RIDEM Response to Comments
Medrecycler-RI Inc.
1600 Division Road, West Warwick, RI

This document is intended as a written response to substantive comments received relative to the Medrecycler-RI Inc. (hereafter Medrecycler) medical waste treatment facility application as noticed by the Rhode Island Department of Environmental Management (hereafter the Department) on January 11, 2011. The Department issued a Notice of Intent to Issue on January 11, 2021 along with draft permit conditions regarding testing and operations at the facility. As required by R.I.G.L. 23-18.9-9, a public informational workshop was held via Zoom on 1/25/2021 and a formal Public Hearing was held on 3/15/2021 also on zoom. The Department accepted public comments for 30 days after the hearing ending, through April 14, 2021.

423 different individuals commented by email or in writing during the comment period. In some cases, individuals submitted multiple different comments. 56 comments were received in the formal public hearing. The majority of comments received oppose the facility.

Part I of this document is a response to major issues that have been raised in the public comments.

Part II contains public comments received by e-mail or hard copy and specific responses to those comments where appropriate. In many cases, the specific response makes reference to major issues discussed in Part I.

Part III contains the public hearing transcript along with the Department’s specific responses where appropriate. In many cases, the specific response makes reference to major issues discussed in Part I.
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SECTION I: DEPARTMENT RESPONSE TO MAJOR ISSUES RELATED TO MEDRECYCLER PERMIT
I. Issues Related to the Department’s Role in the Permitting Process

The Department reviewed the Application under the authority of the following statutes and regulations:

- Rhode Island General Law, Chapter 23-19.12 Generation – Transportation – Storage – Treatment – Management and Disposal of Regulated Medical Waste,
- Rhode Island General Law, Chapter 23-18.9 Refuse Disposal
- Rhode Island General Law, Chapter 42-35 Administrative Procedures
- Regulation 250-RICR-140-15-1 Medical Waste
- Regulation 250-RICR-140-05-1 Solid Waste

These statutes and regulations outline the standards required for this facility in order to protect public health and the environment. They address specific operating standards including, but not limited to, standards for medical waste treatment facilities, medical waste handling procedures and other rules relating to solid waste management facilities.

In review of this and any other application, the Department is committed to a review process grounded in sound science and within the scope of its legal authority. To that end, the Department’s decisions must be both consistent and enforceable. An applicant for any permit must be able to determine from the outset, what is required under the Regulations. The Department through its Regulations and administrative procedures has carefully outlined the basis for approvals, modifications and denials of permit applications.

In short, the Department must determine if this application meets the requirements of the regulations. It is not within the scope of this review to overturn or modify actions taken by other Federal, State or Local governments or regulatory agencies relative to this site. It is not within the scope of our review to determine if this is the best process or the best location for this activity. Neither is it appropriate for the Department to advocate for or against any process, legislation or practice as part of its review.

To the first point, we have received comments related to whether or not the technology proposed at this facility is a green process. The applicant emphasizes that it reduces volume of waste landfilled, the opponents argue that it combusts organic material and therefore releases carbon dioxide, a greenhouse gas. Both statements are true but neither affects the review either positively or negatively.

Currently the state has two permitted medical waste treatment facilities. One autoclaves the waste that is then sent to an out of state solid waste incinerator, the other autoclaves waste that is then shredded and landfilled. Both options are allowed by the statutes and regulations.
Similarly, there have been comments and questions if this proposed facility will bring jobs, if it will generate energy and if it is a wise investment of funds to build such a facility. These decisions are beyond the scope of our review.

The proposed location was not chosen by the Department and we are not empowered to decide where the facility should be located. We have received many comments saying the area is located in a densely populated residential neighborhood, and this activity should be relocated to one that is either less densely populated or more industrial. Whereas the Town of West Warwick has determined this property is industrial and appropriate for this activity, the Department does not have authority to overturn that decision. That being said, as addressed later in this document, it is within the Department’s authority and expertise to require the permittee to demonstrate the activities will not impact nearby receptors, and to require that the applicant must also comply with municipal ordinances and buffer requirements.

Many commenters have insisted it should not be located within or near the boundaries of the Town of East Greenwich given the high quality of life and property values in that community. The Department has serious environmental justice concerns with rejecting applications based on their proximity to certain municipalities and neighborhoods as this would be in effect a mandate to place them in more disadvantaged communities, in contradiction to all established environmental justice practices and mandates.

However, R.I.G.L. 23-18.9-8 gives the Department the following discretion:

_The director shall have full power to make all rules and regulations establishing standards to be met for the issuance of the licenses with those standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities._

As documented throughout these responses, the Department has afforded great weight to the comments received regarding the impact the proposed facility may have on the affected communities, and has attempted to address many of the issues related to community impacts and quality of life raised by the residents during the public involvement process to the extent our authority allows us to.

Some commenters assert the application should be denied because the applicant has not demonstrated there is a need. In other words, no evidence was presented that existing facilities do not have process capacity. The Regulations do not require any such analysis and it is not the Department’s role to do market analysis for a private business.

There have been comments urging the denial of the application because the applicant is based in New Jersey or that members of his project team are from South Africa. The Department is required by law to treat all applicants equally and does not and will not discriminate based on where they live, their nationality, country of origin or other such factors.
Similarly, some commenters have objected to other comments being placed into the administrative record due to assumed questionable motivations of the commenter. The Department must accept and consider all comments received in a timely manner, regardless of any speculation on the motives of commenters.

A. Statewide Planning Approvals

Many commenters have asserted that approval is needed as a solid waste disposal facility from the Office of Statewide Planning prior to permit review as per RIGL 23-18-9-9(a)(1).

Neither the statute nor the solid waste regulations define Solid Waste Disposal Facilities. However, they define and use the term Solid Waste Management Facility throughout the statute and here chose to use a different term Solid Waste Disposal Facility to require additional municipal and SPC review and approval. The statute intended to apply the term Solid Waste Disposal Facility to include additional requirements over and above other solid waste management facilities.

The Statewide Planning Council interpreted this statute in its Rules and Standards of the State Planning Council (150-RICR-60-05-1). In those regulations, Solid Waste Disposal Facility is clearly defined as follows:

8. “Solid waste disposal facility” means a land disposal site designed for the final disposition of solid waste. For the purposes of these Rules, this term shall be synonymous with “landfill” and “sanitary landfill”, which is a land disposal site employing an engineered method for disposal of solid waste in a manner that minimizes environmental hazards, including the spreading of solid waste in thin layers, compacting the solid waste to the smallest practical volume, and applying cover material at the end of each operating day or at such more frequent intervals as may be necessary. For the purposes of these Rules, a solid waste disposal facility shall not include, resource recovery facilities, waste-to-energy facilities, incinerators, materials recycling facilities, composting facilities, facilities that process construction and or demolition debris, or properties that have historically been used for the final deposition of solid waste that are proposed for closure, upgrade, or consolidation in order to better meet current standards of environmental protection.

In the definition above, they also clarified that waste-to-energy facilities are not Solid Waste Disposal Facilities.

The term Solid Waste Management Facility includes a variety of operations. Currently there are 64 active facilities in the state including: Solid Waste Transfer Stations, Construction and Demolition Debris Processing Facilities, Leaf and Yard Waste Composting Facilities, Solid Waste Incinerators, Putrescible Waste Composting Facilities, Anaerobic Digesters, Medical Waste Transfer Stations and Medical Waste Treatment Facilities. According to our research, since the statute was enacted in 1989,
none of the private or municipal Solid Waste Management Facilities, including those operated by the Town of East Greenwich, have ever asked for or been given review by the SPC.

Furthermore, if one looks at the usage of the term Solid Waste Disposal Facilities in the Department’s solid and medical waste regulations, it is only used in Part 2- that govern Landfills and only landfills.

It has also been argued that the legislature intended the term disposal as defined in the Medical Waste Management Act (R.I.G.L. 23-19.12). First, the statute requiring review by the SPC could not rely on legislation enacted years after only for Medical Waste to define the term in that statute. Basic principles of statutory construction and interpretation state that this cannot be the case. Secondly, when looking at the definition below, it clearly relates to medical waste that is permanently dumped in land or waters and does not include the activities such as treatment, storage and destruction facilities, a major portion of this legislation. Secondly, this statute makes no mention of Solid Waste Disposal Facilities, Medical Waste Disposal Facilities or Statewide Planning Council Review.

(3) "Disposal" means the discharge, deposit, injection, dumping, spilling, leaking, abandoning, or placing of any regulated medical waste in, on, into, or onto any land, other surface, or building or vehicle, or trailer, or other containment structure, or into any water, watercourse, stormwater system, or sewer system.

Another issue raised is that some commenters claim the General Assembly in 2018 passed an amendment to the Refuse Disposal Act that expanded the scope of Solid Waste Management Facilities requiring SPC review. [RIGL 23-18.9-8] A reading of the statute clearly indicates, this is not the case, the statute simply provided guidance to the SPC on how to review the impact of the citing of a Solid Waste Management Facility. It also, in a separate section, provided the Director with greater authority to consider impacts on a community when reviewing an application:

(a)(1) No person shall operate any solid waste management facility or construction and demolition (C&D) debris processing facility or expand an existing facility unless a license is obtained from the director except as authorized by this section. The director shall have full power to make all rules and regulations establishing standards to be met for the issuance of the licenses with those standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities.

Finally, there have been assertions that a previous court decision [Lynch v. Rhode Island Dep't of Env't Mgmt., 994 A.2d 64, 71 (R.I. 2010)] shows the Rhode Island Superior Court decision backs up the claim that SPC review is required for all Solid Waste Management Facilities. This is not a correct interpretation of that decision. The decision relates to the need of the applicant to comply with local ordinances of the municipality.
where the facility is located, something that all parties agree on and which is not at issue here at this time. The issue of the need for facilities that are not landfills to receive SPC approval has in fact gone before Rhode Island Superior Court [Lynch v. Dep’t of Env’t Mgmt., PC 10-6883, Order dated May 24, 2011] and received a declaratory judgment that the requirement only applies to disposal facilities such as landfills.

In conclusion, while we believe our interpretation is both reasonable and consistent with statute and precedence, the rules and processes of the Statewide Planning Council are ultimately the decision of that agency and not the Department. To that extent, the applicant and any other parties who believe other or all solid waste facilities are required to obtain approval from SPC should contact the Statewide Planning Council for a written opinion on the issue.

B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic

Many commenters mention that the facility is in a residential area. Some commenters have cited R.I.G.L. 23-18.9-9 (below) as justification that the Department cannot approve this application as a final determination was not made by the Town of West Warwick regarding “local land use and control ordinances”.

(a)(1) Any person who desires to construct and/or operate a solid waste management facility or expand an existing facility shall apply to the director for all licenses and/or permits to do so; provided, however, that the application shall state all licenses and/or permits for which application is made. Any person who desires to construct and/or operate a private solid waste disposal facility shall submit to the director simultaneously with the application a certificate of final determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances or on appeal a final judgment of a court that the proposed site for the facility conforms with all applicable land use and control ordinances of the municipality. [emphasis added]

The above highlighted requirement applies only to Solid Waste Disposal Facilities and not other Solid Waste Management Facilities as discussed above, including medical waste treatment facilities, therefore this requirement is not applicable.

Similarly, the issue has been raised that the level of traffic required for delivery and removal of waste from the facility is too great for the area to handle. The issue of how many trucks the roads can accommodate is clearly within the local jurisdiction. This is entirely appropriate as only the municipality has the authority and expertise to meaningfully decide how much traffic this use generates versus other non-waste related commercial operations in the area. As discussed later in this document, representations have been made by the applicant outside of the application process, to the community, that there will only be 4 deliveries per day, but this provision was not included in the application materials submitted to the Department, nor was it required.
Zoning is also an entirely a local issue. There have been comments made that the approval of the West Warwick Planning Board is preliminary and therefore not sufficient for the Department to proceed with reviewing the plan. As the planning procedures for each municipality are different, the Department gives great weight to these municipalities to decide what level of approval is appropriate at what stage. Our communications with the West Warwick Town Planner have indicated that they gave the conditional approval with the expectation that the next step would be permitting with the Department and they want the Department to review the permit application prior to additional review for the planning board.

Some commenters have also brought up the issue of noise, both of trucks and the facility equipment. Noise ordinances are also a local issue and as such we will defer to their judgement on this issue.

The Department believes the Town where the facility is located should decide what type of local approvals is needed. Therefore, our permit conditions are drafted to require whatever approvals from West Warwick Authorities the Town deems as necessary.

**C. Issues Related to Sewage Discharge**

Some commenters have raised concerns relative to sewage discharge, monitoring and representations that have been made to the West Warwick Sewer Authorities. This clearly lies within the jurisdiction of the West Warwick Sewer Authority as per their approvals.

**II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process**

One of the most frequent concerns is the risk to workers and the community of pathogens. From the outset, our main concern has been the risk of pathogens potentially being released by the process as the safe treatment of Regulated Medical Waste is the primary function of the program. The regulations prescribe that technologies other than autoclave and incineration (innovative) need to undergo a preliminary technology review prior to a site-specific application review. This technological evaluation is designed to decide whether the technology itself is capable of meeting the requirements of the regulations, not related to a particular setup at a particular location. As with autoclave and incineration, all technologies must have efficacy testing onsite prior to the acceptance of waste as part of the normal site-specific permit review.

Some commenters objected to the 2020 approval of the technology because 250-RICR-140-15-1.15(F)(4) & 5 requires that the technology must be “proven on the basis of thorough tests.”

In evaluating any technology there are basically two issues that need to be evaluated:
• The risk that pathogens will not be effectively killed by the process itself.
• The risk that pathogens will be released prior to treatment.

The Department, together with the Rhode Island Department of Health reviewed the technology. While the technology itself is innovative, the use of heat to kill microorganisms is not. The currently-approved technologies of incineration and autoclave both rely on this mechanism. Therefore, there is overwhelming evidence available that allowed us to conclude that a temperature of 800-900° C is capable of destroying proteins that make up pathogens enough to provide 10-6 deactivation of heat resistant bacterial spores, regardless of whether oxygen or steam are present. The review of these items was coordinated with the Infectious Disease Control Program of the Rhode Island Department of Health and that Office concurred with this approach.

It was also made clear in the 2020 technology approval, that although the technology had the capability to adequately treat regulated medical waste, the design at each individual location for such a system would need to go through a thorough permit review process including public notice and participation. Also, efficacy must be demonstrated by on-site testing using both heat resistant bacteria and temperature sensors both prior to receiving waste and on a regular basis when the facility is operating.

Regarding the second bullet, the Department looked at the risk of transmission of pathogens from the acceptance of the material to its treatment. Our primary concern is that the waste is shredded prior to treatment. Our Regulations prohibit the shredding of untreated waste except in a completely enclosed environment. A large part of our review has been focused on how this can be demonstrated. The Department believes it is not possible to meaningfully demonstrate that the shredding and conveyance is completely enclosed without testing of the actual system at this site. From the first review, throughout much of the past two years, this issue has been the major source of the Department’s concerns as we view the potential to aerosolize pathogens as the most significant risk.

There were many comments urging the Department to listen to the experts in the subject. The Department could not agree more. Throughout the permit review, we have contacted a variety of medical waste experts from the Rhode Island Department of Health Infectious Disease Program, USEPA, our counterparts in other states and the private sector about many aspects of the permit, particularly containment and efficacy testing. The Department recognizes the need to listen to and share information from medical waste experts. To that extent, Department personnel spearheaded the formation of and currently lead the Medical Waste Task Force of the Northeast Waste Management Officials Association.

Those consultations were an important part of the Department’s determination that the efficacy testing protocols submitted by the applicant thus far are not sufficient and the specific requirements included in the Notice of Intent for development of those protocols. As discussed later in this document, those who believe the efficacy testing protocols need
to be available for public review prior to a decision on the permit being made make a valid point, and in the interest of affording great weight to the impacts of the proposed facility on the surrounding community, the Department will require the submission of those protocols so that they can be made available for public review and comment, should the applicant choose to submit a new application for this facility and provided the applicant can comply with RIGL 23-19.17-2.

Pyrolysis as a whole, and medical waste pyrolysis in particular has a very limited history in terms of companies operating in the United States for a long time in compliance with applicable regulations. Operations that have been permitted in other states never go beyond the permitting stage, or operate for a short time and shut down. Also, many have pointed out that this company has no experience with treatment of medical waste. While this is a source of scrutiny, it is not by law or regulation, a basis for denial by itself. That being said, it is reasonable to require more thorough testing.

A. Issues Related to Medical Waste Not Being Opened

Some commenters have objected to the fact that the boxes of Regulated Medical Waste will not be opened prior to treatment. As mentioned earlier in this document, the primary function of the Regulations is to prevent the release of pathogens from the waste. As mentioned above, the permit calls for radiation screening as this can be done safely without opening the waste. As this waste has been packaged and labeled with the presumption that it contains potentially infectious material, to require or even allow employees to break open lined sealed and labeled boxes of Regulated Medical Waste would be to purposefully expose them to potential pathogens. This would make all containment of the process irrelevant. Such a requirement would not only violate the Regulations but would be unconscionable as it would expose the workers and by extension the community to significant risk. Furthermore, as radioactive and chemical contaminants are not normally visible to the naked eye, randomly rummaging through boxes for visual inspection is unlikely to uncover illegal disposal of hazardous waste unless the illegal disposed waste was labeled as such. Therefore radioactive sensors and emissions monitoring is a much better way to protect the community and the workers.

III. Plans Not Submitted for Public Review

RIGL 23018.9-9 (a)(2)(ii) requires that (ii) The draft license and/or tentative denial, including all supporting documentation, shall be made available for public comment. Some commenters feel that certain items required as a permit condition should be finalized prior to public notice, and we feel that some of these concerns have merit as discussed below.

A. Contingency Plans

Condition 2 of the NOI states: The Contingency Plan shall be approved in writing by the West Warwick Fire Department prior to accepting waste. There are comments that more details are needed in the contingency plans, including but not
limited to lack of specifics about exactly who will be notified at state, local and community levels in the event of an emergency or release at the proposed facility. The application also contains no specifics regarding an evacuation plan. Early in 2019 the Department contacted local fire officials as we were concerned the process had been compared to the Rhode Island Hospital autoclave when in fact, the fire hazard from a pyrolysis system is significantly greater. We subsequently met with fire officials at West Warwick Town Hall in February of 2019 to make sure the review was coordinated with them and they were aware of information we had from researching issues with pyrolysis facilities that process other kinds of materials. The review and approval of contingency plans is clearly within the authority of local fire officials and such local approval was included as a pre-condition of facility operation in the draft permit conditions. However, giving great weight to local concerns, and because these plans could affect businesses in the same building as well as nearby educational and child-care facilities, we feel it is reasonable that the Department should not approve the permit without the community being able to review these plans. At this time, such an approved plan has not been received.

B. Biological Testing Protocols

Conditions 9 and 10 of the NOI required Medrecycler to submit testing protocols for startup and ongoing biological testing. These testing protocols have been the main source of contention throughout the application process because Medrecycler uses terminology like “fully contained” and “completely sterilized,” but has not yet backed up these terms with scientific testing as the Department has repeatedly requested. These protocols need to be very specific and developed by a qualified professional. As discussed earlier, biological testing protocols are particularly important in this case because the proposal is to shred medical waste prior to treatment and the Department has consulted with numerous experts on the issue. As previously noted, the Regulations require that a system must be demonstrated to be completely enclosed in order for pre-treatment shredding to be approved. The Department believes that the testing should be done with biological surrogates, as unlike with dust control, the standard is no release as opposed to significant reduction of particulates. How the waste is spiked with surrogates, how many samples are taken and where and how those samples are collected significantly impacts the results, and these details must all be included in the protocols. In the public workshop, Mark Dennen, from the Department, pointed out that protocols could be designed to succeed or fail, and that we are looking for protocols that are reasonable, i.e. those that demonstrate protectiveness of the containment systems. The Department placed the development of these specific protocols as a condition of the permit because none of what has so far been submitted has met that threshold. It is also the Department’s position that these protocols need to be developed by professionals with significant training and experience with managing medical waste.

Because of the technical nature of these types of protocols, the Department often requires the submission and approval thereof as a condition of a permit, however,
the argument that since the testing protocols are critical to the validity of the results, and therefore should be subject to public review and comment, has merit. Therefore, in the interest of affording great weight to the impact of the facility on surrounding communities, the Department will require that detailed protocols be developed by qualified professionals, approved by the Department and subjected to public review, should the applicant choose to submit a new application for this facility and provided the applicant can comply with RIGL 23-19.17-2.

C. Financial Assurance Documentation

The Department believes that financial assurance is always important at waste management operations given the negative value of the material. This is particularly important in this case as nationally, the history of pyrolysis facilities is that many have opened and closed in a relatively short time. Also, as will be discussed later in this document, there is ambiguity regarding how much, if any waste will be stored at the facility. As quantity stored greatly affects financial assurance calculations, the Department agrees that these calculations should be made available for public review even though the financial assurance mechanism does not need to be in place until the facility is ready to accept waste.

Some commenters claim the financial health of the company is poor. The Department has not seen evidence to support these claims, but regardless of the financial health of any company, financial assurance is always necessary to ensure that the taxpayers are not left with the bill if the facility accepts material and then ceases operation.

As required by Rule 1.7E (3) of the Rules and Regulations for Solid Waste Management Facilities and Organic Waste Management Facilities (240-RICR-140-05-1), the owner of the real property must certify that he allows the operation, and is the guarantor of proper closure of the facility. Therefore, should the applicant choose to submit a new application for this facility, the property owner will need to sign the application as he/she will be responsible for proper closure in the event the applicant closes the facility without removing all of the waste.

Some commenters want money put aside in case emissions are found to cause health affects in people at or near the facility. This is beyond what is required by law or regulations, and not something that the Department can require.

IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Nearly every comment raised the issue of air pollution, and the concern that contaminants will be released into the air and the residences, schools and day care facilities that are in close proximity. These include a number of comments from practicing physicians. Also, many commenters note that it is not a green process as it produces carbon dioxide and other emissions similar to incinerators. Many note the untested nature of the process. All of these issues are related to the minor source air permit and are not subject to review under the solid and medical waste requirements.

V. Issues Related to Storage of Waste

Some commenters have pointed out the inconsistency between the condition in the Notice of Intent quoted below and a statement on page 47 of the permit application submitted on 11/30/2020 that clearly states "No medical waste is stored at the Medrecycler- RI Inc Division Road RI facility”.

From the Notice of Intent: Medrecycler-RI shall store the medical waste in a secure manner and process the received medical waste within 14 days. At any time, no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite. Medrecycler-RI shall accept no more than 70 tons/day of waste.

In the August 18, 2020 version and all previous versions of their applications, Medrecycler indicated they would store up to 20 trailers outside the building and 25 containers inside the building. In the November 30, 2020 version of the application, designed to correct unrelated issues, this storage provision was and replaced with a statement that no waste would be stored at the facility. This change was not discussed with the Department and nothing else in the permit application was changed, leading to inconsistencies in the application.

Therefore, the application is inconsistent as the total quantity and procedures do not seem consistent with that representation of no storage. Some of these issues are listed below:

- Will the drivers wait for each box to be removed and processed before leaving?
- What is the contingency for a sudden shutdown while a delivery is in progress? Will the driver be required to stay until it is fixed or will the load be rejected?
- Can the total of 70 tons/day be processed without on site storage?

Also, the amount of storage has a pivotal effect on the financial assurance, as the major closure cost is for storage and disposal of waste left at the site. As with many other states, our policy is to have the maximum quantity that can reasonably be stored site be the basis for the financial assurance calculation. Therefore, should the applicant choose to
submit a new application for this facility, and provided the applicant can comply with RIGL 23-19.17-2, the inconsistencies should be corrected and the financial assurance calculations subject to public notice.

VI. Bond Funding and Project Financing Issues

Commenters have objected to the spending of state funds to build the facility by the Rhode Island Commerce Corporation. The facility claims these bonds are not taxpayer funded. The Department has not researched this issue as it is beyond the scope of our review. Anyone with concerns on this issue should contact the Rhode Island Commerce Corporation.

VII. Transportation of Waste Through the Community

Commenters have expressed concern about transportation of medical waste through the community and that in the event of an accident, the public could be exposed to medical waste. Safety standards for packaging and transport of medical waste are promulgated and enforced, as per federal law by the US Department of Transportation. States are specifically prohibited from creating their own different standards. Also, to make this the basis of restriction or denial could raise environmental justice concerns, given the large volumes of medical waste that are transported in the areas of Providence, Warwick and Woonsocket to existing medical waste treatment facilities or from large medical complexes without such restrictions.

It should also be mentioned that the application places only a limit on total volume of waste to be accepted at the facility (70 tons/day). There is no restriction on the number of vehicles that will bring that waste. It has been represented at local meetings that there will only be four deliveries per day, but that figure was not stated in the application, nor was it required. This issue should be clarified should the applicant choose to submit a new application for this facility and provided the applicant can comply with RIGL 23-19.17-2.

VIII. Hazardous Waste Versus Medical Waste

A number of commenters are using the term Hazardous Waste as interchangeable with Regulated Medical Waste and are citing regulatory requirements and concerns without using this distinction. While we understand that there are certainly hazards associated with regulated medical waste, the terms, in a regulatory sense, are quite different and therefore we need to make the difference clear.

Hazardous Waste is specifically defined in both state and federal statutes and regulations (see 250-RICR-140-10). Hazardous waste is classified based on chemical characteristics
or chemical processes that produce hazardous waste. Because of their inherent toxicity, reactivity or other chemical characteristics, they are specially regulated from cradle to grave in their generation, transportation, storage and treatment. The draft permit made this clear in a condition as quoted below:

Medrecycler-RI shall not accept hazardous waste as defined by the Rules and Regulations for Hazardous Waste Management (250-RICR-140-10-1).

There have been comments that make reference to all medical waste containing hazardous waste and therefore the requirements for hazardous waste facilities should apply. R.I.G.L.23-19.12- Generation – Transportation – Storage – Treatment – Management and Disposal of Regulated Medical Waste very specifically set out a set of standards clearly distinct from those of R.I.G.L. 23-19.1 Hazardous Waste Management. For the Department to erase the distinction between these two wastes would be to ignore both the intent and letter of the legislation. Some commenters have specifically identified chemotherapy waste as something that they are alleging is permitted at the site. Rhode Island is actually more stringent than the USEPA in that it specifically defines chemotherapy agents as extremely hazardous waste. It should be noted that if the Department took this drastic step of considering all medical waste to be hazardous waste, it would be unique in the nation and perhaps the world. This would also effectively shut down all existing medical waste treatment within the state.

It is important to recognize this distinction because the risks are so different. Hazardous waste, typically is delivered in bulk, frequently in liquid form. Medical waste, is usually composed of needles and other sharps, plastic tubing and packaging, bandages, paper and gloves, and sometimes containers of liquid. In the case of sharps, the devices are stored in hard plastic containers and overpacked in lined boxes. In the case of other (“red bag”) medical waste, it is normally contained in lined cardboard boxes in rigid sealed containers. If Regulated Medical Waste is mixed with Hazardous Waste, both requirements apply, and therefore the mixed waste cannot be accepted by a medical waste treatment facility.

There have been comments that state or imply that health care facilities routinely dispose of hazardous waste as Regulated Medical Waste. Illegal disposal of hazardous waste is always a concern for both federal and state authorities. However, the Department permits a variety of facilities including medical waste, solid waste, construction and demolition debris, leaf and yard waste composting, food waste digestion and others. If the possibility of the site being used for illegal disposal were the basis for denial, then no solid or medical waste facility could be permitted. There have also been comments that extremely toxic chemotherapy waste containers are allowed to be disposed of as hazardous waste.

Several specific issues relative to this confusion are discussed below:
A.  **Groundwater and Surface Water Bodies at Risk**

Concerns have been expressed about contamination of surface waters and aquifers from release of materials at the site. We do not view this as a reasonable source of concern due to the very different composition of Regulated Medical Waste. It is mostly solid materials packed in lined boxes so release of significant volumes of toxic liquids, that will flow outside of the building and into surface water and aquifers is not anticipated.

B.  **Hazardous Waste Transportation and Disposal Requirements**

There have been comments related to transportation and disposal requirements for hazardous waste. The requirements for transportation, storage and disposal at this proposed facility will be those for Regulated Medical Waste as those requirements are applicable and appropriate here.

IX.  **Limitations on Attendees at Public Hearing**

There were comments arguing that it was not an open meeting because attendance was cut off by DEM at 300. Firstly, it was not DEM decision to limit the meeting but our zoom account that caps simultaneous attendance at 300. We inquired the week before the meeting if the cap could be increased and were informed an IT upgrade could not be approved in that time frame. Secondly, as people left, more people were allowed in and by last hour of the meeting, there were significantly fewer than 300 people there. Finally, the goal of having meetings on zoom was to replace what would normally happen in an in person meeting. The Department’s largest conference room, and many of the alternative venues available to us, seat less than 300 people. Had 300 people shown up to a meeting with the fire code that does not accommodate that number, they would have not been allowed to enter. The Department’s opinion that the Open Meetings Act does not require a public body to require unlimited size or seating is in line with case law (Brunetti, et al. v. Town of Johnston, OM 17-19).

The open meetings rules do not require rooms of unlimited size. Finally, the recording of the four-hour meeting is published on the web site so that anyone can view it, and all written comments received are given equal weight as those received during the public comment hearing.

X.  **Adequacy of Public Notice**

There have been comments that steps in the public notice process as required by RIGL 23-18.9-9 were bypassed. The relevant portion of that statute is listed below:
(2)(i) Notwithstanding the provisions of § 42-35-14 to the contrary, the director shall immediately review the application and shall give public notice of the intention to issue a draft license or the intention to deny the application. (ii) The draft license and/or tentative denial, including all supporting documentation, shall be made available for public comment

Although the Department normally advertises in one newspaper and places a notice on our website, in this case, in recognition of the high level of public interest in this application, the Department went above and beyond what was required and had ads placed in The Providence Journal, Kent County Daily Times, the Warwick Beacon, and the East Greenwich Pendulum. Additionally, the Town Managers of both West Warwick and East Greenwich were notified along with fire chiefs of both communities. Also, prior to the formal hearing, the Department sent over a thousand emails to members of the community and assisted individuals who had never used zoom to access the meeting.

Some commenters suggested that every resident of West Warwick and surrounding towns should be personally notified. To do mass mailings to tens of thousands of residents is not a requirement in law or regulation and far exceeds the limited capacity for the Department’s Medical Waste Program.

XI. Monarch Pyrolysis Facility in New Mexico

Many commenters as well as the applicant made reference to the Monarch Medical Waste Pyrolysis Facility in New Mexico. While it is useful to look at experiences of other facilities, the Monarch Facility’s Operator is not connected to this application and from our research, appears to have no relationship with the applicant.

Given our limited resources, we do not have the ability to investigate all alleged complaints against the Monarch Facility. However, in the interest of factual correctness we investigated the claim made in public comments that the USEPA shut down the Monarch Facility due to air violations. We have contacted the facility, independently checked USEPA’s database and discussed the issue with USEPA. Monarch is not listed as a significant non-complier and we were unable to identify any pending litigation or ongoing enforcement actions. In 2020, a notice appeared in the federal register that USEPA Region 4 did not approve an alternative testing plan proposed by Monarch.

XII. Department Staffing

Questions have been raised about the Department’s resources to review and inspect this facility. As with many programs, the Department completely concurs that our budget for medical waste is far below what we would like. That being said, there is no provision in statute or regulation that allows the Department to reject an application based on inspector resources. The Department has decades of experience doing inspections related to air and medical waste regulations and will continue to inspect all permitted
facilities. Frequency of these inspections depends on Department resources as well as what is required by applicable law and regulations.

XIII. Concerns Regarding Radioactive Waste

The concern has been raised about radioactive waste being processed at the facility. As with other Medical Waste Treatment Facilities, and many other solid waste facilities as well, waste must be screened for radiation prior to treatment. This can be done safely without opening the packaging. Waste must be handled in accordance with the requirements of the Rhode Island Department of Health’s Radiation Control Program. Putting waste aside away from employees and retesting in several days is standard practice at medical waste facilities and in compliance with the Department of Health Regulations.

XIV. Issues Related to Disposal of Ash

The residual ash produced by the proposed facility will be classified as Solid Waste, and will need to be disposed of as such in accordance with applicable laws and regulations. The applicant will need to perform characterization of the material to determine if it exhibits any characteristics that would cause it to be classified as a hazardous waste. The applicant has indicated they intend to use it beneficially, but such a use requires a separate Beneficial Use Determination that will include sampling and characterization of the material as well as public notice. Another possible waste generated by the process is tar. According to the application, the tar will be treated as part of the process. If this were not the case, it would also need to be characterized and disposed of in accordance with the solid and hazardous waste regulations as applicable.

XV. Rejected Waste Shipments

Comments have been received regarding rejected waste. With regard to waste that exhibits unacceptable odors, the application states that waste will be shipped to an alternate facility. Commenters have opined that this alternative facility should be identified in the application. RIDEM concurs with this opinion and will require a revision to the statement should the applicant chose to submit a new application for the facility and provided the applicant can comply with RIGL 23-19.17-2.

XVI. Buffer Zone

Some commenters made reference to a lack of a buffer zone as per Rule 1.9(P) of the Solid Waste Regulations. Unlike Regulations for landfills and transfer stations, the Medical Waste Regulations make no specific reference to buffer zones. While some
aspects of buffer zone, such as dust and litter, may not be applicable to indoor activities such as this, others such as odors and noise, may be applicable. In light of the fact that there is a daycare center very close to the facility, the applicant should explain how they will meet buffer zone requirements in the resubmittal provided the applicant can comply with RIGL 23-19.17-2.

We have also had comments that the facility will create noise and odors that will disturb other tenants in the building, or that it will cause other tenants to leave the building. While the Department has a legitimate function in protecting others at the property from threats to their health, the Department’s regulations generally look at negative effects off the property boundary. The issue of one tenant affecting the enjoyment of another tenant within the building is one for the building owners to evaluate.

Both of these issues relative to buffer zone highlight the role of the property owner in the process as per Rule 1.7(E)(3). To that extent, and because the owner will be potentially responsible for closure, should the applicant choose to submit a new application for this facility, the property owner must sign the new application to certify the he/she allows the operation and is the guarantor of proper closure of the facility.

XVII. **Out of State Waste**

Commenters have asserted that the facility should be restricted or prohibited from taking waste generated outside the State of Rhode Island. The Interstate Commerce Clause of the United States Constitution prohibits any regulatory agency from establishing such barriers to interstate commerce, including waste commerce.

There is a prohibition against out of state waste being disposed of at the Rhode Island Resource Recovery Facility in Johnston. The Department has already spoken to RIRRC officials about this issue and they have indicated that they will not accept waste from this facility.

XVIII. **Distinctions within the Category of Human Pathological Wastes**

The Medical Waste Regulations [1.2 (C)(3)] define Human Pathological Waste as follows:

> Human Pathological Wastes: Tissues, organs, and body parts of humans that are removed during surgery or autopsy, or other medical procedures (e.g., obstetrical procedures).

Some commenters have asked for additional clarification regarding what types of Human Pathological Waste will be accepted, such as which body parts or whether the waste contains or derives from fetal tissue.
Such distinctions are not relevant to the safe and effective treatment of the material and therefore not substantive to the permit review.

XIX. Odor Issues

There were comments that the application should be rejected because of a suspicion that either the treatment process or storage practices will create odor issues. Some commenters cite Rule 1.6 D of the Solid Waste Regulations that contains the following prohibition:

*Odors: A Solid Waste Management Facility or Organic Waste Recycling Facility, whether licensed or unlicensed, shall not emit or cause to be emitted into the atmosphere any air contaminant or combination of air contaminants which creates an objectionable odor beyond the property line of said facility. Odor evaluations shall be conducted by Department personnel to determine if an odor is objectionable by taking into account its nature, concentration, location, duration, and source.*

While it is certainly true that either the process or storage practices could be improperly run to cause odor issues, the Department cannot make the possibility of future non-compliance without evidence the basis for denial.
SECTION II: WRITTEN COMMENTS RECEIVED RELATIVE TO NOTICE OF INFORMATIONAL WORKSHOP & PUBLIC COMMENT HEARING REGARDING MEDRECYCLER-RI INC
Notice Date: January 11, 2021
Closure of Public Comment Period: April 14, 2021

The Department’s responses appear in red. The following are responses to comments received. In many cases, the same issues appear in multiple comments, to that extent, links are provided to those issue related responses. In some cases, unique comments are also addressed in the response.

Appendices and photographs submitted to responses are omitted here, the complete comments along with appendices can be found at:
http://www.dem.ri.gov/programs/wastemanagement/facilities/medrecycler.php

The responses below are to substantive issues raised in the comments. Substantive issues are those within the scope of the Department’s review. This include environmental effects, human health risks and requirements of law and regulation.

As a wise use of limited resources, the Department in this case, as in other cases, does not respond to non-substantive comments. Non-substantive comments are things such as personal opinions or if the permit should or should not be approved. Also considered non-substantive are speculations, good or bad, as to the character or motives of any parties involved in the process including the applicant, the Towns involved, commenters, public employees or public officials.
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28cruzindelpozzod@gmail.com

[EXTERNAL] : Medical recycle location.

I feel having a medical recycling location so near residential areas is not only irresponsible but foolish. Any waste business that burns probable dangerous content, especially in the multi-ton volumes proposed, needs to be done in unpopulated areas such as the western deserts. Please defeat this proposal and any like it in the future.

Sincerely,
David A. DelPozzo

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Good morning.

I am writing to express my concern and opposition to the MedCycler medical waste project on Division St. in W Warwick. I live a mile from the proposed location. I am concerned that toxic heavy metals and polluted air will pose serious health dangers to people and wildlife in the areas surrounding the plant. In addition, I understand that the law requires a buffer zone around such a site, and there isn't one in this location. I do not think the proposed medical incineration is green or clean. It will require significant fuel to burn the waste. Given that MedCycler doesn't own the property on which it will be operating, I do not understand how the site will generate tax revenue. Most importantly, I am concerned that it could pose significant health dangers for people who work at or near the plant, and for people who live near it. I do not think this is good for Rhode Island, and I am baffled and alarmed that the project made it this far. There are better ways to create jobs. This is not green energy production. I will seriously think twice about funding other green energy projects with bonds if this is the kind of project that receives funding. It's embarrassing and it's dangerous. Please don't grant it a license or let it proceed.

Best,

Abigail K. Mansfield Marcaccio
East Greenwich Resident

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi,

I would like to submit my comment that I believe any company looking to grow and create jobs in an industry around consuming our waste while producing energy in sustainable ways should be supported. Change is hard and building support for innovative ideas comes with opposition, but this is an existential change we must make. If we are not willing to undergo the growing pains and invest in operations such as MedRecycler then we are likely to go extinct anyway. I believe if the program in Rhode Island is supported, it will eventually be seen as a pivotal step towards our entire country’s adoption of more sustainable investments. This facility may be the first of its kind with many more to come as we collectively come to understand we should be employing more jobs focused on reducing our overall waste and landfill usage.

