



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

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: E-2014070073
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident: 06/20/2014
4. Time of Incident (use 24-hour time): 03:54
5. Enter National Response Center Report Number (if applicable): 1086527
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
City: JERSEY VILLAGE
County: HARRIS
State: TX
Zip Code: (if known): 77041
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
Hwy 290, Between Beltway 8 & J
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
Name: Linde LLC
Street: 575 Mountain Ave
City: New Providence
State: NJ
Zip Code: 07974
Federal DOT Id Number: 11794
Hazmat Registration Number: 052112 556 031
11. Shipper/Officer:
Name: Linde LLC
Street: 100 South Airhart Dr
City: Baytown
State: TX
Zip Code: 77520
Waybill/Shipping Paper: 353380
Hazmat Registration Number: 052112 556 031
12. Origin (if different from shipper address)
Street: 5757A Underwood Rd
City: Pasadena
State: TX
Zip Code: 77507
13. Destination:
Street: 2309A INVESTMENT DRIVE
City: Pflugerville
State: TX
Zip Code: 78660
14. Proper Shipping Name of Hazardous Material: CARBON DIOXIDE, REFRIGERATED LIQUID
15. Technical/Trade Name:
16. Hazardous Class/Division: Nonflammable Compressed Gas
17. Identification Number: (E.g. UN2764, NA 2020) UN2187

18. Packing Group: (if applicable)

19. Quantity Released: (Include Measurement Units) 500 Liquid - Gallon

20. Was the material shipped as a hazardous waste? False

If yes, provide the EPA Manifest Number:

21. Is this a Toxic by Inhalation (TIH) material? False

If yes, provide the Hazard Zone:

22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate? False

If yes, provide the Exemption, Approval, or CA number:

23. Was this an undeclared hazardous materials shipment? False

PART III - PACKAGING INFORMATION

24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:

Cargo Tank Motor Vehicle (CTMV)

25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.

Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.

What Failed: - 133-Liquid Line; 141-Piping or Fittings

How Failed: - 312-Torn Off or Damaged

Causes of Failure: - Vehicular Crash or Accident Damage

26a. Provide the packaging identification markings, if available.

Identification Markings: MC331

(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)

26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:

Single Package or Outer Packaging:

Single Package or Inner Packaging (if any):

Packaging Type:
Material of Construction:
Head Type (Drums only):

Packaging Type:
Material of Construction:

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:

Single Package or Inner Packaging (if any):

Package Capacity: 43000 Liquid - Pound
Amount in Package: 42300 Liquid - Pound
Number in Shipment: 1
Number Failed: 1

Package Capacity:
Amount in Package:
Number in Shipment:
Number Failed:

28. Provide packaging construction and test information, as appropriate:

Manufacturer: Texas Trailer
Serial Number: 4HUTB4428SG12139
Material of Construction: Steel (if Tank Car, CTMV, Portable Tank, or Cylinder)
Design Pressure: (if Tank Car, CTMV, Portable Tank)
Shell Thickness: (if Tank Car, CTMV, Portable Tank)
Head Thickness: (if Tank Car, CTMV)
Service Pressure: (if Cylinder)
If valve or device failed:
Type:
Model:
Manufacturer:

Manufacture Date: 01/01/1995
Last Test Date: 01/01/1995

29. If the packaging is for Radioactive Materials, complete the following:

Packaging Category:
Packaging Certification:
Certification Number:
Nuclide(s) Present:
Activity:
Critical Safety Index:

Transport Index:

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- | | | | |
|---------------------------|-------|--|-------|
| - Spillage: | False | - Fire: | False |
| - Explosion: | False | - Material Entered Waterway/Storm Sewer: | False |
| - Vapor (Gas) Dispersion: | True | - Environmental Damage: | False |
| - No Release: | False | | |

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: False
Police Report #: True 1400007822
In-house cleanup: False
Other Cleanup: False

32. Damages Was the total damage cost more than \$500?

True

If yes, enter the following information: (If no, go to question 33.)

Material Loss: \$ 5,000.00
Carrier Damage: \$ 150,000.00
Property Damage: \$ 200,000.00
Response Cost: \$ 10,000.00
Remediation/Cleanup Cost: \$ 10,000.00
(See damage definitions in the instructions)

33a. Did the hazardous material cause or contribute to a human fatality?

False

If yes, enter the number of fatalities resulting from the hazardous material:

Employees: 0
Responders: 0
General Public: 0

33b. Were there human fatalities that did not result from the hazardous material?

False

If yes, how many? 0

34. Did the hazardous material cause or contribute to personal injury?

False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

Employees: 0
Responders: 0
General Public: 0

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

Employees: 0
Responders: 0
General Public: 0

35. Did the hazardous material cause or contribute to an evacuation?

False

If yes, provide the following information:

Total number of general public evacuated: 0
Total number of employees evacuated: 0
Total evacuated: 0
Duration of the evacuation: 0

36. Was a major transportation artery or facility closed?

True

If yes, how many? 6

37. Was the material involved in a crash or derailment?

True

If yes, provide the following information:

Estimated speed (mph): 62
Weather conditions: Dark, Clear
Vehicle overturned? False
Vehicle left roadway/track? False

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- | | |
|--|--|
| - Shipment had not been transported | - Transported by air (first flight) |
| - Transport by air (subsequent flights) | - Initial transport by highway to cargo facility |
| - Transfer at sort center/cargo facility | |

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

On 20/06/2014 at 0400 CST, a bulk CO2 tractor trailer (11975/44045) was traveling W on US HWY 290 (Houston TX, USA). Traffic came to an abrupt stop due to an earlier accident. The Linde vehicle could not stop in time and struck two separate third party tractor trailers on the road. As a result there was significant damage to the Linde trailer and piping, resulting in the release of CO2 and loss of pressure on the tanker. Approximately 500 Lbs of CO2 was released. All three vehicles involved needed to be towed from the scene. Hazmat crews were dispatched to clean up the released hydraulic oil (from the trailer hydraulic pumping system). No injuries were sustained.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

Linde will continue training drivers to be aware and reinforce distraction elimination practices for drivers to remain focused on the changing traffic picture.

PART VIII - CONTACT INFORMATION

Contact's Name:	Guy Dalton
Contact's Title:	Fleet Safety and Compliance Manager
Business Name and Address:	Linde LLC 130 Briar Hill Rd. Painesville OH 44077
E-mail Address:	guy.dalton@linde.com
Telephone Number:	440-251-0303
Fax Number:	
Hazmat Registration Number:	
Date:	07/02/2014
Preparer is:	Other - Shipper and Carrier

01/01/1995