

Tier 2 Online Submission Report
E-Plan - University of Texas at Dallas
Reporting period : From January 1, 2020 to December 31, 2020

Facility Name	LOWE'S OF RIDGELAND, MS (Store #2622)	Facility ID	6823662
Company Name	Lowe's Home Centers, LLC	Facility Email	Bobbi.L.Tenborg@lowes.com
Department Name		Mailing Address	1000 Lowe's Blvd. , Mooresville , NC - 28117
Physical Address	910 East County Line , Ridgeland, Madison county , MS - 39157 , USA	Latitude / Longitude	32.40147886034888 / -90.13900000000001
Max. No. of Occupants	5800 <input checked="" type="checkbox"/> Manned <input type="checkbox"/> Unmanned	Emergency 24-Hour Phone Number	888-429-6281
NAICS	444110 - Home Centers	Dun & Bradstreet	006997142 -
TRI Facility ID		RMP Facility ID	
Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Subject to Chemical Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Management Program)?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Facility Note			

Contact Information	Name (Title)	Phone	Email	Mail address
Emergency Contact	Lowe's HAZMAT Support Line (Manager on Duty)	601-952-1700 (Work) 888-429-6281 (24-hour)	Bobbi.L.Tenborg@lowes.com	910 East County Line, Ridgeland, Madison COUNTY, MS - 39157, USA
Fac. Emergency Coordinator	Varies by Shift (Store Manager)	601-952-1700 (Work) 888-429-6281 (24-hour)	Bobbi.L.Tenborg@lowes.com	910 East County Line, Ridgeland, Madison COUNTY, MS - 39157-1932, USA
Owner / Operator	Lowe's Home Centers, LLC (Owner)	704-758-2955 (Work) 888-429-6281 (24-hour)	Bobbi.L.Tenborg@lowes.com	1000 Lowe's Blvd. , Mooresville , Iredell , NC - 28117 , USA
Tier II Information Contact	Bobbi Tenborg (HAZMAT Manager)	704-758-2955 (Work) 888-429-6281 (24-hour)	Bobbi.L.Tenborg@lowes.com	1000 Lowe's Blvd. , Mooreseville , Iredell , NC - 28117 , USA

Chemical Inventory Information

Chemical Description	Physical Hazards	Health Hazards	Inventory	Mixture components	Storage locations and codes (Non- Confidential)
CAS <u>68476346</u> Trade Secret <input type="checkbox"/> Chem. Name <u>Diesel Fuel</u> Pure <input type="checkbox"/> Mixture <input checked="" type="checkbox"/> Solid <input type="checkbox"/> Liquid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> EHS <input type="checkbox"/> Below Reporting Thresholds <input type="checkbox"/>	Explosive <input type="checkbox"/> Flammable (gases, aerosols, liquids, or solids) <input checked="" type="checkbox"/> Oxidizer (liquid, solid or gas) <input type="checkbox"/> Self-reactive <input type="checkbox"/>	Acute toxicity (any route of exposure) <input checked="" type="checkbox"/> Skin corrosion or irritation <input checked="" type="checkbox"/> Serious eye damage or eye irritation <input type="checkbox"/>	<u>11,100</u> Max. Daily Amount <u>11,100</u> Avg. Daily Amount <u>11,100</u> Max. Amount in largest Container <u>365</u> No. of Days On-site	Chemical Name-Diesel Fuel (CAS 68476346) Percentage-99.0 Unit-weight	1) W side of store, locked emergency generator area: Type <u>Above ground tank</u> , Pressure <u>Ambient</u>

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Chemical Description	Physical Hazards	Health Hazards	Inventory	Mixture components	Storage locations and codes (Non- Confidential)
State Specific Information No State specific information	Pyrophoric (liquid or solid) [] Pyrophoric Gas [] Self-heating [] Organic peroxide [] Corrosive to metal [] Gas under pressure (compressed gas) [] In contact with water emits flammable gas [] Combustible Dust [] Hazard Not Otherwise Classified []	Respiratory or skin sensitization [] Germ cell mutagenicity [] Carcinogenicity [X] Reproductive toxicity [] Specific target organ toxicity (single or repeated exposure) [X] Aspiration hazard [X] Simple Asphyxiant [] Hazard Not Otherwise Classified []		Max Amount Code-06	<u>pressure</u> , Temperature <u>Ambient temperature</u>

State Specific Information

No State specific information

Additional Information

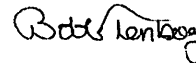
I have attached a document. I have attached two or more documents.

Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages 1 through 2 , and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

Bobbi Tenborg, HAZMAT Manager

Name and official title of owner/operator OR owner/operator's authorized representative



Signature

2021-02-15 17:04:45 UTC

Date signed