

Section 1. Registration Information

Source Identification

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|-------------------------|----------------------------------|
| Facility Name: | Ross Incineration Services, Inc. |
| Parent Company #1 Name: | RI Technologies, Inc. |
| Submission Type: | Resubmission |
| Receipt Date: | October 2021 |

Facility Identification

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|--------------|----------------|
| Facility ID: | 1000 0014 0402 |
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Dun and Bradstreet Numbers (DUNS)

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|----------------|----------|
| Facility DUNS: | 54428560 |
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Facility Location Address

| | |
|-----------|-----------------|
| Street 1: | 36790 Giles Rd. |
| Street 2: | N/A |
| City: | Grafton |
| State: | OH |
| ZIP: | 44044 |
| ZIP4: | N/A |
| County: | Lorain |

Facility Latitude and Longitude

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|----------------------|-------------|
| Latitude (decimal): | 41.324167 |
| Longitude (decimal): | -082.034722 |

Local Emergency Planning Committee and Regulations

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|--------------|--------------------|
| LEPC: | Lorain County LEPC |
| OSHA PSM: | Yes |
| EPCRA 302: | Yes |
| CAA Title V: | Yes |

Process Chemicals

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| Program Level: | Program Level 3 process |
| Chemical Name: | Formaldehyde (solution) |
| CAS Number: | 50-00-0 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene 2,4-diisocyanate [Benzene, 2,4-diisocyanato-1-methyl-] |
| CAS Number: | 584-84-9 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene diisocyanate (unspecified isomer) [Benzene, 1,3-diisocyanatomethyl-] |
| CAS Number: | 26471-62-5 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Formaldehyde (solution) |
| CAS Number: | 50-00-0 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Isopropyl chloroformate [Carbonochloridic acid, 1-methylethyl ester] |
| CAS Number: | 108-23-6 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene 2,4-diisocyanate [Benzene, 2,4-diisocyanato-1-methyl-] |
| CAS Number: | 584-84-9 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene diisocyanate (unspecified isomer) [Benzene, 1,3-diisocyanatomethyl-] |
| CAS Number: | 26471-62-5 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Formaldehyde (solution) |
| CAS Number: | 50-00-0 |
| Flammable/Toxic: | Toxic |

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| Program Level: | Program Level 3 process |
| Chemical Name: | Isopropyl chloroformate [Carbonochloridic acid, 1-methylethy ester] |
| CAS Number: | 108-23-6 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene 2,4-diisocyanate [Benzene, 2,4-diisocyanato-1-methyl-] |
| CAS Number: | 584-84-9 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Toluene diisocyanate (unspecified isomer) [Benzene, 1,3-diisocyanatomethyl-] |
| CAS Number: | 26471-62-5 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Formaldehyde (solution) |
| CAS Number: | 50-00-0 |
| Flammable/Toxic: | Toxic |
| Program Level: | Program Level 3 process |
| Chemical Name: | Isopropyl chloroformate [Carbonochloridic acid, 1-methylethy ester] |
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| CAS Number: | 26471-62-5 |
| Flammable/Toxic: | Toxic |

Process NAICS

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|--------------------|--|
| NAICS Code: | 562211 |
| NAICS Description: | Hazardous Waste Treatment and Disposal |

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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| 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

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|--|---------------------|
| Agency Name (Name of local agency with which the facility ER plan or response activities are coordinated): | Lorain County OEMHS |
| Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated): | (440) 329-5117 |