Thank you,
Adam

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Adria Cicillini

adriajain@hotmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Please do not permit medical recycling to destroy our beautiful state. This type of waste has so many horrible repercussions for ourselves as well as future generations. I, as many of my neighbors and friends will be forced to move from our wonderful town of East Greenwich. Which, in turn, will become a much less desirable area to reside, due to chemical waste being burned in our breathing space. I plead with you, for our children and their children, to keep MedRecycler out of our state.

Thank you,

Adria J. Cicillini

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Adria Cicillini,
149 Laurel Hill rd,
East GreenwichRI
adriajain@hotmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Below you will find an email and attached letter that was sent to the WW Town Council and Acting Town Manager on 7 March expressing my concerns relative to the proposed MedRecyler project in our town.

I'm sure that you are well aware of the issues relative to this project but you probably are not too familiar with how West Warwick conducts business.... The 20 minute "hearing" before the WW Planning Board is a prime example.

NB The MedRecyler Sign for this project went up in March of 2019, approximately 3 months before it was given Master Plan approval on 6 May 2019.

It took over 6 months for the Town to put forth ANY information relative to this project and they did so only after being publicly castigated on Social Media. In my opinion, that fact alone, speaks volumes as to the ethics and integrity of our town officials.

Hopefully, the RI DEM and US EPA will act in a deliberative, thoughtful and prudent manner given the technology involved as well as the scope of this project and its potential impact on the town and neighboring communities.

There has been a lot of conflicting data thrown out for public consumption, e.g. plants of this type actually operating in an efficient and profitable manner.

It is the duty and responsibility of your agency to get to the truth and determine the facts.

I would ask that DEM not betray the public trust for political expediency.

The citizens of our town are depending upon you, so I implore the DEM to act on our behalf to ensure the safety of ALL Rhode Islanders.

I would be most happy to elaborate on any information put forward here or in my msg to the WW Town Council

Very respectfully,

A.G. Palazzo
Cdr USN (Ret)
401-996-4985
Good day. I am writing to you as a citizen of West Warwick to express my thoughts and opinions on the proposed MedR project given the conflicting information out there in the public domain. I would respectfully request that ALL Members of the WW Council take a step back and read the attached article from UpriseRI, dated 22 February 2021, Ref A, as if this project were just coming before the Council, i.e., take a fresh look. The information provided in the article presents the proposed project in a new light and I believe that the citizens of our town deserve more than the cursory oversight of the WW Planning Board back in May 2019. I have no doubt that Mr. Campanella has indeed complied with all requests made of him to date. That said, what exactly are the qualifications of those involved on the part of the town or the DEM for that matter, given the nature of this technology?

I would also call your attention to an EcoRI story, Ref B, that I have also attached entitled "Dubious Claims Swirl Around Medical Waste Facility" dated 1 March 2021. This information, as well as Ref C dated 16 June 2020, which was published by the Conservation Law Foundation, entitled Burning Medical Waste is a Toxic Business have piqued my interest relative to this project and its proposed location within our town and the potential impact on neighboring communities.

Given the conflicting information offered to date, perhaps it would be prudent to ask for US EPA intervention/oversight given the origin of the waste as well as the potential for crossing interstate boundaries should an incident occur. (What are
the applicable federal laws/regulations that govern this type of project? Is any federal concurrence/review required as well?)

Understanding that the WW Town Council usually does not intervene before a decision is made by the Planning Board, perhaps the Council should actually review all available information and consider the location relative to the close proximity of a Day Care Center, the NE Institute of Technology, and residential neighborhoods, albeit not in West Warwick, but residential all the same. After all, this project is not like any other approved in the Town, State or New England for that matter. It is my opinion that you would be remiss in your public stewardship if you do not act in a thoughtful and prudent manner.

I also find it rather interesting that although the property in question, 1600 Division Road sold for $19.7 million on 12 September 2019. It is currently carrying a value of $12.7 million on the 2020 tax roll. (Reference the WW Property Tax Data Base) Although the MedR website has some rather interesting facts, e.g. $4 million paid in taxes to the Town, the 2020 WW Property Tax Data Base notes a tax of $1,371 on $30K for “Misc Equip”. It information such as this that the Council should clarify if they wish to gain our trust.

I have also attached several photos of the generators on the MedR site. When they were first installed, I believed they were simply back up power for the project if needed. As the UpriseRI story articulates, they are an integral part of the process and should, in my opinion, raise some questions on the part of DEM, the Council, the Planning Board and the Town Manager.

It is often said, “We Get the Government We Deserve!” but don’t the citizens of our community deserve accurate, timely and practical information presented in a logical, easy to use format?

Please do not hesitate to contact me, should you need any clarification or additional information. Thank you for your attention.

Alan. G. Palazzo
CDR USN (Ret)
996-4985

Ref:
A: RI leaders are falling for the perpetual motion machine scam – Uprise RI
B: Dubious Claims Swirl Around Medical Waste Facility — ecoRI News
C: Burning Medical Waste is a Toxic Business | Conservation Law Foundation (clf.org)

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Addendum Questions for WW Town Manager / Council review / Consideration:

- In air permit, the US EPA was supposed to be contacted for a compliance determination per the DEM, who follows up on that for the Town of West Warwick?
- Given that much of the equipment is already on site, it has been reported that the required insurance coverage has expired. Who is following this within the Town of West Warwick?
- It has been reported that a 10-year lease was signed BEFORE getting any approvals. How does this Town Council account for that fact?
- The RI DEM stated on their 2/5/2021 - "Also, RIDEM determined that the currently proposed testing protocols are insufficiently detailed at this time." Who exactly within the Town is going to ensure that detailed "safe" protocols are provided to the RI DEM / US EPA BEFORE any testing begins?
- The MedR Project has been touted as a "green project". Has any party involved provided documentation specifying how the project qualifies a "green project"?
- At 1:31:40 of the 6 May 2019 WW Planning Board Mtg, Atty Shekarchi stated "I have never known DEM not to accept public comment from neighbors, or abutters or anybody, so if they have concerns...." Or words to that effect. Yet Ref B notes, "The March 15 4 p.m. hearing will be a listening session. Questions will not be answered. Public comments and question can be submitted until April 14 to Yan Li at yan.Li@dem.ri.gov." Is the Council aware / OK with this?
- Are Councilmembers going to provide their own "public input" to the Planning Board given the possible impacts, be they positive or negative, of the MedR Project on our community, friends and neighbors?

NB: West Warwick Zoning Code Section 5.21.3  reads as follows
- Definitions. 5.21.3.1 Green, renewable or alternative energy installation and facilities (green project). For purposes of this section 5.21 green, renewable or alternative energy installation and facilities (green project) any installation or facility, excluding wind energy systems, at which electrical or any other type of energy is produced by a source other than fossil fuels, is renewable and which is safe for people and the environment.

For the Record: At 1:32:30 of the 6 May 2019 WW Planning Board Mtg, Mr. Campanella was asked if this has ever been done with his system and / or would they be the first? He stated they will not be the first to use this particular pyrolysis system.

The WW Town Planner, has noted that the 6 May 2019 WW Planning Board meeting was for consideration of Master Plan Review which is the initial stage of the review
process and is a general conceptual review. This stage is intended to accept public input and typically results in questions and concerns being presented about the proposal. These questions / concerns would be addressed in the later stages of the review process.

Preliminary review/approval is the next stage of consideration by the Planning Board. The preliminary review stage requires that all regulatory permits have been obtained, these permits include KCWA, WW Sewer Authority, RI DEM, R IDOT etc. Also, all stipulations contained in the Master Plan approval must be satisfied or appropriately addressed and any questions, concerns and comments must be addressed to the satisfaction of the Planning Board. There is a possibility that the Planning Board could / would impose additional stipulations and restrictions on the proposed use resulting from continued review of the proposal and as a result of public input.: Proposed MedRecycler Project; Due Diligence and Attention to Detail

To: <mknott@westwarwickri.org <mailto:mknott@westwarwickri.org> >, Maribeth Williamson
<mailto:mwilliamson@westwarwickri.org <mailto:mwilliamson@westwarwickri.org> >, <mailto:dgosselin@westwarwickri.org <mailto:dgosselin@westwarwickri.org> >, <mailto:jmessier@westwarwickri.org <mailto:jmessier@westwarwickri.org> >, Jason Licciardi <mailto:jlicciardi@westwarwickri.org <mailto:jlicciardi@westwarwickri.org> >, <mailto:jdamico@westwarwickri.org <mailto:jdamico@westwarwickri.org> >
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I would respectfully request that the Town Manager and members of the WW Town Council pay particular attention to the information provided in the attached files, including the references cited.

Now is NOT the time to remain disengaged from what is actually happening to our town, our friends and neighbors and the surrounding communities.

Very Respectfully,

DEPARTMENT RESPONSE:
• Since these are specifically directed to West Warwick officials, it would be appropriate to allow them to address them. See also I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: C. Issues Related to Sewage Discharge
After watching the Zoom session on March 15th regarding MedRecycler and hearing all the scientific (Kevin Burdis and Jim Mullowney testimony) and legal reasons for not issuing the permit to this company, I cannot understand how DEM could possibly go forward approving this project. The fact that MedRecycler has already signed a ten year lease, put their name on the sign and moved equipment into the facility leads me to wonder if this is an "I know a guy" Rhode Island deal. As a native Rhode Islander, I have witnessed political corruption over the years. I am hoping that this is not the case of a politician who cannot keep his hand out of "the cookie jar" and has put his own selfish interests above the health, safety and welfare of his constituents and the entire state of Rhode Island.

I trust the integrity of your office will prevail by opposing this hazardous experiment.

Alan Zartarian
25 Crckett Circle
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Alexis Kearney  alexis.kearney@gmail.com

Hello,

I am writing to express my concern regarding the possible construction of an experimental medical waste disposal site on the West Warwick/East Greenwich line. As a home owner in East Greenwich, I am adamantly opposed it its construction.

Not only is this technology largely unknown, but the construction of this plant -- while physically located in West Warwick -- places undo burden on EG residents with respect to traffic, noise, and potential hazards. I strongly support denying this company's bid to build here in RI.

Sincerely,
Alexis Kearney
40 Bow Street
East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Allen Grobin
allengrobin@gmail.com

[EXTERNAL] : DEM Zoom Call 3/15/2021

I was not able to participate in the DEM Zoom Call. The entry page on the Zoom said meeting was full. This has denied not only my participation, but certainly others citizens as well who had wished to express their concerns on this matter.

Kind regards
Allen Grobin

DEPARTMENT RESPONSE:
• See IX. Limitations on Attendees at Public Hearing
From Allison Demetros ademetros@hotmail.com

[EXTERNAL] : Opposed to MedRecycler in our Neighborhood

Hello,

I live in the Signal Ridge neighborhood adjacent to the West Warwick business park where MedRecycler will be operating. I am writing to you to say that our neighborhood and children will be endangered by this proposed medical waste facility. Previously, I signed the petition against this waste treatment in such a populated part of our state (or really anywhere in our state, as it is one of the most densely populated states in the US). Please make sure that my voice and the voice of our community is heard. I implore you to do whatever is in your power to prevent this facility from operating where it will surely have a negative impact on the residents of these thriving communities.

Thank you for your serious consideration in this matter.

Sincerely,

Allison S. Demetros

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department's Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: Allison Sangster asangster1@verizon.net

[EXTERNAL] : Medical Waste Facility

Mr. Li
I would like to respectfully let it be know that we are opposed to the Medical waste facility being built on the East Greenwich line. We have no idea as to the long term effects of any such facility on the health of the citizens and surrounding areas! Also, the effects on property values in the area! Please, Please Please vote NO to this proposal!

A very concerned citizen worried about the health and well being of our future generations.
Allison Sangster

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Dear DEM Officials:

My husband and I are residents of West Warwick. We are raising two little girls here. This medical waste facility would be very close to our home and their school. It is unconscionable to allow this to go forward in our state, let alone the proposed location which is nestled amidst neighborhoods, schools, and local businesses. My anxiety has raised just by the prospect of this facility moving in right where we are raising our little ones. I know the sentiment is shared by our friends and neighbors, even those who live outside of the West Warwick East Greenwich area. We love our neighborhood and our neighbors have been like family since we moved here 6 years ago from California. I can say with certainty that if this moves forward we will seriously consider leaving this state. That might not mean a lot to you since we are just one small family; however, please consider how serious this is to us being that we have good jobs and two small children. It would be so difficult to uproot, but more difficult to justify remaining in a place where something that poses a real threat to our health is allowed to go forward.

I know with certainty many of our neighbors and fellow Rhode Islanders feel just as strongly as we do. Please support us, as an organization charged with protecting and preserving our environment, by not allowing this facility to move forward.

Thank you for your consideration.

Kind regards,

Amber Latronica
West Warwick

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Respectful DEM officers,

This Amr Kader,

I am a resident of Signal Ridge, East Greenwich. I am also a doctor, an OBGYN physician and an assistant professor at Brown University. Me, and my wife are very concerned about our health and the health of our children for the years to come if we will be forced to neighbor a Pyrolysis facility with such proximity.

The proposed facility at the proposed location raises multiple concerns:

1- I did research to see if any similar facilities have been operational within such a proximity of civilians. I found none not just in the North-East, Nationwide or worldwide.

2- Little is still known about this technology and its emissions. Medical waste contains high concentration of plastic which would produce dioxins during the disintegration process. Do we know for sure if civilians around this facility, kids, young adults and elderly will be safe?

3- This facility would be operating using extreme temperatures and requires cooling. Do we know if the building chosen to host this facility contains fail -safety measures to contain failures that might occur due to machinery or human errors? I cannot imagine how such a facility that operates under such extremely dangerous conditions and producing highly flammable gases and liquids would be positioned next to a kindergarten, a college and a residential area with no buffer zones to contain potential extremely hazardous failures. This exposes all those civilians to serious risks, weather long term from daily operation risks or from risks of operation failure to serious risks.

Choosing a location to such a facility is by choice and placing it right next to all those human beings in near immediate contact is simply dehumanizing to those individuals. It is making us the guinea pigs of the world to be exposed and live with this new technology.

I would therefore ask in the strongest words that this company should not be permitted by the DEM to operate out of the proposed facility or any other facility where there is no significant buffer zone from civilians. Our community is reaching out to the DEM to give our safety and our children's safety the priority it deserves. Please feel free to contact me at any time for any questions

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: (Name) From: (Address)

Amy Martin               abmartin021@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

How could DEM have even approved an air permit when this is not even an existing technology with no record of test results? This whole process stinks.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Amy Martin,
20 Lynn Cir,
East GreenwichRI
abmartin021@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Hello,

I previously sent an email to state my objection to this proposal. After listening to the entirety of the zoom call on 3/15 my concerns have grown. It is absolutely unconscionable that the RI Department of ENVIRONMENTAL Management would care so little about the citizens of RI who pay their salary and the ENVIRONMENT of RI in even considering approving this project. From the many violations in process that were raised by the attorneys hired to represent interested parties and from research done by individuals, it is clear this is corruption at its finest to have progressed this far.

In my previous letter I stated my concerns for the health and safety of residents of Kent County, which have only increased after hearing the testimony of several experts in this field. Toxic chemicals will likely affect the water and air, despite claims of safety. It is disgusting that an air permit would be issued on a business for a process that has never been tested.

There is no evidence that this will be safe and not cause detrimental harm to surrounding communities and wetlands. In fact all the evidence points to the exact opposite. In addition to untested technology, Mr Campanella has no experience in pyrolysis or medical waste, and is unable to answer any questions about safety protocols.

Mr. Dennenn has also admitted they do not know how to test the air quality and there will be little to no oversight. It will be left to the business to police themselves, and this is a proposal by a businessman who has been portrayed as less than ethical in previous dealings.

The developer also claims this is a good location in an industrial area. This is by no means an industrial area by definition. This is a highly congested residential area, with many businesses and homes abutting this property. In addition there are ponds and rivers that contribute to the water supply. Many residents in this area also rely on private well water, and DEM cannot assure by their own admission that toxic chemicals will be released.

Additionally, while I agree the landfill issue is valid, Rhode Island is a small state relative to the states that waste is going to be trucked in from. This is outrageous, as stated previously the central landfill does not allow interstate waste yet this untested facility in a highly populated neighborhood can accept tons of toxic waste daily from many large states. This is unconscionable.

I could continue with my concerns which have all been raised numerous times by
EXPERTS in medical waste and green technology. So I ask you to listen to the experts and not the money and deny this permit.

Thank you,
Amy Martin
Concerned Kent County Resident

DEPARTMENT RESPONSE:

The Statement that Mr. Dennen has also admitted they do not know how to test the air quality and there will be little to no oversight is not accurate. We believe the statement being referred to here is that Mr. Dennen said that we do not know how to test the emissions on a facility that does not exist. Meaning that there is not a way to demonstrate efficacy and emissions compliance without testing at the facility when it is built, prior to accepting waste. Also, it was not stated that there would be no oversight, it was stated that the Department does not have the resources to be at the facility continuously or even weekly.

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XII. Department Staffing Issues
from: (name) from: (address)
amy putrino mrsorbie@gmail.com

[external]: deny medrecycler’s medical waste treatment application

the process is neither green nor clean. the dangers of this process being attempted at this location would be irresponsible and harmful to all of the citizens of rhode island and our environment. you must stop this from happening and protect ri from the greed and untruths from medrecycler. the process of pyrolysis was not vetted properly and should not be allowed to continue.

the rhode island department of environmental management should deny medrecycler’s application for a medical waste treatment permit. the company’s application and its proposed pyrolysis facility do not comply with rhode island medical waste regulations (250-ricr-140-15-1), rhode island solid waste regulations (250-ricr-140-05-1), or rhode island law governing solid waste facility license applications (r.i.g.l. 23-18.9-9), because:

• medrecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• medrecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• medrecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between medrecycler and neighboring tenants or between medrecycler and a nearby daycare center; and

• medrecycler has not included a final determination from west warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the state planning council.

amy putrino,
1578 division road,
east greenwich ri
mrsorbie@gmail.com

department response:
• see i. issues related to the department’s role in the permitting process
• see iv. issues related to air emissions, air pollution control regulations and the minor source air permit
• see ii. risk of pathogens associated with regulated medical waste and the innovative/experimental nature of the process
• see i. issues related to the department’s role in the permitting process: a. statewide planning approvals
• See XVI. Buffer Zone
[EXTERNAL] : No MedRecycler

I am reaching out to voice great concern over the MedRecycle project proposed for 1600 Division Road in West Warwick.

This project, from the beginning has been very questionable as to the "green and clean energy" it would provide through the pyrolysis process it would use. As we have all learned in the past 23 months, since the West Warwick town planning meeting in May, 2019, this process is not clean, green, cost effective or safe to the community. It will jeopardize our residents, ground water, air quality and our environment. We will all be put at risk, while "they figure out" this new technology.

Medical waste being hauled in from all over the northeast and burned in RI is not something DEM is capable of overseeing. Admittedly, during the Zoom meeting in January, Mr Dennen commented that DEM does not have the staffing to perform regular testing at this time. That being said, how is this project even a possibility moving forward? Keeping Rhode Islanders safe is everyone's goal. Except of course, MedRecycler's.

Sincerely,

Amy Putrino
1578 Division Road
East Greenwich

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XII. Department Staffing Issues
I am writing to voice my objection to the possibility of MedRecycler beginning operations at 1600 Division St.

The fact that pyrolysis will be used and polluting the air is of grave concern. I am unclear how they were able to receive a minor source permit when all research shows that pyrolysis is dangerous. They are claiming that their process is green, however, no environmentalist agrees that this process is green.

As a state, we need to ensure that these processes are safe. Before it's too late and damaging something needs to be done. Their methods do NOT meet RI Regulatory Standards. In order to meet the standards, we need to make sure that MedRecycler does NOT start using pyrolysis in our state. Doing so would create damage that would potentially be irreversible.

Please, we implore you to do everything you can to stop this very dangerous company from coming to using our beautiful state and destroying it.

Thank you for listening,

Melissa & Andrew Chernick

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
The health and well being of our neighbors is at stake with an untested environment. I read that even if it proves toxic after its running it would take an act of God to put a stop to it.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Angela Timmann,
24 Ashton street,
West Warwick RI
speedtalka@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
A public forum for such an important meeting should have been available to more than 300 participants. My husband and I tried to get into this meeting but were unable to as it had reached 300 and we were told it was full. You need to open this up again so that all interested parties can participate. Isn’t that what it means to have a public forum? Thank you.

Cameron and Ann Stock  
115 Sanctuary Drive  
East Greenwich, RI 02818  
atstock@gmail.com

DEPARTMENT RESPONSE:  
• See IX. Limitations on Attendees at Public Hearing
Ann & Tom Stock  atstock@gmail.com

[EXTERNAL] : MedRecycler RI

We are strongly opposing the approval of the MedRecycler facility on Division Road in West Warwick and bordering East Greenwich. The DEM has the immense responsibility of protecting all Rhode Islanders against harmful emissions from businesses in our state. How can you even consider approving this application which uses a process never before tried on medical wastes?

The facility is in close proximity to residential areas, a day care and NEIT. These medical wastes of incredible depth will generate toxic by products including air particles and how will you explain yourselves once people in the area have been exposed to these dangerous chemicals and have resultant medical problems including deaths? We moved here two years ago from Illinois. We lived close to a plant which sterilized medical equipment and promised no hazardous materials from their process. The cancer rates were found, after years of the operation, to be significantly higher within a mile radius of the facility.

We urge you to do your job to protect us and err on the side of caution for all residents of Rhode Island. We urge you to deny this petition.

Thank you.

Cameron and Ann Stock
115 Sanctuary Drive
East Greenwich, RI 02818
atstock@gmail.com
401-471-7289

DEPARTMENT RESPONSE:

- The Department does not have enough information to evaluate the claim of an unnamed medical waste facility in Illinois.

- See I. Issues Related to the Department’s Role in the Permitting Process

- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Ann & Tom Stock atstock@gmail.com
[EXTERNAL] : MedRecycler-RI hearing 3/15
We have 3 questions for the public hearing:

1) In regard to the request for a major source permit for water discharge, what will happen to this water and where will it be discharged? What will the condition of this water be in and how will it be evaluated?

2) Why are there such significant differences in the public statements Mr. Campanella has made regarding the kind of medical wastes being processed (simple household wastes including band aids) and those stated on the application (pathological and anatomical waste, human waste, blood products, needles, animal waste, hazardous waste, chemical waste, cultures and stocks)?

3) How will the citizens of RI be protected if Mr. Campanella is mistaken in his claims of perfect safety?

This is wrong for RI. Please protect your residents!

Cameron and Ann Stock
115 Sanctuary Drive
East Greenwich, RI 02818
atstock@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: C. Issues related to Sewage Discharge
I have one more question for the hearing:

What is the plan for disposal of the remaining matter after the process of pyrolysis is completed? We understand there will be ash and tar left over that weighs approximately 1/4 of the original product matter.

DEPARTMENT RESPONSE:

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process: A. Issues related to medical waste not being opened
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Project Financing Issues
- See XIV. Issues Related to Disposal of Ash
Ann & Tom Stock atstock@gmail.com

Rhode Island Department of Environmental Management
Attention: Yan Li
Office of Land Revitalization and Sustainable Materials Management 235 Promenade Street, Providence, RI 02908

Re: Deny Permits for MedRecycler Facility

Dear Ms. Li:
As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick.

Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA 2017) is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day.

Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. Given the two daycare centers and a college in close proximity to the proposed site, it is shocking that a facility emitting lead alone would be allowed to operate nearby. Additionally, with residential neighborhoods surrounding the site, we are especially concerned about the health effects of dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects , and environmental harm -- and the potential for radioactive waste to come to the facility (www.epa.gov/dioxin).

During DEM’s January 25, 2021, Public Informational Workshop on Facility’s License Application, project developer Nicholas Campanella admitted that he intends to expand the facility to accept medical waste from throughout the northeast; he said that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders - including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste. Those of us who live in East Greenwich, including several neighborhoods that would be directly impacted by emissions from this facility, feel particularly disenfranchised by this ostensibly
democratic process. Given that the facility’s driveway and access roads are actually in East Greenwich, as Rep. Justine Caldwell has stated, East Greenwich “will have the emissions ... and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. The residents of West Warwick and East Greenwich do not consent to our children, our families, and our neighborhoods being used as guinea pigs for an untested technology, which could cause unknown harm. What happens if there is a malfunction, an accident, a fire, or unpredictably harmful emissions from this plant? How do you reverse that damage? Once the children at the two nearby daycares are exposed to lead from the MedRecycler facility, how do you undo that harm? The answer is: it is impossible. Therefore, DEM should err on the side of caution to protect human health and the environment.

“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action.”


The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely distinguishable from a medical waste incinerator with a greenwashed name, and medical waste incinerators are notoriously toxic, polluting facilities that are inconsistent with residential communities. This is the definition of regulated medical waste:

- Pathological waste. Tissues, organs, body parts, and body fluids removed during surgery and autopsy.
- Cultures and stocks of infectious agents (microbiological waste). Specimens from medical and pathology laboratories. Includes culture dishes and devices used to transfer, inoculate, and mix. Also includes discarded live and attenuated vaccines.
- Contaminated sharps. Contaminated hypodermic needles, syringes, scalpel blades, Pasteur pipettes, and broken glass.
• Isolation waste. Generated by hospitalized patients isolated to protect others from communicable disease.

• Contaminated animal carcasses, body parts and bedding. From animals intentionally exposed to pathogens in research, biologicals production, or in vivo pharmaceuticals testing.

Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to import to this site. On the same January 25 call, Mr. Campanella admitted that he plans to start by processing 70 tons of medical waste/ day, but he chose this site partly because he can expand in the same building to accept up to 140 tons/ day. Industrial facilities are as imperfect and fallible as the humans who manage them. They malfunction, have accidents and do not always perform as planned. With the predicted volumes of hazardous waste, even small accidents can have a big impact on the surrounding community. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who live and work near or downwind of this site.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar. Furthermore, we want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Zooming out from the local perspective to a statewide, national, and even global view, the facts are clear that our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future. In fact, Rhode Island is in the midst of debating whether to strengthen our greenhouse gas emission limits with the new Act on Climate bill, currently pending in the legislature. In her recent State of the State address, Governor Raimondo said, “Rhode Islanders can be proud that we are the state leading the nation in the fight against climate change.”

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.
Thank you for considering our comments. We look forward to the March 15 public hearing on this matter.

Sincerely,

Contact:
Cameron and Ann Stock

115 Sanctuary Drive
East Greenwich, RI 02818

atstock@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See VIII. Hazardous Waste Versus Medical Waste
• See III. Plans not submitted for Public Review: A. Contingency Plans
• See XIII. Concerns Regarding Radioactive Waste
• See XI. Monarch Pyrolysis Facility in New Mexico
I urge you to deny permission to go forward to the proposed medical waste facility.

There are too many unanswered questions and apparent contradictions in the proposal for this to be granted permission. The contradictions in the company's presentation raise several red flags. Protecting the quality of life for the people of Rhode Island is a primary task of DEM, and this proposal flies in the face of that goal.

It definitely does not belong in any area in proximity to residential areas, schools, or places where people spend time.

I urge you to send this proposal back to the petitioners for further oversight.

Thank you.

Anne Kellerman
217 Hope ST., #8
Bristol, RI 02809

--

Anne Kellerman
Re/Max River’s Edge
423 Hope St., Unit M1
Bristol, RI 02809
401-524-8433

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
This facility does not belong in proximity to any residential area. It does not appear, as well, that the facility and the process have been tested adequately to operate it at all, or certainly not in Rhode Island.

It is of some concern that there is political interference here. Also, the contradictory assertions of the company and its proponents raises too many red flags to grant this facility permission to proceed.

I urge you to deny permission to this facility to go forward.

Thank you.
Anne Kellerman
217 Hope ST, #8
Bristol, RI 02809

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
April 4, 2021

Dear Ms Li,

On Tuesday, March 30 we closed on the purchase of a house at 27 Rector Street in East Greenwich. We intend for it to be our summer residence and look forward to enjoying it for many years to come.

Just before closing, however, we heard of the plans to put a medical waste disposal facility in West Warwick near the border with East Greenwich. We were shocked to hear of the proposal.

We decided to purchase in charming East Greenwich because it had an elegant, historic, hometown atmosphere where we would enjoy spending time and having our children and grandchildren visit. Knowing the strength of the school system and hence the abundance of young families makes this proposal even more shocking. It is a potentially dangerous situation for all, but particularly for young children.

We have been told that there is significant objection by members of the local community and we would like to add our names to the list. We cannot understand why the state would consider placing a treatment plant for medical waste with the potential for accidents in a neighborhood so close to homes, schools and businesses.

Please help us keep this from happening.

Thank you.

Arlene Lidsky Salomon & Chester B Salomon

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
arnazu arnazu@verizon.net
[EXTERNAL] : No medical waste!

I am opposed to the plan to build a medical waste facility in or near East Greenwich!

ARNA ZUCKER
215 Blair Drive
East Greenwich, RI 02818
hm  401-884-0808
cell  401-474-4044
arnazu@verizon.net

DEPARTMENT RESPONSE:
  •  See I. Issues Related to the Department’s Role in the Permitting Process
Hi Mr. Dennen,

I was unable to enter the Zoom meeting yesterday, I think because it was full, but want to be "counted" as both interested and opposed to the facility.

Thanks very much,

Anne Marie Meegan
East Greenwich, Rhode Island

Department Response:
• No response needed.
Anne Marie Teixeira
amteixeira0721@gmail.com

[EXTERNAL]: Objection to MedRecycle-RI location

My name is Anne Marie Teixeira and I am a resident of Greenwich Estates
Condominiums in West Warwick. I am writing this email to express my objection to the
1600 Division Rd. West Warwick, RI location of the proposed MedRecycle-RI facility. I
realize that the location is zoned commercial and that you already have a building
structure large enough to proceed with your plans. The values of residential property in
West Warwick and East Greenwich surrounding your proposed location will be severely
impacted. There is no appropriate buffer zone to separate it from residential areas, I am
a college educated woman who fully realizes the economics behind what you are trying
to do but look at this from a HOMEOWNERS perspective. Would you want this facility
in your backyard? I understand the jobs that will be created and the filter technologies
intended to reduce emissions but you have been unable to prove that you will completely
eliminate pollutants. There is a history of failures that come with gasification and
pyrolysis. Unchecked, untreated medical waste being burned is going to go into the air
and ultimately ground water. Trucks importing TONS of waste from other states and the
contents of the medical waste will be unknown and potentially hazardous. The bottom
line is that this is a bad idea due to all of the residential property that surrounds it. I
question the impact that your facility will have on our local water supply.

Sincerely,

Anne Marie Teixeira
565 Quaker Lane #88
West Warwick, RI  02893

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste
• See XVII. Out of State Waste
• See XVI. Buffer Zone
Dearest Mr. Li,

I am a 42 year resident of East Greenwich and wish to register my deep objection to the facility planned by MED RECYCLER in West Warwick. I am familiar with the location having worked there with Met Life Insurance. Although the address is in West Warwick it is only across the street from my community.

My understanding is that this proposed process as it pertains to medical waste is not in wide use anywhere else. Some of the gases that will be emitted are most likely not good for anyone’s health. A day care center is within a few hundred yards on the same side of Division Road as MED RECYCLER. There is a college campus right across the street in a southerly direction and immediately beyond that, a number of medical office buildings drawing many patients daily, including me. Beyond that are many residences. With a prevailing wind current from the north, these areas will be in a direct line of wind born effluent from the MED RECYCLER process, affecting many people on a daily basis.

For this reason, I feel that MED RECYCLER should not be granted approval to conduct their operation at the West Warwick location.

Sincerely,
Arthur C Gossmann
artg401@verizon.net

**DEPARTMENT RESPONSE:**
- See *I. Issues Related to the Department’s Role in the Permitting Process:*
- See *IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit*
- See *XVI. Buffer Zone*
Arthur Gossmann  artg401@verizon.net  Re:

[EXTERNAL] : MED RECYLER

Dear Mr. Li,
This is an addendum to my letter of March 9 regarding my objection to permitting MED RECYCLER to open its facility in West Warwick.

I checked a map and have determined that three of four East Greenwich schools, two elementary and one high school, are approximately two miles to the south of the proposed West Warwick location. In addition to that, a very large outside athletic complex is located at the high school. This facility is used by the entire town, not just high school students. These facilities are all in line with any wind born effluent carried by a wind from the north and could affect many students and staff at the schools, another reason to reject MED RECYCLER's proposal.

Please include this with my previous letter.

Thank You,
Arthur C Gossmann
artg401@verizon.net

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
OUTRAGE

Hello Mark,
I have recently learned about this proposed medical waste facility on Division RD on the WW/EG line. As an EG resident I, along with our community, am concerned and outraged by the thought of this possibly entering our backyard. There does not seem to be enough evidence supporting this type of facility proving that it is safe to have such a densely populated area surrounding neighborhoods, daycares, businesses, restaurants, and the list goes on. In fact, from the research I have found it seems as though the one that has been opened in this country has been quickly shut down (Florida for example). I can assure you taxes being lowered, or the minimal jobs it will provide, does not supersede the looming danger it will impose on our families. I could truly go on forever but I assume you have plenty of other concerned resident emails to tend to. The surrounding neighborhoods would like to be involved in the decision making process as it directly impacts us the most.

I thank you for your time and consideration and look forward to hearing from you.

Thank you,

Ashley Bruni
401-527-0772

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi Yan, Mark, Janet,
I am writing to you today, strongly opposing the MedRecycler facility. As a close by resident I am concerned how this technology will directly impact my family. I have a few questions;

-Since this technology is new, how do we know there will be no negative health implications?
-Has it been tested that there will be zero emissions into our air?
-There is ALWAYS a possibility for accidents. If something were to happen and the building caught on fire, or exploded (which doesn't seem out of the realm of possibility with a high heat facility that will be running 24/7) what does that mean for the community? Does it make sense to risk the wellbeing of such a densely populated area?
-How was Mr. Campanella able to start building this facility without full approval? Seems like expensive technology and equipment to implement without fully knowing his business had a green light. Quite a risk to take along with signing a 10 year lease. Which leads me to believe there's some hand painting or political pull going on behind closed doors.
-Is it true former Governor Ramondo is an investor? If so, would that not be a conflict of interest? Along with Shekarchi as being the attorney to start (I believe he had to step down, is that correct?)
-How does this fit into RI's climate bill? We have no proof this technology is renewable and 21,000 tons of carbon dioxide doesn't seem to fit the bill...
-How often will this facility be tested if approved? Will tests be at random or will they be given notice? If given notice don't you think the facility would make sure it passes on the given day?
-Second hand chemo is known to be very harmful to those around it. Assuming this will be part of the 70 tons of waste a day (to start) how can we say this is safe?
-What happens if a truck carrying the waste gets into an accident or spills over onto our roadways, what hazmat teams would cover it up?
-How do we know it will not secrete into our water, that we drink and bathe in? -How do we know it won't affect the bodies of water that habitat plants and animals?
-Mr. Campanella keeps promoting the 30 jobs it will create, but those 30 jobs that it will bring in will negate the jobs of the people that work in the daycare next door because I assure you as a mother, no one will want to send their child to a care center next to such a dangerous facility. I would be willing to bet it will be forced to shut down.
-Is there not a policy that this type of facility can not share a wall with another business? Wouldn't it share a wall with another business in this parkway?
-Why Rhode Island? Why such a densely populated state, less than a mile away from homes and businesses? Out of anywhere in the world, what brought Mr. Campanella to RI?
If any of you lived within close proximity of this dangerous, unproven, untested, facility, would you be able to let you kids pay outside and breathe the emissions, or drink the
water? Would you approve it if your loved ones lived close by? Please put yourselves in the shoes of all of us in the West Warwick, Coventry, East Greenwich, Warwick, and surrounding communities. We all want the same thing, we want to live with peace of mind and in a healthy environment, and with MedRecycler as our neighbor there is NO WAY we will be able to do that. PLEASE do the right thing, this is NOT right or NECESSARY for RI.

Thank you for your time and I look forward to hearing back from you,
Ashley

DEPARTMENT RESPONSE:
Regarding facility testing and inspection, the answer is two fold. The facility testing prior to waste acceptance would be done by a third party with notification of both the owner and the Department. Unless there are specific rationale for not doing so, inspections are normally unannounced. The right of the Department to do unannounced inspection is one of the draft conditions.

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See III. Plans not Submitted for Review: A. Contingency Plans
- See VII. Transportation of Waste Through the Community
- See VII. Hazardous Waste versus Medical Waste
- See VI. Bond Funding and Projecting Financing Issues
Hi Mark,

I please ask you, imagine if you and your family, and children had this facility in your backyard.. would you be comfortable letting them breathe this air, drink this water? There are so many negatives that outweigh the positives of this type of operation. I could rationalize it if there were many others in the country that have been proven to be safe, but WHY choose a densely populated state like RI, WHY choose an area that is full of neighborhoods and businesses. Please put yourself in our shoes.

Thank you,

Ashley

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
This is not safe
The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RI-CR-140-15-1), Rhode Island solid waste regulations (250-RI-CR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and
• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Ashley Fleury,
35 Highview Drive,
West Warwick RI
ashleyfleury1@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
We are writing to express our strong objections to the proposed MedRecycler facility at 1600 Division Road in West Warwick. It is alarming that a company which wants to use technology that is unproven and untested in treating mixed medical waste has even made it this far in the permitting process, especially given the densely-populated location of this proposed facility. MedRecycler should not be allowed to open a facility given, a) buffer zone requirements were not addressed in the DEM application, b) the technology is untested in medical waste applications and therefore emissions are not well understood, and c) there is no process established to monitor the types of mixed waste that would be processed at the facility.

As a resident of the Stone Ridge neighborhood in East Greenwich, which is less than a mile from the facility, we are extremely concerned for the health of our family and neighbors, as well as wildlife and impact on the environment.

We very much hope that the lack of evidence regarding the safety of this technology, the lack of required buffer zone around the plant, and the risks that come with tons of hazardous medical waste being hauled through the surrounding roads, will convince DEM to reject MedRecycler’s application for a medical waste treatment permit.

Thank you for taking the time to listen to and consider these concerns.

Ashley and Kevin Reilly
145 Fernwood Drive, East Greenwich

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department's Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Hello. No one wants a medical waste incinerator in West Warwick? Why is this even on the table? You mustn't live in East Greenwich or West Warwick.

Please don't bring this near our children.

Thank you!!

Sent from my Galaxy

DEPARTMENT RESPONSE:
  • No response needed.
Barbara Brown
turtle47@hotmail.com

[EXTERNAL] : Medical Recycle opposition

I am writing to express my opposition to the proposed medical recycle plant on Division Rd. in W. Warwick.
I believe this was pushed through without community acceptance or involvement, yet will potentially adversely affect W .Warwick and nearby communities. There needs to be much more proof that such facilities are not harmful. Please slow down this process and involve the communities in the conversation. Barbara Brown, 538 Middle Rd., E.G. RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
February 13, 2021

Re: Oppose Permits for MedRecycler Facility

Dear Ms. Li:

As a resident of East Greenwich, I am writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in neighboring West Warwick.

