

Section 1. Registration Information

Source Identification

| | |
|--------------------------------|-------------------------|
| Facility Name: | The Scotts Company, LLC |
| Parent Company #1 Name: | N/A |
| Submission Type: | First Time |
| Receipt Date: | March 2012 |
| Status: | Deregistered |
| Deregistration Effective Date: | January 2017 |

Facility Identification

| | |
|--------------|----------------|
| Facility ID: | 1000 0021 7133 |
|--------------|----------------|

Dun and Bradstreet Numbers (DUNS)

| | |
|----------------|-----|
| Facility DUNS: | N/A |
|----------------|-----|

Facility Location Address

| | |
|-----------|-------------------|
| Street 1: | 1220 Schrock Road |
| Street 2: | N/A |
| City: | Orrville |
| State: | OH |
| ZIP: | 44667 |
| ZIP4: | N/A |
| County: | Wayne |

Facility Latitude and Longitude

| | |
|----------------------|------------|
| Latitude (decimal): | 40.826461 |
| Longitude (decimal): | -81.789554 |

Local Emergency Planning Committee and Regulations

| | |
|--------------|-------------------|
| LEPC: | Wayne County LEPC |
| OSHA PSM: | N/A |
| EPCRA 302: | N/A |
| CAA Title V: | N/A |

Process Chemicals

| | |
|------------------|-------------------------------|
| Program Level: | Program Level 1 process |
| Chemical Name: | Propane |
| CAS Number: | 74-98-6 |
| Flammable/Toxic: | Flammable |
| Program Level: | Program Level 1 process |
| Chemical Name: | Isobutane [Propane, 2-methyl] |
| CAS Number: | 75-28-5 |
| Flammable/Toxic: | Flammable |
| Program Level: | Program Level 1 process |
| Chemical Name: | Butane |
| CAS Number: | 106-97-8 |
| Flammable/Toxic: | Flammable |

Process NAICS

| | |
|--------------------|---------------------------------|
| NAICS Code: | 49311 |
| NAICS Description: | General Warehousing and Storage |

Section 6. Accident History

No records found.

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?): | Yes |
| Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?): | Yes |
| Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?): | Yes |
| Healthcare (Does facility's ER plan include information on emergency health care?): | Yes |

Local Agency

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

Wayne Cnty LEPC

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

(330) 262-9817