



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-2019050425
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
04/16/2019
4. Time of Incident (use 24-hour time):
10:40
5. Enter National Response Center Report Number (if applicable):
1242907
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
City: CUERO
County: DE WITT
State: TX
Zip Code: (if known): 77954
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
FM 766 near Guadalupe River
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
Name: Refinery Specialties Inc.
Street: 38106 FM 3346 RD
City: HEMPSTEAD
State: TX
Zip Code: 77445-2003
Federal DOT Id Number: 610351
Hazmat Registration Number: 052416552054YA
11. Shipper/Officer:
Name: REFINERY SPECIALTIES, INCORPORATED
Street: 38106 FM 3346 RD
City: HEMPSTEAD
State: TX
Zip Code: 77445-2003
Waybill/Shipping Paper:
Hazmat Registration Number: 052416552054YA
12. Origin (if different from shipper address)
Street: 882 US Highway 183 South
City: CUERO
State: TX
Zip Code: 77954
13. Destination:
Street: Not Available
City: CUERO
State: TX
Zip Code: 77954
14. Proper Shipping Name of Hazardous Material: METHANOL
15. Technical/Trade Name: RSI-200
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) UN1230

- 18. Packing Group:** (if applicable) II
- 19. Quantity Released:** (Include Measurement Units) 2400 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: - 150-Tank Shell
How Failed: - 310-Ripped or Torn
Causes of Failure: - Rollover Accident

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

Identification Markings: Not Available

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

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:	Single Package or Inner Packaging (if any):
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Package Capacity:	3600 Liquid - Gallon	Package Capacity:
Amount in Package:	3200 Liquid - Gallon	Amount in Package:
Number in Shipment:	1	Number in Shipment:
Number Failed:	1	Number Failed:

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

Manufacturer:	Not Available - pending	Manufacture Date:
Serial Number:		Last Test Date:
Material of Construction:	Stainless (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:		

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

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

PART IV – CONSEQUENCES

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

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

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

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

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: | \$ 3,000.00 |
| Carrier Damage: | \$ 35,000.00 |
| Property Damage: | \$ 0.00 |
| Response Cost: | \$ 20,000.00 |
| Remediation/Cleanup Cost: | \$ 0.00 |
- (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: | |
| Responders: | |
| General Public: | |

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

If yes, how many?

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: | |
| Responders: | |
| General Public: | |

Non-Hospitalized:

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

- | | |
|-----------------|--|
| Employees: | |
| Responders: | |
| General Public: | |

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

If yes, provide the following information:

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

36. Was a major transportation artery or facility closed? True

If yes, how many? 8

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

If yes, provide the following information:

- | | |
|-----------------------------|--|
| Estimated speed (mph): | |
| Weather conditions: | |
| Vehicle overturned? | |
| Vehicle left roadway/track? | |

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:

While en route to customer locations, the driver of an RSI methanol tanker fell asleep at the wheel, causing the truck to leave the left side of the road. As the driver attempted to bring the truck back onto the road, it crossed the road again, this time to the right side, where the driver over-corrected to the left, causing the truck to turn over on its right side. Approximately 2400 gallons of methanol was released into a swale adjacent to roadway, due to the abrasion and rupture of several tank compartments, as well as failure/leaking of product from top hatches. Initial estimates were a release rate of 10 gpm or so; however, this slowed considerably as liquid levels fell below top hatches. Cuero VFD and state troopers closed FM 766 as a precaution and attempted to place booms to slow advance of methanol but tall grass prevented effective response. Victoria FD Regional Hazmat and CG Environmental (private spill response contractor) were dispatched to scene and arrived by 14:00, at which point tanker no longer leaking, and liquid level below hatches. RSI personnel from Cuero Yard were dispatched to scene with a flatbed, empty IBC's (totes), and a pump and remaining product (approximately 525 gallons) off-loaded into totes and truck righted by 19:00. A Texas Commission of Environmental Quality (TCEQ) Region 14 (Corpus Christi) investigator supervised response actions and follow-up sampling of soils in vicinity of spill; results were indicative of no impact. It is speculated that due to prevailing wind and weather conditions during the incident, the vast majority of released product volatilized into the atmosphere. Some distressed vegetation was observed in the vicinity of the rollover in the days following the incident. No water bodies (e.g. Guadalupe River) were impacted as a result of the incident.

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:

RSI has communicated the details of this incident company-wide and reviewed its operating policies and procedures with drivers; specifically, the need to be abreast of changes in medical status and medicine dosages. In this case, the driver was impaired due to taking a higher than recommended dose of a required medication - the dose had changed but the driver had forgotten and inadvertently took twice the recommended dose. In addition, the driver complained of fatigue and had been evaluated for a sleep disorder. This information fell outside the scope of the normal DOT physical and so was not disclosed to RSI, according to the post-incident investigation. RSI is working to reinforce its "Stop Work Authority" policy and exploring ways employees can communicate any physical, medical or other limitations in their ability to perform their job duties so the appropriate steps can be taken to provide rest, alternate (lower risk) work tasks, or other accommodation to prevent the recurrence of an incident like this. All of these steps are worth taking by all companies involved in hazardous materials transportation.

PART VIII – CONTACT INFORMATION

Contact's Name:	Karl Mueller
Contact's Title:	Environmental Manager
Business Name and Address:	Refinery Specialties Inc. 38106 FM 3346 PO BOX 577 HEMPSTEAD TX 77445-2003
E-mail Address:	karl.mueller@rsichem.com
Telephone Number:	(979)826-4961
Fax Number:	(979)826-4935
Hazmat Registration Number:	052416552054YA
Date:	05/16/2019
Preparer is:	Shipper