Pyrolysis, which has been called a “high risk, low yield processes for waste management,” is an untested, hazardous technology that is entirely inappropriate for a residential neighborhood. The citizens of West Warwick and East Greenwich -- while bearing all of the risk of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste which would travel through our towns every day. Medical waste is known to contain mercury, harmful plastics and other toxins even before COVID-19: we do not want infectious COVID-19 waste traveling through our towns.

I attended the information session in January, in which the developer of the project admitted that he fully intends to expand the facility to accept medical waste from throughout the northeast, from New York to New England, and he chose this site due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including a childcare center and a college in close proximity to the MedRecycler proposed site -- and our voices should count in this decision.

As Rep. Justine Caldwell has stated, East Greenwich “will have the emissions, the trucks in our neighborhood, the potential for accidents, and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich,”

I encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since the true risks of using pyrolysis to burn medical waste are currently unknown, DEM should err on the side of caution to protect human health and the environment.
“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action.”

Please prioritize the health of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering my comments.

Barbara Chernow
55 Hidden Lane
East Greenwich, RI

(barbara.chernow@gmail.com <mailto:barbara.chernow@gmail.com>)

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste versus Medical Waste
- See XVII. Out of State Waste
Dear Sirs,
I urge you not grant a permit to MedRecycler. Doubtless there will be a negative environmental effect on the air quality from burning medical waste. MedRecycler’s pyrolysis process is untested on medical waste. More studies are needed to determine whether or not there will be unwanted pollution as the result of this process. MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public; I am against such a facility in a highly populated area.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-ERICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Barbara Crane,
52 Sundance Trail,
Wakefield RI
bc@bccrane.com
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
92 Laurel Hill Rd.
East Greenwich, RI 02818

April 11, 2021

Janet Coit, Mark Deneen, Yan Li
Rhode Island Department of Environmental Management

Dear RI DEM Representatives,

I am writing in reference to the medical waste license application for the proposed MedRecycler-RI Inc. facility at 1600 Division Rd. in West Warwick, RI. [x-apple-data-detectors]

As an East Greenwich homeowner living three miles from the site I have GRAVE concerns about the environmental impact as well as the health, safety and welfare of ALL Rhode Island residents should this business be allowed to operate.

For the following reasons I implore the Department of Environmental Management to DENY the application from MedRecycler:

- Pyrolysis is an untested process on medical waste.
- There is no comparable facility in the United States to evaluate emissions.
- The location does not provide the state statute regulation of a buffer zone of “undeveloped, vegetative land retained in its natural, undisturbed condition or created to resemble a natural occurring vegetative area”.
- The location is in extreme close proximity to a child daycare, a residential neighborhood, a college dorm, a golf course, a restaurant, and other businesses located in and near 1600 Division Rd.

- The applicant did not submit the required certificate of approval from the State Planning Council.
- The applicant did not submit the “certificate for final determination that the site conforms with local land use laws from West Warwick” as required by the solid waste statute.

The Rhode Island DEM does not have the resources to monitor a facility of this nature for safety concerns such as:
- syngas emissions containing carbon dioxide, heavy metals, dioxins, etc.
- spot checking waste coming in for cancer causing chemo therapy chemicals
- a disposal plan for tars, oils and ash under normal operating conditions and especially
in the event of a fire or accident
- contamination of well water in the area
- contamination of nearby wetlands and ponds served by Fry Brook
- a contingency plan for medical waste trucks arriving or waiting for disposal during an unexpected shut down.

Incineration, gasification, pyrolysis, call it what you want, but do not call it green. Per the Rhode Island DEM website, “Our mission put simply is to protect, restore and promote our environment to ensure Rhode Island remains a wonderful place to live, visit and raise a family.” I beg you to chose the health and environment of Rhode Island families over the profits of a developer who has ZERO experience in waste management by DENYING the medical waste license for MedRecycler-RI Inc.

Thank you for your consideration.

Barbara P. Rickert

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XII. Department Staffing Issues
- See III. Plans not submitted for Public Review: A. Contingency Plans
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Projecting Financing Issues
- See XVI. Buffer Zone
Yan Lu Mark Dennen I am writing to express my unhappiness with the issue of MedRecycler possibly coming to West Warwick. I am all for new businesses coming into town, however, a company such a this is not what we had in mind. A company that burns medical waste does not necessarily generate clean renewable energy. It can produce harmful toxins that can be hazardous to our health. My family and neighbors do not want to be treated like guinea pigs with an untested and unproven technology. This facility (if allowed to be built) should be out in the middle of nowhere, not in the middle of a community. Since no testing has been done, no one knows enough about the process to see how it will affect the environment. Please deny this application. Thank you.
Barbara Shapiro

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Barbara Shapiro, 104 Monterey Drive, West WarwickRI bshapiro23@cox.net

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Barbara Tabakstashbat@cox.net

[EXTERNAL]: Medcycler Project
I totally say NO to the Medrecycler project proposed in West Warwick. I live in West Warwick but consider the project a terrible risk for our state and immediate communities.

With no responsible track record of positive testing results and the chance of toxins getting into the air along with so many questionable contradictions to the project, I say NO moving forward.

There should never be a question about licensing a business like Medcycler in a residential area. not only residents, but a Child Care facility along with a school across the street.

Please renew our faith and positively say NO to this pending project.

Barbara Tabak

West Warwick, RI 02893

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Please deny the MedRecycler's permit. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Barbara Walsh,
62 Frederick Street,
WARWICKRI
bw6262@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Hi, I am a West Warwick resident and would like it to be on record that I am opposed to MedRecycler proposed business.

This company has not been truthful with the amount and type of medical waste that it is wants to treat. This technology is unprecedented and we don’t have any concrete measure of its safety for our community.

Where is the guaranty if this facility fails and we are financially unable to support its cleanup or worse? Will we be placing our first responder in peril if they have to report to this facility?

There are so many unknowns and I would like to encourage you to deny its permit.

Wendy Beauchaine
67 North Pleasant St
West Warwick, RI 02893
401.588.9304

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See III Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See III. Plans Not Submitted For Public Review: A. Contingency Plans
Dear Ms. Li and Mr. Dennen,

As a 15-year resident of East Greenwich, I am writing to express my deep concerns about the proposed MedRecycler pyrolysis facility in the State of RI.

After attending the public Zoom meeting on 3/15/21, and doing my own research, this facility has no place in our state, let alone bordering my town. There is no evidence that points to this process as being "green" or safe for medical waste. Additionally, the idea that our local roadways will be used to carry the medical toxins to the facility and further expose us to potential hazards in the event of an accident is unacceptable.

I find it insulting that Mr. Campanella said that he plans to be "a good neighbor" considering he lives 200 miles away in NJ. He also has ZERO experience with waste management of any kind. I certainly hope that the desires of the residents of RI will be honored over the shareholders of the Sun Pacific Holding Corp. If they are not residents of the State of RI, their opinions should be sidelined.

I also find it appalling that the elected officials in West Warwick have not been more transparent throughout this process. How is it that so many steps in the process that should have been done along the way for approval were skipped or ignored? Their inaction and disregard for the people they represent is criminal, and I will push for a thorough investigation to be conducted.

This project is reminiscent of the 38 Studios gaming company fiasco. The state of RI made a very costly investment to the tune of $75 million to a company that went bankrupt, and left RI with huge fiscal losses. It seems that the West Warwick officials pushing the MedRecycler agenda through are only concerned with dollar signs. The difference in this scenario is the health and safety of our citizens as well as our fragile environment are at stake!

I am pleading for RI DEM to do the right thing and deny the medical waste license for MedRecycler-RI, Inc.

Respectfully,
Beth Cliff
54 Grasslands Rd.
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See VII. Transportation of Waste Through the Community
• See VI. Bond Funding and Projecting Financing Issues
My name is Elizabeth Ferguson and I am a resident of East Greenwich, a registered nurse and most importantly, a mother of four young children. I am writing to you to oppose the granting of any license to MedRecycler, the pyrolysis facility already being built less than 1/2 mile from my home.

High-heat waste processing facilities have no place in Rhode Island. We have a long-standing policy against incineration, and this supposedly "new" technology being pushed as "clean", "green", and "renewable", is just a slightly altered, 2-step version of an incinerator with the same toxic byproducts. Proponents of pyrolysis as a means of waste disposal, namely, Nicholas Campanella, CEO of MedRecycler, attempt to distinguish their process from incineration by highlighting the lack of oxygen during burning. The reality is that there is still combustion with pyrolysis. MedRecycler will burn the synthetic natural gas or "syngas" captured through pyrolysis, but often, that step in the process is completely omitted in the explanation of the technology.

The oxymoronic "syngas" should not be called "clean" because it is scrubbed. The state doesn't classify gas from processing unsorted solid waste as "renewable", so MedRecycler should not incorrectly use that description either. Mr. Campanella has also falsely stated that his medical waste facility will produce emissions equivalent to that of only 4 cars per year. According to information from the MedRecycler application, that number is more like 4,000 cars. A company claiming to be "green" probably shouldn't lie about its emissions. Unfortunately, a lot of misleading statements have been made whenever Mr. Campanella is giving interviews, boasting on social media and holding meetings with the public as well as Rhode Island officials. I recognize that DEM does not have the jurisdiction to hold Mr. Campanella personally accountable for all of his untruths, but what about at the informational zoom from 1/25/21? Mark Dennen said during that zoom, "what we are charged with is getting the information out for this application". Shouldn't that information from the CEO be accurate? Furthermore, why is it acceptable for Mr. Campanella, on several occasions, to make statements such as, "we've been working closely with DEM for over 2 years in order to open the facility"? Even going as far as to say that DEM "loves the technology". I would also like to point out that the scheduled public comment zoom on 3/15/21 did not allow for enough people to participate. To announce a time and provide a zoom link, but then concerned residents, myself included, could not participate because the meeting was full is frankly, unacceptable. Although these complaints do not relate directly to the application, I am bringing them to your attention in order to be part of the record. It must be known that because of the reasons stated above, as well as the granting of a minor source air permit without due diligence or public participation, the community's confidence in the DEM's ability to handle this particular application has dramatically declined.

I am appalled that this pyrolysis facility is even being considered. Introducing a MedRecycler facility to any part of Rhode Island would be detrimental to that community. People would move, businesses would close, home values then property
taxes would plummet and schools would fail. No one would choose to live anywhere near an odorous and dangerous facility. "Little Rhody" is so small, even one facility would impact us all. Renaming technology and using environmentally-friendly buzzwords do not protect us. The science is not there. Peer-reviewed studies on pyrolysis and medical waste simply do not exist. I have researched this thoroughly and my findings are keeping me up at night. Here is the growing list of my concerns:

- What considerations are being made for medical waste being heterogenous? If MedRecycler doesn't know exactly what is being fed into the machine, how will they be able to account for different operating conditions needed? Specifically when it comes to different kinds of plastic?

- Untreated medical waste is going to be shredded. How can we be sure nothing escapes that process?

- What about the things that cannot be "killed"? As an oncology nurse, I know medical waste includes loads of items with trace amounts of chemo agents. What happens to chemicals and other pharmaceuticals during pyrolysis?

- What is the emergency response plan? How will nearby residents be notified of an emergency?

- What would the inspection schedule look like? How involved is DEM in assessing MedRecycler's compliance with regulations?

- There's a conveyor, shredder, dryer...lots of "other" machinery that requires fuel to operate. How can you be certain that the amount of energy this system is supposedly creating is more than what it will consume? This does not seem possible let alone sustainable.

- What about the noise?
- What about the smell? Rotten egg odors, burning odors?
- What about the necessary buffer that does not exist?

- MedRecycler application asks for 10 deliveries a day and up to 25 truckloads of waste can be stored. What happens to the waste sitting in trucks on hot days? What about the potential for truck accidents? What is the plan for hazmat cleanup?

- Applicant has zero experience, the machinery is from South Africa, what happens when it needs to be serviced? If the system has to be shut down for maintenance, what happens to all of the waste being trucked in?
- Will an air quality impact study be done?

- There will not be any continuous emissions monitoring at MedRecycler. What about dioxins, VOCs, NOx and particulate emissions? When the pyrolysis engineer says "volatiles will be taken off and taken care of", what does that mean??
- What happens to the ash? The bio oil? The hydrochloric acid that is apparently collected as a commodity? Are those all going on separate trucks that the community needs to be concerned about?

- This is a wildly inappropriate location. It is understood that DEM cannot tell MedRecycler to change locations, but shouldn't the proximity to schools, businesses and residential neighborhoods be considered when thinking about the potential for irreversible damage to the environment and human health??
- What is the plan for the equipment should the company default?

The DEM website states, "Our mission put simply is to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family". Please, PLEASE heed your own mission statement and do not allow this untested pyrolysis facility brought to us by an out-of-state insolvent company go any further.

As someone who has spent an inordinate amount of time researching and worrying, I thank you for yours.

DEPARTMENT RESPONSE:
- The commenter correctly points out that at a meeting where RIDEM was not present, it was represented that the Department “loves the technology” when Department officials never expressed such an opinion.
- The commenter recalls a statement from the applicant that volatiles will be taken off and taken care of" and asks for clarification. Based on the application, our understanding is that volatile compounds will not be shipped offsite from this high heat process. Our understanding was the tar would be processed by the system. If flammable material were generated and removed from the site, it would be governed by the Departments regulations regarding hazardous waste.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See IX. Limitations on Attendees at Public Hearing
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See XII. Department Staffing Issues
- See VII. Transportation of Waste Through the Community
As with both waste and other commercial/industrial facilities, any waste such as hydrochloric acid produced by the air pollution control system would be transported offsite under state and federal regulations.

- See VI. Bond Funding and Project Financing Issues
- See XIX Odor Issues
Bethany E. Bragg
BBragg88@msn.com

[EXTERNAL] : Opposition to MedRecycle-RI

Hello: I am an owner of a unit at 565 Quaker lane unit #105. I have a strong objection to RIDEM allowing a potentially dangerous and possibly deadly facility within 2 miles of my property. I am strongly opposed to this facility in RI at all-but certainly so close to my property. This type of facility has an unproven history in the US. Using extremely high heat to destroy medical waste is a risky proposition regarding potential mishaps that could be devastating to the surrounding community, as well as have a significant potential for environmental impact in the area. The size of the industrial building surrounded by residential property is an additional concern of mine. DEM's responsibility to the citizens and property owners in RI is to ensure a clean environment for public enjoyment, as well as protection from potential environmental hazards. I implore you to do your job for the citizens of RI and not big industry, and protect our air, land, and communities.

Thank you for your time and worthy consideration.

Regards,
Bethany E. Bragg

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Bethany Fain

I am writing to let you know I am against the proposed pyrolysis plant which would be located off Division Road. While I am concerned for many reasons, I am most worried about the surrounding community being exposed to the dioxides that will be given off during the burning process and emitted into the air of the surrounding residential communities. This particular area is highly populated with residences and businesses such as a golf course, daycare, college, shopping plaza.

There is no research showing these dioxides are safe for people to breathe and I am extremely concerned about the proposed amount of medical waste that will be burned daily and continually putting dioxides into our air. This is not a facility that should be anywhere near a populated area. Please protect our environment and our community. Allowing this business to operate here will have detrimental effects to our community. Please do your research and protect the people of RI.

Thank you,
Bethany Fain
East Greenwich resident

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Bill Zech  bobill14@yahoo.com

Sir..... I am a 77 yr old resident of East Greenwich and am greatly concerned about the potential toxic effects of the Medrecycler plant proposed near NEIT. My understanding is this technology is NOT proven in the real world .I sincerely dont want to be a guinea pig or lab rat. Who will monitor the effluent from the incineration? Does the stack have scrubbers? This strikes me as Rusian roulette with the nearby residents.

I hope you find the courage to deny this petition. Sincerely,
Dr. William H Zech
119 Prospect St
EG RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Bob Zartarian, 1600 Division Road, West Warwick, RI

Dear Mr. Dennen:

As a concerned citizen of RI, I am writing concerning the proposed controversial processing plant planned for 1600 Division Road, West Warwick. This processing plant, hyped as a "green" project, would pose serious environmental threats to many Rhode Islanders' air quality, drinking water, and safety due to increased traffic congestion in what is primarily a residential neighborhood of homes, a school of 400 students, a daycare center, and a restaurant/golf course, all located directly across the street from the proposed plant location. The plant intends to burn human, animal, and contaminated medical waste such as syringes and bedding using an untested process, pyrolysis, that is found nowhere else in current use in America. I, along with many other residents in East Greenwich, Warwick, and West Warwick, are outraged that this project has proceeded so far with very few residents having any idea of its potential danger. It's astonishing that the first two stages have already been quietly approved by West Warwick's Town Council. Fortunately, the all-important Preliminary Planning meeting has yet to take place.

How could the Rhode Island DEM approve an air quality test, albeit a "minor source", when the exact details of the process are still unknown? Why is the MedRecycler corporate logo already displayed on the marquee at 1600 Division Road if the site has yet to be approved? Is this matter a "done deal" based on any verbal commitment that MedRecycler has received from the State which would make the future Town Council hearings a moot exercise? While I can understand our State Legislators wanting to remedy the state's waste management problem, shouldn't their first priority be to protect the citizens? Lastly, why is a company from New Jersey locating to Rhode Island to set up an unknown process when there are other states in closer proximity to their headquarters? Could it be the other States have wisely turned them down? Shouldn't the EPA be involved in the license approval process as well? Many more questions on the pyrolysis process itself have gone unanswered.

I will plan to participate on the RI DEM Zoom informational workshop at 4:00PM this afternoon (January 25) to learn more. Zoom ID #87132811510

In the meantime, I would appreciate hearing your thoughts on this matter. If you are not the appropriate person at RI DEM involved in this license, please advise who I should direct future comments to at RI DEM concerning the MedRecycler plant.

Thank you for your time.

Respectfully,

Robert J Zartarian
DEPARTMENT RESPONSE:

- The commenter asks about the U.S. Environmental Protection Agency. While the Department has kept them informed about the site, they have no direct role in the permit review.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms Li:

I am writing to express my vehement opposition to the above subject processing plant which RI DEM has incredulously issued a minor source permit to MedRecycler to operate.

The question that I, and many other citizens in West Warwick, East Greenwich, and Warwick, have concerning this proposed site is how your office could approve, albeit preliminarily, a permit when the exact details of pyrolysis and its lasting effects on the environment are unknown? Was an extensive environmental impact study completed prior to issuing a minor source permit? If not, will one be completed before a final decision is made? Is such a study required by the EPA? And if so, how would that study be deemed credible when there is no track record anywhere in the USA of the pyrolysis process? The MedRecycler plant should not be approved on promises made by Mr. Campanella. According to his own words their operation in New Mexico does not incinerate medical waste therefore the West Warwick site would be the only operation to do so in the entire country. This fact alone begs the question why would RI DEM be willing to risk the lives of Rhode Islanders by approving what could be described as a test site?

Did your office rush to judgement and be influenced by State politicians' eagerness to develop sustainable energy sources? We are told that MedRecycler's pyrolysis process does not meet the requirements to even qualify under RI State guidelines as a "green" project. Is this true?

RI DEM's first priority should be to ensure that Rhode Island's air, water, and land are managed with the utmost assurances that citizens and their families will be safe and secure with decisions that you make. I hope your office will have the courage and integrity to ultimately make the honest call in this matter.

I would appreciate your answers to my above questions and concerns.

Thank you so much.

Respectfully,

Robert J Zartarian
90 Crickett Circle
East Greenwich, RI 02818
DEPARTMENT RESPONSE:

- The commenter makes reference to an Environmental Impact Study requirement. We are not aware of any requirement in either RIDEM or USEPA regulations for such a study.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
March 16, 2021
My wife, Susan Oberbeck, and I logged on to the Zoom DEM meeting regarding the proposed medical waste treatment facility located in West Warwick held yesterday evening. We are residents of East Greenwich and I'm a retired physician.

The meeting was very informative and helpful in focusing our thoughts. From articles previously published in the Providence Journal and other sites, we felt that the entire enterprise was led by individuals with little background in civil engineering and medical waste management and there was no clear indication the technology involved would be environmentally sound and appropriate. We came to find out at the meeting that the proposed site didn't even meet DEM specifications and have the required town approvals. Taken together, we join the others at yesterday's meeting in calling for DEM to reject this poorly conceived and poorly executed project.

Andrew S. Brem, MD
Susan Oberbeck
11 Reynolds Street
East Greenwich RI 02818
401-886-7886

DEPARTMENT RESPONSE:
  - See I. Issues Related to the Department’s Role in the Permitting Process
Hello,

I was unable to attend the public session yesterday, but I am very concerned about the facility.

The location in question is right next to a golf course and watershed, they will have extremely negative impacts on the waterways starting in East Greenwich all the way to the coast.

Even if the method is "safe for the environment", all it takes is ONE accident to cause irreparable damage. Nothing is 100% safe, and in this case it would only take a miscalculation, mechanical error, or natural disaster to severely harm the environment.

Coventry where I live and grew up is home to the site of one of the country's WORST pollution disaster in the Picillo Pig Farm. I don't want our town to be known as the place where two hazardous waste disasters occur.

I am intrigued by the untested/unproven methods, however I am deeply concerned for the location of operations. That being said, I am firmly against this project.

I am a hydrogeology masters degree student, with a B.S in animal science, a B.A in biology, and a minor in marine and coastal affairs, all taken at the University of Rhode Island. I am also OSHA HAZWOPER 40 hour certified for the third consecutive year.

-Brendan McCarron

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Hazardous Waste Versus Medical Waste
Ms. Li and Mr. Dennen –

Please find attached a public comment submission on behalf of my client, Mr. Strauss, in regards to the proposed Medical Waste Management Facility license for MedRecycler-RI, Inc., at 1600 Division Road, West Warwick, Rhode Island. Please let me know if you have any questions.

Bret

Bret W. Jedele  
Partner - Providence  

One Park Row, Suite 300 Providence, RI 02903  
t: (401) 453-6400  
15 Franklin Street  
Westerly, RI 02891  
t: (401) 315-2702  

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April 14, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street
Providence, RI 02908

Attention: Ms. Yan Li (yan.li@dem.ri.gov)
Mr. Mark Dennen (mark.dennen@dem.ri.gov)

RE: Proposed MEDRECYCLER-RI, Inc., License – 1600 Division Rd., West Warwick, RI

Dear Ms. Li and Mr. Dennen:

On behalf of my client, Mr. David Strauss, a resident of an East Greenwich, Rhode Island, neighborhood that is close in proximity to the proposed facility identified above, I am submitting this public comment correspondence and written objection to the proposed solid waste license (“License”) for MedRecycler-RI, Inc. (the “Applicant”), to operate a proposed facility at 1600 Division Road in West Warwick, Rhode Island (the “Facility”). The public information available for this proposed License easily establishes that this is neither the time, nor the place, for the Rhode Island Department of Environmental Management
(“RIDEM”) to issue said License. It is not the time because any approval at this juncture would be based on insufficient information and an inadequate public review process. It is not the place because the proposed technology, which is untested and unproven, would be housed in a facility that borders residential neighborhoods. Simply put, this location, for this Facility, makes no sense. For the following reasons, my client respectfully demands that RIDEM deny the License.

I. Not The Time For Approving This License.

A review of the public documents reveals that RIDEM has not satisfied its mandates in reviewing and considering this application. Moreover, the Applicant has failed to secure the proper local and state approvals that would even allow RIDEM to consider approving the License. Given all the shortcomings in this Application, it is not the time for this Application, and RIDEM cannot grant the License.

a. RIDEM Has Not Satisfied Its Obligation In Reviewing This Application.

RIDEM is not in a position to issue the License here. Under state law, RIDEM is obligated to address the siting concerns of the surrounding community for such a facility. R.I.G.L. §23-18.9-8(a)(1) was revised in 2018 to require the following: “…the Director shall make rules and regulations establishing standards to be met for the issuance of licenses with those standards affording great weight to the detrimental impact that placement of such a facility shall have on its surrounding communities (emphasis added).” Since that 2018 amendment, RIDEM has yet to promulgate standards or criteria for how “affording great weight to the detrimental impact that placement of such a facility may have on the surrounding community” will be accomplished by RIDEM. Without clearly established standards, the substantive review of any such consideration of the impacts on surrounding communities is missing. If RIDEM’s substantive review is missing, then so too is the public’s opportunity to understand and scrutinize those considerations.

This Application cannot be considered until RIDEM has developed clear standards and criteria for how it will consider and assess detrimental impacts of placement of such a facility on surrounding communities and, most importantly, proven that it has applied those standards and criteria in considering impacts to surrounding communities.

b. The Applicant Must Receive Review And Approval From The State Planning Council And Local Zoning And Planning Boards.

In accordance with R.I.G.L. §23-18.3-9(a)(i), this Facility is subject to review and approval by the State Planning Council (“SPC”). State law dictates that the SPC can approve a site only after great weight has been afforded to the detrimental impact that the placement of such a facility has on the surrounding community after an evaluation of alternative site. The record is absent any evidence that the SPC has made such an analysis.
or determination here. In fact, it appears that the SPC has yet to go through a public
notice and comment process. As such, RIDEM is precluded from considering this
application further until the SPC process is completed. Any decision by RIDEM in the
absence of the full SPC process prejudices my client, the residents of East Greenwich,
and the residents of West Warwick from fully participating in the public planning
process.

In addition, for RIDEM to be in a position to grant the License, certifications of legal
compliance and other approvals are required at the local level. According to R.I.G.L.
§23-18.3-9(a)(i), one such requirement is a final determination from the municipality that
the site conforms with all applicable land use and control ordinances. Here, the Applicant
is only at the beginning of the local permitting process. The Applicant has yet to apply
for Preliminary Plan or Final Plan approval from the West Warwick Planning Board. In
the absence of a certificate of final determination from the town of West Warwick,
RIDEM cannot consider granting the License.

c. The License Cannot Be Granted - The Application for License is
Incomplete.

In accordance with R.I.G.L. §23-18.3-9(a)(2)(ii), all supporting
documentation must be made available for public comment. The draft RIDEM
license says certain documentation has “yet to be produced.” That information
includes important information that should be open to public review and scrutiny
including, for instance, a town of West Warwick contingency plan, a pre-
operating test of the system, and evidence of financial assurance. The public
documents and public comments establish that the pyrolysis technology is an
untested, unproven technology. As such, a review of all of the documentation
relative to the operation of this technology is critical to informing the public
before any license is approved. Any approval in the absence of a thorough
review of said documentation would be an abuse of the public participation
requirements.

II. Not The Place For Approving This License.

Common sense dictates that there must be more suitable locations to site a medical
waste pyrolysis facility. The proposed location is very close in proximity to
residential neighborhoods. My client is justifiably concerned with the potential
human health impacts from this unproven and potentially dangerous technology
along with the irritating onslaught of industrial traffic that will inevitably occupy
the area.

State law requires this proposed technology to be proven on the basis of thorough
testing. Since pyrolysis is not included in the list of technologies in Rule
1.15(F)(3) (250-RICR-140-15-1.15(F)(3)), it requires approval under Rule
1.15(F)(4), which requires all technologies to be approved in writing by the
Director of RIDEM. But according to Rule 1.15(F)(5)(A), the Director cannot grant approval unless and until such technologies are proven on the basis of thorough testing. Here, RIDEM has not received, reviewed, or approved sufficient testing plans or protocols or, importantly, test results, to justify an approval of the License. As such, an approval of the License here would assuredly subject my client and his neighborhood, along with other proximate neighborhoods, to being the “guinea pigs” for the application of this technology. I submit that granting a License to an out of state applicant, for an unproven technology, under an incomplete application, is an outcome that is unjustified and unfair, and would amount to a slap in the face to hard-working Rhode Island taxpayers who have no appetite to be the pyrolysis test-case.

**Conclusion**

It is clear that many important elements of the Application and public review process are lacking. Any approval in the absence of addressing all of the issues and considerations identified above flies in the face of the law and is an assault on the regulatory review process. It is worth noting that the Applicant’s primary justification for approval is a reference to, and comparison of, the Monarch Waste facility in New Mexico (“Monarch”). It should be noted here that according to the Federal Register just prior to the March 2021 public hearing, Monarch was denied approval for pyrolysis by EPA.

Finally, rumors are circulating that the Applicant has brought in equipment and has started some form of operations. I cannot confirm or deny any such rumor here but, if true, this agency’s decision should not and cannot be swayed by pleas for tolerance or forbearance. The Applicant should not be allowed to profit by subverting the statutorily proscribed regulatory process.

On behalf of my client, I want to thank you for considering these comments and this objection. To the extent necessary for preserving issues for appeal under R.I.G.L. §23-18.9-9(a)(7), my client hereby incorporates by reference and raises all substantive comments raised in opposition to MedRecycler that were submitted as part of the public comment period.

Sincerely,

/s/ Bret W. Jedele

Bret W. Jedele, Esq.

cc:  Mr. David Strauss

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• Reference is made by the commenter to a March 2021 decision on Monarch by USEPA in the federal register. Neither the Department nor USEPA could find such a reference in the March 2021 federal register. See also XI. Monarch Pyrolysis Facility in New Mexico
Medical waste does not belong in our waters.
The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Brian Butman,
607 knollwood dr,
WoonsocketRI
bbutman01@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Brian Wilder
bwilderz7@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

DEM should DENY the application of MedRecycler to burn medical waste. They have no experience doing this and the site is very close to existing businesses and residences. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Brian Wilder,
185 Bluff Ave. Unit 3,
CranstonRI
bwilderz7@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
From: (Name) From: (Address)
Bridget GERRINAUGHTON@HOTMAIL.COM

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I am gravely concerned about placing a facility such as this in West Warwick which is not an affluent part of the city and then allow them to use this facility to burn waste-derived fuel that could produce hazardous toxics that are harmful to human health. Please think about the people that live in this area and the potential long-term health problems this facility will expose them to not to mention the medical costs associated with these folks getting sick. This wouldn't even get off the ground in a wealthy part of town, please think of people's health and the environment before dollars.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Bridget Naughton,
11 Gail Ave,
CRANSTONRI
gerrinaughton@hotmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
Bridget Shapiro
bridgetshapiro@gmail.com

[EXTERNAL] : No to MedRecycler

Dear Rhode Island DEM,

There are too many unknowns surrounding the proposed MedRecycler that I implore you to deny this company the ability to do business here in Rhode Island.

The DEM factsheet itself states this company's proposed process to remove waste is "similar to incineration", so there will obviously be emissions. Of course - the very word starts with pyro which means fire and fire burns things, which creates emissions. They claim it will be creating "Renewable energy" when it's actually processing plastics? No. The process is not proven and Rhode Islanders do not want to be guinea pigs. Just three years ago, a different effort involving biomass failed because there was too much probability of the process creating significant air pollution.

MedRecycler is looking for tax-free status because it claims it will be a "disposal facility generating renewable energy" - there is ZERO evidence their proposed process will do this, and they have not clearly been able to outline the safety of the process. According to International Power Ecology Company (iPEC), "the hazards associated with process of pyrolysis arise from the releases of toxic gases and explosions. Hydrocarbons exempted from the pyrolysis reaction are highly flammable. Under the enough heat and oxygen, an explosion may occur." This is a cash grab at the expense of Rhode Islanders.

The fact that medical waste will be driven into this facility also leads to a lot of concern. The company has not provided enough of a plan to govern the transit process and outline clear safety protocols, or a remediation plan when something should go wrong.

The concerns about the safety of this process should be enough to terminate any consideration of having this company in our state, not to mention in a part of the state that is densely populated. However, adding to the fact that MedRecycler is vying for space in an office park where many other companies already do business, including a DAYCARE, and not far from many residences and a dormitory, should bring anyone over to the side of concluding that this proposal should be shut down immediately. There is way too much at risk here.

If this company is allowed to move in and start using this unproven pyrolysis method, there will be major backlash in the community. This will cause a lot of outrage. Many people are mobilizing in opposition of this proposal, as I'm sure you're starting to see, and they are vocal, and in my opinion, their opposition is justified as there are many reasons to be concerned.

This is a bad idea. Please listen to the growing number of residents who vehemently
oppose this company's proposal.

Thanks,
Bridget Shapiro
East Greenwich resident

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
Dear Ms. Li,

Many, many of the people I talk with are supporting the construction of the medical waste pyrolysis facility in West Warwick because,

1. It will create non-government jobs.
2. It is a ecofriendly business, i.e., generates power and is the discharge/byproducts are environmentally acceptable.
3. It is a good location for ease of access and in an existing business area.
4. It demonstrates to the community that Rhode Island is a business friendly and progressive state.

Sincerely,
Bruce LeBlanc
33 Red Oak Road

East Greenwich, RI 02818
401-885-4379

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
I am writing in opposition to the proposed MedRecycler-RI facility in West Warwick. This is not a green energy project and portraying it as such is dangerous to the future of renewable energy. First of all, according to the state of Rhode Island, producing gas from burning medical waste is not considered renewable energy (https://rules.sos.ri.gov/regulations/part/810-40-05-2). Using literature review and case study methods, along with civil permit applications and experimental results, it shows that a pyrolysis plant for self-sustaining Energy from Waste is thermodynamically unproven, practically implausible, and environmentally unsound. A linkage between widespread commercial failures and a lack of focus on thermodynamic fundamentals is also identified, along with an environment of indifference or ignorance towards energy balances and sustainability when these technologies are presented, assessed and financed. Though proposals to build machines which violate physical laws is not new, in a modern context this phenomenon is found to be stimulated by competitive financial rewards. The situation presents a high risk to investors and has the potential to adversely impact on societal transitions to a more sustainable future (Rollinson and Oladejo 2019). It is impossible for this facility to create more fuel than is being used. This facility is a complete waste of money and resources and does not belong in Rhode Island or anywhere else.

-Alex Denisevich

**DEPARTMENT RESPONSE:**

- See *I. Issues Related to the Department’s Role in the Permitting Process*
My name is Carey Jeffrey and I live at 9 Brayton Meadow East Greenwich.

I urge you to deny the permit application for the Med Recycler facility as proposed to be located in the West Warwick/East Greenwich area. This application should be rejected by RI Department of Environment Management for the following reasons:

1. Lack of experience: The pyrolysis technique has not been used before for medical waste in the United States. Nick Campanella, not only does not have any experience operating a pyrolysis plant, he has cancelled at the last minute to attend meetings to answer questions about this proposed project. If he can't answer questions now, what will he do if there is an accident at the Med Recycler plant? https://www.ecori.org/composting/2020/5/28/medical-waste-developer-implicated-in-price-gouging-accusation [ecori.org] has not operated this technology before.

2. Lack of funding: The proposed plant would start from inception with deficit financing so if there were negative environmental impacts, Med Recycler would not have funds to adequately monitor and/or clean up any harmful emissions, dispose of residual waste safely or accidents.

3. Poor timing: We have just spent a year in lockdown with 500,000 plus dying from covid in the United States. So how does it make sense to potentially introduce more toxins to our environment with an unproven technology with no ability to detect dangerous microbes emitted? At least with covid, we have effective covid testing.

4. Lack of supervision: Who is the qualified, independent third party professional with the technological expertise to monitor transportation, air emissions, disinfection, safe storage, maintaining adequate temperature and proper disposal of residual waste? Did you know that if any of these factors are not executed properly, the pyrolysis plant can double carbon emissions instead of helping the environment? Did you know that any metal mixed in the medical waste can cause an environmental disaster? See this informative article written by an expert in pyrolysis: https://www.linkedin.com/pulse/pyrolysis-harmful-environment-melissa-leung/ [linkedin.com]

Approval of this plant will be a gross injustice to the towns of West Warwick and East Greenwich due to the lack of experience, funding and supervision. But it is not only these towns that will bear the impact. The Rhode Island taxpayers will also be forced to pay for any potential mistakes by an inexperienced operator. We have already experienced a
health disaster with covid. Please do not add to our pain.

Thank you for your consideration.

Carey Jeffrey

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VI. Bond Funding and Project Financing Issues
Carol
carol063@verizon.net

[EXTERNAL] : Rejection of Medical Waste Incinerator Proposal

I reject the building of the Medical Waste Incinerator Project on the proposed site off of Division Street in West Warwick and East Greenwich Rhode Island for the following reasons:

1. The environmental impact could be devastating to the area.

2. The impact on the air quality, subsoil land contamination and contaminating the water and aquifer resources can be irreversible if radioactive materials are incinerated at this proposed site.

3. The potential site is very close to residential homes and steps away from a children's day care center.

4. The damage to the infrastructure i.e roads and bridges will be considerable and the associated noise and congestion of large trucks bringing in materials from out of state day and night is unacceptable.

In summary, I reject the building of this Medical Waste Incinerator because I believe it will take away from the quality of life in both towns, bring down the value of the properties in the surrounding neighborhoods and most importantly the long term health issues caused by the reasons mentioned above.

Please consider these reasons to reject this Medical Waste Incinerator Project.

Sincerely,
Carol DiNitto
East Greenwich Preserve

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Hazardous Waste versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIII. Concerns Regarding Radioactive Waste
- See XVI. Buffer Zone
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

This is a terrible location for such a business! Not to mention the daily shipping and unloading of large quantities of medical/biological contaminated waste through this community.

This is an unproven technology, and may cause an unhealthy exposure to nearby residents and businesses.

The appropriate vetting process for the proper location for such an operation has not been done. Environmental impacts must be evaluated.

Please deny this application.

Thank you for your consideration of this important matter.
Carol Ayala

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250- RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Carol Ayala,
110 Log Rd,
Harrisville RI
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VII. Transportation of Waste Through the Community
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
Carol Baumgupta

carol.baum.ri@gmail.com

Dear officials Yan Li and Mark Dennen

I am writing this letter to protest the possibility of granting a permit to the MedRecycler plant that has been proposed on Division Road.

I truly believe that this is a bad idea, and that it puts residents like me in the surrounding area at increased risk of unknown health exposures. As a breast cancer survivor of 10 years I have been working hard to limit my exposure to toxins. As you know, the MedRecycler company has not proven that treatment of medical waste with pyrolysis is safe for human health and the environment.

I ask that you consider this matter closely, and that you decline the installation of this facility so close to a heavily populated community without a clear understanding of its impact on the health of nearby residents.

Sincerely yours,

Carol Baumgupta
10 Signal Ridge Way
East Greenwich, RI.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
As a longtime resident of Warwick RI, I am appalled that DEM is considering licensing the proposed medical recycling facility.

I have read as much as possible about this process, and can see that there is no way that the process has been certified as safe for our environment and for our citizens.

Why would RI allow a NJ resident to pick the most densely-populated state as a place for such a facility? Telling that the only other location is in a much less densely-populated state in the West.

I urge DEM to do their job to protect our state and all of us loyal citizens from this facility.

Thank you,
Carol Cavanagh
25 Nathaniel Greene Drive
Warwick RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Carol Lampeter
kcsk4@aol.com

[EXTERNAL] : Medical waste plant

Do not support the proposed Medical Waste facility. RI residents should not be experimented on. This plant would be within a few hundred yards of a daycare!


Carol Lampeter

Sent from my iPad

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Good Afternoon,

It has been brought to my attention that a proposal has been made for build a Medical Waste Processing Plant at 1600 Division Road.

This cannot be allowed to happen. That area abuts my neighborhood. There are also environmentally protected areas adjacent to NE Tech and the EG Golf Club. Home prices will be diminished and health and safety will be severely impacted.

