Facility Name: Terminal Warehouse,Inc
EPA Facility Identifier: 1000 0020 1836

# **Section 1. Registration Information**

### Source Identification

Facility Name: Terminal Warehouse,Inc
Parent Company #1 Name: Peoples Services, Inc.
Submission Type: Resubmission

Receipt Date: Resubmission Receipt Date: February 2020

**Facility Identification** 

Facility ID: 1000 0020 1836

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 50992122

**Facility Location Address** 

Street 1: 1779 Marvo Drive

 Street 2:
 N/A

 City:
 Akron

 State:
 OH

 ZIP:
 44306

 ZIP4:
 N/A

 County:
 Summit

Facility Latitude and Longitude

Latitude (decimal): 41.294444 Longitude (decimal): -081.685917

Local Emergency Planning Committee and Regulations

LEPC: Summit County LEPC

OSHA PSM: Yes
EPCRA 302: N/A
CAA Title V: N/A

Plan Sequence Number: 1000085461

Facility Name: Terminal Warehouse,Inc EPA Facility Identifier: 1000 0020 1836

Plan Sequence Number: 1000085461

#### **Process Chemicals**

Program Level: Program Level 1 process

Chemical Name: Hydrogen fluoride/Hydrofluoric acid

(conc 50% or greater) [Hydrofluoric

acid]

CAS Number: 7664-39-3 Flammable/Toxic: Toxic

Program Level: Program Level 1 process

Chemical Name: Ethylenediamine [1,2-Ethanediamine]

CAS Number: 107-15-3 Flammable/Toxic: Toxic

Program Level: Program Level 1 process

Chemical Name: Toluene 2,6-diisocyanate [Benzene,

1,3-diisocyanato-2-methyl-]

CAS Number: 91-08-7 Flammable/Toxic: Toxic

Program Level: Program Level 1 process

Chemical Name: Cyclohexylamine [Cyclohexanamine]

CAS Number: 108-91-8 Flammable/Toxic: Toxic

### **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?):

N/A

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):

Springfield Fire Department

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

(330) 784-7210