Facility Name: AEROSOL SYSTEMS EPA Facility Identifier: 1000 0000 7565

Plan Sequence Number: 10050

# **Section 1. Registration Information**

Source Identification

Facility Name: AEROSOL SYSTEMS
Parent Company #1 Name: SPECIALTY CHEMICAL

RESOURCES, INC.

Submission Type: First Time Receipt Date: May 1999

**Facility Identification** 

Facility ID: 1000 0000 7565

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: 38946091

Facility Location Address

Street 1: 9150 VALLEY VIEW ROAD

Street 2: N/A

City: MACEDONIA

 State:
 OH

 ZIP:
 44056

 ZIP4:
 N/A

 County:
 Summit

Facility Latitude and Longitude

Latitude (decimal): 41.299722 Longitude (decimal): -81.492222

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: 10050

#### **Process Chemicals**

Program Level: Program Level 3 process
Chemical Name: Flammable Mixture

CAS Number: 00-11-11 Flammable/Toxic: Flammable

Flammable Mixture Chemical Components

Chemical Name: Propane
CAS Number: 74-98-6
Flammable/Toxic: Flammable

Chemical Name: Butane
CAS Number: 106-97-8
Flammable/Toxic: Flammable

#### **Process NAICS**

NAICS Code: 49319

NAICS Description: Other 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?):

Facility Plan (Does facility have its own written emergency response plan?):

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

Yes

Yes

Yes

Yes

Facility Name: AEROSOL SYSTEMS EPA Facility Identifier: 1000 0000 7565

Plan Sequence Number: 10050

### Local Agency

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

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

MACEDONIA FIRE DEPARTMENT

(330) 468-1234