"According to a recent article, this plant is the first of its kind proposed in the United States with many untested technologies, can emit foul odors and can produce air pollution which could contain cancer causing compounds into the air or into waterways (among many other negatives). I don't think we want our neighborhoods to be the testing grounds for this type of a facility."

Several citizens and residents are now aware of this proposal and intend to fight this with all legal avenues.

I would ask any of you if you would be comfortable living next to a medical waste facility.

Sincerely,
Carol A. Ciolino-Lampeter

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Carol Tobian
ctobian@gmail.com

EXTERNA L: Deny MedRecycler’s medical waste treatment application

Waste to energy is wrong direction especially for tax payer investments. Absolutely deny this project. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250- RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council. Carol Tobian, 85 Tillinghast Road, East

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process
- See XVI. Buffer Zone
Carol Viccione
carolviccione@gmail.com

[EXTERNAL] : Re: MedRecycler

I am writing to voice disapproval of putting MedRecycler on Division Rd. in East Greenwich. Treating medical waste with pyrolysis is an unproven procedure that may cause very harmful carcinogenics to be released in the air. Please vote NO for this proposal.

Sincerely,
Carol Viccione
20 Field Stone Drive
East Greenwich, R. I. 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
I continue to remain opposed to this facility.

The solid waste permit should not be approved. This facility has no required buffer zone between itself and other personnel and companies in the building complex and thus, those companies cannot protect their employees from any contamination or chemical exposure that can and will likely occur at Medrecycler's plant. This buffer area is required for all employees at Medrecycler and all organizations and companies directly connected to this facility, and this is not the case at 1600 Division Road.

Also, the DEM permitting does not address the details of how this facility will filter the waste and slag and other outputs in a extremely detailed way as it is needed and required. No filtration system or manual is noted in the application. No clear cleaning system name or manual is explained or described in the application. Broad references are made - UNACCEPTABLE! There is no clearly explained (And Required) guide regarding how Medrecycler will clean its pyrolysis system of slag/ash through the removal sites. What systems will be used, what filters and scrubbers and makers of these items will be used. We need to be able to research if the items have been used for this type of process before and if they are appropriate for this use and will thus work? So, I ask...Where are the names and manuals for these filters and cleaning systems? How can an application for something this dangerous be missing these kinds of details. I work in research and the level of detail I must give even for things as simple as an e-cigarettes or nicotine patches, which are FDA APPROVED devices and medicines is insane. I have to give product descriptions and manuals for use EVERY time I apply for a project oversite permit.

How can DEM not require simple details like this for something THIS hazardous. Come on guys!

This is simply unacceptable and inexcusable and it is time to pull-the-plug on this and say NO to Medrecycler. This company and its owner, Mr. Campanella are NOT knowledgeable enough or skilled enough to being doing this kind of work or building this kind of plant in our state. This is YOUR job RIDEM, to prevent sneaky, shady companies like this from coming into our state and using us a their "test site".

It is time for you all to now say NO. It is the smart, right and most appropriate answer. The Rhode Island Department of Environmental Management should deny MedRecycler's application for a medical waste treatment permit. The company's application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:
• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

catherine costantino,
25 Narrow Ln,
East GreenwichRI
catherine_costantino@brown.edu

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
• See XIV. Issues Related to Disposal of Ash
Dear Mark Dennen,

My name is Catherine Malgieri and I am a resident of East Greenwich. I'm writing to RIDEM to voice my concerns about the proposed medical waste facility in West Warwick. I feel strongly that RIDEM should deny the facility license application for the MedRecycler Facility.

MedRecycler uses pyrolysis to burn medical waste, an untested technology that could have significant impacts on our state environment, as well as direct impacts on the town of East Greenwich. Residents of East Greenwich have expressed concerns about increased truck traffic on town roads, noise and reduced air quality, as well as potential odor from the facility. Another major concern is the proposed site location, which is next to the Playground Prep childcare center.

I urge RIDEM to prioritize the health and safety of Rhode Island residents and deny the facility license application for the MedRecycler Facility.

Sincerely,
Catherine Malgieri

--

Catherine Malgieri, DVM
32 Phillips Road
East Greenwich, RI
401-601-5004

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XIX Odor Issues
From: Catherine
cscape11@hotmail.com

[EXTERNAL] : Medical Waste "Recycle Plant"

To DEM,

I have lived in West Warwick all my life. I have raised my children here.

I was a Registered Nurse for over 45 years. In those years I have handled a lot of Medical Waste. I can tell you it was NEVER SAFE.!!!! DEM has stated that we are not allowed to burn leaves in our backyard, but it is safe to burn Covid and God knows what other contagious materials into the air. This is not a tested process!!!

Remember the Station Fire in West Warwick in 2003. When the egg cartons burned, it turned to MUSTARD GAS which killed most of the victims!! (100 of them)

DEM is supposed to PROTECT the environment, not POLLUTE it. Shame on the people that work for DEM. This plant is only an INCINERATOR. If you think that burning leaves will pollute the air, what do you think waste products will do?????

Oh, that's right, you don't know. It hasn't been TESTED!!!

This appears to be a money making scheme. After all, just look at all that waste. Money! Money! Money! This plant belongs in the middle of no where. Especially not in RI where we are too crowded together and there is too much pollution to begin with.

This decision to approve this waste facility was done without any research, planning or care for the people of Kent County. This West Warwick Town Council is absolutley the worst!!! I wonder who they know or are related to that is trying to build this plant? Politics as usual.

Cathy Petrarca

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Catherine Webb Lynch  cwebblynch@me.com

[EXTERNAL] : Oppose MedReCycle

Ms Li - attached is a letter that we shared with our neighbors based on research my husband did to this solution.

We are very concerned about this proposed system and the untested nature of what is being proposed.

Please read this detail and research to consider the risks on this proposed use. The quantities and proposed risks are disturbing.

I would ask you to thoughtfully consider the med recycler proposal and ask yourself if you would put your children in the daycare that touches the parking lot of this facility.

Thank you in advance for your time.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Catherine Webb Lynch  cwebblynch@me.com

Dear Neighbors,

I am dismayed and deeply concerned that MedRecycleRI may be allowed to go through with a planned “pyrolysis” based medical waste facility in our community. Why? The technology is untested for medical waste and until it is fully determined to be safe; it is reckless and dangerous to dismiss what independent experts argue will cause harm to our environment, health, and property value.

To be fair the high heat pyrolysis method is different than incineration but to be equally clear, the claimed environmental and safety benefits of such a system are unknown and untested. Based on the lack of research we as a community should assume until proven that the proposed “pyrolysis” system by MedRecycle is NO cleaner than the incineration methods whose harmful effects have been well documented and studied. Research shows that few government agencies have the resources and or the knowledge of the new system necessary to ensure safety and environmental standards are being met.

In short: We the Signal Ridge community will be test subjects of a new technology that could have the same effects that are similar to medical and plastic waste incineration - increased cases and severity of asthma, cancer, and birth defects. In addition, our property values and community wellbeing could take a dramatic hit.

What led me to this conclusion and my level of concern

There is simply not enough research on the pyrolysis technology to support the claim from MedRecycleRI’s CEO “that high heat pyrolysis will in effect burn medical waste without the pollution usually caused by incineration and create renewable energy in the process”. Cleanliness and safety cannot be assured without regulation and monitoring of the type and amount of feedstock (the medical waste material) going into the technology itself. Feedstock monitoring is critical as recent research finds in a 2020 article from the Journal of Analytic and Applied Pyrolysis -- the leading scientific journal for the field of pyrolysis. The feedstock (the waste) especially medical that contains plastics needs to better understood, regulated and sorted before any claim of safety of technology can be assured. MedRecycle has claimed it is safe but this is not based on research or examples from a similar use because there is none. It is based on industry based technical “experts”. The State of Rhode Island should, until actual independent research and testing is done, proceed with caution and heed the warning of the Alliance for Incinerator Alternatives that stress pyrolysis is no cleaner than incineration method:

“Studies that have comprehensively reviewed gasification, pyrolysis and plasma incinerators have found that they provide little to no benefit when compared to mass burn incinerators.”

Another concern of the pyrolysis treatment of medical waste is that it can produce C4H4 or Vinyl Acetylene which has hazard certification that should at the very least required highly certified workers to handle. According to “hazard certification” it is extremely
dangerous because in high enough concentration and it can auto-detonate (explode without air being present).

Why would anyone risk allowing a new operator to test a medical waste pyrolysis system near a University, child care facility and densely populated community?

In Minimum We Should Demand:

I. Until further research of the “pyrolysis” based high heat medical waste system that we consider the risks equivalent to Hospital and Medical Waste Incinerators.

II. Until proven safe - that the MedRecycleRI facility only be allowed to process the equivalent amount of waste under the Clean Air Act (CAA) of that of an incinerator within a community (or Standard Metropolitan Area). Currently Mr. Campanella’s plan is to start by processing 70 tons of medical waste a day, but he chose this site partly because he can expand in the same building to accept up to 140 tons a day. 140 a day is 980 times more than the CAA standard for an incineration unit if placed in community.

III. There are also safety, inspection and reporting standards that apply to Medical Waste Incinerators that as a new and unproven technology this system should be in compliance with. We should demand this level of oversight until it is proven to be safe.

IV. The MOST important safety measure is the sorting, monitoring and regulation of waste feedstock. We should require a detailed pre-sorting and reporting of all feedstock waste to ensure the waste does not include potential hazardous materials as recommended by the Journal of Analytical and Applied Pyrolysis 152 (2020): 104804. It should not be too much a burden considering the risks to the densely populated community and nearby Wet Lands.

I am not an expert in this area BUT we as a neighborhood should insist West Warwick, East Greenwich, and/or the state of Rhode Island hire independent (not industry) experts. We can and should protest any heated medical waste “recycler” being placed near any community until the safety of a system is tested and can be assured safe. We should at least want the same oversight and protection we would receive if it were an incinerator being placed near a daycare.

In the immediate, you may be less concerned about your health, safety and the environment but please also consider - the research study on negative effects of high heat medical waste systems can have on property value. How certain can we be that the same neighborhood effects won’t befall us with an unregulated pyrolysis system? The recent increases in values will significantly drop.

What can I do? We need your help before the March 15th hearing:

• Call and email your contacts, friends, clients, or patients in West Warwick, Rhode Island State, and East Greenwich leadership positions and share your concerns

• Sign the online petition objecting
• Attend the virtual zoom March 15th hearing at 4pm Eastern Time
  o Zoom Meeting
  o Meeting ID: 521 138 3116
  o Or by phone: 929-205-6099

What we are asking for? We do not want to stifle innovation or jobs. We want a careful measured approach.

• Sort the feedstock material that is coming into Med Recycle

• Limit the processing to 1 ton a week for adequate monitoring and testing to be done

• Provide daily and weekly reporting on the feedstock for test monitoring and regulation by the appropriate independent agencies to provide oversight and ensure plastics do not end up in our water supply or poison the schools nearby

How can we not follow the advice of leading scientist in the field of pyrolysis- that more research is needed? If more research is needed before safety of the solution can be ensured why should WE be testing it with such large quantities? The last year has clearly taught us what when we ignore science people die.

References Please Review:


“As a technology still under development, gasification relies upon a strong regulatory environment, including real time environmental emissions monitoring, to ensure operational safety and compliance. Few governments today have the capacity, technical knowledge, or regulatory framework in place to ensure safe operation of gasification facilities, but due to the environmental and health risks inherent with these technologies, investors should anticipate an evolving, and increasingly stringent future regulatory environment.” Tangri & Wilson pg 8 2017.


1 https://www.ncbi.nlm.nih.gov/books/NBK233626/ Social Issues and Community Interactions-including possible social, economic, and psychological effects of incineration and how these might influence community interactions and estimates of health effects.

1 Dangers of Hospital, Medical Waste Incineration

This article - shares the history and issues surrounding Hospital, Medical and infections Waste Incinerators (HMIWI). https://www.pbs.org/newshour/world/agents-for-change/how-u-s-hospitals-cleaned-up-their-toxic-trash
“In 1994, the Environmental Protection Agency released a report that found that incinerators used by many hospitals throughout the United States were a top of emitter of harmful air pollutants, including mercury and dioxin.”

The incinerators are now regulated emission guidelines under the 1994 clean air act. These standards were amended in 2013. See fact sheet below:


This article shares a research article discussing the potential for pollutants with HMIWIs

https://www.ncbi.nlm.nih.gov/books/NBK233633/

The above article reviews the possible harmful effects of HMIWIs and provide recommendation to keep communities safe.

https://eastgreenwichnews.com/w-warwick-medical-recycling-plant-would-use-high-heat-technology/


How should you weigh this evidence: Please consider that Qin, L., Han, J., Zhao, B., Chen, W., & Xing, F. written research was publishing in a tier 1 refereed research journal not based on assessment of invested industry representative whose publication on technology was for trade conferences.


in That All standards established pursuant to CAA [Clean Air Act] Section 129(a)(2) must reflect maximum achievable control technology (MACT). The MACT "floor," or minimum level of stringency set forth differing levels of minimum stringency that EPA’s standards must achieve, depending on whether they regulate new or existing sources. See report on combustible compliance:
https://www.combustionportal.org/hmiwi.php

Property value and negative effects: https://link.springer.com/article/10.1007/s10640-011-9467-9

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
Good Afternoon,

I would like to express concern for the proposal of a medical waste facility in West Warwick at 1600 Division.
I live in East Greenwich not far from this site.
My concerns are for the possibility of contaminating the ground water, the air quality etc

Forgive me if I do not believe their claims of being safely run, because I am from California, I can still remember in the 90's PG&E claiming what they were doing was safe and yet children and adults got gravely ill and some dies because of contamination of the water supply in San Bernardino County.
It can happen! And by the time it's discovered, people have become sick.

Claudia Iannotti

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Good Morning,
I am sending this email regarding the proposal of a medical waste facility at 1600 Division Rd.
My concern with this being allowed is the high risk for the surrounding area. We have residential areas there, a daycare facility next door and also 2 ponds very close to the property.

What happens if a hauler bringing in medical waste that carries infectious disease waste and that hauler has an accident which allows this infectious waste to escape into the air? I am an East Greenwich resident and I pass by 1600 Division three times a day. There's a lot of wild life in that area as well who can then spread that waste.

I do not understand why such a facility would be allowed in this particular location and want to express my concern to you.

I appreciate your attention in this matter

Claudia Iannotti

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Good Afternoon,

I would like to express concern for the proposal of a medical waste facility in West Warwick at 1600 Division.

I live in East Greenwich not far from this site. My concerns are for the possibility of contaminating the groundwater, the air quality etc.

Forgive me if I do not believe their claims of being safely run, because I am from California, I can still remember in the 90's PG&E claiming what they were doing was safe and yet children and adults got gravely ill and some died because of contamination of the water supply in San Bernardino County. It can happen!

Claudia Iannotti

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
From: cbudshome@aol.com <cbudshome@aol.com>
[EXTERNAL] : Medical Waste Facility

Good Morning,

I am sending this email out of concern for the high risk of allowing a medical waste facility at 1600 Division Rd

My concern is that in the event of a hauler bringing in medical waste that includes infectious disease waste has an accident and that infectious waste escapes.

That building in next door to a daycare, across the street from a college, 2 ponds very close by not to mention the residential neighborhoods.

This also will be using untested technology.
I just believe that such a facility does not belong in that area due to the risks involved

Thank you,

Claudia Iannotti

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See VII. Transportation of Waste Through the Community
Charles Moreau  
charles.moreau@providesch

[EXTERNAL] : Objection to waste treatment plant
I adamantly oppose this treatment plant in our neighborhood. I live at 565 Quaker Lane #83, in West Warwick RI near the EG border and am an opponent of this high-heat technology—pyrolysis, to come into and around our neighborhood.

Medical waste is dangerous and I support denying this company to set up shot around here. I hope the Department of Environmental Management denies this permit.

Sincerely,

Charles Moreau  
401 241-6339

*****This information may be confidential and/or privileged. Use of this information by anyone other than the intended recipient is prohibited. If you received this in error, please inform the sender and remove any record of this message.*****

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Charles Xynellis  cxynellis@aerogel.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application
I want to stop this unproven and dangerous proposal that can poison our children and neighborhoods with overwhelming citizen pushback. It’s a disgrace how this was covered up to sneak this past RI citizens.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Charles Xynellis,
60 Archdale Dr,
Warwick RI
    cxynellis@aerogel.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See X. Adequacy of Public Notice
• See XVI. Buffer Zone
Cheryl Sachs
css1015@gmail.com

[EXTERNAL] : 3/15/21 hearing

Mr. Dennen,

Thank you for the great job you did moderating the hearing today.

Although I did not speak, I did attend, and listened carefully.

I would like to go on record asking DEM to deny the Med Recycling plant from moving ahead. There is so much unknown about the recycling of medical waste that could easily cause great damage to the environment of RI and its people.

Please do what you are entrusted to do. Protect our environment.

Sincerely,

Cheryl Sachs
15 Ann Dr.; East Greenwich, RI 02818

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
Dear Yan, dear Mark,

please consider this another concerned resident disapproving the proposed med recycler facility at Division Street (West Warwick/East Greenwich).

- Where is evidence that their proposed technology works:

1 with medical waste?
2 without air or water pollution?
3 where are the safety protocols?

- Where was the possibility for residents to have a say before March 15th, before DEM was going to approve it?
- Why is it one of the dense population areas (right in front you have a daycare center...they might as well close right now! And you have hundreds of students at NE TECH across the street!)

How can there be more disregard for your neighbors and their health?
And the answer is it was too costly to build a new building somewhere else? Laughable!

The list goes on. I disapprove of this project!

Sincerely,

Christian Roos
6 Brayton Meadow, East Greenwich, RI 02818
708 228 8239 c

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
PLEASE DO NOT bring MedRecycler to our community.

The danger to our health and the health of our community far outweighs ANY financial gain, including creating jobs.

What’s the benefit to creating jobs if the net result is compromising the worker’s health and could lead to death! As was clearly stated during the local hearing, bringing MedRecycler to Rhode Island is certain to have negative ramifications to our health in and around the community. Additionally, the health of the community will deteriorate which will negate any financial gain from bringing MedRecycler to Rhode Island. For example, the value of our real estate will drop significantly because most people do not want to live anywhere near such a facility!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Christina Endicott,
112 Grand View Road,
East GreenwichRI
nina.endicott13@gmail.com
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
From: (Name) From: (Address)
Christina nina.endicott13@gmail.com
To whom it may concern:

PLEASE DO NOT bring Medrecycler to our community.
The danger to our health and the health of our community far outweighs ANY financial gain, including creating jobs. What's the benefit to creating jobs if the net result is compromising the worker's health and could lead to death! As was clearly stated, bringing Medrecycler to Rhode Island is certain to have negative ramifications to our health in and around the community. Additionally, the health of the community will deteriorate which will negate any financial gain from bringing Medrecycler to Rhode Island. For example, the value of our real estate will drop significantly because most people do not want to live anywhere near such a facility!

Further as a member of our community states:

If pyrolysis isn't that much different than incineration, why don't we have the same standards? The article below "Central Landfill Keeps R.I. Incinerator Debate Alive" from March 4, 2015 gives us some history on RI's waste problem. Mr. Campanella constantly boasts his process will "help" our landfill. Some highlights from the article....
• "Currently, state law prohibits RIRRC from owning and operating an incinerator and from even considering it for its comprehensive plan."
• "Kite admitted that incinerators, also called a waste-to-energy facilities, are money losers and require extensive environmental scrutiny."
• "Any incinerator, she presumed, would likely be a small facility that burns a modest volume of the trash material that can't be resused, recycled, repaired or composted."
Yet here we are looking at a facility being proposed to essentially burn medical waste, 70 tons a day, 24 hours a day, 7 days a week from all over New England. WHY bring more waste into RI when we currently have an issue handling what we have???

We urge you NOT to bring Medrecycler to our community or anywhere in our little state of Rhode Island. The risks are simply NOT worth it.
Thank you in advance for NOT compromising our health and the health of our community!

Sincerely,
VERY CONCERNED citizen

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See VI. Bond Funding and Project Financing Issues
I am Christine Berger, I live in East Greenwich, my Rep is Justine Caldwell, and I oppose the MedRecycler proposed plant in West Warwick and request that DEM not extend the solid waste permit to MedRecycler.

On the solid waste permit: There is no guarantee that the medical waste in that plant will be free of contaminants. WHAT exactly is in the SEALED containers that will be brought in by the truckload (up to 70 tons a day) then SHREDDED and HEATED on site. There could be contaminants in the containers. Pyrolysis plants are harmful for the environment if they are not properly designed for the feedstock. Pyrolysis is better suited to homogeneous fuel stock than heterogeneous waste like medical waste and other items that may contaminate the feedstock. There is no guarantee that the waste will be free of contaminants.

Thus, Rhode Island will have no control nor even knowledge of the hazardous waste imported to our towns every day. Why should our Ocean State be a test site for such a potentially dangerous, polluting, untested technology. Also, there is a lack of a buffer zone.

There is no evidence that treating medical waste with pyrolysis is safe for human health and the environment. It is untested. Emissions will leach to the surface water or to the water table, or bioaccumulate in plants and then in animals. Not to mention the dangers posed to those who live work and go to school in properties immediately abutting the proposed facility in West Warwick.

We do not want this type of plant in RI. Please deny the permit.

Christine Berger

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
- See XVI. Buffer Zone
Good Afternoon Ms. Li,

Attached please find a copy of RI Communities for Environmental Awareness’ Formal Objection to the Proposed MedRecycler Facility for review and submission. A copy has also been mailed to the Office of Land Revitalization and Sustainable Materials Management Attn: Yan Li.

Thank you for your attention to this filing.

Best,
Clarice Parsons
Office Manager/ Paralegal
Phone: 401.477.0023
VIA USPS MAIL AND ELECTRONIC MAIL:
RIDEM
Office of Land Revitalization and Sustainable Materials Management 235 Promenade St.
Providence, RI 02908
ATTN: Yan Li
Yan.li@dem.ri.gov
RE: Formal Objections to Proposed MedRecycler Facility
West Warwick, RI
To Whom it May Concern,
This office represents the non-profit organization known as the RI Communities for Environmental Awareness ("CEA") and hereby formally submits its objection to the above referenced project. CEA is comprised of property owners who will be negatively impacted if the proposed project is approved by RIDEM in its current condition.

The MedRecycler Facility ("MedRecycler") poses a great risk to the health and safety of those in its surrounding area. MedRecycler's proposed function is to incinerate used medical waste and other hazardous medical materials. Some materials proposed to be transferred to this facility include hazardous and extremely hazardous materials, including equipment used in the distribution of chemotherapy medications. These materials and the resulting fumes released into the surrounding area have the potential to cause severe health risks and other not-yet studied dangers to the environment and CEA communities.

Before discussing the great risk that this facility possesses to the health of the community, there are several procedural concerns that must be first addressed. The Town of East Greenwich and the New England Institute of Technology have also submitted their objections to this proposed project. We adopt their objections in part. Specifically, CEA asserts that:

RIDEM cannot consider this application until MedRecycler receives a "final determination" from the City of West Warwick in relation to their compliance with "local land use and control ordinances" under RIGL *23-18.9-9(a)(1).

The State Planning Council has not issued a "certification of approval" for the project. Approval is required under RIGL *23-18.9-9(a)(1).

MedRecycler failed to comply with the "alternative technology" standards under 150-RICR-140-15.1.15(F)(4) & (5) for conditional approval. The use of pyrolysis is unproven and conditional approval does not cure this defect. Protection against unknown effects of an untried method of medical waste disposal cannot be provided by conditional approval.

Insufficient Public Comment
The information related to MedRecycler's future "detailed testing protocols" for numerous critical tests necessary for approval is not available for public review during the public comment
period. This fact is fatal under the Rhode Island Waste Disposal Act. RIGL *23-18.9-9 (the "Act"). Section (a)(2)(ii) of that Act mandates that "[t]he draft license and/or tentative denial, including all supporting documentation, shall be made available for public comment." RIGL 523-18.99(a)(2)(ii) (emphasis added).

A primary issue with the Applicant's permit application is the inability for meaningful public review and comment. Since medical waste regulation is left to the state's oversight, the state's decision here should be made only after careful evaluation of all the consequences of such a decision and after adequate procedural opportunities for informed public participation in the decision-making process.

The application process in this case resulted in the absence of adequate procedural opportunities for the CEA to participate in the decision-making process. The draft approval application process here was lengthy, yet several of the Applicant's methodologies were not subject to public review and comment. These methodologies, if made public in a timely manner, would have provided for informed participation by the CEA.

Requiring technical information as a condition after a permit is granted violates the terms of the Act. Any supporting documentation must be supplied during the public comment period. Id. MedRecycler's withholding these documents prevents adequate meaningful public comment. The intent of public notice and comment is to provide information to the general public on a particular issue in such a manner as to provide the public an opportunity for informed public participation in the decision-making process, and to allow for community engagement in discussion with government. The intent behind public review and comment is being eviscerated in this case. MedRecycler's withholding of documents defeats the intent of the public comment period as it limits or completely bars what the public can comment on. Not allowing for public review prevents any meaningful discussion with the community and does not allow for the communities' needs and concerns to be adequately addressed. As a result, RIDEM cannot render a decision on the draft application as adequate public comment is not being provided.

Environmental Harm associated with the Incineration of Medical Waste

The EPA has previously spoken on the incineration of medical waste in the 1988 Medical Waste Tracking Act (expired in 1991). There is particular concern regarding the medical waste associated with chemotherapy drugs. These drugs are handled with a greater standard of care in medical facilities and in packing and transport, than most other drugs, due to their potent nature. Medical waste relating to and in contact with these chemotherapy drugs will be included in the waste intended for incineration. It is expected that all hospitals within 500 miles of the MedRecycler facility will utilize it.

In a March 16, 2020 letter, RIDEM addressed several concerns shared by CEA. RIDEM acknowledged that the subject technology has not been previously permitted or utilized in Rhode Island. Yet, RIDEM is willing to conditionally approve the Pyrolysis Technology if several conditions are met. Major concerns highlighted by the RIDEM in its Notice of
Intent to Approve are "the ability of the system to maintain, at all times, negative pressure and containment such that particles generated by the macerator cannot escape into the environment and do not present a risk of exposure to workers and Emissions and safety protocols are compliant with other RIDEM and West Warwick Fire Department requirements."

It is paramount that these concerns be addressed in a meaningful way prior to issuance of an approval. The issuance of an approval with conditions to address the above elements is not appropriate.

Sincerely,

Marisa A. Desautel, Esq.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
From: (Name) From: (Address)
Colleen Peters colleenpeters@uri.edu

[EXTERNAL] : MedRecycle-RI concerns

Hello,
I would like to express concerns about a medical waste facility being located 2 miles from my home. If such a facility needs to be located in Rhode Island at all, I would think it should be located in an industrial area, such as Quonset, rather than a busy residential area. Not only may this cause traffic issues, but if there is any kind of accident, it will have a huge impact on the surrounding area.

I encourage you to please reconsider the location of such a facility to a less populated, less residential area of Rhode Island.

Thank you,
Colleen
--
Colleen Peters, MBA
Operations Manager
Inner Space Center
University of Rhode Island
Graduate School of Oceanography
Mobile: +1-203-209-3825

Email: colleenpeters@uri.edu <mailto:colleenpeters@my.uri.edu>

Explore With Us: innerspacecenter.org [innerspacecenter.org]
<https://urldefense.com/v3/__http://innerspacecenter.org__;!!KKphUJtCzQ!Yhkn91tcqCk81Wf-dW0FdCV9HUFvSdA8E0gfISKZI-FzujY0xQjxyvoXD6DacsC$>


DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Hello Mark,

Of great concern to me and my neighbors is the hearing today for a license application by Med-Recycler, a medical waste treatment plant. I would say that emissions from such a facility would undoubtedly pose a major health issue to all of the homes and businesses located in this area. Which I might add includes a child care center.

As nearby residents at Taylor Pointe Condominiums I and our neighbors are concerned as to the release of toxic chemicals into the air which is certain to have a negative affect on the air quality and ultimately result in respiratory problems for all in proximity to this facility. Residents close by are already experiencing foul odors not to mention the negative impact to our respiratory system. This is a health nightmare!

Public health should be the main concern for DENYING this license and the responsibility of DEM to protect us.

Thank you for your attention to this matter and please confirm receipt of this email.

Connie Marsocci
Taylor Pointe Condominiums

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
Hello,

DEM is charged with protecting the natural resources and people of Rhode Island. In the matter of the proposed MedRecycler facility in West Warwick the duty of DEM couldn't be more clear.

Science based analysis requires data. There is little to no data on pyrolysis and medical waste, especially at the potential scale MedRecycler is proposing. We cannot be confident that the facility will work the way the applicant states. Therefore it is appropriate to apply more caution, not less.

Scientists also recognize no system is perfect: human error occurs, equipment breaks down, and natural disasters do damage. All of these risk factors demand redundant safety measures to reduce the impact of such a failure that invariably will occur - it is a not a matter of if, but when. The most important safety measure the proposed MedRecycler facility lacks is space; an appropriate buffer from other people. History has shown time and time again that procedures and backup systems will fail. The only failsafe would be more space.

While the proposed technology may be an innovative solution to a difficult problem, it should not be tested in a location that puts at risk so many people, including dozens of children at a nearby daycare facility. An honest assessment of risk and probability would require this facility to be located somewhere with a much larger buffer between it and other residential and commercial space.

Sadly, the "I know a guy" culture of Rhode Island has allowed this project to reach such a late stage without applying this common sense. The residents of East Greenwich and West Warwick now rely on the career scientists at DEM to stand up to political pressure and do the job we-the-people have hired them to do - protect us from environmental hazards.

Thank you for your consideration,

Corie Jacaruso
15 Bassett Circle, East Greenwich RI

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
I would like to express my concerns regarding the proposed Medrecycler, Inc. medical waste incineration site in West Warwick RI.

These types of facilities should not be allowed to establish themselves in residential communities.

The industrial park that Medrecycler is being proposed for is Very residential.

I respectfully request that the RIDEM deny the request by Medrecycler, Inc. to establish a business like this in West Warwick, as well as all of Rhode Island.

This energy has been consistently found to Not be a clean energy source.

The developer claims it is but this technology has been criticized as being inefficient, because it takes so much energy to superheat the waste.

But even more critically, it’s unsafe and should not be introduced anywhere in Rhode Island.

Pyrolysis is used to burn other types of waste in other locations in the US, but medical waste would be a new use and one that should not be tested on Any RI residence.

Deliveries will not be inspected daily at this facility, with medical waste bags going directly into the incinerator unopened.

Thus, there is no way for the community to know what is being sent and incinerated there in order to ensure it’s not radioactive or otherwise harmful.

This is not the kind of development Rhode Island needs, and the people of West Warwick and East Greenwich specifically, are not interested in being guinea pigs for this technology.

Please do not approve this facility in our towns.

I thank you for your attention to this matter and look forward to discussing it further at the Open Comments meeting on March 15th, 2021.

Sincerely - Catherine Costantino
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
I am a board-certified child and adolescent psychiatrist who trained at Brown, currently working in the community, as well as a resident of East Greenwich and mother of three East Greenwich students and I am firmly in opposition to the MedCycler proposal. I am all in favor of safe, green energy in our state, but MedCycler is not conclusively either safe or green. The scientific evidence supporting pyrolysis is completely insufficient. As a specialist in pediatric neurologic and psychiatric development, I feel the MedCycler plant poses a grave risk to the health and well-being of the children in the adjacent daycare as well as the larger neighborhood. Allowing the MedCycler plant to emit unspecified chemicals during regular functioning, as well as the risk should there be a malfunction, could lead to brain damage, endocrine disruption and even cancer in our youngest and most vulnerable children. It is not acceptable to put children’s lives and health at risk in pursuit of profit or ostensible “green energy” endeavors. This would be true in any neighborhood in Rhode Island. I urge you to keep MedCycler from our local and state community.

Sincerely,

Daisy Bassen, MD DFAACAP
East Greenwich, RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Hello my name is Daphne Sherman. I am a registered voter and resident of East Greenwich. I was shocked to read the article that was posted about this medical waste burning near a child care facility on division Street across from new England tech. If we are to move towards energy efficiency, by this means makes no sense to me and I completely oppose it, as does everyone in my household. I’ll definitely do not want such a facility near where I live and breathe.

Sincerely
Daphne Sherman

Sent from my iPad

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Yan Li:

I’m writing to express my opposition to the MedRecycler medical waste plant proposed for West Warwick, RI. The reasons for my opposition:

1. MedRecycler’s proprietary pyrolysis system has not been tested with medical waste. Why would the state of RI put residents of East Greenwich, West Warwick and nearby towns at risk on an unproven technology? We look to state government to protect communities against risky business propositions.

2. Originally, MedRecycler stated that there would be no odor from the plant. Now, they admit there may be some odor and they want to be a good neighbor and provide a system of odor mitigation. This raises concerns as to other issues that will arise if this plant is approved.

3. Based on the scientific literature, there is no proof that this is “green” technology. It appears that term is being used to reap incentives associated with “green” technology.

4. Legally, a facility like this plant requires a buffer zone. This site has no buffer and MedRecycler will share a wall with the business next door. Also at risk is the daycare, school and businesses nearby.

Thank you for your consideration.

Cindy Antonelli
East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
From: David Dias
davidxdiasjr@gmail.com

[EXTERNAL]: Deny MedRecycler’s medical waste treatment application

As a resident of East Greenwich for over 32 years and looking at the possibility of living 1.6 miles from the MedRecycler-RI, proposed site stickiness me! (Literally). The permit in front of DEM needs to be unconditionally rejected. Numerous objections have been submitted, one of the most egregious one is that Lncpyrolysis is a simple type of incineration, with potentially dangerous emissions. Why on Gods earth would DEM, West Warwick and East Greenwich even consider such a horrific business to locate at a location that is obviously not appropriate for our neighborhood, in fact any neighborhood! As a former commissioner of RI. State Fire Board of Appeals and Review, speaking for myself I have grave concern of the possibility of fire at the site. Possible smoke from a fire containing harmful emissions is not acceptable to the families in this danger zone. If this is such a great opportunity, then why the owner of MedRecycler who lives in NJ want it in R.I.D.E.M. I implore you please do what is right reject this now. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit.

The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

David Dias,
170 Lynn Cir,
east greenwichRI
davidxdiasjr@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See III. Plans Not Being Submitted for Public Review: A. Contingency Plans
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Dear Ms. Li:

We would like to express our deep concerns regarding the proposed Medrecycler, Inc. medical waste incineration site in West Warwick RI. These types of facilities should not be allowed to establish themselves in residential communities or in close proximity to other establishments, such as schools, doctors offices, grocery stores, pharmacies, and other businesses.

The industrial park that Medrecycler is being proposed for is both very residential and very close to many other retail businesses and establishments as listed above.

We respectfully request that the RIDEM deny the request by Medrecycler, Inc. to establish a business like this in West Warwick, as well as all of Rhode Island.

This energy has been consistently found to NOT be a clean energy source. The developer claims it is but this technology has been criticized as being inefficient, because it takes so much energy to superheat the waste.

But even more critically, it’s unsafe and should not be introduced anywhere in Rhode Island.

Pyrolysis is used to burn other types of waste in other locations in the US, but medical waste would be a new use and one that should not be tested on any RI residence. Deliveries will not be inspected daily at this facility, with medical waste bags going directly into the incinerator unopened.

Thus, there is no way for the community to know what is being sent and incinerated there in order to ensure it’s not radioactive or otherwise harmful.

This is not the kind of development Rhode Island needs, and the people of West Warwick and East Greenwich specifically, are not interested in being guinea pigs for this technology.

In addition, increased traffic and potential accidents with trucks containing these materials may occur, as well as extremely undesirable odors.

Please do not approve this facility in our towns.

We thank you for your attention to this matter and look forward to discussing it further at the Open Comments meeting on March 15th, 2021.

Sincerely - Davina & Kevin Villeneuve
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XIX Odor Issues
Good Morning,

My name is Dawn Munroe. My fiancee John Troutman and I are owners of our condominium who reside in Greenwich Estates in West Warwick.

We understand there is discussion about bringing a medical waste facility within a few miles of our residence. I am writing to express my concerns and against this proposal.

There are potential hazards of the current use of our water supply specifically because the location does not have an appropriate buffer zone to separate it from neighboring residential areas. That is inadvertently dangerous to the health residents of the area. Trucks transporting tons of hazardous waste from other states with the contents of medical waste to our area is cause for concern for unknown hazardous potential to all of us. Rhode Island should not be utilized as the guinea pig for this type of facility as a 1st within the United States. As my research has shown there is no comparable facility within the USA.

Please take my objection into account and with all seriousness as RI residents who are at the most effected by the outcome.
Thank you for your time and attention to this matter.

Respectfully Submitted
Dawn Munroe and John Troutman

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk and B. Hazardous Waste Transportation Requirements
Dear Ms. Li,

I ask you to please hear the public and their unanimous plea to not approve a medical waste center in a place that is not a completely industrial area. There are neighborhoods of children as well as a daycare in close proximity to this proposed facility. In addition this method of ridding medical waste has not been tested and proven to be completely safe.

I would not want to be on the committee to make such decisions but I will say that it will be a heavy weight to bear if this procedure is EVER found to be harmful especially after 2 communities came together to plea for a rejection. I sincerely hope that you spent the time reading every single email with the resident’s many concerns. Thank you for your time.

Deanna Sheridan
Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
As a physician in the community I am very concerned about the health impacts of using “pyrolysis” to effectively incinerate medical waste so close to so many residential locations and businesses. The technology is new and largely untested for this purpose and certainly at this magnitude. The health and safety impacts of this are potentially disastrous and unspeakable, and it is inappropriate for this company to be building a facility like this with no buffer zone where it can put so many people at risk. Please, protect the health and welfare of our community.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RI-140-15-1), Rhode Island solid waste regulations (250-RI-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Debra Goldman,
65 Watch Hill Dr,
East Greenwich RI
debra_goldman@hotmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
Denise Lopez
denisealopez35@gmail.com

Good Afternoon,

"A relatively untested technology that cooks medical waste to generate electricity is proposed for a local office and warehouse building." As an East Greenwich resident this is NOT something I want close to my home. I'm writing in advance of today's informational session to share our community's growing concern regarding the Medrecycler facility being proposed for 1600 Division Road. There is a petition with over 1,400 signatures from East Greenwich, West Warwick residents and beyond as awareness continues to grow....


WHY make the residents of East Greenwich and West Warwick be part of this experiment? This facility is near our homes not to mention a day care facility, NE Tech, East Greenwich Golf Course and ANY spill could have a major impact on traffic on Division Road. Medrecycler's flow chart is oversimplified and as stated by Kevin Budris, attorney at from CLF, Zero Waste Project, "There is a well-documented history of gasifiers and pyrolyzers generating dioxins. Same with thermal oxidizers. There is no safe way to burn waste. And turning waste into fuel, then burning that fuel = burning waste."

From another article..... “Despite claims of low health risks, local environmentalists have aggressively fought waste-to-energy facilities, such as incinerators or gasification plants. In 2018, a large coalition of opponents defeated a biomass incinerator proposed for Johnston. Last year, they killed a bill that would have allowed the state to build a gasification plant in Johnston.” A bill was already stopped to build a gasification plant in Johnston .. why is this suddenly considered safe to set up here?

