



U.S. Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: E-2026030326
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
03/17/2026
4. Time of Incident (use 24-hour time):
19:58
5. Enter National Response Center Report Number
(if applicable):
6. If you submitted a report to another Federal DOT agency, enter
the agency and report number:
7. Location of Incident:
- City: LORDSTOWN
County: TRUMBULL
State: OH
Zip Code: (if known): 44481
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
6700 Muth Rd SW
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
- Name: XPO ENTERPRISE SERVICES, INC.
Street: 2211 OLD EARHART RD STE 100
City: ANN ARBOR
State: MI
Zip Code: 48105-2963
Federal DOT Id Number: 838885
Hazmat Registration Number:
11. Shipper/Officer:
- Name: Jamestown Coating Technologies
Street: 108 Main Street
City: Jamestown
State: PA
Zip Code: 16134
Waybill/Shipping Paper: Hazmat Registration Number:
12. Origin (if different from shipper address)
- Street:
City:
State:
Zip Code:
13. Destination:
- Street: 633 Georgia Tubing Rd
City: CEDAR SPRINGS
State: GA
Zip Code: 39832
14. Proper Shipping Name of Hazardous
Material: PAINT INCLUDING PAINT, LACQUER, ENAMEL, STAIN, SHELLAC SOLUTIONS,
VARNISH, POLISH, LIQUID FILLER AND LIQUID LACQUER BASE
15. Technical/Trade Name: Gray ID Conduit Coating
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) UN1263

23. Was this an undeclared hazardous materials shipment? False

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- | | | | |
|---------------------------|-------|--|--|
| - Spillage: | True | - Fire: | |
| - Explosion: | | - Material Entered Waterway/Storm Sewer: | |
| - Vapor (Gas) Dispersion: | | - Environmental Damage: | |
| - No Release: | False | | |

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

Fire/EMS Report #: _____
Police Report #: _____
In-house cleanup: _____
Other Cleanup: True

32. Damages Was the total damage cost more than \$500?

True

If yes, enter the following information: (If no, go to question 33.)

Material Loss:	\$ 0.00
Carrier Damage:	\$ 0.00
Property Damage:	\$ 0.00
Response Cost:	\$ 6,000.00
Remediation/Cleanup Cost:	\$ 0.00

(See damage definitions in the instructions)

33a. Did the hazardous material cause or contribute to a human fatality?

False

If yes, enter the number of fatalities resulting from the hazardous material:

Employees: _____
Responders: _____
General Public: _____

33b. Were there human fatalities that did not result from the hazardous material?

False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury?

False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

Employees: _____
Responders: _____
General Public: _____

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

Employees: _____
Responders: _____
General Public: _____

35. Did the hazardous material cause or contribute to an evacuation?

False

If yes, provide the following information:

Total number of general public evacuated: _____
Total number of employees evacuated: _____
Total evacuated: 0
Duration of the evacuation: _____

36. Was a major transportation artery or facility closed?

False

If yes, how many?

37. Was the material involved in a crash or derailment?

False

If yes, provide the following information:

Estimated speed (mph): _____
Weather conditions: _____
Vehicle overturned? _____
Vehicle left roadway/track? _____

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- | | |
|--|--|
| - Shipment had not been transported | - Transported by air (first flight) |
| - Transport by air (subsequent flights) | - Initial transport by highway to cargo facility |
| - Transfer at sort center/cargo facility | |

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

At 1958 EST XPO notified ERTS of a cargo release at XAY. It was reported that approximately 150 gallons of Gray ID Conduit Coating were released from a 265-gallon plastic tote due to a forklift puncture or improper loading by XAY. The release impacted trailer #4637579 and the concrete under the trailer at door # 3. ERTS will proceed to dispatch a contractor to the site to complete cleanup activities.

Contractors arrived onsite and confirmed there was approximately 75-gallons of UN1263 Gray ID Conduit Coating released to the wooden trailer floor and 5'x5' area of the concrete floor due to a forklift puncture. The product was transferred from the damaged tote to a new tote. The damaged tote was cut up and containerized into (3) 55-gallon poly drums, and impacted absorbents were containerized into (4) 55-gallon poly drums. The waste was left onsite for terminal personnel to manage.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

No comments provided.

PART VIII - CONTACT INFORMATION

Contact's Name:	Gloria Brown
Contact's Title:	NA
Business Name and Address:	ERTS 11231 Phillips Industrial Blvd Ste 300 Jacksonville FL 32256
E-mail Address:	brown.gloria@cleanharbors.com
Telephone Number:	(904)874-8825
Fax Number:	
Hazmat Registration Number:	
Date:	03/18/2026
Preparer is:	Other - Agent for Carrier