DEPT ENV MNGMT ATTN: BEAUCHAMP (PRIMARY)

19-SEP-05 16:38

OH EPA ATTN: DUTY OFFICER (PRIMARY)

19-SEP-05 16:38

TSA MARITIME AND LAND (PRIMARY)

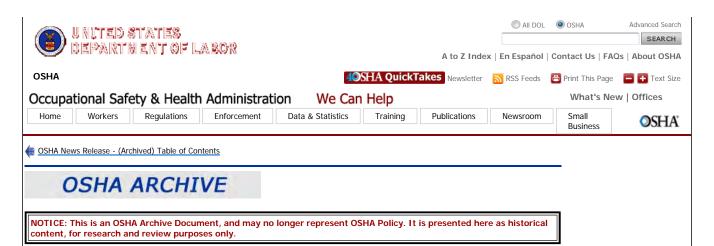
19-SEP-05 16:38

ADDITIONAL INFORMATION

CALLER STATED THE YANKEE ROAD IS STILL CLOSED.

*** END INCIDENT REPORT # 773011 ***

The National Response Center is strictly an initial report taking agency and does not participate in the investigation or incident response. The NRC receives initial reporting information only and notifies Federal and State On-Scene Coordinators for response. The NRC does not verify nor does it take follow-on incident information. Verification of data and incident response is the sole responsibility of Federal/State On-Scene Coordinators. Data contained within the FOIA Web Database is initial information only. All reports provided via this server are for informational purposes only. Data to be used in legal proceedings must be obtained via written correspondence from the NRC.



OSHA Regional News Release

U.S. Department of Labor Office of Public Affairs

Region 5

Region 5 News Release: 06-333-chi

Date: March 20, 2006 Contact: Brad Mitchell Phone: 312-353-6976

OSHA Proposes \$173,000 Fine at Todhunter Terminal, Monroe, Ohio, for Violations of Federal Workplace Safety Regulations

CINCINNATI -- The U.S. Labor Department's Occupational Safety and Health Administration (OSHA) has proposed \$173,000 in fines against TEPPCO Partners LP and EPCO Inc. and their successors, for unsafe operation of the Todhunter Terminal, a Monroe, Ohio, facility primarily operating to receive, store, distribute and ship refined petroleum products.

OSHA opened an accident investigation at Todhunter Terminal following a September 2005 explosion that took the life of one worker. As a result of that inspection, OSHA issued citations alleging 15 serious violations with penalties totaling \$103,000 and two repeat violations with \$70,000 in proposed penalties for failure to comply with federal workplace safety and health standards.

Among the serious violations cited were inadequate standard operating procedures for handling propane gas, lack of self-closing valves, lack of training for employees, and use of radio-phones that were not intrinsically safe in hazardous locations. Alleged repeat violations included failure to perform inspections and tests on equipment that controlled the flow of water and propane, lack of written mechanical integrity procedures and failure to correct items found during mandated internal compliance audits of the facility.

"Working with flammable gases requires specialized equipment and procedures," said OSHA Area Director Richard Gilgrist, Cincinnati. "When those elements are lacking, tragedies can and do occur."

OSHA last inspected the Todhunter Terminal following a 2002 accident in which a worker was fatally overcome by butane fumes. TEPPCO Partners is headquartered in Houston, Texas, as the Texas Eastern Products Pipeline Company LLC. The company has 15 working days from receipt of the citations to appeal before the independent Occupational Safety and Health Review Commission.

Employers are responsible for providing a safe and healthful workplace for their employees. OSHA's role is to assure the safety and health of America's workers by setting and enforcing standards; providing training, outreach, and education; establishing partnerships; and encouraging continual improvement in workplace safety and health. For more information, visit www.osha.gov.

###

U.S. Labor Department (DOL) releases are accessible on the Internet at www.dol.gov. The information in this news release will be made available in alternate format upon request (large print, Braille, audio tape or disc) from the COAST office. Please specify which news release when placing your request. Call (202) 693-7773 or TTY (202) 693-7755. The U.S. Department of Labor is committed to providing America's employers and employees with easy access to understandable information on how to comply with its laws and regulations. For more information, please visit www.dol.gov/compliance.

OSHA ARCHIVE

NOTICE: This is an OSHA Archive Document, and may no longer represent OSHA Policy. It is presented here as historical content, for research and review purposes only.

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U.S. Department of Labor | Occupational Safety & Health Administration | 200 Constitution Ave., NW, Washington, DC 20210

Telephone: 800-321-0SHA (6742) | TTY: 877-889-5627

WWW.OSHA.gov