"10+ trucks a day carrying medical waste full of unknowns." There is no way to test the local impact of this. I as well as many others will be listening in.

Thanks in advance for your consideration of our concerns,
Denise Lopez

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See VIII. Hazardous Waste versus Medical Waste: B. Hazardous Waste Transportation Requirements
I have left voicemails but haven't heard back..... I had a few questions regarding the approval process for Medrecyler ..... Testing - in your 2/5/21 info doc it was mentioned that "RIDEM determined that the currently proposed testing protocols are insufficiently detailed at this time." Have you received any additional testing documents to date?

11/13/19 - "The most recent submitted package failed to that in a number of instances." 6/16/2020 - "There are significant issues that either have not been addressed or were not provided in the previous submittals."

for 11/13/19 & 6/16/2020 - please provide Medrecyler's response in the public docs.

In your 3/16/2020 letter you mention "remaining concerns that need to be addressed, specifically, that shredding untreated medical waste may aerosolize pathogens that could negatively impact the health of the workers and the community at large." Why allow conditional testing to be performed in this location if you are unsure of environmental impact as well as the health and safety of those around the facility? This is NOT a stand alone building. There are 70 employees alone in the business next door.

Thanks in advance for your assistance as I'd appreciate a quick reply on the above this week.
Best Regards,
Denise Lopez

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Thank you, I will check.

One other piece we discussed this morning is in the Medrecycler application on page 47, next to 7. WASTE STORAGE it clearly states... "No medical waste is stored at the Medrecycler- RI Inc Division Road RI facility." The RIDEM Notice of Intent to Approve Doc has on page 3, point 8. "At any time, no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite."

Can you explain this?

Thanks in advance,
Denise

DEPARTMENT RESPONSE:
- See V. Issues Related to Storage of Waste
[EXTERNAL] : 3/15 Comment Summary and One Last (hopefully) Public Comment
Denise Lopez <denisealopez35@gmail.com>

Mark/Yan,
Attached please find a summary of my public comment on 3/15. I jumped around a bit to meet the time allotment as many of my concerns had already been addressed by others or the attorney's comments.

Why would Rhode Island add MedRecycler's yearly 20,881 tons of carbon dioxide to the planet’s greenhouse gas threat when it just passed the 2021 Act on Climate [webserver.rilin.state.ri.us] which sets specific greenhouse gas reduction goals? CO2 makes up 81% of the greenhouse gas/global warming problem, per the US EPA.

The Act's purpose is to safeguard our economy, public health, and natural environment. “The bill establishes guidelines for more aggressive emission reduction policies and calls for a net-zero Ocean State by 2050. It also amends the 2014 Resilient Rhode Island Act by providing updated and enforceable timelines for emissions standards, as well as emphasizing transparency and accountability.”

Multiple reasons have been given to deny a solid waste permit for Medrecycler-RI ..... no buffer zone - 70 employees on one side, I95 on the other missing State approvals incomplete testing protocols (Note : as part of due process shouldn't they have been available for public review as part of the public comment process?) inconsistent information from Medrecycler application to DEM approval notice (no storage vs storage) bringing additional medical waste via I95 and in an accident prone area inconsistent with The Act on Climate goals insufficient RIDEM resources to provide necessary oversight In addition, concerns regarding DEM's public comment hearing continue to be raised. Over 50 people , we know of , tried to get in and were not permitted or bumped out and could not regain access.

I'm also hoping that the high heat bill that was recently heard by the Environmental House Committee and soon to be heard in the Senate moves forward to prevent any community in RI from going through what we're dealing with now.

We have a beautiful state, please deny this permit to help protect the health and environment of the surrounding communities.
Thank you,
Denise Lopez

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See VII. Transportation of Waste Through the Community
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See III. Plans Not Submitted for Public Review

[facebook.com]
Good afternoon, my name is Denise Lopez and I am an East Greenwich resident, but today I come to speak as a resident of Kent County and the voice of those who are unable to come and speak today but have shared their concerns with me day in and day out. I have spent the past year following the Medrecycler project and objectively learning more in order to provide facts to the community on what is being proposed. Quite frankly, the more I have learned, the more concerned I have become that the project has gotten this far for such a congested area in the middle of Kent County.

As stated in a Science Direct article, “a pyrolysis plant for self sustaining energy from waste is thermodynamically unproven, practically implausible and even environmentally unsound.” Yet, Medrecycler claims their process is safe, even green, but it has never tested the system with medical waste to date, only in simulation.

Pyrolysis is not that different from incineration, both methods use high heat and produce ash, char and air pollutants including mercury and lead. I have heard from many families impacted by Cancer thanking me for my efforts as the last thing RI needs is additional dioxins that will increase our risks statewide. While I could go on for hours, the focus tonight is on the solid waste permit, so I will concentrate my comments on the issues I found when reading the solid waste permit application.

First, when reviewing Section 1.14 of the medical waste regulations under Title 250 of the RI Code of Regulations, Chapter 140, Subchapter 15 part 1 Section 5 regarding Approval of Alternative Technologies specifically states under a. The Director shall not grant approval for the use of any other combination of treatment, destruction, and/or disposal technologies, unless and until such technologies are proven on the basis of thorough test to several terms including be protective with respect to total impact on the environment Ensure the health, safety and welfare of both facility employees and the general public.

In DEM’s letter from March 16, 2020 states, “with respect to 3 and 4, The Office of Waste Management has remaining concerns that need to be addressed, specifically that shredding untreated medical waste may aerosolize pathogens that could negatively impact the health of the workers and the community at large.”
They also go on to say that “this technology has not previously been permitted or utilized in RI “. This is a key piece of information for this location that I will address later.

Secondly, it is alarming the number of flags that appear when I did a general oversight of the Rules and Regulations for Solid Waste Management and Organic Waste Management Facilities under Title 250 of the RI Code of Regulations, Chapter 140, Subchapter 5 Part 1

While this is alternative technology, I would guess it would still need to be in the guidelines for general safety of a solid waste permit including…

Section 1.6 Prohibitions
Odors: A Solid Waste Management Facility or Organic Waste Recycling Facility, whether licensed or unlicensed, shall not emit or cause to be emitted into the atmosphere any air contaminant or combination of air contaminants which creates an objectionable odor beyond the property line of said facility. Odor evaluations shall be conducted by Department personnel to determine if an odor is objectionable by taking into account its nature, concentration, location, duration, and source.

Specifically in

- Section 18. Odor Control Problem
  - What off site alternate medical waste treatment facility has been determined for processing trucks with offensive odors?
  - If such a facility has not been identified, how is it permissible to be as stated in the application “processed immediately “ on site.

(Note, my feedback is in red for the next few items)

- Low Level Radioactive Waste: The disposal of low level radioactive waste at an Organic Waste Recycling Facility or Solid Waste Management Facility is prohibited. All low level radioactive waste must be managed in accordance with 216-RICR-40-20-1, General Provisions and Standards for Protection Against Radiation. I believe they will take this in and it is stated in the application. Page 47 of the application states that “should radioactive material be detected, the container is labeled as radioactive and temporarily placed away from employees. In most cases it will decay to an acceptable background limit and may be processed as regulated medical waste.”

1.9 General Operating Standards
1. General: The facility shall be designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility. If you don’t know something is safe, it should NOT be tested close to operating businesses or residential areas.

P. Buffer Zones: The facility shall be required to maintain a buffer zone area that serves to mitigate nuisance impacts such as dust, litter, odor, and noise from the
facility to human activities. The buffer zone must be an area of undeveloped vegetated land retained in its natural undisturbed condition, or created to resemble a naturally occurring vegetated area, or approved equal, that is not used for any facility operations. The buffer zone may be utilized for vegetated drainage controls such as swales or storage ponds. There is NO buffer between Medrecycler and business next door. The loading dock for neighboring business (M-F Athletic) receives 6-8 truckloads daily.

Moving on to general comments about the application and documents submitted by Medrecycler.....

In 2/5/2021 DEM Fact Sheet it is stated, “RIDEM determined that the currently proposed testing protocols are insufficiently detailed at this time. Therefore, permit conditions have been included to require additional details of the testing protocol, department approval and oversight prior to testing.”

It’s a bit surprising that over 2 years into this process they are STILL not able to provide DEM with sufficient info, yet the public is expected to be the guinea pigs for the environmental impact of their process.

Specific discrepancies in the DEM application, dated July 28, 2020 include:

Volume and Storage Questions:
Why does the DEM Notice of Intent to Approve say that Medrecycler - RI can STORE medical waste when the application states that waste will NOT be stored on site?

Why does the DEM Notice of Intent to Approve say that Medrecycler - RI "no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite"? This is quite a disparity from what the public is being told.

The original intent, based on planning board minutes, was for 4 delivery trucks a day "generally in the morning" or as stated in DEM info session "scheduled by appointment". The application states this facility will operate 24 hours a day, seven days a week. Will trucks be delivering materials all day or is there a set window? Will someone be on site to have 24 hour monitoring?

Location:
The application is clearly still referencing the original Johnston site as noted in Population and Service Area. Shouldn't this be updated in the application?

Employee Manual:
Has DEM gotten a more comprehensive employee manual to date? The one provided is from a company called Environmental Health Concepts. I was just curious how this company represents itself as an Employee Manual for Medrecycler, is it a sample of a business they're working with or just one provided in the absence of them not having one themselves?

MONARCH WASTE - COMPARISON SITE IN NEW MEXICO
Per a conversation I had with someone in San Fe regarding the Monarch site:
"I am sorry you are still fighting this fight and I hope that you are able to get what you need to protect the people and land in your community. In our area residents who lived nearby complained of the smell being so bad they avoided walking their dogs or going for jogs outside. I am also adding some notes I took from public meetings that I shared with my community that may be helpful to follow up with or share with the advocacy group you are working with. Hope this helps, keep up the good fight!"

"Monarch recently moved operations out of my homelands due to restrictions we placed on not processing human or non human body parts last year and it no longer being financially lucrative. The facility was near a residential area and neighbors said the smell was horrible and couldn’t even walk their pets outside anymore. I lived far enough away to where I didn’t smell it. My concerns were around what the EPA deemed safe amounts of things like arsenic. They also didn’t do a full environmental impact assessment, so no information on how it would impact ground water only air emissions. I would advocate for a full environmental impact assessment.

It’s completely gone over here, no longer in operation thankfully. While I think it’s important that we find ways to dispose of waste safely I’m not understanding why these facilities need to be near homes and communities and near areas that are deemed “disposable”-largely near communities of color/Indian reservations. I don’t know what the demographics look like in your area but in my case it was environmental racism and there is a long history of ‘sacrifice zones’ where nuclear waste was dumped uranium mining occurred. I’d definitely be concerned with the “let’s try it and then test it” method.”

Note: I sent correspondence on 3/29 confirming that Monarch had closed.

In closing, going back to the DEM Alternative Technologies Regulations stated above,

b. Notwithstanding the provisions of § 1.15(F)(5)(a) of this Part, the Director may deny any application for just cause within the scope and intent of these regulations.

Especially in this age of COVID, considering the relatively new and unique use of Pyrolysis for the disposal of Medical Waste, I would question whether or not RI DEM even has the ability / expertise to thoroughly and safely evaluate the proposed project. It is certainly new territory for DEM and an alternative use of this technology that will set precedent for the State.

This company and I’m sure many others will come to RI as many are looking for states that offer industrial bond funding for self identified green initiatives. WE ARE URGING DEM TO DO THEIR JOB AND PROVIDE THE SCRUTINY AND OVERSIGHT OF THIS APPLICATION AND PROTECT THE ONES YOU SERVE.
DEPARTMENT RESPONSE:

- The commenter correctly notes that the application lists the population and service area as that around Johnston instead of East Greenwich. Firstly, given the fact that this is a regional analysis, the distance between the two is very small. More importantly, although this is relevant for a market analysis, such analysis is not relevant to the Department’s role.
- We have not received any additional employee manuals to date.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIII. Concerns Regarding Radioactive Waste
- See VII. Transportation of Waste Through the Community
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See V. Issues Related to Storage of Waste
- See XV. Rejected Waste Shipments
- See also XIX Odor Issues
From: (Name) From: (Address)
Denise Lopez  denisealopez35@gmail.com
[EXTERNAL] : Greenaction comments on Medrecycler
Solid Waste Application
Mark/ Yan,

Down to the wire... another community member and I reached out to Greenaction as they are a high level grassroots organization fighting for health and environmental justice. Bradley Angel, the Executive Director got back to us with his feedback on the Medrecyler-RI application tonight. Please see the attached document to be included as part of public comment.

Thank you ,
Denise
Greenaction for Health and Environmental Justice Comments on permit application of MedRecycler-RI, Inc., 1600 Division Road West Warwick, Rhode Island

Greenaction for Health and Environmental Justice submits these comments at the request of local residents living near the proposed medical waste pyrolysis facility. We urge denial of a permit for a facility to treat regulated medical waste up to 70 tons/day by using pyrolysis.

After reviewing the claims of the company, and based on our experience investigating and monitoring similar facilities and proposed facilities worldwide, we have serious concerns about potential emissions and the potential harmful impact on public health and the environment. At best, pyrolysis is an unproven technology and there is insufficient information to prove it is safe and acceptable for this location and permit application.

Rhode Island DEM “Fact Sheet” Concerns:

The “Fact Sheet” produced by the Rhode Island Department of Environmental Management Office of Land Revitalization and Sustainable Materials Management (Rhode Island DEPARTMENT OF ENVIRONMENTAL MANAGEMENT, OFFICE OF LAND REVITALIZATION & SUSTAINABLE MATERIALS MANAGEMENT, February 5, 2021) has some accurate, and some inaccurate information that must be corrected before the public comment period expires.

DEM “Fact Sheet” incorrectly claims that pyrolysis “…differs from incineration in that the heating is done in an anoxic (without oxygen) environment.

The reason this DEM claim is not correct is that oxygen is present in some of the waste materials fed into the pyrolysis chamber. This is very relevant to the issue of the types of emissions that will occur.

DEM “Fact Sheet” confirms facility and technology would use burning in the waste treatment process:

The DEM “Fact Sheet” says: “Pyrolysis is similar to incineration in that they both use high heat to break down organic materials such as cloth and plastic. It differs from incineration in that the heating is done in an anoxic (without oxygen) environment. The
process produces a flammable gas that is then burned in the presence of oxygen to produce electricity.”

Despite the claims that pyrolysis is not incineration, DEM’s own “fact sheet” admits the process involves burning = also known as incineration. Many environmental health advocates and experts on incineration technologies (including Greenaction and the Global Alliance on Incinerator Alternatives) refer to pyrolysis and similar gasification technologies as two-staged incinerators. As DEM points out, in the first stage the waste is heated, and then the resulting gases are then burned. This is clearly incineration, no matter how much the proponents attempt to disguise it as something different.

**Concern about DEM “Fact Sheet” section entitled: “What waste products will be produced?”**

The DEM “Fact Sheet” states the following:
“The application is for a process that produces the following wastes:
Flammable gas (syngas) that will be burned to generate electricity.
Solid ash-like material will need to be disposed of in accordance with RI Regulations.
A flammable tar to be used to heat the vitrification system.”

Here again, above, DEM admits the process includes “burning” yet claims elsewhere in the fact sheet that this is not incineration – which it is.

The application should describe more clearly the content and toxicity of the “solid ash-like material” and what would be the potential impacts from its disposal on the community and environment near the disposal site (which is not mentioned).

DEM’s #3 refers to a “flammable tar to be used to heat the vitrification system.”

The above sentence referring to a flammable tar is again indication that the process includes flames (burning/incineration).

**Testing Protocols and Premature Proposed Permit Issuance Concerns:**

The DEM “Fact Sheet” states: “Also, RIDEM determined that the currently proposed testing protocols are insufficiently detailed at this time. Therefore, permit conditions have been included to require additional details of the testing protocol, Department approval, and oversight prior to testing.”

The above statement is a tremendous concern as it is improper to plan to issue a permit for this type of facility without knowing the testing protocols and evaluating them. In fact, the public has the right to evaluate them during this public comment period, but if they do not exist, there can be no DEM or public review.

**Waste Storage Concerns:**
We encourage scrutiny of the plans for storage of the medical waste, as there will be potential issues of noxious odors, exposure to pathogens and other infectious materials.

DEM’s “Fact Sheet” states that no more than 25 trailers of waste could be stored on site. That is an enormous amount of trailers and waste to store at this location, and poses risk of leaks, serious odors, break-ins, and contamination. Many medical waste facilities are known to have had odor issues, and allowing large scale storage onsite is a problem and concern.

**Truck Traffic and Emissions Concerns:**
A full and realistic assessment of truck traffic is very important, not only for analyzing truck traffic going to and from the facility. Diesel trucks emit harmful toxic and particulate emissions that can cause asthma, cancer and other health problems.

**Location Concerns:**
A key concern is the proximity of the facility to homes. As we believe this facility would potentially emit hazardous and criteria pollutants into the air, it should not be located anywhere near homes, schools, day care, health care institutions or similar sensitive receptors.

**Comments on “Application for Pyrolysis and Energy Production Medical Solid Waste Treatment Facility”**

The company’s application cover letter states in part: “On January 29, 2019 Medrecycler-RI, Inc., seeks a permit to construct and temporarily operate a Pyrolysis and Energy Production System utilizing Medical Waste as the primary source of feed stock.”

**Concern about “feed stock.”**

As can be seen from this description, the company refers to Medical Waste as the primary source of feed stock but does not clearly divulge the other feed stock they intend to use. If something is described as primary, clearly that means there will be other types of feed stock. What are they?

**Concern about the facilities referred to as models/similar plants are not similar:**


As is clearly obvious, none of these are medical waste facilities. A slaughterhouse feedstock is completely different from medical waste, as is wood.

**Concern about Permit Applicant’s Lack of Experience:**
The permit application states: “This will be the first waste to energy project for Medrecycler-RI. Medrecycler-RI relevant project experience is mainly related to alternative energy especially Solar Energy.”

As this company has no apparent experience in the field of medical waste to energy, additional scrutiny needs to be conducted with an extended public comment period which we request.

**Permit application admits this is a thermal process, contradicting claims that this is not incineration which is precisely a two-stage thermal process**

The application states: “Overall process takes medical waste (MW), received by a transporting company, and thermally processes it in a pyrolysis system operating at 800°C - 900°C (1,472°F - 2,165°F). Organic matter from the MW is evaporated forming a syngas that can directly be used as a fuel source for electrical generating engines… All gasses are sent to a Thermal Oxidizer where they are conditioned for release to atmosphere via a stack at a temperature….”

The application goes on to state: “Once a syngas was established within the variations described, the next step was to combust those available compounds through the Engine, Vitrifier and Thermal Oxidizer…”

Once again, the application itself contradicts DEM’s claim that this is not incineration. The application says the technology will “combust” – i.e. incineration.

As can be seen from the application itself, this is a combustion, incineration process. Stage 1 involves thermal processing of medical waste, and Stage 2 involves Thermal Oxidation which is an incineration process. Once again, this contradicts claims that this process and facility would not use incineration, as it clearly would.

**Request for extension of public comment period:**

Due to the complexities of the technology, the fact that the project proponent has no experience in the field, and the seriously misleading claims that this facility would not use incineration when it clearly would use what they admit is “combustion” and “burning” and “thermal processes,” DEM should reopen the public comment period and do so only after the inaccuracies and misleading statements are corrected so the project can be properly evaluated by all concerned parties.

Thank you for considering our comments. Please provide a response to comments.

Respectfully submitted,

Bradley Angel, Executive Director
DEPARTMENT RESPONSE:

- The commenter objected to the Department’s fact sheet. Specifically, where the Department pointed out the similarities and differences between pyrolysis and incineration that the commenter claims are identical and request the fact sheet be revised and the public hearing be negated. The Department’s definitions were worded using standard engineering definitions, state and federal regulations and sound scientific principles. They were written in an objective manner that neither favors nor opposes its use. The alternate language suggested inserts opinions and is not appropriate in a fact sheet.

- The commenter notes that syngas and tars will both be burned after pyrolysis. Therefore he considers this “two-stage incineration”. This is a matter of semantics only. The Department regulations clearly define pyrolysis and the burning of fuels and the application is evaluated using the definitions in those regulations and their related statutes.

- The commenter notes that diesel trucks will be used to deliver the waste and diesel trucks are known to create air emissions. While this is true, it is also true for virtually every other commercial/industrial facility in Rhode Island, and to deny the permit on that basis is arbitrary and capricious.

- See III. Plans Not Submitted for Public Review

- See I. Issues Related to the Department’s Role in the Permitting Process

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process

- See V. Issues Related to Storage of Waste


- See VIII. Hazardous Waste Versus Medical Waste

- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Thank you Mark. Just to confirm, this is not the final testing protocol, just what they initially gave you, correct?

And thank you for looking into the other docs as the public would like to review prior to public comment.

As I mentioned there are MANY conditions that are not being met with regards to safety for a solid waste permit but I can certainly save those for public comment. I know you don’t have authorization for the location but as DEM is charged with looking out for the welfare of the environment and community, it is very concerning that you would even consider testing a new technology in a building that is not stand alone and is in a congested area.

Regards,

Denise

Sent from my iPhone

DEPARTMENT RESPONSE:
- See III. Plans Not Submitted for Public Review: Biological Testing Protocols
From: (Name) From: (Address)
Dennis Tosoni dt48@hotmail.com

[EXTERNAL] : Med-recycling plant at 1600 Division Road.

To whom it may concern:

I am a resident in the area this plant is going to be placed. I know it is new technology and I have educated myself on pyrolysis. Even though it burns at extremely high temperatures and is deemed to be safe, I question its use. Anything that is burned has by-products, gas, smoke and possibly dioxins that are released into the atmosphere. This is predominately a residential area. We have schools, a college and daycare all abutting this property. I feel that this is a detriment to every resident in the area. I find it hard to believe that another area, better suited to the intended use cannot be found. I would like you to know that we are very much against this recycling plant being allowed to locate in this area. The risk is far too high. You cannot guarantee the safety of all involved and the project should be located elsewhere. I hope you will see the wisdom of this request and deny this plant its approval.

Sincerely,

Dennis J. Tosoni JD

East Greenwich Resident

Sent from Mail [go.microsoft.com]
<https://urldefense.com/v3/__https://go.microsoft.com/fwlink/?LinkId=550986__;!!KKphUJtCzQ!aQVhsyxj63Nb0dTfHzw853ZArIDqZJSIs38SAFDc9iuwf5gh9I3o63PPX9vICq>$ for Windows 10

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Devorah devorah.brumberger@gmail.com
[EXTERNAL] : Med-Recycler - PLEASE SAY NO!
Yan Li,

Please make note that as a resident of East Greenwich, I am vehemently opposed to this untested behemoth moving next to a residential neighborhood in our town. It shouldn't even be in our STATE. Don't make us the guinea pigs!

Devorah Brumberger
97 2nd St, East Greenwich, RI 02818

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
[EXTERNAL] : I oppose the Medical Waste Plant
To Whom it May Concern,

I am a resident of East Greenwich and I am writing to voice my utter opposition to the medical waste plant planned for West Warwick. I don't believe there is enough research and evidence to prove the safety of the material that is planned to be burned. I have no interest in Rhode Islanders being the guinea pigs for this technology. It is painfully obvious that these are unchartered waters and I do not want this operating anywhere near our community.

Sincerely,
Devorah Brumberger
97 2nd Street
EG, RI.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms. Li

I am writing to voice my opposition of any permits being granted to Med Recycler – RI. As you are aware Med Recycler plans to use pyrolysis to dispose of medical waste. Pyrolysis is a process which uses extreme heat, in this case to disintegrate medical waste (blood, prescription drugs etc.). This process is virtually untested with medical waste. The residential community which surrounds this industrial permitted area should not be the guinea pigs to such new untested technology. The Conservative Law Foundation noted “emissions for pyrolysis contain cancer causing compounds. The ash consists of dioxins, mercury and heavy metals pollutants that can make their way into waterways and drinking water supplies.” See EcoRI News “Proposed West Warwick medical waste processing plant would serve New England” by Tim Faulkner 2/24/20.

In New Mexico, where a similar but smaller scale facility exists, or perhaps existed as we are learning they may no longer be in existence, complaints describe how the “sniff” test tells us the stuff is in the air. We smell it all the time.” This is in spite the facility meeting regulations regarding emissions. See Los Alamos Reporter (12/8/2019) “Nambe Tribal member raises concerns about monarch’s medical waste facility” by Marie O’Neill. How can DEM even consider approving a permit without proper testing being done. My understanding is DEM has indicated that since this is the first facility of its kind using this process it is difficult if not impossible to test. Thorough testing is required by law and should not be overlooked simply because it is difficult or even because it is impossible. Without actual tests performed so that DEM knows exactly the impact it will have such permit should not be approved.

I heard on the public comments that the project will create jobs and tax revenue. While jobs and tax revenue are important, they pale in comparison to the health and welfare of the citizens who live and work in the area. Personally, I do not believe that this technology should be placed anywhere in RI, however, if DEM chooses to gamble on this technology it should be in an area far away from residences and commercial businesses where, when all the problems being forecast about this project become a reality, the damages can be mitigated. Please do not gamble with the health and well-being of RI’s current and future citizens and deny the requested permits.

Thank you for your time and consideration.

Diane Daigle
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XI. Monarch Pyrolysis Facility in New Mexico
Diane Scott <ibcdds@cox.net>
March 14, 2021
Rhode Island Department of Environmental Management
Attention: Yan Li
Office of Land Revitalization and Sustainable Materials Management 235 Promenade Street, Providence, RI 02908
Re: Deny Permits for MedRecycler Facility
Dear Ms. Li:

As residents of East Greenwich, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick.

Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA 2017) is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day.

Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. Given the two daycare centers and a college in close proximity to the proposed site, it is shocking that a facility emitting lead alone would be allowed to operate nearby. Additionally, with residential neighborhoods surrounding the site, we are especially concerned about the health effects of dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm -- and the potential for radioactive waste to come to the facility (www.epa.gov/dioxin).

During DEM’s January 25, 2021, Public Informational Workshop on Facility’s License Application, project developer Nicholas Campanella admitted that he intends to expand the facility to accept medical waste from throughout the northeast; he said that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste. Those of us who live in East Greenwich, including several neighborhoods that would be directly impacted by emissions from this facility, feel particularly disenfranchised by this ostensibly democratic process. Given that the facility’s driveway and access roads are actually in East Greenwich, as Rep. Justine Caldwell has stated, East Greenwich “will have the emissions ... and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. The residents of West Warwick and East Greenwich do not consent to our children, our families, and our neighborhoods being used as guinea pigs for an untested technology, which could cause unknown harm. What happens if there is a malfunction, an accident, a fire, or unpredictably harmful emissions from this plant? How do you reverse that damage? Once the children at the two nearby daycares are exposed to lead
from the MedRecycler facility, how do you undo that harm? The answer is: it is impossible. Therefore, DEM should err on the side of caution to protect human health and the environment.

“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action.”


The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely distinguishable from a medical waste incinerator with a greenwashed name, and medical waste incinerators are notoriously toxic, polluting facilities that are inconsistent with residential communities. This is the definition of regulated medical waste:

- Pathological waste. Tissues, organs, body parts, and body fluids removed during surgery and autopsy.
- Cultures and stocks of infectious agents (microbiological waste). Specimens from medical and pathology laboratories. Includes culture dishes and devices used to transfer, inoculate, and mix. Also includes discarded live and attenuated vaccines.
- Contaminated sharps. Contaminated hypodermic needles, syringes, scalpel blades, Pasteur pipettes, and broken glass.
- Isolation waste. Generated by hospitalized patients isolated to protect others from communicable disease.
- Contaminated animal carcasses, body parts and bedding. From animals intentionally exposed to pathogens in research, biologicals production, or in vivo pharmaceuticals testing. Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to import to this site. On the same January 25 call, Mr. Campanella admitted that he plans to start by processing 70 tons of medical waste/day, but he chose this site partly because he can expand in the same building to accept up to 140 tons/day. Industrial facilities are as imperfect and fallible as the humans who manage them. They malfunction, have accidents and do not always perform as planned. With the predicted volumes of hazardous waste, even small accidents can have a big impact on the surrounding community. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who live and work near or downwind of this site.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar.

Furthermore, we want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Zooming out from the local perspective to a statewide, national, and even global view, the facts are clear that our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future. In fact, Rhode Island is in the midst of debating whether to strengthen our greenhouse gas emission limits with the new Act on Climate bill, currently pending in the legislature. In her recent State of the State address, Governor Raimondo said, “Rhode Islanders can be proud that we are the state leading the nation in the fight against climate change.”
Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering our comments. We look forward to the March 15 public hearing on this matter.

Sincerely,

Mark F. Scott, MD and Diane D. Scott
110 Sanctuary Drive
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello -

I am writing to register my concern and opposition to the proposed medical waste facility on Division Rd in West Warwick.

It is my understanding that the technology to be used, pyrolysis, is both untested and potentially unsafe. Pyrolysis is in fact incineration in disguise and will emit harmful toxins into the air and water. The machinery to be used will also create noise that will be disruptive to nearby residents and childcare facilities. Furthermore, it is unclear how the RI Department of Environmental Management could issue a permit for a facility of this nature without a public hearing.

Please reconsider allowing this facility to operate in Rhode Island. There are far too many unknowns concerning the use of this technology and no clear benefits to the State in having it here.

Sincerely,

Diane C. Vendetti
West Warwick, RI

DEPARTMENT RESPONSE:

- The commenter asserts, correctly, that a permit of this nature cannot be issued without a public hearing. A public hearing was held on March 15, 2021.
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process
I am writing as a resident of East Greenwich, a registered nurse, a mother, daughter, sister and overall advocate for humans. I am opposed to the accepting and approving the application by Medrecyclers Inc. onto 1600 Division St, West Warwick. Besides the fact that we have not been ensured about emergency/disaster plans, testing plans or other safety measures surrounding our neighborhoods, the toxins produced by the gases are outright deadly. According to an article written regarding pyrolysis products, in the journal of Mutation Research/Genetic Toxicology and Environmental Mutagenesis, April 26, 1999 pages 29-41. “In general, the effects were most pronounced with liver pyrolysate. In all test systems, a clear dose relationship could be established. In conclusion, we were able to prove that the particulate fraction of laser pyrolysis aerosols originating from biologic tissue undoubtedly have to be classified as cytogenic, genotoxic, clastogenic, and mutagenic. Therefore, they could be potential health hazards for humans”. In all, resulting in CANCER. This alternate technology has not been proven to be safe and we already know that byproducts like heavy metals when ingested or inhaled cause severe medical problems. Just take a look at Flint, Michigan and they were drinking water. While the technology may appear like a game changer in keeping medical waste out of landfills and incinerators, we would be creating another health implication problem in years to come. I propose we do our homework and look at the data regarding the health effects of this technology in the UK, Santa Fe, Mexico (Monarch technologies), and army bases where pyrolysis has been used. Until then, NO to the medical waste facility!

Best regards,

Ana M Dickenson BSN, RN
Nursing Care Management, C.G.S.

Pronouns: she/her/hers (what’s this? [assets2.hrc.org])

Program Manager Care Coordination, Center for Primary Care & Specialties
245 Chapman St, Suite 300, Providence, RI 02905
401-606-6315p
401-444-4445f

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DEPARTMENT RESPONSE:
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process
Hello

I wanted to write to you regarding the MedRecycle-RI that is planning on moving within 2 miles of the condominiums at Greenwich Estates in West Warwick.

At first look this company seems to be a great solution to managing waste but I’m very concerned about the potential hazard that it will pose to our community due to its proximity to our homes, businesses, and schools.

A facility like this which has never been used to process medical waste of this magnitude does not belong in our community. We don’t know the impact that it will have on the air that we breathe and the water we drink, not to mention the noise pollution that a facility of this magnitude will create.

I urge you to reconsider allowing this company to use our town and our state as their test site.

Thank you for your time
Sincerely
Didem Kokturk

--

Didem Kokturk Fine Art

DEPARTMENT RESPONSE:

- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process
Good Evening,

As a resident of Kent County, where the MedRecycler pyrolysis (gasification) plant is being considered for plastic medical waste, I would like to voice my objection. The reasons why this facility should not be considered are as follows:

1. We should be encouraging a movement away from plastics-reduction/elimination of plastics is the goal.
2. The result of this plant will be harmful emissions from the combusted fuel it generates.
3. Waste products generated will be filled with the worst toxins.
4. The emissions profile from the synthetic fuels generated is worse than emissions from fracked gas, diesel and gasoline.
5. Gasification costs more than twice the capital costs of wind and solar.
6. Our focus should be on composting and recycling.

Thank you for considering my views! It is my hope that Rhode Islanders can count on you to make the safest and most environmentally sound choice for all living beings by preventing MedRecycler from operating in West Warwick or any other part of our state.

Doris Poisson
131 Capron Farm Drive
Warwick, RI

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
I am writing to you as an extremely concerned resident of East Greenwich with regards to the upcoming proposal for the Medrecycler medical waste processing plant. According to the NIH, pyrolysis has strong environmental disadvantages: "Combustible gases raise major security concerns and require reliable control equipment."

Pollutants like NOx, SO2, char, tar, ash, etc. need to be removed."

In addition, per the NIH there are "rare studies directly investigate the effect of thermal plasma on pathogen destruction."

None of this untested potentially harmful technology has been tested and allowing such a facility to operate in a crowded residential area is irresponsible. There is also little regulation and screening of the actual waste being delivered to the facility, causing the potential for more harm to the surrounding environment and people who live here. If this technology were that efficient and "green" then there would be facilities being built all across the country and that is just not the case. If it is that safe why isn't the parent company who is located in New Jersey building their facility in their own state.

With so much unknown about using pyrolysis for medical waste and so much potential to cause the surrounding area and people in it to have potential toxic exposures seems beyond unnecessary to take these risks. And while I understand that traffic does not pertain to DEM matters, increased large tractor trailers delivering to the facility will increase air pollution.

I would like it to be known as a resident of East Greenwich who lives near the proposed facility site I adamantly oppose it due to the potential harm to the environment and my health.

Sincerely,

Dora Clark, Meadowbrook Rd., East Greenwich

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
Please deny the permit for the proposed MedRecycler Facility on Division Street in West Warwick. This location is in the midst of a fairly concentrated residential area close to the Big River Reservoir and just upwind of the more concentrated residential neighborhoods of Warwick, Cranston, and Providence. The prevailing winds will take the unknown and untested emissions towards that densely populated area. Medical Waste often contains chemicals used for chemo which makes for really nasty emissions. Do everybody a favor and reject this please. Thanks for reading my very concerned rant. Doug Tingle

Sent from Mail [go.microsoft.com] for Windows 10

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Mr. Dennen,

I am opposed to the MedRecyclerRI plan, system, and facility for the following reasons:

1. U.S. regulations prohibit pharmaceuticals from entering a medical waste incinerator.

2. In 2019 a regulatory body of the FDA prevented human exposure from human body waste chemicals, including those used for chemotherapy.

3. These chemicals can cause birth defects and miscarriages.

4. If the proposed facility and plan are approved pharmaceuticals, including human bodily waste secretion chemicals, will be exploding into our air infecting the air we breathe, our soil, our drinking water, our rivers, and our bay.

5. RI DEM already recognizes and regulates hazardous waste including chemotherapy drugs and bodily secretions of these dangerous chemicals.

6. The proposed system does not eliminate these hazardous chemicals.

The proposed plan, system, and facility are unsafe and approval should be denied.

Sincerely,

Donald Yeoman

DEPARTMENT RESPONSE:
- See VIII. Hazardous Waste Versus Medical Waste
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear RI DEM,

After listening to the public forum for West Warwick/East Greenwich and the proposed MedRecycler project, we felt compelled to reach out to your office. We were disappointed to learn that DEM would consider granting approval to a project that will, so obviously, damage the health and safety of our community. We moved to East Greenwich to start a family in a place with healthy air qualities and clean groundwater. The MedRecycler project would destroy both overnight. Should this sound alarmist, I urge you to speak with the many experts opposed to this project. Kevin Budris, with the Conservation Law Foundation, has science to support the fact that burning medical waste is not a source of green energy.

Our own State House is also making strides towards striking medical waste burning as an option for the Ocean State,

Bridget Valverde is an excellent source for these details. Looking into the details proposed by MedRecycler to DEM- they have NO SPILL PLAN, meaning they have no idea how or plan to clean up a problem. They state that they will burn 70 tons of medical waste a day, 24 hours a day. The fact that MedRecycler has rebranded "incinerator" to "pyrolysis" is semantics.

Gases and vapors will be expelled into our air and these noxious fumes will be contaminated with known carcinogens that we will first breathe, then consume in our drinking water and through the plants we eat that are watered by this pollution.

Wastewater generated from their process will be diverted into our systems where it will contaminate our coastlines, beaches, and their delicate ecosystems. This is a huge health and environmental step backward in a time where we have the capabilities and ethical compass to move our local environment in a clean and efficient direction. This is the exact opposite of being the 'good neighbor" that MedRecycler proposes to be.

We understand that Rhode Island places an important emphasis on business and economic health. Through this lens of creating 40 jobs, it may be tempting to view the MedRecycler project as a positive thing for the state. Keeping in mind that the parent company Sun Pacific Holding Corp, LLC, has never been solvent, and is reliant upon $17.5m in bonds from Commerce RI, let's also look at the long term impact of the pollution that this plant will create:

-1600 Division Road (the address for MedRecycler) is a shared office park. The existing tenants currently employ over 100 Rhode Islanders. They will all be forced to relocate (possibly out of the state) to a location where their employees are safe from the hazardous air and water pollution of their neighbors.
Groundwater will become polluted in East Greenwich, and flow south to the rest of the state and into the Bay. The majority of drinking water in East Greenwich homes is through well water systems.

Now the air and water quality becomes so undesirable in East Greenwich, that people move away.

This exodus floods the real estate market, driving prices down, then the town struggles to find people willing to live in a polluted environment and tax assessments nose dive. The school's tank. Small businesses flee.

Where East Greenwich was once a jewel in the Rhode Island ecosystem of skilled workers, residents, small business, thriving Main St economy, and a great school system; we now have a polluted backwater where you can't give away homes and wouldn't eat a thing grown in the soil.

Please think this through and give the situation the gravity it deserves. Please DENY solid waste permits and any further permits to your office from MedRecycler (or SunTrust Holdings, LLC). It is really a life-and-death decision for our town.

Sincerely,
Donna & Joel Evans

DEPARTMENT RESPONSE:

- See VI. Bond Funding and Project Financing Issues
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Come on. Would you let your mother, your wife or your best friend live next to this place? If no, than look for alternatives.

We’ve just begun to fight!!!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Donna Hutchinson,
12 Enfield Avenue,
North KingstownRI
fairwindsri@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Dear Sir/Madam:

I am writing to register my concern regarding the proposed Med Recycler site for 1600 Division Rd.

This facility is very close to the residential area where many live and the homes here are on well water.

Not to mention that there is a daycare directly across from the building. Are these children not important enough to the “Town” which is to keep its residents safe!!

I believe that West Warwick has a VERY important responsibility here to safeguard not only its residents but the surrounding communities as well. I certainly hope that the town council takes this responsibility seriously in light of the recent viral outbreak.

This should never have been taken this far without notifying all Local residents!! Just like the Casino Deal – residents were notified by mail, and the Water Park, notification was sent to the People.

WHERE were the notifications on a potential health danger of allowing a medical waste facility!! To learn of this through Facebook is appalling to say the least.

WE ARE PLEADING WITH THE DEM.......

PLEASE DO NOT ALLOW THIS IN OUR NEIGHBORHOOD!!

WOULD YOU LIKE THIS IN YOUR BACKYARD??

Sincerely,

The Lucier Family

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See X. Adequacy of Public Notice
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

This permit should be denied for the simple fact that there is no buffer zone at all. They are sharing a building with 70 employees on the other side of the wall. Second point of denial should be no previous proof of business activity in order to determine the safety of the process.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Douglas Victor
doug.crimewatch@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

We must protect our beloved Rhode Island from accepting waste from other states to be treated here. It is imperative that we build a solid, environmental-friendly and equitable solutions. Frist West Warwick, Next the Port of Providence. No more! The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Douglas Victor,
103 Princeton Avenue,
ProvidenceRI
doug.crimewatch@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Dear Ms. Li,
As a retired Rhode Island school nurse teacher and a resident of North Kingstown, I am requesting that DEM not issue a permit allowing a medical recycling facility in West Warwick. As well as having inconsistencies in its application, MedRecycler is using untested technology to incinerate biohazards and plastics. Pyrolysis releases air pollutants detrimental to the health of Rhode Island citizens. Our children and future generations of Rhode Islanders should not have to suffer the health consequences of us trucking hazardous medical waste into our environment for a questionable means of disposal.

Thank you for your attention to this urgent matter.

Kathleen Bennett, RN
96 Seawynds Drive
North Kingstown, RI.

Sent from my iPad

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
As residents of East Greenwich we want to go on record that we are absolutely opposed to the approval of the MedRecycler project proposed to be located at 1600 Division Road. For a variety of reasons, we believe this type of business has no place in a residential community located in close proximity to homes, restaurants, daycare centers and other local businesses. Thanks for your consideration.

Joseph and Lisa Dymek

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
From Ellen McGill

Dear Mr/Ms Li:

I am writing to you and DEM to protest the construction of this pyrolysis plant in W. Warwick. Given the hazards of this process I have no idea why DEM would give the project even preliminary approval.

Pyrolysis is an unproven process for recycling hazardous medical waste and there are far too many unknowns. The potentially toxic emissions could affect Rhode Island’s air, soil, and water and prove hazardous to human health.

My other concerns are the noise and heavy truck traffic that would further clog the roads in this already high-trafficked area.

Finally, the man promoting this project is simply a business person interested in profit. He has zero experience with pyrolysis or with the operation of such a plant.

The potential for 20 jobs is not worth the risks involved. RI DEM should fulfill its responsibility to protect the people and the environment of this State and decline to approve the MedRecycler plant.

Yours truly,
Ellen McGill
354 Old Boston Neck Rd. Apt. 3
Saunderstown, RI 02874

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See VII. Transportation of Waste Through the Community
Please see attached comment letter.

Ellen Ullucci  
Legal Assistant, Civil Division  
The State of Rhode Island | Office of the Attorney General  
150 South Main Street | Providence, RI – 02903  
150 South Main Street | Providence, RI – 02903  
150 South Main Street | Providence, RI – 02903  
Office: +1 401 274 4400 | Ext:2252  
eullucci@riag.ri.gov | www.riag.ri.gov
April 14, 2021

Via Electronic Mail
RI Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
Attention: Yan Li
235 Promenade Street Providence, RI 02908
yan.li@dem.ri.gov

RE: Medical Waste Management Facility License Application
Medrecycler-RI, Inc – 1600 Division Road, West Warwick

Dear Yan Li,

Please accept this letter addressing the numerous procedural and substantive concerns regarding Medrecycler-RI, Inc.’s (“MRI”) application to operate a medical waste pyrolysis facility in West Warwick, RI. Given the novelty of the technology proposed by the above-referenced applicant, strict adherence to all applicable statutory and regulatory requirements and robust public participation in the entire decision-making process is required. For the reasons stated below, the Office of the Attorney General respectfully requests the Rhode Island Department of Environmental Management (“RIDEM”) to stay its review of MRI’s application until the proper technology analysis is conducted and all required certifications are obtained pursuant to the Refuse Disposal Act and its implementing Medical Waste regulations. R.I.G.L. § 23-18.9-1 et seq; 250RICR-140-15-1 et seq.

The regulatory process required to build this first-of-its-kind medical waste facility is intended to be robust due to the inherent health and safety risks involved in processing and disposing of potentially infectious waste, especially when adjacent to residential communities. Further, while the applicant has proffered that pyrolysis involves different technology than traditional incineration, there are still many unknowns. Unmitigated, pyrolysis has the potential to emit many of the same toxic and noxious pollutants that necessitated the phase out of medical waste incinerators nationwide. Accordingly, in order to protect the health and safety of Rhode Island and its citizens, it is imperative that the State’s regulatory review hold MRI’s application to the most stringent applicable standards. To date, they have not been held to those standards.
The Technology has not been Thoroughly Tested

The Medical Waste Regulations expressly provide that certain technologies are allowed under state law to process medical waste - mainly incineration, chemical disinfection, and steam sterilization. See 250-RICR-140-15-1.15. However, as pyrolysis is not included in these allowable technologies, the proposed use of a pyrolysis process triggers the “Alternative Technologies” regulatory analysis, which provides in pertinent part:

5. Approval of Alternative Technologies:

a. The Director shall not grant approval for the use of any other combination of treatment, destruction and/or disposal technologies, unless and until such technologies are proven, on the basis of thorough tests to:

Completely and reliably inactivate Geobacillus stearothermophilus spores or Bacillus atrophaeus spores at a 4 Log\textsubscript{10} reduction or greater; and

Completely and reliably inactivate vegetative bacteria, fungi, viruses, parasites, and mycobacteria at a 6 Log\textsubscript{10} reduction or greater [this requirement is applicable to technologies not based on thermal and chemical treatment]; and,

Be protective with respect to total impact on the environment; and,

Ensure the health, safety and welfare of both facility employees and the general public; and,

Ensure that the total weight and/or volume of the end product of the alternative technology does not exceed the total weight and/or volume of the regulated medical waste prior to treatment and/or destruction. Testing must also demonstrate that inactivation is uniform and within containers reasonably likely to be treated in the system.

250-RICR-140-15-1.15(F) \textit{(emphasis added)}. These regulations intend to ensure that alternative technologies be proven safe and effective by \textit{thorough testing} before RIDEM can approve a medical waste facility. Here, the technology has never been utilized or tested for the kind and amount of waste proposed. Instead, the purported destruction efficiencies, emissions, and overall safety of the Facility has been based on modeling and estimations. These are not equivalents of, nor substitutes for, the \textit{thorough testing} required for Alternative Technologies.

The Application Lacks Necessary State Planning and Municipal Zoning Approvals

Further, the Refuse Disposal statute provides that the application for a Medical Waste Facility permit must be submitted \textit{simultaneously} with a “certificate of final
determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances or on appeal a final judgment of a court that the proposed site for the facility conforms with all applicable land use and control ordinances of the municipality” and a “certificate of approval of the proposed site issued by the state planning council.” R.I.G.L. § 23-18.9-9(a)(1); see also R.I.G.L. § 23-18.9-8 (providing that “[t]he director shall have full power to make all rules and regulations establishing standards to be met for the issuance of [solid waste management facility licenses] with those standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities.” The statute also requires that “[t]he council shall only approve a site after evaluation of alternative sites and assessment of comparative environmental impact at the sites in accordance with law and state planning council rules, and in the absence of these, the council shall promulgate rules for the evaluation and/or assessment, and distribution of location of sites for waste facilities among the regions of this state.” Id.

No such municipality nor state planning council certification has been sought, let alone approved, for this proposed Facility. Importantly, had MRI sought these necessary certifications, it would have provided other opportunities for public input and may have impacted the substance of MRI’s application or even the location of the site. The failure to adhere to these requirements, which are intended to ensure adequate oversight and consideration of potential environmental and health impacts, blatantly disregards the Refuse Disposal Act and its implementing Medical Waste Regulations, circumvents key aspects of the public review process, and frustrates review of this application.

The Minor Source Permit should have included Public Notice and Comment and Made Publicly Available

Last/Finally, the Attorney General wants to take this opportunity to comment on the minor source air permit issued to MRI by RIDEM on May 7, 2020, recognizing it is outside the scope of the medical waste facility license at issue. While minor source permits do not require public notice and comment, RIDEM has clear discretion to do so if the circumstances so require. However, despite the novelty of the technology, the absence of testing data, and the potential risks the emissions pose to the surrounding communities, RIDEM has unfortunately refrained from exercising that discretion here. The Attorney General encourages RIDEM to, at the very least, make the approved minor source air permit for this facility available on RIDEM’s website, provide the public with more information about the air control technology approved by RIDEM for use by this applicant and explain how and why RIDEM was able to conclude that this technology is adequate and appropriate given the lack of stack testing. The Attorney general also recommends that when reviewing air permit applications for such untested and unproven technologies in the future, RIDEM consider utilizing its discretion to involve the public more dynamically.

While the unknowns of the proposed Facility should not necessarily preclude a project solely because it is first-of-its-kind, the novelty of this proposal merits close scrutiny and
strict adherence to relevant regulations. Further, the public should have been provided ample and meaningful opportunities to comment and question RIDEM’s consideration of the technology at each stage, including the minor source permitting process, to ensure that all of the unknowns are being adequately considered, planned for, and addressed in a manner that satisfies the expressed concerns. This transparency is key to holding the State accountable for how air quality is protected and how potentially infectious waste is managed in our state.

Accordingly, the Attorney General respectfully requests that RIDEM instruct MRI to resubmit its application for the medical waste facility after it has received the requisite certifications and then proceed to review MRI’s revised application under the Alternative Technologies analysis. Only then, and after thorough testing, should this application be submitted for public comment.

This Attorney General appreciates RIDEM’s attention to this matter.

Respectfully submitted,
Attorney General
Peter F. Neronha

By his attorney

Alison B. Hoffman
Alison B. Hoffman
SAAG, Environment & Energy Unit
cc: Susan Forcier, Senior Legal Counsel, RIDEM

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permits
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
To place a project with an unproven process of incinerating medical waste in the middle of a densely populated area and have residents become test subjects is morally corrupt. This proposal should be denied and the health of Rhode Island and its residents prioritized. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.
This is the official letter from the Environment Council of Rhode Island opposing the granting of a permit for the proposed facility in West Warwick. Please see the attached letter. Greg Gerritt Administrator Environment Council of Rhode Island

Environment Council RI <environmentcouncil@earthlink.net>

To: Rhode Island Department of Environmental Management
Public comments on proposed pyrolysis facility in West Warwick

The Environment Council of Rhode Island, a coalition of more than 60 environmental organizations in Rhode Island, strongly opposes the permitting of MedRecycler's plans for a pyrolysis facility in West Warwick, which would gasify plastics and medical waste and burn the gases produced to generate electricity.

Pyrolysis is another name for waste incineration, even with the minor change of using heat to gasify the plastic and burn the gas rather than burn the waste plastic directly. Like incineration, a practice that is harmful to the environment, pyrolysis has flue gas emissions of toxic and carcinogenic compounds and greenhouse gases. Additionally, Pyrolysis leaves behind toxic residues that are hazardous in nature and must be disposed of according as hazardous waste. Pyrolysis therefore contributes to local and regional air pollution. The plant would produce dioxins, lead, mercury, and furans. These substances are known carcinogens and nerve toxins and have no known safe level of exposure. This facility would be a hazard to the people who live and work "downwind" depending on the prevailing weather. It is within a 10-15 mile radius to the Scituate Reservoir, Town of East Greenwich, Goddard Park, Cranston, Warwick and Jamestown.

Pyrolysis and other incineration plants often claim they are renewable energy in order to seem less harmful to the environment or to leverage state incentive programs directed at supporting renewable energy development. But there is nothing clean or renewable about pyrolysis: just like any fossil fuel power plant, pyrolysis plants generate electricity from petrochemicals. They emit greenhouse gases that damage the climate and would hurt Rhode Island’s chances at meeting state climate goals.

ECRI has long supported the ban on incineration of waste in Rhode Island and opposed all previous efforts to bring pyrolysis to the state. The technologies have proven to be overly expensive and continue to pollute. As a form of incineration, once they are in production they require a continuous feeding of these materials and release toxins all day every day, as well as increasing the amount of waste imported to Rhode Island. Therefore, the Environment Council of Rhode Island opposes the permitting of the proposed MedRecycler facility in West Warwick Rhode Island.

Respectfully
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Using unproven technology to reintroduce a disposal practice that was discontinued over 20 years is not a good idea. Don't let RI be a guinea pig for this supposedly clean technology. They should be able to reliably show that this process will be safe, effective, and not release harmful toxins like dioxin into our atmosphere. Please deny their current application, because it's better to require them to be rigorously factual and provide a proven safe technology, than it is to let them move forward and have to worry about cleaning up and reversing damage if it occurs.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Eric Listenfelt,
388 Vose St Unit 3,
Woonsocket RI
eric.list84@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
Dear Mark Dennen,

As a pediatrician and Rhode Island resident, I am writing to express my concern and opposition to MedRecycler’s proposal for a medical waste facility in West Warwick, RI. A treatment plant that uses extreme heat to decompose medical waste while releasing toxins does not belong in close proximity to commercial and residential neighborhoods. The long-term impacts of its toxic byproducts on the health of employees and surrounding communities are unknown and alarming.

Despite safety claims, in my own research, I have come across reports of toxic emissions from pyrolysis. In a report by Health Care Without Harm (HCWH)[1], using heat to break down medical waste “releases into the air a wide variety of pollutants including dioxins and furans, metals (such as lead, mercury, cadmium), particulate matter, acid gases (hydrogen chloride and sulfur dioxide), carbon monoxide, and nitrogen oxides. These emissions have serious adverse consequences on worker safety, public health and the environment. Dioxins, for example, have been linked to cancer, immune system disorders, diabetes, birth defects, and other health effects.” Pyrolysis may have less emission than conventional medical-waste incinerators, however based on the HCWH report, it still emits dioxins which has been linked to serious health issues including cancer. In a study by Czajczynska et al, the pyrolysis of a variety of waste from plastics to food products produced many pollutants, such as sulphurous compounds, heavy metals, nitrogen compounds…. highly toxic HCl (hydrogen chloride)… some chlorinated hydrocarbons that can be precursors of toxic compounds, etc.” The authors in this study specifically note that the pyrolysis of polyvinyl chloride (PVC) can “pose a threat to the environment and humans, because highly toxic HCl is released. … Moreover, some chlorinated hydrocarbons can also be generated during pyrolysis, and they can be precursors of toxic compounds such as polychlorinated dibenzodioxins (PCDD), dibenzofurans (PCDF) and polychlorobiphenyls (PCB), when combusted.” [2] Medical waste contains a significantly higher plastic content than typical solid waste, and PVC plastic accounts for a large proportion as it is found in common medical waste such as transfusion bags and tubing and urine sample collectors.

Some may argue that the amount of toxins released in pyrolysis is “minimal”. However, constant exposure to environmental toxins, even at low levels, can lead to irreversible damage to the health and development of individuals. There are many well-known examples of this, including the impact of chronic low-level lead exposure on a child’s cognitive development; asbestos on malignant mesothelioma; air pollutants on cardiovascular disease; and more.[3] MedRecycler wants to bring 70 tons of medical waste daily and potentially operate day and night, releasing its toxins to a daycare,
student dormitories, and neighborhoods of families and children less than a mile away. No level is a safe level especially when the toxic exposure is constant!

Although I am a proponent of finding alternate fuel sources and slowing climate change, a medical-waste treatment plant like this does not belong near any residential community. Its true impacts on the health of workers and community members are unknown.

Please reject MedRecycler’s application for a waste treatment plant at 1600 Division Road in West Warwick.

Respectfully,

Erica Chung, MD


DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi Mark,

I tried to log onto the DEM hearing yesterday but got an error message that the meeting was full. I would have appreciated the opportunity to hear all of the arguments made, and to support those opposing Medrecycler, which I firmly believe should not be allowed to open due to the overwhelming scientific evidence against it. Will there be another meeting scheduled or some other follow-up for the public?

Best,
Erica Weinschenk

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See IX. Limitations on Attendees at Public Hearing
Yan, Mark, and Janet,

Thank you for taking the time to read my message. I wanted to share my strong opposition to MedRecycler's medical waste treatment application, and hope that you act in time to stop MedRecycler from becoming a reality in our community. As an East Greenwich resident and a mother of a 1-year-old with a family history of allergies and asthma, I am especially concerned about the resulting air quality in the West Warwick/East Greenwich area should the plant go live.

There are a number of holes in MedRecycler's application. For instance, Monarch Waste Technologies was cited as a comparable use by MedRecycler, but they were NOT approved for pyrolysis and medical waste in a February 2020 decision by the EPA, which said their petition did not "provide specific information about the control equipment installed, nor [did it] provide sufficient other information required for a petition under 40 CFR 60.56c(j)." It is not sound for MedRecycler to test its unproven technology in our community, while it points to a failed plant as its shining example.

MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public. Their pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity. Is that the kind of gamble you're looking to approve in our community?

Please deny their application before any damage can be inflicted and it becomes too late.

Best,
Erica Weinschenk

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See XI. Monarch Pyrolysis Facility in New Mexico
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Hello,

I am very concerned regarding the proposed Med Recycler site at 1600 Division Road in West Warwick.

I live just a few miles down the road from this site, and I'm extremely concerned about the environmental impact on the community's air and water. This proposed facility plans to take in "anatomical waste, animal waste, contaminated animal carcasses, body parts and bedding, cultures and stocks, human blood and blood products, pathological waste, prescription drugs, spill cleanup material mixtures, and syringes." A facility such as this with a limited track record should not be in such close proximity to residential areas, particularly those that rely on well water and would be deeply impacted by any potential catastrophes in how that waste is managed.

Please decline Med Recycler's petition and keep that land contaminant-free.

Best,
Erica Weinschenk

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: (Name) From: (Address)
ERICA lawtonerica@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I am strongly opposed to MedRecycler’s medical waste treatment application, and hope that you act in time to stop MedRecycler from becoming a reality in our community. As a mother of a 1-year-old with a family history of allergies and asthma, I am especially concerned about the resulting air quality in the West Warwick/East Greenwich area should the plant go live.

Monarch Waste Technologies was cited as a comparable use by MedRecycler, but they were NOT approved for pyrolysis and medical waste in a February 2020 decision by the EPA, which said their petition did not "provide specific information about the control equipment installed, nor [did it] provide sufficient other information required for a petition under 40 CFR 60.56c(j)."

It is not sound for MedRecycler to test its unproven technology in our community, while it points to a failed plant as its shining example. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

ERICA WEINSCHENK,
25 LARCH RD,
E GreenwichRI
lawtonerica@gmail.com
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XI. Monarch Pyrolysis Facility in New Mexico
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
Dear Yan Li,

I am David Wang, a resident of East Greenwich, Rhode Island. Even though I currently work and study in Massachusetts, I lived 15 years in East Greenwich and regularly visit family living there. I would like to thank the Department of Environmental Management for providing this period for comments on the proposed MedRecycler site at 1600 Division Road in West Warwick. I have reviewed, to the best of my abilities, the materials provided by DEM, including the MedRecycler-RI, Inc. Factsheet, the Pyrolysis and Energy Production Medical Solid Waste Treatment Facility/Application, and the recorded comments during the public hearing held online on March 18, 2021. While I acknowledge that I do not personally have experience in the fields of neither medical waste disposal nor waste-to-energy plants, I have reviewed materials in those areas to the best of my abilities and have conversed with those whom I am acquainted with who have expertise in these areas.

I do not have a fundamental objection to the idea of a medical waste facility; rather, just the opposite. The current pandemic has shown us the scale of the medical waste problem and the need for effective ways to deal with it. The argument that Medrecycler makes in terms of sanitizing and reducing solid waste volume to reduce the burden on landfills. However, I have serious concerns about this proposal as it currently stands.

My comment is concerned with the following four areas. First, the transport of medical waste to and storage of said waste in the proposed facility. Second, the lack of elaboration regarding the combustion of the intermediate product syngas with the ostensible purpose of electrical production. Third, the impacts on surrounding communities. Fourth, concerns over the inconsistent numbers MedRecycler has advertised for the project's outcomes.

**Concern 1: Transport and storage of medical waste**

My first concern is the handling of medical waste in and to the proposed facility. The first part is the transportation of the waste to the site. As far as I can tell from the application materials, there is no plans for communication between producers of medical waste and MedRecycler as to the content of the waste. This is concerning for two reasons. First, without prior notification as to the contents of each trailer's content, it may be impossible to determine that containers do not contain "unacceptable wastes" as defined by the document "Medrecycler-RI, Inc. Division Road Pyrolysis and Energy Production, Medical Waste Treatment Facility Operating Plan" [sic] section 5, since the "waste will... be placed into the hopper whole and unopened" ("Facility Operating Plan", section 33) (emphasis mine). There is also no mechanism described to monitor the performance and compliance of such hauliers. I would like Medrecycler to formulate plans to monitor the content of deliveries to their facilities, as well as developing mechanisms to audit their transportation partners.

The second part of this concern is the disposal of the slag resulting from the processes some of which may be "on the floor" of the building site ("Facility Operating Plan" section 19). There is no plan that I can find as to how to discard this slag. The section that would contain this plan, section 26 of the "Facility Operating Plan", is scant. In full, the description is "Medrecycler-RI, Inc sends the treated waste products to facilities permitted to accept such waste." This is woefully insufficient for a plan. Medrecycler needs to identify and make arrangements in advance with such facilities. Additionally, Medrecycler asserts that this slag is inert. I find this hard to believe. There will doubtless be chemicals or heavy metals in the slag from medical products. Without
proper disposal practices, these chemicals and heavy metals can and will leach into groundwater and waterways. This is especially concerning since the facility abuts one of the tributaries to Fry Brook and many of the residential properties near the facility on Division Road rely on well water. I would like to see Medrecycler submit plans to handle and dispose of slag and other solid wastes.

The third part of this concern is the storage and use of natural gas or liquid petroleum gas (LPG) to boost thermal drying. There is no mention of how natural gas or LPG will be stored in the facility. There is also no indication in Section 8 of "Expedited Permit Information", "Monitoring Devices", to monitor and control the flow of natural gas/LPG, and shut off supply when not required. There is also no contingency plan in the event of a fire, neither internally nor filed with neither the West Warwick Fire Department nor the East Greenwich Fire Department. I would like Medrecycler to document their practices and file appropriate contingency plans with fire authorities.

**Concern 2: Syngas electricity production**

My second concern is the combustion of the flue gas from pyrolysis to generate electricity. The first part of this concern is the assertion by Medrecycler that the electricity will produce "clean energy" "in an environmentally friendly way" ("Medrecycler Overview Flyer"). While Medrecycler details that pyrolysis emits very little in harmful emissions (Table 5), there is still no way to support the Medrecycler representatives' assertion that the plant does not incinerate medical waste. While I agree with the representatives that pyrolysis itself is not incineration, **pyrolysis and then combustion of flue gases is incineration, just with extra steps.** The proposed process using medical waste is analogous to coking of coal and burning of the resulting coal gas, which is incineration. This is a fundamental flaw within this proposal and cannot be remedied.

The second part of this concern is the, in my opinion, inadequate assessment and tabulation of stack emissions. As described in the "Expedited Permit Information", while there is a cascade of 3 scrubbers between the pyrolysis chamber and the engine, there is apparently no scrubber between the engine, "thermal oxidizer" (combustion chamber), and the stack. Medrecycler claims that there would be only around one part per billion of nitric oxide (NO) and a similar amount of nitrogen dioxide (NO₂). Since the combustion chamber will apparently be performing complete combustion, as Medrecycler has indicated that there will be no methane (CH₄) emitted from the stack, it is inconceivable that there would be no additional nitrogen oxides (NOₓ) created during combustion. We learned in our high school environmental science class that all combustion creates NOₓ, and that more complete combustion increases the amount of NOₓ produced. As there is no scrubber within the stack, these NOₓ will be emitted directly to the atmosphere. NOₓ contributes to ground-level smog or "Los Angeles smog". The presence of NOₓ in the atmosphere results in a brownish haze that exacerbates respiratory problems. In addition, nitrogen oxides react with water in the atmosphere to create nitric and nitrous acid, which are components of acid rain. I would like to see Medrecycler add scrubbers within their stack to reduce the concentration of NOₓ into the atmosphere.

The third part of this concern is more of a comment, and more technical. This plant will be producing electricity equivalent to a large wind turbine. However, one difference with this plant is that humans can control when the syngas generators run, but humans cannot yet control when the wind blows. It seems that Medrecycler plans to run the plant at a continuous, constant load throughout the day. However, the supply and demand for electricity is not constant. Demand for electricity peaks in the late afternoon or early evening, while electricity production from renewable sources currently peaks at midday due to solar. This means that load-balancing "ramp
plants" need to compensate for the increasingly larger gap between baseline supply and demand at dusk. Ramping power plants are problematic because they are often fed by fossil fuels to keep up with demand, and tend to be more polluting than baseline plants as they cannot run at full efficiency. As it currently stands, Medrecycler would be increasing the baseline supply of electricity, which would result in "wasted" electricity at night when demand is low, and would not mitigate the need for such ramp plants. My proposal is this: could Medrecycler limit their production of electricity at night, reducing the amount of excess energy pumped onto the grid, and instead shift that capacity to the afternoon and evening hours when it is more in demand? This would mitigate the need for ramping plants and reduce noise effects on surrounding communities. In addition, it should reduce greenhouse gas emissions. My back-of-the-envelope calculation suggests that this plant should emit only 20% of an equivalent natural gas plant, which would be a significant reduction even if not running at optimal efficiency.

**Concern 3: The surrounding community**
The site at 1600 Division Road is already occupied by a building. A current occupant of that building is M-F Athletic, a sports equipment company. M-F Athletic is a beloved institution. Their products were used on a daily basis by me and my teammates on the East Greenwich cross country and track teams. Without their equipment, I surely would not have developed my love of running and exercise.

Sentimentally, it is hard for me to accept that MF Athletic will be next door to the facility we are discussing in this comment period. The solicitor for the company, Jerry Petros, commented in the public hearing that the workers at M-F Athletic will be separated from the pyrolysis facility by only 1/2 inch of wallboard. This is woefully inadequate protection from the noise pollution and potential leaks that come with such a plant. I would hate to see M-F Athletic forced from their current location and budding athletes losing access to their wonderful resources because of the operation of Medrecycler's facility.

This brings me to my larger point. The applicants and DEM appear to believe that, since this building will be housed in an existing structure, some parts of the environmental review process can be skipped. I argue that this is the wrong conclusion to make. The fact that this building exists is a sign that the plant will be operating in a built-up area, with many households living nearby. They will suffer the impacts of this facility, which in my opinion has not been adequately assessed by the minimal amount of review presented so far. In addition, a new structure can be built to the state-of-the-art, mitigating many of the impacts I described above. On the other hand, it may be impossible to remedy such problems in an existing structure. To this end, I call on the DEM to conduct a full environmental review. Additionally, I would like to see a plan to retrofit the building with soundproof materials to attenuate the noise pollution from the generators, and ventilation systems to evacuate the building of any leaks, should they occur.

**Concern 4: Inconsistencies in application**

My fourth concern, though less substantive with the proposal itself, is indicative of the carelessness with which this application was prepared. They are the numerous inconsistencies in claims and grammatical errors in the submitted materials. I shall proceed to list some of the more egregious inconsistencies.

In the "Medrecycler Overview", on the web page, Medrecycler claims that "the facility will create approximately 20-30 permanent jobs for local residents once complete," while the PDF flyer linked to on the same page claims "The facility will create approximately 40 permanent jobs for local residents once complete."
The "Medrecycler Overview" states that "MedRecycler will receive no more than four full truckloads of waste daily, or eight trucks in total," while Section 29 of the "Facility Operating Plan" states that the facility may receive up to ten trucks daily.

The "Medrecycler Overview" claims that the process of pyrolysis results in waste being "evaporated". This is misleading. Evaporation is a phase change that does not alter the chemical configuration of the molecules in a substance. On the other hand, pyrolysis breaks down larger chemical structures, such as the polymers in plastics, into smaller molecules. This is not a physical process, so it is not evaporation.

Section 5 of the "Facility Operating Plan" refers to the proposed site as "Industrial Lane". Section 46 of the same tab claims that Medrecycler-RI, Inc. services the "Jonston area market" [sic]. The inconsistent application of fonts throughout the application materials. For example, on page 46 of the "Pyrolysis and Energy Production Medical Solid Waste Treatment Facility/Application", the heading for section 3 is in Times New Roman, while the heading for section 4 is in Arial. The heading for section 5 can't seem to make up its mind, so its numeral is in Times New Roman, while its script is in Arial. The font color shifts from black #000000 to a medium grey #505050. The kerning widens at seemingly random words, for example at "unacceptable" and "originating", possibly because the text is sometimes split into dozens of text boxes per line. The segmentation of text would make it difficult for those who rely on accessibility software, such as text-to-speech programs, to review the application for themselves. In the title of the "Facility Operating Plan", the word "pyrolysis" is misspelled as "pyrolisis".

**Conclusion**

As the application currently stands, the proposed facility is inadequate. The proposal inadequately addresses my concerns in safely securing transport and handling of medical waste inside the facility. The copyediting done (or not done) by Medrecycler before their submission was inadequate and left numerous errors and inconsistencies. As such, I urge the director of the Rhode Island Department of Environmental Management to exercise their discretion under RIGL §23-19.12-13 to defer for further review Medrecycler's application for a license at the facility at 1600 Division Road in West Warwick due to their unfitness to engage in the business -- as demonstrated by their carelessness in planning and proofreading -- and their misleading statements regarding the environmental-friendliness of their "waste-to-energy facility".

Thank you again for opening this comment period and for considering my comments.

Sincerely,

David Wang

90 Hamilton Drive
East Greenwich, RI 02818
ezemdw@gmail.com
(401) 391-3871

**References**


DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIV. Issues Related to Disposal of Ash
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Project Financing Issues
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: (Name) From: (Address)
Forrest, Bob   Bob.Forrest@CotoRelay.com
[EXTERNAL] : Say NO to Medrecycler

No Medical Waste Facility

This message is confidential. It may also be privileged or otherwise protected by work product immunity or other legal rules. If you have received it by mistake, please let us know by e-mail reply and delete it from your system; you may not copy this message or disclose its contents to anyone. Please send us by fax any message containing deadlines as incoming e-mails are not screened for response deadlines. The integrity and security of this message cannot be

DEPARTMENT RESPONSE:
  • No response needed
From: (Name) From: (Address)
Fran Armstrong franmarmstrong@yahoo.com

To Whom it May Concern:

As a long-time resident and taxpayer of West Warwick, RI, I wish to submit my objection to the proposed project -- MedRecycler. As such, I want to state specifically these points:

The technology they're proposing, pyrolysis, is previously untested on medical waste. We do not want to be guinea pigs for an untested technology.

The company, MedRecycler, is unable to prove that treating medical waste with pyrolysis is safe for human health and the environment.

Legally, for a facility like this, a buffer zone is required around the plant. This site has no buffer zone - in fact, MedRecycler would literally share a wall with the business next door, and there are daycares, schools and businesses very nearby.

Rhode Island is a small state, and I believe the residential and business areas within the radius of this proposed project will be detrimental with the environmental impact that will result, as well as to the whole of our state. Please reject the passage of this proposed project.

Frances M. Armstrong
8 Carlson Circle, West Warwick, RI 02893
(401) 826-3275

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
Frances Mancini  
mancini.frances@gmail.com

[EXTERNAL] : Proposed medical waste management facility on 1600 Division in West Warwick

Dear Sir,

I vehemently oppose the plan for this waste management facility on 1600 Division St to go forward.

Please consider the many catastrophic consequences of allowing this ill conceived idea.
As a member of the medical community, I strongly recommend canceling the plan and a full investigation of those who have any interest in pushing forward. Thank you.

Sincerely,
Frances Mancini
1 Crystal Court
East Greenwich, RI
Tel: 401 573 9594

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Yan Li,

The following are comments that I want entered as evidence “Against” MedRecycler-RI Inc. proposal to build a Medical Waste facility in 1600 Division Road in West Warwick, RI.

**COMMENT #1:**

*In the ecoRI News dated February 24, 2020, “The Conservation Law Foundation has noted that emissions from pyrolysis contain cancer-causing compounds. The ash consists of dioxins, mercury, and heavy metals-pollutants that can make their way into waterways and drinking supplies.”*

Kent County Water has a well that pumps water from the Mishnock Aquifer in Coventry. These pumps are located approximately 2-3 miles south of the proposed MedRecycler plant (off Route 95).

Part of this underground Aquifer is in Coventry, West Greenwich, underneath the Center of New England, West Warwick, and East Greenwich. Providence Water has a Purification plant approximately 10 miles away (as the crow flies) with feeding streams and reservoirs nearby.

Should any of the pollutants reach Kent County Water’s Aquifer and/or Providence Water system, the consequences will be catastrophic on everyone’s quality of life in the State. I ask that the RI DEM not make West Warwick & East Greenwich the new Flint Michigan.

The MedRecycler plant should NOT be built in the West Warwick/East Greenwich. I ask that the RI DEM DENY MedRecycler a license for its proposed Medical Waste Treatment Facility.

**COMMENT #2:**

Nicholas Campanella has used the terms “renewable” and “clean energy” to describe the burning of synthetic gas (syngas) byproduct to power generators that would feed into the electric grid. …*the state doesn’t classify gas from processing unsorted solid waste as renewable.*” ([ecori.org](http://ecori.org) article *Dubious Claims Swirl Around Medical Waste Facility March 1, 2021*).

It appears that the buzz words of “renewal” and “clean energy” are misrepresenting the real issue that the gas is not considered to be a “renewable” gas. Furthermore, “Clean Energy” does not release pollutants into the air. “Renewable Energy” comes from sources that are constantly being replenished, such as Solar Energy, Hydropower or Wind Power.
Based on the state’s guidelines that the gas that is produced is not renewable or clean energy, RI DEM should REJECT MedRecycler-RI Inc’s application for a license.

**COMMENT #3**

Nicholas Campanella may be in violation of *Rhode Island General Law Title 23 - Health and Safety, Section 23-19.12-13 Denial or revoking of licenses.*

The director of the department of environmental management may deny an application for a license, or suspend or revoke a license after it was granted, or refuse to renew a license for any of the following reasons:

In addition to Subdivision 2, Subdivision 4 stands out because of an article in the NY Times. **Subdivision 4 states** “A history of noncompliance with environmental regulations or standards, or conviction of any environmental crime or other crimes involving moral turpitude. This subdivision applies to: the applicant, and officers, major stock holders, or principals of the business for which the application is submitted or to which an existing license has been issued."

According to an article in New York Times dated May 26, 2020, “Prosecutors charged a New Jersey man who was part of an unlikely crew that sought a lucrative deal to provide desperately needed protective equipment…..The characters described in the complaint also appear to include Nicholas B. Campanella, a New Jersey businessman who is the chief executive officer of Sun Pacific Holdings Corp., the company whose subsidiary plans to convert medical waste to energy, people familiar with the matter said."

Based on Nicholas Campanella’s “violation” of *Rhode Island General Law Title 23 - Health and Safety, Section 23-19.12-13, subdivision 4,* MedRecycler’s application for a license for its proposed Medical Waste Treatment Facility SHOULD BE DENIED.

Thank you for your time in allowing me to speak at the Zoom Meeting as well as submitting my comments as to why I am “Against” this Medical Waste Facility.

Respectfully,

Frank Lombardo
33 Acorn Lane
West Warwick, RI 02893
Sent from Mail [go.microsoft.com] for Windows 10

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See XVI. Buffer Zone
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
As a past President of Ocean State Clean Cities, I am disappointed to read about MedRecycler-RI’s Inc potential of being built in West Warwick. MedRecycler-RI Inc claims that the “Pyrolysis” process produces “Clean Energy”. (ecori.org [ecori.org] article Dubious Claims Swirl Around Medical Waste Facility March 1, 2021).

“The Conservation Law Foundation (CLF) has highlighted a significant distinction about pyrolysis. While MedRecycler-Ri claims that nothing is burned during pyrolysis and therefore the operation isn’t an incinerator, CLF has noted that medical waste is typically about 25 percent plastic and that the subsequent burning of syngas releases dioxins, mercury, lead, and nitric oxides — the same pollutants released from burning waste at traditional incinerators. “What comes out of the system is often highly toxic,” CLF staff attorney Kevin Budris said. “You can’t just rebrand incineration and say it doesn’t have the same problems. (ecoRI News, February 16, 2021).

After reading the Conservation Law Foundation’s comments that pollutants are released from burning of syngas, it is my conclusion that Pyrolysis will not be able to produce “Clean” Energy.

In 1963, The Clean Air Act was initially passed with major amendments made in 1970 and 1990. “The 1990 amendment of the Clean Air Act introduced a nationwide approach to reduce acid pollution. The law is designed to reduce acid rain and improve public health by dramatically reducing emissions of sulfur dioxide (SO2) and oxides of nitrogen (NOx)” (Federal Law). Based on the Conservation Law Foundation’s comments, those same emissions will be released by the “Pyrolysis” process that MedRecycler-RI Inc will be using. It is my opinion that if permits and licenses are issued by RI DEM, MedRecycler-RI Inc will be in violation of the Clean Air Act of 1990.
In the Providence Journal of March 17, 2021, one of the headlines reads “RI Senate approves climate measure Bill to put teeth into carbon dioxide reductions”. The Bill is called Act on Climate. If the State is being pro-active in reducing emissions in the State then RI DEM must also be pro-active in NOT granting permits/licenses to companies that will produce and release pollutants into the air. It is my opinion that RI DEM should NOT issue any permits/licenses to MedRecycler-RI Inc. Additionally, MedRecycler-RI Inc should not be allowed to build this facility in West Warwick (or any other place in RI).

Respectfully,
Frank Lombardo
Past President of Ocean State Clean Cities.
Sent from Mail [go.microsoft.com] for Windows 10

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms. Yan Li:

The following comments are submitted on behalf of 1635 Division Road, LLC and its tenant, Playground Prep, located proximate to the 1600 Division Road proposed site of the facility which is the subject of the Rhode Island Department of Environmental Management (“RIDEM”) January 11, 2021, “Notice of Intent to Approve - Medical Waste Treatment Facility” proposed by MedRecycler-RI, Inc. (the “Applicant”).

Both 1635 Division Road, LLC and Playground Prep object strenuously to the proposed approval of the MedRecycler facility based on the information presented to date in materials submitted by the Applicant in its application and subsequently.

Playground Prep is a pre-school program which serves approximately 64 children. These children average 2 and 1/2 years of age and enjoy programs and activities which are conducted out of doors for up to 5 hours daily during the school year and for up to 7 hours daily in the summer months. The health and safety of these children are a great concern to Playground Prep itself and to its landlord, but even more so to the parents of these children. According to testimony offered at the hearing on this application, the proposed facility will burn medical waste, including a substantial volume of plastics, causing emissions of dioxins and other potential cancer-causing agents. The children served at Playground Prep, not to mention all the other residents in the surrounding community, should not be placed at risk of these exposures, particularly when no evidence has yet been presented about the ability of the facility to limit the introduction of the emissions to the environment. These are real concerns and they have not been sufficiently addressed through the licensing process to date.

Both 1635 Division Road LLC and Playground Prep were astonished to learn that the RIDEM proposed to issue a license to the MedRecycler facility, which is the first of its kind to operate in the United States, without any evidence that pyrolysis treatment of medical waste meets the five standards for alternative technology set forth in the Rules and Regulations for Medical Waste at 250-RICR-140-15-1.15(F)(5). The thorough testing required has not yet occurred and will presumably not occur until the facility has been constructed. For something as novel as this proposal to be conditionally approved
represents an abdication of RIDEM’s responsibility to follow its regulations and assure that the technology meets all five standards **BEFORE** licensure occurs. Once the facility is up and operational, political considerations may prevent the regulatory process from reaching the appropriate conclusion. That is why alternative technology is not to be approved “unless and until” the Applicant can prove that it meets all of the requirements. This is particularly true when the potential harm accrues to innocent and unsuspecting children. History is replete with environmental harms occurring to individuals that are not detected until years or decades after harmful exposures. Those usually occurred in the absence of regulatory controls. Here, there is no justification for precipitous action. The Applicant is an unknown, with no track record of performance. The projected renewable energy yield is both speculative and low. The number of permanent jobs projected are minimal. There is no local crisis for disposal of medical waste. The potential for this location in West Warwick to become the hub for medical waste disposal for New England or for the East coast of the United States is neither an immediate necessity nor a desirable outcome for the state. Thus, the kinds of incentives that may normally persuade a state regulatory agency to approve a project that entails some risk for the public are simply not here. There is no obvious benefit to the state while the potential for harm is unknown. That is an equation that simply does not support the approval of a license.

1635 Division Road LLC and Playground Prep were also surprised by the choice of this location in preference to other locations both within and without the state for siting of this first of its kind technology-using pyrolysis to treat and destroy medical waste. The Applicant had to realize that this site was proximate to an operating pre-school and to the facilities of the New England Institute of Technology. This is not Quonset Point! This is a neighborhood! Siting for projects like this are normally controlled by the State Planning Council. For some reason, that requirement, set forth at RIGL 23-18.99(a)(1), a provision of law with which RIDEM is quite familiar, has been by-passed in this instance. How this applies to “landfills” only, as suggested by representatives from RIDEM, is not readily apparent from any reading of RIDEM’s statutory authorities and fails to pass muster as a rational application of law. The State Planning Council should have, and must, approve the proposed site before the license is even considered. This step has not been done. Accordingly, the RIDEM process must be placed on hold until the State Planning Council acts or the MedRecycler application must be denied without prejudice to its right to resubmit if it receives the requisite State Planning Council approval.

Another issue relates to the conditional approval process itself. Assuming conditional approvals are authorized by the laws under which RIDEM operates (which is not a foregone conclusion), such approvals necessitate a framework for conscientious monitoring and the imposition of meaningful remedies, including license denial, suspension or revocation if compliance with the conditions imposed is not attained, or once attained, is not maintained. The problem with conditional approvals then becomes one of prioritization and execution. Government regulatory agencies are prey to the same kinds of budgetary pressures as any other government agency. What assurance do the Playground Prep children and their parents have that frequent monitoring of this facility
will be maintained in the face of reductions to the RIDEM budget or reductions in the staffing of those divisions within RIDEM responsible for the monitoring and enforcement function? Frankly, they have none. That is why the conditional approval process does not protect the health and safety of the public.

Accordingly, assuming the public’s health and safety is subject to a conditional approval process once the Applicant has met all of the pre-requisites for licensure (which it has not yet done) and assuming that RIDEM finds itself in a position where the requisite monitoring cannot be done, the Applicant’s license should be suspended for the period of time that the monitoring is unable to be performed.

Moreover, if, for whatever reason, this project is eventually approved, that approval must be limited to what is set forth in the four corners of the application. As examples, the facility must process no more than seventy tons per day, there must be no more than the number of trucks promised on site per day, emissions must not exceed the equivalent produced by “four cars per year”. If the Applicant departs from these and other parameters that it has set forth in its application or offered in testimony or written submissions, it must file a new application or must submit any proposal for expansion or changes in operations for review and approval by the RIDEM. During the pendency of any such review, the Applicant must remain obligated to continue to meet the original parameters it had stipulated in its application and which formed the basis for whatever approval it did receive, until approval of the new application, expansion or change is granted. The Applicant should not be allowed to secure a license on the basis of promises made which cannot, or are not intended to, be kept.

In conclusion, 1635 Division Road LLC and Playground Prep firmly believe the MedRecycler application should be denied at this time and that MedRecycler should be permitted to reapply once it has received those pre-requisite approvals that are required by law, such as that of the State Planning Council. If it meets those pre-requisites, it should then be required to meet the requirements for approval of alternative technology before the license is granted, not after. Finally, if a conditional approval process is to be utilized, the license should be subject to suspension for any period when monitoring cannot be maintained by RIDEM and the approval, if any, must be conditioned on the Applicant not exceeding any of the promised limits on its operations without the additional review and approval of the RIDEM.

Thank you for the opportunity to present these comments.

Health Policy Analytics, LLC

By: Gerard R. Goulet, Esq., Principal
For: 1635 Division Road, LLC and Playground Prep

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XII. Department Staffing Issues
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Project Financing Issues
- See XVI. Buffer Zone
Good evening Mr. Li –

Please find my substantive comment attached for consideration.

Best,
Geoff

GCorp Management LLC
Geoffrey M. Aptt, ESQ
SVP & General Counsel
401-203-6127 Mobile
200 Kenneth Welch Drive
Lakeville, MA 02347

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Geoff Aptt gaptt@gcorpmgmt.com (also received from Jessica.aptt@usdoj.gov)
March 30, 2021
VIA EMAIL (Yan.Li@dem.ri.gov)
Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street, Providence, RI 02908

Attention: Yan Li

RE: OPPOSITION TO MEDRECYCLER'S APPLICATION — PUBLIC HEARING

COMMENT

Dear Mr. Li:

MedRecycler-RI ("MedRecycler") is a New Jersey medical waste disposal company headed by CEO Nicholas Campanella ("Campanella") that is endeavoring to operate from a proposed location of 1600 Division Rd, West Warwick, Rhode Island. This location is surrounded by a local Playground Prep school, as well as New England Institute for Technology. MedRecycler plans to utilize a method called Pyrolysis at their facility. The term "Pyrolysis" comes from the Greek-derived elements, pyro "fire" and lysis "separating" thus meaning to separate via fire. Pyrolysis produces the same chemicals and byproducts as incineration or burning of waste. All facilides and all businesses are expected to adhere to regulations placed forth by the Federal and local governments to operate, however, the "MedRecycler" systems and technology has never been utilized for medical waste; therefore, MedRecycler cannot adequately prove they can adhere to these guidelines. Because of uncertainty and lack of previous applicability of Pyrolysis to medical waste, Rhode Island would be a proverbial guinea pig for this operation. Careful consideration of every granular detail is essential for a decision of this caliber to ensure both the safety of the citizens as well as the ethical history of the company involved. Importantly, MedRecycler has the burden to prove its technology is safe and will not pollute our air and water. Aside from blanket statements unsupported by fact or science, MedRecycler has not carried its burden and, therefore, its application must be denied.

The RI DEM should deny the application for the following reasons:

For the potentially devastating effects it will have on the environment, surrounding families, and workers of the facility.

Noise pollution and toxic bi-product pollution.
Without a scintilla of scientific evidence to back it up, MedRecycler claims it is a clean process despite marked outcry from the scientific community to the contrary. MedRecycler cannot adequately prove its technology is compliant with federal and state regulations.
Medical waste regulations sections 1.15(F) b, Solid waste regulations section 1.9(M)

ARGUMENT

1. RIGHTS AND SAFETY OF ABUTTERS, LOCAL BUSINESSES AND RESIDENTS COMPEL DENIAL

All residents of Rhode Island, and not just specifically Warwick, should be concerned and involved in this decision. Pyrolysis is known to produce chemical compounds called dioxins, which are extremely dangerous to the community because of their slow rate of dissipation as well as their known carcinogenic effects. Dioxins are part of the "dirty
dozen”, a group of chemicals known as persistent organic pollutants (POPs). Other known effects dioxins have on the body are infertility, birth defects, and endocrine damage. Dioxins are not the only dangerous compounds being produced; lead, mercury, sulfur-dioxide, and nitrogen oxides will also be emitted into the environment due to this process. The real threat these compounds pose to Rhode Islanders have already been evaluated on the international level. In 2004, over 180 Countries entered the “Stockholm Convention”, thereby pledging to protect human health and environment from highly dangerous chemicals, including P.O.P's and dioxins. Similarly, the "Basel Convention" of 1989 specifically aimed at proper hazardous waste and its disposal in order to minimize the release of hazardous emissions. Neither of these treaties suggest incineration or Pyrolysis as a plausible waste alternative.

Residents have already begun to recognize the threats posed by dioxins and POPs. Fifty-three Citizens spoke out against MedRecycler at the 3-hour March 15, 2021 public hearing, most notably local Doctors, Attorneys, and the Vice-President of the East Greenwich town council. Michael Donegan expressed his legitimate concerns, stating "We're going to have trucks driving through our neighborhoods with body parts, viruses, and pathogens. And we are going to have the risk that these viruses and pathogens will be released through accident, through improper operation of the facility, [or through] poor design. This is unproven technology. And it is also important to note that the applicant has absolutely zero experience running any medical waste facility, let alone this particular type of equipment, which is experimental. It is so experimental that it's not actually in operation anywhere in the U.S. used on medical waste." Donegan further accused MedRecycler-RI CEO Nicholas Campanella of searching the country to find the one state agency, DEM, that would allow this type of facility.

2. **PYROLYSIS IS JUST ANOTHER WORD FOR INCINERATION**

Pyrolysis in the processes of using heat to burn a product without the presence of oxygen, producing hydrocarbons and creating syngas or toxic and environmentally damaging pollutants to then burn to operate generators, eventually emitting the toxic by-product back into the atmosphere.

Toxic by-products, such as dioxins, furans, lead and other chemicals, directly jeopardize the wellbeing and peace of the community. According to the MedRecycler's DEM applications they plan on reaching temperatures of 800-900°F with their Pyrolysis systems, however in other statements they have reported systems reaching temperatures as high as 1400°F with a clear discrepancy of over 500°F. This is problematic because dioxins form when plastics are heated at temperatures under 1200°C; these dioxins and POPs are critically dangerous to the community and surrounding elementary school located less than a half a mile away.

Incineration is an exothermic process that involves the mass burning of a material with the heat typically being applied to thermal energy (steam powered or generating electricity). In comparison, pyrolysis advocates claim it is an endothermic process because it absorbs heat to produce a combustible "syngas", but the critical component
ignored in this circumstance is that the 'syngas' will also be burned by on-site generators, producing toxic ash and releasing pollutants into the atmosphere. According to the World Health Organization, burning medical waste is the second largest source of dioxin emissions. The World Health Organization continues to discourage the burning of any medical waste for any reason because of the potential chemicals and impact on the environment.

III. THE FACILITY WILL PRODUCE NOISE PRODUCED FROM GENERATORS AND TOXIC EMISSIONS

Although MedRecycler has made claims that his company's methods are "clean", the scientific community found that they produce similar levels of the same chemicals that incineration does: high levels of heat, resulting in toxic and environmentally dangerous ash and char, creating syngas, which is burned by generators, thereby producing dioxins and furans, CO2, NOX, and SO2, mercury and leads. Producing and extracting toxic syngas from this process is only the first step, the facility then plans to burn the syngas in its generators for power, all while producing chemical emissions.

There is also the issue of the continuous generator usage emitting roughly 85 consistent decibels of noise from the property, this is equivalent to a leaf blower going off at all hours of the day and night. This can have a massive impact in the community, from Autism sensory issues to animal migration. Children with can be highly susceptible to sounds and frequencies, 85 decibels is more than enough to trigger some children. With a school within a mile of the proposed location, this would be sending a severely negative message to parents and the community regarding its standards. The noise is also enough to affect various ecosystems and biomes. Noise can dissuade certain animals from living there, this can change the predatory cycle within that ecosystem. With new animals consuming different vegetation in these old ecosystems, it changes the biome overall. This effect is most obviously seen with overhunting of wolves in the Yellowstone, the impact it had to that ecosystem and Biome changes, such as rivers moving, beaver and other wildlife population changes, vegetation changes and droughts.

IV. MEDRECYCLER IS UNABLE TO COMPLY WITH PRE-EXISTING REGULATIONS

According to medical waste regulations section 1.15(f), MedRecycler must prove "based on thorough tests" that its technology is "protective with respect to total impact on the environment" and it ensures "the health, safety, and welfare of both facility employees and the general public". MedRecycler technology has never been used on medical waste, therefore MedRecycler cannot prove that it is adequately protective.

Solid waste regulation section 1.9(N'f) states that the MedRecycler facility must be "designed operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility." Given the risks of burning medical waste, the untested nature of MedRecycler technology, and the proximity of businesses and residents, MedRecycler cannot demonstrate it will be able to comply with this standard."
MedRecycler has not provided a scintilla of evidence to meet its burden of proving safety. Because neither of these two legal regulations can be met or demonstrated, and the overall uncertainty and these devastating toxins being released into the air and exposed to the population, this facility should not be allowed. Aside from these two regulations, there are UN regulations in place that demand specific and proper action to protect people and the environment from harmful pollutants such as dioxins and POPs (Basel Convention 1989 & Stockholm Convention 2004).

V. FLAWS IN SCIENTIFIC LAWS OF THERMODYNAMICS PROVE MEDRECYCLER IS NOT PROVIDING A RENEWABLE ENERGY SOURCE

The second law of thermodynamics states that the "disorder" in the universe always increases. As the Disorder in the Universe increases, the energy is transformed into less usable forms. Thus, the efficiency of any process will always be less than 100%, i.e. A troubling (and clearly false) claim made by MedRecycler is that its system is "renewable/sustainable" suggesting that syngas produced from burning waste operates at 100% efficiency, which directly contradicts the laws of thermodynamics. The modern idea of pyrolysis is to burn plastics and other refuse into a gas or oil (in this case "syngas") that can be used as a "fuel" (in this case for on-site generators). This gas must be combusted to be utilized, thus releasing the same amount of chemicals into the atmosphere than if the plastics had been combusted directly, making it a simple steppingstone of fossil fuels and the initial combustion. This has been backed up with scientific testing as well. "In one study the concept was described as 'high efficiency', but results showed that the system operated with negative efficiencies, using between 5 and 87 times more energy than could be obtainable from the pyrolysis products." Such a process simply cannot operate at 100% efficiency.

Conclusion
MedRecycler cannot meet its burden to prove the safeness of its business operations and technology. Rhode Island cares about its community, the youth, and the quality of life that Warwick has to offer. With hypersensitive situations and clear negative effects on the community, we need action against this cause. Our future relies on the healthy and successful upbringing of our children; by placing a carcinogenic pollutant facility, a different message is being sent. For all the reasons set forth herein, MedRecycler's application should be denied.
I look forward to your response.

Very Truly Yours,

Geoffrey M. Aptt

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\(^vii\) "250 R.I. Code R. S 250-RICR-1404-1.9" 250-14041.9 R.I. Code R. S 1.15

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
George McIntosh
georgemcintosh@cox.net

[EXTERNAL]: Deny MedRecycler’s medical waste treatment application

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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George McIntosh,
50 Hunters Crossing Drive,
Coventry, RI
georgemcintosh@cox.net

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
Protect our community! Burning hazardous materials is toxic for human health. Burning waste is not clean energy whatsoever!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RCIR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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Gianna Sollitto,
16 Suddard Ln,
North ScituateRI

gmsollitto@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
I am gravely concerned as a health care professional of the med recycling near my home and my family. Please don't allow this. We will move out of RI if it happens.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
Glenn Mooney
moon146@mail.com

I strongly reject the idea of allowing any additional sources of pollution in the state!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Glenn Mooney,
28 Urrico Ave,
North SmithfieldRI
moon146@mail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Greg Armstrong
garmstrong1@cox.net

Ms. Li and Mr. Dennen,

I am writing with much concern regarding MedRecycler opening a pyrolysis facility in my home town. The fact that our community is literally downwind from the facility is very upsetting.

I have read on multiple news outlets of RIDEM's intent to approve this facility. I implore you to refuse their request. The byproducts of burning medical waste is a health risk which is unacceptable anywhere in our state. The safety of this technology is unproven.

This is decidedly not what one would consider green or renewable energy. Wind and/or water power would fall into this category. Medical waste burned to produce electricity is rife with problems such as pollution (air, solid waste).

While MedRecycler claims that the emissions will be clean, the nature of the waste and potential for contaminants being incinerated is alarming.

This should be cause for you to put a stop to this facility.

Regards,
Gregory Armstrong
150 Maplewood Drive
East Greenwich

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Good morning.

I am an East Greenwich citizen who is concerned about the environmental impact of the proposed Med Recycler facility planned for 1600 Division Road, West Warwick, RI. My family lives at 30 Boulder Way in East Greenwich, which is less than 1 mile from the Med Recycler facility (see map below). There are hundreds of East Greenwich and West Warwick families who live within a 1 mile radius of this location, not to mention a child care center within very close proximity. I am certain that a vast majority of these families share my concerns.

It is my understanding that Med Recycler is pioneering the application of its technology to the disposal of various biological waste (they claim to be the only one of their kind in the US). It is also my understanding that this is not a common application of the technology, which makes it experimental and highly speculative. As with any waste disposal process, a variety of by-product emissions will be released that may or may not be safe to our families, particularly children and those with compromised respiratory and/or immune systems. The unique, untested nature of this facility is exactly why it should NOT be pressure tested in a residential area. Why should this 24/7 facility be placed so close to a residential area versus an industrial park or remote location with far less population? If there is a clear business need for this type of technology, there certainly are far better geographic locations that mitigate the environmental risks to Rhode Island residents.

For the health of my family and our fellow citizens, I am strongly opposed to the proposed Med Recycler facility operating at 1600 Division Road, West Warwick, RI. Please, please, please do whatever can be done to deny the permit/license to this untested and potentially dangerous business venture.

Respectfully,
Dr. Greg Kauffman, Ph.D.
30 Boulder Way
East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Please oppose this permit.

The process is untested for this use and at this scale.
The company has been insolvent since inception. Financial reports indicate an inability to pay their bills.
The health and environmental risks are too high to entertain this facility with no buffer zone to businesses and residences.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Gregory Armstrong,
150 Maplewood drive,
East Greenwich RI
gregarmstrong150@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
Hart Kelley sailtrainer@gmail.com

I write to you in opposition of the proposed MedRecyler project in West Warwick. I am a resident of East Greenwich, a town that along with West Warwick will likely suffer the worst effects of MedRecyler's operation should they be allowed and permitted to commence disposal of medical waste.

Most shocking in the permitting process is the acceptance of the applicants science as the basis for approval. Business, historically and realistically, is a terrible source for fair science representing their operations. From the Hooker Chemical Company, to RJ Reynolds, to PG&E, companies have mis-represented and misled the public about how dangerous their operations are to the public health. Their goal is not public interest, it is profit. MedRecyler is no different, they are looking to set up a waste disposal processing plant and have no real data to show that the process is nearly as safe as they claim. In fact, all relevant data shows the opposite, that pyrolysis is not safe or environmentally friendly, never mind "Green".

The fact that MedRecyler is proposing a "new" process should merit increased scrutiny and proof-of-process, not less. It must be necessary that the processes are fully known and understood before placing such a potentially hazardous plant in operation in any residential community in Rhode Island. Assumptions, aspirations, expectations for a business that is closest akin to incineration, of medical waste no less, can not be the standard acceptable to our State.

While the applicant, MedRecyler, has stated that their operation will have minimal environmental impact, that claim is refuted by science and logic. There are plenty of scientific reports documenting that pyrolysis is far from a green process. From toxic emission, to the energy required to fuel pyrolysis, MedRecyler's claims cause one to question their data source which is unproven by their own admission. Pyrolysis also does not alter matter. The toxic materials found in MedRecyler's fuel source, medical waste, does not magically disappear.

Heavy metals, radioactive materials, plastic, etc. will not disappear. MedRecyler has been unable to explain where those dangerous materials will end up. Will it be expelled into the air, or perhaps into groundwater or wastewater to be dumped into the Bay? Is MedRecyler providing a bond for the potential clean-up of toxic waste, or will West Warwick and East Greenwich become the newest Love Canal communities?

Over the last 100+ years there have been many businesses claiming absolute safety. In a perfect world, that may be the case. However, the world is never perfect. From the failed Challenger launch, to nuclear power plant failures, we know things will go wrong-often with catastrophic results to public health and safety. MedRecyler's process, transportation, or storage, will fail at some point. It is inevitable, with perhaps
only the scale of the failure being the real question. For industrial plants, their proximity to the public is the key concern. The further away a plant is located from the public, the less likely it will impact the public when it fails. Placing a plant with MedRecycler's risks, including disease samples and contagions, toxic and radioactive raw materials, toxic emissions and waste product next to schools, nurseries, and residencies is completely irresponsible. If one were to write a disaster movie screenplay, the scenario of MedRecycler's location in West Warwick would be the preposterous setting for the ticking time bomb. Those responsible for allowing MedRecycler to operate in the proposed location, never mind within the State of Rhode Island, would not only be excoriated, but have to live with the knowledge that their actions are tied to such a disaster.

MedRecycler has already acted in bad faith. The other US pyrolysis plant(s) MedRecycler used as examples for accepting MedRecycler's application have both been shut down for unacceptable pollution levels and/or economic failure. MedRecycler's science and application is based on failed plants like the one MedRecycler is proposing. Building those failed programs on a larger scale makes the pollution levels much worse. Is that what the DEM is approving? The other pyrolysis plants in the world (why are there only 2-3 if the process is so amazing? The technology isn't that new!) the plant in the UK does not use medical waste, it processes wood. MedRecycler has no data of scale to make the claims in their application. The MedRecycler proposal is an experiment with little upside and significant environmental and public health risks. The State has stated that they are limited in their ability to monitor MedRecycler's emissions. So even if there is a problem, how long would the problem persist, and to what extent of damage, before it was even detected.

My last point is MedRecycler's claim to be a "Green" business. Nobody wants to see medical waste added to landfills. But MedRecycler claiming to ease landfill burden, through an unproven scientific process, is not using a renewable source of energy to fuel their plant. MedRecycler is using waste as a fuel. Even if they could operate as safely as they claim, which they cannot, they are still a business closest akin to an incinerator. If MedRecycler is claiming to be "Green" one has to wonder why. Are they looking to expedite their application through a channel the State is interested in pursuing, actual "Green" businesses. Did they choose a "Green" application course to circumvent the type of business they are most like, an incinerator? Is the State be using different permit requirements to assess MedRecycler's application if they claimed to be an incinerator? With the energy required to create pyrolysis, are they even energy neutral? MedRecycler is far from a "Green" company. They should not be treated as such for the purposes of permitting by Rhode Island.

The MedRecycler proposal should be rejected. The science they claim is credibly refuted and the basis for their operation is theoretical. The "comparable" businesses they cite are not equivalents and have failed in the US. The risks of environmental contamination and public health are real, likely, and once they occur cannot be undone. MedRecycler does not meet the standard of a "Green" business and should receive no benefit simply by claiming such. Let's just call this what it is, a waste management company from New
Jersey is looking to expand its most hazardous waste operation (medical) by bringing it to Rhode Island. MedRecyler is looking to make a profit at Rhode Islander's environmental and health expense.

For only 27 stated jobs, processing 140-180 thousand pounds of waste in our state each and every day(!) with all the associated costs and risks related to transport, storage, and toxic by-product waste is a terrible deal. This is not what Rhode Island wants or needs. Tell MedRecyler no, they can take their operation somewhere besides a residential community, besides our State. Rhode Island has ambitions of being a true leader in Green business and MedRecyler takes all of us in the wrong direction. I strongly and enthusiastically urge you to deny MedRecyler's application.

Sincerely,

Mr. Hart Kelley
East Greenwich

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIII. Concerns Regarding Radioactive Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XI. Monarch Pyrolysis Facility in New Mexico
​
Dear Rhode Island Department of Environmental Management,

My name is Hasion M. Gaston and I work with Community Action Works. Our organization works side-by-side with community groups to clean up and prevent toxic pollution in Rhode Island and throughout New England. We all know that burning waste is hazardous to neighboring communities and the environment overall. Community Action Works has a long history of working alongside community groups in New England to stop toxic facilities.

I am here today to urge you to reject MedRecycler’s application for a medical waste treatment permit for the following reasons. First, technology MedRecycler plans to use has not been tested previously so we have no way of knowing how much emissions it will produce and what sort of harm it will cause to the surrounding communities. This type of experimental technology should not be happening so close to homes, schools, and entire communities.

A second concern that has arisen from the inconsistency with the information MedRecycler is presenting. After asserting that no trucks will be stored on-site and that 4-8 truckloads of waste would arrive daily, paperwork filed with the state asks for 10 deliveries a day and up to 25 truckloads of waste could be stored at the facility. These and other inconsistencies lead to a lack of trust between MedRecycler and the community.

Thirdly, responsibility of notifying the public of any dangerous emissions would be completely optional and voluntary for MedRecycler-RI which is concerning and compounded by the statement by DEM that their inspections would be sporadic due to understaffing issues. Lastly, this is proposed waste facility is claimed to be renewable but really isn't RI says waste-to-energy is not renewable.

I hope Rhode Island will continue to move away from burning their medical waste and give reverence to the health of communities.

Thank you, for your attention and time.
Sincerely,
Hasion M. Gaston
Connecticut Community Organizer
Community Action Works

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Storage of Regulated Medical Waste
- See XII. Department Staffing Issues
Dear Yan,

I am opposing Medrecyler moving into East Greenwich. My reasons are short and to the point. I along with my daughter are cancer survivors. Our 8 year old neighbor was not fortunate enough to beat it. There are far too many cases of cancer in East Greenwich. A facility that performs untested means to break down medical waste does not seem like a healthy decision. There are enough known pollutants in this town-State lets not add to it. Thank you for your time,

Heather MacQueen

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Ms Li,

I will be attending the MEDRECYCLER Zoom session today. As an engineer, I recognize when decisions are being made with very little data or scientific knowledge. Truthfully, this particular system that MEDRECYCLER is proposing should have been prototyped in a controlled environment to assess the environmental impact of the thermal decomposition of these medical wastes on the natural environment so that it could be determined whether this location in West Warwick is suitable for this type of waste treatment plant. The Nambe New Mexico facility is the most similar facility, but that facility had a proprietary process for reducing pollutants, thus the comparison is weak.

Therefore, I am urging DEM to gather a preponderance of data and analysis that ensures the safety of the local population, especially the children at the nearby daycare centers, who could suffer life long diseases if DEM is not cautious. Very little of RI DEM Air Pollution Control Regulation number 39 is applicable to the MEDRECYCLER process, so DEM engineers have little guidance and must rely on data gathering at every point in this thermal decomposition process to ensure its safety.

Additionally, I don’t think that RIDEM’s authorization to allow MEDRECYCLER to store 20 containers of medical waste indoors and 25 containers of medical waste outdoors is specific enough to meet the requirements of section 15.2 (h) 2 of RI DEM regulation DEM-OWM-MW-1-2009. I hope you can address that concern in today’s Zoom meeting.

Respectfully,
Helene Tay
West Warwick, RI
--

Love and Blessings,
Helene

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XI. Monarch Pyrolysis Facility in New Mexico
• See V. Issues Related to Storage of Waste
From: Helene Anderson  
bluehue2002@gmail.com  

[EXTERNAL] : Fwd: MEDRECYCLER WEST WARWICK  
Forwarding because I was told you are the best POC.  

Helene Tay  

-------- Forwarded message --------  
From: Helene Anderson <bluehue2002@gmail.com> <mailto:bluehue2002@gmail.com>  
Date: Wed, Feb 3, 2021 at 12:03 PM  
To: <dem.compliance2@dem.ri.gov> <mailto:dem.compliance2@dem.ri.gov>  
CC: <toates1749@verizon.net> <mailto:toates1749@verizon.net>  

Dear Compliance team,  
At last night’s West Warwick Town Council meeting, Councilman John D’Amico stated that the State intends to approve the use of Pyrolysis technique at MEDRECYCLER company in West Warwick, but they (DEM) have to have public meetings. See this link at minute 46 to see exactly what was said.  

This statement has caused concern from a lot of citizens in West Warwick because this technology is new and its environmental safety is unproven. Would you kindly inform me as to what DEM has done so far to verify the environmental safety of this technology, and what DEM is planning to do in the future to ensure that this company’s process, in practice, are safe and will continue to be safe to the health of citizens in the towns of West Warwick and East Greenwich.  

I am truly grateful for any information you can provide, because you know how people can think the worst of a situation and it would be best if facts are presented instead of conjecture and fear.  

Sent from my iPhone  
Helene Tay  
650 E Greenwich Ave  
West Warwick RI 02893  
401-623-1623  

--  

Love and Blessings,  
Helene  

DEPARTMENT RESPONSE:  
• See I. Issues Related to the Department’s Role in the Permitting Process  
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: Henry Szydlo <hnkszyd@aol.com>
Subject: Medical waste facility.

Sent from my iPad

Begin forwarded message:
From: Henry Szydlo <hnkszyd@aol.com>
Date: March 18, 2021 at 10:46:31 PM EDT
To: mark.dennen@dem.ri.gov
Subject: Medical waste facility.

I have lived in West Warwick for almost 70 years. I can see no reason why we need this facility in our neighborhood. If you think we need it build it in your neighborhood. In this area we like our neighbors and don’t see any reason to build an unproven facility that may poison them. From what I hear about it it’s never been proven to be effective or safe. Why do you want to make us guinea pigs for an unknown experiment. Let them prove it somewhere else before building it in our backyard.

Henry Szydlo
109 Lonsdale St
West Warwick, RI

Sent from my iPad

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms. Li,

My name is Ashley Hong, and I am a junior at Brown University. One of the West Warwick residents informed the Brown community of the MedRecycler issue, and over 140 of us have penned this letter to voice our concerns in support of our neighbors in West Warwick and East Greenwich. Thank you for taking the time to listen to us.

Best,
Ashley Hong

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
From: Hope Stockwell  
emmahlee1207@gmail.com

[EXTERNAL]: Medrecycler - objection

Having recently moved into West Warwick I happened to see a clip on the news regarding the medical waste facility proposal. I wanted to understand what this was about and read everything I could.

I am the HOA President of Kent County Commons which is a new condominium site in West Warwick. We are 7 miles from the proposed location of 1600 Division Road, West Warwick., we as new residents of this town oppose the Medrecycler facility.

Everything I have read and now have heard today at the public meeting, validate our concerns. The water, air and ground contamination is extremely concerning especially with a company that has no experience with this type of process which by the way has not been found anywhere in the United States. Furthermore it appears that the proper documentation has not been offered and that specific guidelines have not been met. Many people who have spoken out today in opposition to this facility come from all parts of the professional world, who would be impacted by this facility. The idea that we would allow this type of untested process to be placed anywhere in the state of RI is absurd. We should not be the testing grounds for such an untested process. There is a reason why there is no other facility like this, it is dangerous and deadly.

Everyone promises you the moon and the stars when they want something from you. This company is no different. I understand that IBEW 99 will gain 100 jobs however, there are other projects that would afford them to put those people to work. The 20 or 30 people that this facility would employee is NOT worth the risk for the HEALTH of all. The ONE does not out way the GOOD of the MANY! We are the many and we ask that you deny this proposal. This type of facility is not good here in West Warwick, here in RI or here in the United States of America.

Thank you and we hope that you hear the MANY!
Hope Stockwell

HOA President Kent County Commons
Quaker Lane West Warwick

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Houllahan tehoullahan@gmail.com
[EXTERNAL] : Dubious Claims Swirl Around Medical Waste Facility March 01, 2021
Sir

It is outrageous that any Rhode Island official and state agency would even consider allowing this unproven and dangerous facility to be given license in our state.

Furthermore, it is an environmental justice issue placing such a horrifying business in one of Rhode Island’s poorest communities.

Dubious Claims Swirl Around Medical Waste Facility [ecori.org]

"Public comments

Emails sent to DEM ahead of a Jan. 25 hearing and one scheduled for March 15 convey outrage that an unproven technology will process medical waste close to homes, schools, and businesses.

“As a physician, I can’t emphasize enough the potential dangers to the health of our young children this type of plant poses to the surrounding neighborhoods,” wrote Liudvikas Jagminas, chief of emergency medicine at South County Hospital in Wakefield, who lives about a mile from the proposed facility.

“No one truly knows how this system works or its effects on the environment and its result on human life,” wrote Tara Buontempo, a resident of the Signal Ridge neighborhood in East Greenwich. “I brought my children to this neighborhood to give them a beautiful place to live, not to be exposed to this experimental project.”

I am forwarding this email to other Rhode Islanders in hopes that they will read the ECORI article and join me in protest to: yanli@dem.ri.gov <mailto:yanli@dem.ri.gov>

Roberta (Bobbi) Houllahan
627 Hope
Providence RI 02906
GOOGLE: ecori waste management dubious claims

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello Mark,

My neighbors and I are greatly concerned about the hearing today for a license application by Med-Recycler, a medical waste treatment Plant. I would say that emissions from such a facility would certainly pose a major health issue to all the homes and businesses in this area.

As a nearby resident at Taylor Point Condominiums, I and our neighbors are concerned as to the release of toxic chemicals into the air which will certainly have a negative effect on air quality and ultimately lead to respiratory problems for all in proximity to this facility. Residents in the area are already experiencing fowl odors. This is a health crisis!!!

Public health should be the main issue for DENYING this license. As it is the responsibility of the DEM to protect us we look to you for your help.

Thank you for your attention to this matter and please confirm receipt of this e-mail.

Sincerely
Irene Brocchi
Taylor Point Condominiums.

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
Ismenia Jackson  yiherrera17@yahoo.com

[EXTERNAL] : Pending hearing for MedRecycler

Dear Mark,

I hope your well. I would 1st like to thank you for taking all our questions and listening to our concerns.

I am writing to ask that you not grant a permit to the MedRecycler. I hope you take the fact this process has not been proven and the Pyrolysis would take place in a residential area with budding businesses such a a Daycare and school. The potential to contaminate our air is great.

Thank you!
Ismenia Jackson
120 Laurel Wood
EG, RI 02818

I’m writing on regards to

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick. Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA 2017) is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day. Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. Given the two daycare centers and a college in close proximity to the proposed site, it is shocking that a facility emitting lead alone would be allowed to operate nearby.

Additionally, with residential neighborhoods surrounding the site, we are especially concerned about the health effects of dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects [nam12.safelinks.protection.outlook.com] , and environmental harm -- and the potential for radioactive waste to come to the facility (www.epa.gov/dioxin [epa.gov]

<https://urldefense.com/v3/__http://www.epa.gov/dioxin__).”

During DEM’s January 25, 2021, Public Informational Workshop on Facility’s License Application, project developer Nicholas Campanella admitted that he intends to expand the facility to accept medical waste from throughout the northeast; he said that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste. Those of us
who live in East Greenwich, including several neighborhoods that would be directly impacted by emissions from this facility, feel particularly disenfranchised by this ostensibly democratic process. Given that the facility’s driveway and access roads are actually in East Greenwich, as Rep. Justine Caldwell has stated, East Greenwich “will have the emissions … and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. The residents of West Warwick and East Greenwich do not consent to our children, our families, and our neighborhoods being used as guinea pigs for an untested technology, which could cause unknown harm. What happens if there is a malfunction, an accident, a fire, or unpredictably harmful emissions from this plant? How do you reverse that damage? Once the children at the two nearby daycares are exposed to lead from the MedRecycler facility, how do you undo that harm? The answer is: it is impossible. Therefore, DEM should err on the side of caution to protect human health and the environment.

“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action.”


The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely distinguishable from a medical waste incinerator with a greenwashed name, and medical waste incinerators are notoriously toxic, polluting facilities that are inconsistent with residential communities. This is the definition of regulated medical waste:

* Pathological waste. Tissues, organs, body parts, and body fluids removed during surgery and autopsy.
* Cultures and stocks of infectious agents (microbiological waste). Specimens from medical and pathology laboratories. Includes culture dishes and devices used to transfer, inoculate, and mix. Also includes discarded live and attenuated vaccines.
* Contaminated sharps. Contaminated hypodermic needles, syringes, scalpel blades, Pasteur pipettes, and broken glass.
* Isolation waste. Generated by hospitalized patients isolated to protect others from communicable disease.
* Contaminated animal carcasses, body parts and bedding. From animals intentionally exposed to pathogens in research, biologicals production, or in vivo pharmaceuticals testing.

Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to import to this site. On the same January 25 call, Mr. Campanella admitted that he plans to start by processing 70 tons of medical waste/day, but he chose this site partly because he can expand in the same building to accept up to 140 tons/day. Industrial facilities are as imperfect and fallible as the humans who manage them. They malfunction, have accidents and do not always perform as planned. With the predicted volumes of hazardous waste, even small accidents can have a big impact on the surrounding community. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who live and work near or downwind of this site.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar.

Furthermore, we want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Zooming out from the local perspective to a statewide, national, and even global view, the facts are clear that our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future. In fact, Rhode Island is in the midst of debating whether to strengthen our greenhouse gas emission limits with the new Act on Climate bill, currently pending in the legislature. In her recent State of the State address, Governor Raimondo said, “Rhode Islanders can be proud that we are the state leading the nation in the fight against climate change.”

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering our comments. We look forward to the March 15 public hearing on this matter.

Sincerely,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
Please accept this as written comment on the proposed facility in West Warwick.

As a neighbor and resident of the town of West Warwick, there is no chance that the proposed facility passes the risk-benefit test.

Further, the state of RI has no need for such a facility. House Bill 5923 and Senate Bill 527 have been introduced in the General Assembly. These Bills, if enacted, would prohibit any waste-burning facility in Rhode Island.

Finally, I totally agree with Kevin Budris’ thoughts in YOUR TURN in the PROJO issue of March 18, 2021. "BURNING WASTE HAS NO PLACE IN RI". Enough said.

Sincerely,

James E. (Jed) Donohue

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
My name is James Ferguson. I am a Pulmonary & Critical Care physician, currently working at Newport Hospital. I live on 20 Signal Ridge Way in East Greenwich, RI 02818 with my wife and four children. I did my training and fellowship through Brown's program. I have served the RI community for the last 9 years.

I am deeply concerned and disturbed at the proposition of the medical waste facility being proposed and is being considered for approval at 1600 Division Rd. My concern stems from being a resident, father, and pulmonary physician.

On the most basic level this technology does not "recycle" any part of the waste, it burns it, leading to the generation of toxic and harmful chemicals that cannot be fully controlled or mitigated. As a pulmonary physician there is nothing safe you can burn and inhale, and there is nothing safe you can burn without causing harmful chemicals to be released into the surrounding environment.

1) The facility in place does not have proper scientific evidence of the safety for emissions so air pollution, solid, and liquid wastes that will be emitted. There are currently 3 similar in size type plants that burn waste and are labeled as "renewable" (none that burn medical waste). The burning of fossil fuels would be required to run the plant (only benefiting the bottom line of the expenses of the plant operator) and by the own admission of the plants plans it would release 25000 tons of carbon dioxide yearly, (equivalent of 5000 cars running for a year). THIS IS NOT GREEN ENERGY and DOES NOT BENEFIT RHODE ISLAND RESIDENTS.

2) This "technology" of pyrolysis is not new as stated on the company's own application, it mentions burning of biomass having been done for "thousands of years." The burning of biomass fuels and inhalation of the compounds it releases has been inextricably linked to chronic obstructive pulmonary disease, asthma and lung cancer. That is why this has already been proposed in Rhode Island and rejected due concerns of air pollution. RI was smart enough to avoid this, in the past and similar ideas to conserve landfill space have been proposed and failed, similar to the one previously tried to have accomplished in Johnston, RI. Incineration is costly, and much cheaper to process recycling than trash. The only thing that makes financial sense is for the company's bottom line in that they get essentially free waste material and burn it to keep the plant running and provide very little additional energy aside from the plant's power needs. Should we not focus our bond money to actually green energy (Wind, solar, improved recycling plants) rather than stipend trash being burnt. The amount of energy required to heat the material to a sufficient degree to run the plant does not conserve energy. The amount of energy "saved" is trivial and this is a terrible front / facade to
think this is in any Rhode Islander's best interest. We have known this and have passed on similar propositions in the past.

"Incineration of solid waste is the most costly method of waste disposal with known and unknown escalating costs, which would place substantial and unreasonable burdens on both the state and municipal budgets to the point of jeopardizing the public's interest"- Rhode Island's law (State Senate Act 92-S 2052)

Similar plants that incinerate waste (such as the one Wheelabrator trash Incinerator in Baltimore) has led to a disproportionate amount of asthma and lung cancer in the surrounding urban population. Studies of this area in Baltimore has determined that living near the incinerator is similar to living with a smoker in your home (a known cause of asthma, chronic bronchitis, and predisposition to infection.) The Baltimore Incinerator has generated nearly 55 million dollars worth of health problems. More locally, Wheelabrator has Incinerators in Millbury, MA which had to pay out 7.5 million due to improper handling of ash from its facilities from leaks of waste products into the air and surrounding water.

I am concerned the CEO of MedRecycler's connections have allowed this process to move forward at an alarming rate, and public hearing should have not been allowed to take place during the pandemic when the attention of everyone in this state needed to be on safety and survival. (I was in the covid unit at Rhode Island Hospital's ICU while this process was unfolding) Bluntly stated, this operation reeks of corruption, an individual seizing an opportunity to benefit from millions in RI stipend/funding for sham "green" energy, and it is disgraceful that it was even allowed to move forward during such a trying time.

In summary, this facility does not have sufficient evidence to be safe, specifically to the matter of being able to adequately contain and mitigate harm from produced toxic liquid, airborne, and solid waste production, the emission of fousls smells, and the downstream respiratory effects similar facilities have been shown to cause. This will jeopardize the health of surrounding neighborhoods (Preschool/daycare next door on Division Rd alone!) and likely a large catchment area that would involve the greater part of Kent county, if not further. This does not serve the best interest of RI citizens.

I firmly oppose this facility being allowed to become operational, not just in West Warwick, I do not wish this facility to be in operation in any part of Rhode Island. It is not proven to be safe, it is not proven to be beneficial and is a huge liability with tremendous risks to the well being of RI residents. This is a threat to the well being of my family and I am preparing to move my family out of the state of RI if this plant becomes operational.

I think it would be a crime to allow this to proceed without allowing a proper investigation and then allowing for the citizens of Rhode Island (local and state wide) to vote on the proposal of a facility that will jeopardize their health and well being.

James Ferguson MD
Board Certified Pulmonary Medicine, Internal Medicine
Newport Hospital
Cell phone 508 769 8508

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi Yan,

I would like to add the following to the conversation in opposition to MedRecycler. I want to ensure my points had links with supportive scientific evidence to support the "substantive" concerns that I hold.

As a pulmonary physician, I believe in real science. Landfills are not an ideal solution, however burning medical waste (and to the scale that is being proposed) has not been tested and has not proven to be safe. It has been theorized that it could be done in a similar manner to other facilities that burn other types of waste. But similar incinerators have led to significant health effects for those people who live in the surrounding areas. The fight against this type of facility is not a new one. This data would also show that it would emit more carbon dioxide per ton than coal, has a track record of having accidents, and jeopardize the health and well being of the surrounding communities.

Just to set the record straight, my duty as a pulmonary physician and doctor in general is to advocate for the health of my patients and the communities in which they live. I in no way support the burning of medical waste in Kent county or any other community in RI, in the US or internationally. It has been proven to increase the risk of asthma, lung cancer, lymphoma and many other adverse health conditions. Often people of low socioeconomic conditions have no option to uproot and leave an area once incinerators such as the one being proposed is put into place. A now 20 year old, Destiny Watford, was just awarded one of the most prestigious international environmental awards for her work to stop an incinerator from being constructed in her community in Baltimore. (https://www.washingtonpost.com/news/energy-environment/wp/2016/04/18/this-baltimore-20-year-old-just-won-a-huge-international-award-for-taking-out-a-giant-trash-incinerator/ [washingtonpost.com])

The incinerator in Baltimore that is in place has been estimated to have been responsible for 55 million dollars worth of increased health care costs.

Similar waste burning operations have been proposed and previously rejected going back to the 1990s. The following are excerpts from Act 92-S 2502, approved on July 14, 1992, which banned municipal solid waste incineration in Rhode Island.

* "That due to the myriad of over four hundred (400) toxic pollutants including lead, mercury, dioxins and acid gasses known to be emitted by solid waste incinerators, the known and unknown threats posed by solid waste incinerators to the
health and safety of Rhode Islanders, particularly children, along with the known and unknown threats to the environment are unacceptable.”

* “That despite the use of state of the art landfill liner systems and leachate collection systems, landfills and particularly incinerator ash landfills release toxic leachate into ground and surface waters which poses an unacceptable threat to public health, the environment and the state’s limited ground and surface water resources.”

* “That incineration of solid waste is the most costly method of waste disposal with known and unknown escalating costs which would place substantial and unreasonable burdens on both state and municipal budgets to the point of seriously jeopardizing the public’s interest.”

RI can't afford to make such a mistake.

Kindly,

James Ferguson MD

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I would like to express my opposition to the medical waste facility in central Rhode Island. I live in East Greenwich and this will severely affect my health and that of my family. Please do not let this business create poisonous clouds around my home. The process is unproven and not safe as well as the renamed version of burning hazardous waste in family neighborhoods.

Sincerely,

James

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
Deny MedRecycler’s medical waste treatment application

Medical waste incinerator will spew chemical weapons over east bay residents.

The Rhode Island Department of Environmental Management recently announced its intent to issue a license to MedRecycler to treat medical waste. My daughter is a lifelong resident of Rhode Island and I have lived here for over 30 years. I am a chemist in the hazardous waste industry and medical waste expert, and I strongly oppose this action.

Make no mistake, Med Recycler’s proposed facility is an incinerator, no matter that it is called a “leading-edge processing facility”. The proposed facility has the capacity to destroy any living thing, which is fine for treating biological hazards, but totally ineffective at destroying chemicals.

Many drugs used to treat cancer have their roots in chemical weapons (mustard gas to name one) and are DNA-altering. These extremely dangerous chemicals can effectively treat cancer, but in the first days following treatment, chemo patients excrete up to 90% of chemo drugs in their original active form. If this cytotoxic human “medical waste” is incinerated, chemo chemicals will become airborne chemical weapons that not only threaten us, but future generations. These chemicals are mutagenic (cause birth defects), teratogenic (skips a generation before causing a birth defect) and carcinogenic (cause cancer).

The MedRecycler system does not eliminate or destroy cytotoxic drugs. Any level of exposure to these dangerous chemicals can cause cancer and birth defects now and in the future.

The MedRecycler incinerator will spew chemical weapons into the air we, and future generations, breathe. Cytotoxic chemicals will wind up not only in our air, but in the Bay, in our soil, in our drinking water and ultimately in us. The consequences are dire for all Rhode Islanders and with the prevailing south west winds the residents of Barrington, Warren and Bristol are targets of the toxic cloud.

RI air permits focus on pathogens and other living biological hazards. Looking at the proposed MedRecycler facility solely on this basis, of course it is safe. What is not being considered are the chemo chemicals classified by the DEM as “Extremely Hazardous Wastes.” A significant amount of this “medical waste” will contain the most dangerous chemicals ever invented.

Approval of this incineration process would trade one ignored problem for another. Currently, chemo-contaminated human waste is being flushed directly into toilets where it ultimately enters Greenwich Bay, the shores of Barrington, and all of Rhode Island. If this MedRecycler facility is approved, cytotoxic waste, human or not, from every hospital within 500 miles will undoubtedly be forwarded to this MedRecycler facility in where it will be incinerated instead of being flushed.
EPA regulations do not allow incineration of drugs in any form, even the pharmaceutical is a trace residue, a few pills, a vial of chemo drugs, or is contained in bodily fluids. OSHA allows zero human exposure to chemotherapy drugs. U.S. Pharmacopeia rules mandate protection for everyone who handles chemotherapy drugs, and requires all used gloves, boxes, and empty vials be disposed of as “trace chemotherapy waste.” That includes protection from the chemicals contained in patient excreta, but no one is enforcing that part of the regulation or adequately educating cancer patients about the risks for the families.

Exposure to secondhand chemotherapy is a global health crisis. The E.U. recognizes the risks and is leading the charge in collecting and segregating chemotherapy patient excreta. The U.S. is not.

The bottom line? Flushing chemo patients’ contaminated excreta or incinerating it yields the same results: more cancer and more birth defects. The DEM seems willing to spend a lot of money and risk our health one way or another.

The good news? There are safe, reliable ways to solve this problem. We can continue to treat cancer with chemotherapy drugs and prevent secondhand exposure to chemotherapy chemicals without contaminating our water or our air. Big Pharma and insurance companies are well aware of the hidden dangers associated with chemotherapy. They know there is an answer to the problem, but they are unwilling to acknowledge the facts or pay for the solution. It’s going to take government intervention to make that happen.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and
• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

James Mullowney,

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See VIII. Hazardous Waste Versus Medical Waste
• See XVI. Buffer Zone
Rhode Island and West Warwick should not be gambling with the health and well-being of residents adjacent and/or downwind of this facility.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

James Pierson,
8 Nichole Ln,
Coventry RI
jamespierson.ri@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
From: (Name) From: (Address)
Jason Beaumier jwbeaumier@yahoo.com
[EXTERNAL] : Medrecyler

Good day,

I am writing in support of the Medrecyler facility proposed in West Warwick. As an East Greenwich resident I welcome this business and think it is an excellent opportunity for New England Tech to have such a facility literally within walking distance for them. The jobs it will bring as well as the technology and reduction of waste will be of great benefit to the West Warwick and the surrounding communities including East Greenwich.

Thank you for your consideration,

Jason Beaumier

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)

Jason jayschlo@gmail.com Re:
[EXTERNAL] : Petition Against Med Recycler from Local Residents
Yan,

Thank you for the reply. I'm happy to hear that you're taking this matter seriously, and you're open to hearing from us. As a resident of East Greenwich, we are hearing a lot of concerned talk about this Med Recycler. The majority of us are concerned about the long term health issues this facility may cause. Even if your study concludes it is safe, we know that malfunctioning equipment or breakdowns may lead to life threatening health problems for our community in the future.

Sincerely,
Jason S.

________________________________

From: Jason Schlossberg <jayschlo@gmail.com <mailto:jayschlo@gmail.com> >
[EXTERNAL] : Petition Against Med Recycler from Local Residents

Hi Yan,

Please help us voice our concerns over the Med Recycler plant in West Warwick. Many of us have only recently come to learn of this facility and the potential negative health implications for local residents. Take a look at the petition linked below. Currently 1,500+ people have signed, and are against the facility due to the close proximity of local homes and businesses.

https://www.change.org/p/west-warwick-town-council-stop-proposed-med-recycler-site-for-1600-division-rd-approval [change.org]

Thank you for your help.

Sincerely,

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Jay Patel
jaypatel195@gmail.com

[EXTERNAL]: Totally Opposed to this idea
I am a resident of East Greenwich.

Please stop this project.

Jay Patel

[EXTERNAL]: https://urldefense.com/v3/__http://PATELINVESTMENT.COM__;!!KKphUJtCzQ!edMyXKD877bAtlUxsWk86SIa9EKb8uzj1kepOQfqlqzrJQPDK78W0ZOl5ct-E6wC1$[patelinvestment[.]com]

Wishing You Active and Healthy Living

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
Good evening,

I am writing to note my opposition to further allowing, enabling, or permitting an untested, unfounded technology for incineration of medical waste (or any waste for that matter) in West Warwick (abutting our neighborhood and community of East Greenwich). Furthermore, this facility will affect all Rhode Islanders and our climate.

Setting aside the optics of this process appearing to be another RI political, loophole driven fast track job with little proven upside, and significant downside. As others have mentioned, this does remind me of the 38 Studios mistake that has cost Rhode Islanders dearly. While I trust due process will prevail, so far I lack confidence the appropriate process has been or will be followed.

To fact based evidence however, I cite an article from the Global Alliance for Incinerator Alternatives from June 2009 (BlowingSmokeReport.pdf (no-burn.org) [no-burn.org] <https://urldefense.com/v3/__https://www.no-burn.org/wp-content/uploads/BlowingSmokeReport.pdf__;!!KKphUJtCzQ!YNtLnS1-rsvikliX23LCOJirRh5dplz7xll825f3nM5TKjYRJ2POyq6--lJ7ML-d$> ). The bottom line is this facility would be an incineration outfit with its own risks. "The core impacts of all types of incinerators remain the same: they are toxic to public health, harmful to the economy, environment and climate, and undermine recycling and waste reduction programs."

Details from the article are included in the link with evidence to support each of the high level points below. Here are the reasons why this is not a good fit for RI, or really any place in the world. This does not include the risks of traffic, transport of waste, and risk inherent in that, which I also find disturbing and concerning.

Each reason provided by MedRecycler-RI and it's holding company as to why this would benefit RI is unproven, and RI does not need to be the experiment that fails miserably.

10 Reasons Why GASIFICATION, PYROLYSIS & PLASMA Incineration are Not the “Green Solutions” Often Claimed by Industry Representatives

Reason #1: Gasification, pyrolysis and plasma incinerators (like mass burn incinerators) contaminate people and the environment with toxic and cancer causing gaseous, liquid and solid releases.

Industry Myth: Gasification, pyrolysis and plasma incinerators are safe and pollution-free.
Reason #2: Emissions limits for incinerators (including mass burn, gasification, pyrolysis and plasma incineration) don’t ensure safety. Emissions from incinerators are also not measured sufficiently and thus overall emissions levels reported can be misleading. In addition, emission limits are not always adequately enforced.

Industry Myth: Gasification, pyrolysis and plasma incinerators are regulated to standards that ensure that they are safe.

Reason #3: Gasification, pyrolysis and plasma incinerators have a dismal track-record plagued by malfunctions, explosions and shut-downs.

Industry Myth: Gasification, pyrolysis and plasma incinerators are operationally proven.

Reason #4: Staged incineration is not compatible with recycling; gasification, pyrolysis and plasma incinerators compete for the same financing and materials as recycling programs. Incineration also undermines efforts to minimize the production of toxic and unrecyclable materials.

Industry Myth: Gasification, pyrolysis and plasma incinerators are compatible with recycling.

Reason #5: Staged incinerators can be even more expensive and financially risky than mass burn incinerators.

Industry Myth: Gasification, pyrolysis and plasma incinerators are a wise investment.

Reason #6: Incinerators inefficiently capture a small amount of energy by destroying diminishing resources. Gasification, pyrolysis and plasma incinerators are even less efficient at generating electricity than mass burn incinerators.

Industry Myth: Gasification, pyrolysis and plasma incinerators reliably produce “renewable energy.”

Reason #7: Incinerating discarded materials depletes resources and in many cases permanently damages the natural environment.

Industry Myth: Gasification, pyrolysis and plasma incinerators are environmentally sustainable.

Reason #8: Staged incineration technologies are contributors to climate change, and investment in these technologies undermines truly climate-friendly solutions.
Industry Myth: Gasification, pyrolysis and plasma incinerators are good for the climate.

Reason #9: All types of incinerators require a large amount of capital investment, but they create relatively few jobs when compared to recycling and composting programs.

Industry Myth: Gasification, pyrolysis and plasma incinerators create good jobs.

Reason #10: Wasting valuable natural resources in incinerators and landfills is avoidable and unnecessary.

Industry Myth: Wasting materials is inevitable.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Mr. Dennen and colleagues,

I respectfully submit my sincerest and most emphatic plea that this Medrecycler facility NOT be approved. I was unable to participate in the “full” call last night – opposition of this ill-conceived project from our community is so strong that the call was at capacity.

I have lived in East Greenwich for nearly 20 years. I have five children. I own 4 businesses in Rhode Island including a commercial real estate development firm. I have been before countless boards for zoning, traffic, and all sorts of development related matters where we have had engineers and architects squabble over small drainage matters, curb cuts, and protecting wetlands with 50’ and 100’ buffers. This ludicrous proposal is not even on the same planet as anything I have ever seen in 20 years of business or property development in Rhode Island.

It is bad for absolutely everyone and good solely for the small group who aim to financially gain from it. This type of facility belongs near the landfill or somewhere far from our small children, our families, and our homes.

I sincerely thank you for listening to my concerns and for your work in protecting our community.

Best regards,

Jay Colgan

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
In response to today's Kent County Daily Times report about this subject, I am against putting this facility in West Warwick and nearby East Greenwich. Although I know that MAYBE these types of recycling facilities are needed for the future, I don't think this area is appropriate. There is so much traffic congestion as it is in that area, more trucks delivering products to be incinerated is not good.

But, my major concern, as is well known in RI, once out of state medical facilities get wind of this, they will be sending their waste to our Town. Oh, sure, only X amount of waste will be allowed, but as more greed seeps in, more waste will come. I don't want another Station Night Club incident where West Warwick will be known, again, for some once in a lifetime fire or, in this case, people getting sick from pollutants. What about Quonset? that is an industrial area which is about to get plenty of bond money. A small Town like West Warwick, that has so many issues, cannot take on more even is there is $$$ rewards. It will end up costing up more and just to power 1,000 homes?

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Jean Baldwin McLevedge
East Greenwich

I am a resident of East Greenwich. I assume you know that Mr. Campanella is a fraud and has already been mentioned in a New York Times article about another scam in New Jersey last year.

https://www.nytimes.com/2020/05/26/nyregion/coronavirus-fraud-masks-new-york.html?fbclid=IwAR32jHwn3LhSMuFeIA0NGi4QmZbh7n0N2bgopD6BuKuJculpIwSufzvyo [nytimes.com]
<https://urldefense.com/v3/__https://www.nytimes.com/2020/05/26/nyregion/coronavirus-fraud-masks-new-york.html?fbclid=IwAR32jHwn3LhSMuFeIA0NGi4QmZbh7n0N2bgopD6BuKuJculpIwSufzvyo>

He has no management team.

The parent company of MedRecycler is insolvent and the science underlying MedRecycler is questionable:

https://www.reddit.com/r/pennystocks/comments/lhi78p/sun_pacific_snpw_a_word_of_caution/ [reddit.com]

It appears to me that RIIFC conducted no due diligence prior to deciding to extend a multimillion dollar bond to Mr. Campanella.

I hope that you already know all of this and that you and your team do not intend to recommend approval of any activity by Mr. Campanella or his associates.

Thank you,

Jean Baldwin McLevedge
East Greenwich

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
Jeanie Gorrie
jeaniegorriehomes@gmail.com

I oppose Medrecycler

I would like to go on record as opposing this plant. My concerns are:

**BURNING WASTE**

Medical waste is made up of about 25% plastic [nationalgeographic.com]

<i>https://www.nationalgeographic.com/science/2019/10/can-medical-care-exist-without-plastic/</i>, making it all the more toxic to burn. When plastic is incinerated, it releases hazardous heavy metals like lead and mercury, as well as highly toxic pollutants like dioxins [ciel.org]


Dioxins, in particular, pose tremendous risks for those living in frontline communities – those who live and work near incinerators and are regularly exposed to toxic emissions. Dioxins are poisonous compounds [epa.gov]

<i>https://www.epa.gov/dioxin/learn-about-dioxin/</i> that break down very slowly in our environment and in our bodies. They can cause cancer, liver and endocrine damage, infertility, and birth defects [medicalnewstoday.com]

<i>https://www.medicalnewstoday.com/articles/17685*health-risks/</i>. According to the Environmental Protection Agency, medical waste incinerators are the second-largest source [ofmpub.epa.gov] of dioxin emissions in the country. Because of this, the World Health Organization discourages [who.int] the burning of medical waste altogether.

Despite this toxic reality, companies like MedRecycler want to bring back this dangerous and outdated practice through supposedly “new” technologies like pyrolysis. But now is not the time to reverse our progress on dioxin emissions.

M

Jeanie Gorrie  e-PRO®, C2EX
Pricing Strategy Advisor [elink.clickdimensions.com]

<i>https://elink.clickdimensions.com/c/6/?T=OTUzMTUwMDU*3AMDItYlwMTQ4LTBjOTE0NTZjYzNmZjQ1OTBiNjBiYTI3NzI1OTcwYzY2*3AamVhbmllZ29ycmllaG9tZXNAZ21haWwuY29t*3AY29udGFiZC1mYjZhYzg4Nzg0OGNlZWRqMzU2Zjc1MTBiZTYyY2Y0Ny1kODFhZTdiODE1YWY0ZWUzOWFj</i>
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Deny MedRecycler’s medical waste treatment application

This is an unproven technology with potential environmental hazards being allowed right next to a day care and neighborhood. Rhode Island shouldn’t be New Jersey’s dumping ground. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jeanne McCaffery,
420 Stoneridge dr,
East Greenwich RI
jeannemccafferyri@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XVI. Buffer Zone
Good morning Yan,

I am writing to you my support for the MedRecycler facility proposed in West Warwick. I am a resident of RI and see this project as a solution to our landfill capacity issue we could see in 2030. Now more than ever, there needs to be innovative solutions to rid of medical waste. Not only does this project create jobs in times where there are many without jobs, it creates a much needed new tax revenue stream for both the State and Town as well as renewable energy that will power 1,000+ homes in the area.

The concerns being raised are not fact based or on the science behind how this plant will operate. From what I understand, this site will be cleaner than most of its neighboring manufacturers and meets some of the most stringent emissions requirements in the country.

Best Regards,
Jeff Gordon

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I am writing to add my name to the growing number of East Greenwich residents who strongly oppose to the proposed pyrolysis plant. I am very concerned about the storage of medical waste on site within close proximity to New England Tech, homes, businesses and families. There has been no information provided which guarantees the safety of this waste nor that it would be free of contaminants. The inherent danger to our community is not a risk I believe we should take.

Additionally, the obvious vast increase to traffic, particularly through the use of trucks will cause problems as well. I recently moved my elderly parents from out of state to a condo very close to the proposed site. I did so with the intention of have them be in a safe area. If this plant is to open I will no longer feel this is an area in which I want them nor would I feel others in our community are safe. The health and wellbeing of our residents should be much more important to all of us than this company.

Thank you for your consideration.

Sincerely,

Jennifer Longa
Bow St.
East Greenwich, RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
Dear Ms. Li,

I am writing to express my significant concerns about the proposed MedRecycler Pyrolysis plant under consideration in West Warwick on the East Greenwich line. My family and I live on Middle Road in East Greenwich, minutes away from the proposed site. As a young mother of two, I chose to live in this area because it is a safe and beautiful location to raise a family. Approving this plant would pose a danger to our community and environment. A plant like this should not be placed in such a populated area, so close to neighborhoods, day care centers, and bustling route 2. The lack of understanding regarding this technology and it's impact on health, safety, and the environment is concerning. Even more concerning is the fact that this plant will pose a potential risk of contamination of unknown pathogens and chemicals if there is an accident or spill in this process or in transporting medical waste to this facility. Whatever economic benefit this plant will bring does not justify the risks that it will pose to our community. I urge you to deny the permit for the safety of our community and environment.

Thank you,
Jennifer Schwab

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear RI DEM,

After listening to the public forum for West Warwick/East Greenwich and the proposed MedRecycler project, I felt compelled to reach out to your office. As an RI small business owner, I was disappointed to learn that DEM would consider granting approval to a project that will, so obviously, damage the health and safety of our community.

As a sufferer of asthma, I can attest to the real, daily struggles of the respiratory disease that comes from these facilities. The rates of asthma and severe respiratory disease among the resident population was (and continues to be) staggering in areas where these facilities exist. These medical waste smokestacks have state of the art cleaning scrubbers, meant to meet climate emission controls, and still the human and environmental effects are horrendous. Warmer seasons bring air quality in these neighborhoods to nearly unbreathable levels. The water quality of rivers and canals in the neighborhoods are completely toxic- irreparably polluted from years of waste water disposal and runoff. I have two small boys and live in RI by the ocean for clean air and water. The MedRecycler project would destroy both overnight.

Should this sound alarmist, I urge you to speak with the many experts opposed to this project. Kevin Budris, with the Conservation Law Foundation, who has science to support the fact that burning medical waste is not a source of green energy. Our own State House is also making strides towards striking medical waste burning as an option for the Ocean State, Bridget Valverde is an excellent source for these details. Looking into the details proposed by MedRecycler to DEM- they have NO SPILL PLAN, meaning they have no idea how or plan to clean up a problem. They state that they will burn 70 tons of medical waste a day, 24 hours a day. The fact that MedRecycler has rebranded "incinerator" to "pyrolosis" is semantics. Gases and vapors will be expelled into our air and these noxious fumes will be contaminated with known carcinogens that we will first breathe, then consume in our drinking water and through the plants we eat that are watered by this pollution. Waste water generated from their process will be diverted into our systems where it will contaminate our coastlines, beaches and their delicate ecosystems. This is a huge health and environmental step backwards in a time where we have the capabilities and ethical compass to move our local environment in a clean and efficient direction. This is the exact opposite of being the 'good neighbor' that MedRecycler proposes to be.
I understand that Rhode Island places an important emphasis on business and economic health. Through this lens of creating 40 jobs, it may be tempting to view the MeRecycler project as a positive thing for the state. Keeping in mind that the parent company Sun Pacific Holding Corp, LLC, has never been solvent, and is reliant upon $17.5m in bonds from Commerce RI, let's also look at the long term impact of the pollution that this plant will create:

-1600 Division Road (the address for MedRecycler) is a shared office park. The existing tenants currently employ over 100 Rhode Islanders. They will all be forced to relocate (possibly out of the state) to a location where their employees are safe from the hazardous air and water pollution of their neighbors.

-Ground water will become polluted in East Greenwich, and flow south to the rest of the state and into the Bay. The majority of drinking water in East Greenwich homes is through well water systems.

-Now the air and water quality becomes so undesirable in East Greenwich, that people move away.

-This exodus floods the real estate market, driving prices down, then the town struggles to find people willing to live in a polluted environment and tax assessments nose dive. The schools tank. Small businesses flee.

-Where East Greenwich was once a jewel in the Rhode Island ecosystem of skilled workers, residents, small business, thriving Main St economy and a great school system; we now have a polluted backwater where you can't give away homes and wouldn't eat a thing grown in the soil.

Please think this through and give the situation the gravity it deserves. Please DENY solid waste permits and any further permits to your office from MedRecycler (or SunTrust Holdings, LLC). It is really a life and death decision for our town.

Sincerely,
Jenni Laundon

<https://drive.google.com/uc?id=1Qrfu985uyzfOyEVzcPWO8cBTaTgYHzAq&export=download>
Jenni Laundon
CEO
Frances Paper

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process

• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit

• See VIII. Hazardous Waste Versus Medical Waste
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

In addition to the below.
This will absolutely ruin the established and prominent surrounding neighborhoods and businesses. Not just with the chemicals that will be burning and distributed through the air but is just not appropriate to be in an urban location.
Already planning to sell my home if this proceeds.
The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jennifer Bonomo,
40 Nathaniel Green Dr,
E Greenwich RI
bonomojennifer@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Jennifer Lloyd
Jkl881@hotmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

It's not good for the environment The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jennifer Lloyd,
Post road,
WarwickRI
jkl881@hotmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
Good afternoon,

I am writing with concerns over the medical waste plant proposal in WW. I live close to the area and I have 4 young children. I do not want us to be guinea pigs for this project. From what I can find there’s only 1 other plant using this process in the country. It is not CLEAN energy. I can’t understand how ANYONE would consider putting a facility like this in a community?????? I work in the medical field and do everything I can to protect myself and my family. I am VERY concerned about our health and safety regarding this proposed project in my backyard.

From PROJO: “MedRecycler says the project would create 20 to 30 permanent jobs and support up to 100 construction jobs during build-out of the 48,000-square-foot facility.”

20-30 jobs is absolutely not enough to justify this facility being in a residential area!

Also from PROJO: “ MedRecycler is a subsidiary of New Jersey-based Sun Pacific Holdings, of which Campanella is president and CEO. He has no previous experience in pyrolysis or energy. His name was recently in the news in connection to an alleged criminal scheme to sell New York City respirators at inflated prices [nytimes.com] <https://urldefense.com/v3/__https://www.nytimes.com/2020/05/26/nyregion/coronavirus-fraud-masks-new-york.html> at the beginning of the COVID crisis. Although one person was charged in connection to the deal, Campanella was not and has denied any involvement.”

NO EXPERIENCE in pyrolysis or energy!! And shady business practices??

Everyone I know is opposed to this project and I truly hope our voices are taken into consideration.

Sincerely,
Jennifer Silva

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello,

I am a current resident of East Greenwich, RI and I am strongly against MedRecycler using pyrolysis so close to my home and my daughter's daycare. My daughter’s daycare will be directly next-door to a medical waste building? I am very concerned that this process of pyrolysis is unsafe. I can’t seem to find any documents or research that supports that it is safe. I find it upsetting that I really hadn’t heard much about this plan until earlier this week. What if there is a leak, a fire or an explosion? How will you ensure that we will all be safe? Accidents happen and my child will be at risk and I am not okay with taking that chance. I also am worried about the smell and the traffic that will be added to our roads. I don’t feel that a company that “heats” medical supplies and other waste for 24 hours a day through a process that is not tested should be allowed anywhere, let alone an area surrounded by schools, daycares, businesses and homes. I am very much against this happening. I have listened to previously recorded meetings with Mr. Campanella and I still don’t want this building right next door. I am concerned that we don’t know what is in the waste that comes in. We don’t know what is really inside the containers. That is concerning- how do we spot check and make sure there isn’t solid waste? I understand that the waste is documented but I don’t trust humans to be perfect. I don’t care about the process or the models, It can't be 100 percent safe all the time so I don’t want it near my kids school and my house. Respectfully, Mr. Campanella saying that he is going to do everything that he can to be safe isn’t enough.

Thank you,

Jen Hayes

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Good morning, I’ve been followed the information about this new recycling plant as it’s called. We live in the surrounding area neighborhood with elementary age children and we are appalled this is even a thing being considered for our community. The amount of people and families who live here and pay taxes are against this and it’s increasing clear. For this to continue to be a business option I can only assume it is for greed and money purposes and not for the communities highest needs. Between the lack of wildlife and woods that have been destroyed in the 6 short years I’ve been here is disgusting to say the least. Once a quiet home I can now here tractor trailers through the space to the highway and as these things continue I no longer want to live in this area. Most feel the same and I’m sure that will become a bigger issue after people and children will possibly get sick from all the chemicals that will soon be sent out into our neighborhood. Sincerely and with complete disgust at the lack of consciousness Jessica Bucci

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
I am writing to voice my opposition to the medical waste recycling facility proposed for West Warwick. This business utilizes an unproven technology with potential health risks to the members of the community. In addition, the traffic and noise this business will bring into the neighborhood is unacceptable.

I represent one family but the community at large is vehemently opposed to Medrecycler. Please listen to the myriad voices in the local community who do not wish to live near this facility.

Regards,

Jessica Ainsworth
amarack Dr
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
To whom it may concern,

My name is Jessica Tholander and I am writing this email today to let you know I am opposed to the medical waste facility to be built at 1600 Division Road. I am a resident of East Greenwich and this is a bit too close to home for me. I am a mother of a young child and believe this is unhealthy and inconsiderate to the people and children growing up in this area. You will destroy our land and health! Please do not let this facility dump their WASTE in our NEIGHBORHOOD!

Sincerely,
Jessica Tholander & Family.

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Jessica Marciano jessicamarciano1005@gmail.com

[EXTERNAL] : strongly opposed to the proposed MedWaste facility in West Warwick
Hello Janet, Mark & Yan,

We are East Greenwich residents who live close to the proposed sight for the MedWaste Facility and wanted to voice our concerns regarding this. We strongly oppose the proposed MedWaste facility in West Warwick.

This is the last kind of business we would want in the area, especially since it is untested. There are so many companies, communities, a college and daycare close by. We have small children in that daycare and we would not feel comfortable sending them there if an untested process was being run at a medical waste company one parking lot away. As parents we do everything in our power to keep our children safe and healthy and the last thing we would want is for them to potentially be breathing in these pollutants. On top of potential pollutants, there will be a lot more traffic from the trucks carrying the medical waste and more noise from the building similar to a leaf blower running 24/7. If this company wants to test out processes they should do it in their hometown in NJ, not ours.

Our community would be extremely grateful if you would please deny their required DEM permits and stop this project!!

Thank you for your time!

Concerned parent and neighbor,
Jessica Marciano

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
My name is Jessica Newkirk and I am an East Greenwich resident who strongly opposes the proposed Medrecycler Medical.

As a nearby resident of the proposed site, I have deep concerns over the environmental impact to ground water and air quality that would affect our community. The air concerns stem from both the exhaust from the disposal process itself as well as the increase in industrial trucking through the area. The disposal process is largely unproven for medical waste with unknown long term effects on the environment and community. As such, the facility is an obvious health risk for surrounding residents, children and wildlife.

Before moving to East Greenwich, we lived about a mile away from T.F. Green Airport. We could smell the exhaust from the planes. In addition to worrying about the health impact on the environment and ourselves, we were extremely concerned about raising 2 small children there. This was one of the driving forces that made us decide to move to East Greenwich. We loved the fresh air and ruralness that East Greenwich provided.

My kids spend all day in this community between school and at home breathing this air. My husband and I have been working from home for the past year and breathe this air all day long. As a family, we spend as much time as possible outside in our yard, running/walking/biking in our neighborhood, and at local parks & playgrounds. So health and air quality is of utmost importance. Adding a waste facility without any measurable data of the long-term effects on the community is not something we support. I hope that we can count on DEM's partnership to oppose the Medrecycler Facility in our community.

Thank you,

Jessica Newkirk
75 Atherton Rd.
East Greenwich, RI
02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
Dear Mr. Li,

We implore you to use your trusted power to deny a permit to this very dangerous initiative. Birth Defects and Cancer are not what RI residents want. We prefer our healthy bodies and day jobs to hospital visits and illness. Now we learn that this process will cause birth defects in our children’s offspring. How did this project get this far? This is a no brainer. Please make the right choice for Rhode Island and its residents. MedRecyler is not a green initiative. Under the very best circumstances, this project is precarious at best. Here we have untested equipment from South Africa wedged into an inadequate space. It’s akin to putting a cement mixer inside of a shoebox according to engineering experts that I have spoken with. Let’s add some cancerous body parts, plastics, chemo drugs and light a fire to it. - All overseen by a man who was in trouble on ventilator scams! What could go wrong!?!? The legal fees that the state of RI will incur will undoubtedly outweigh the $17 million in bonds. Let’s invite the founder of MedRecyler to pitch this facility in his home town of NJ and see how well it is received. We thank you for your time, your good conscience, and your decision to deny a permit to MedRecyler.

Thank you,

Kindly,

Jessica Rosenkaimer

The Rhode Island Department of Environmental Management should deny MedRecyler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecyler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecyler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecyler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecyler and neighboring tenants or between MedRecyler and a nearby daycare center; and

• MedRecyler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jessica Rosenkaimer,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
Dear Mrs. Coit,  
Dear Mr. Li,  

We, the citizens of Rhode Island thank you in advance and urge you to use your trusted power to deny a permit to this unethical and extremely dangerous initiative. Experts have weighed in. Illness is not what RI residents choose. We prefer our healthy bodies and day jobs to hospital visits and chemo treatments. Now we learn that this facility will cause birth defects in our children’s offspring. How did this project get this far? Please make the right choice for Rhode Island and its residents. MedRecyler is not a green initiative. Under the very best circumstances, this project is precarious at best. Here we have untested equipment from South Africa wedged into an inadequate space - next door to a daycare. “It’s akin to putting a cement mixer inside of a shoebox.” according to engineering experts that I have spoken with. Let’s add some cancerous body parts, plastics, chemo drugs and light a fire to it - All overseen by a man who was in trouble on ventilator scams. What could go wrong?!  

The legal fees that the state of RI will incur will undoubtedly outweigh the $17 million in bonds. Let this not be a stain on RI history. Let’s avoid an Erin Brockovich scenario with your names on the red stamp. Let’s instead, invite the founder of MedRecyler to pitch this facility in his home town of NJ and see how well it is received. We thank you for your time, your very good conscience, and your decision to deny a permit to MedRecyler.  

Thank you,  
Kindly,  
Jessica S. Rosenkaimer  

DEPARTMENT RESPONSE:  
- See I. Issues Related to the Department’s Role in the Permitting Process  
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I am emailing you today re: The Medical Recycler Waste Management Facility License: which I just learned is up for application via zoom on 1/25 and March 15th.

I am Overwhelmingly concerned re: the plans for this facility. This could be a significant health risk for all of us who reside directly across the street as well as surrounding neighborhoods and a daycare center. They state that there is “no health risk”. But with all that has transpired in recent months its hard to trust anyone especialy with our health and that of our children.

Please be our voice!!!!! I reside in East Greenwich and feel that its very unfair for West Warwick too approve such a potentially dangerous toxin and reap the benefits not too mention the several deliveries this site will receive on a daily basis resulting in wear and tear of roads and infrastructure.

Sincerely,

Jill Cranham Rn,Bs,Med

East Greenwich RI

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Jill Spitzer  
Jill.Spitzer@dell.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

This untested and unproven technology should not be approved by the DEM as the risks outweigh the rewards being promised by this out of state company. I don't think this facility belongs in RI or any other state for that matter. Please do not make our residents guinea pigs and find out too late this is not a facility that should be operating anywhere. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jill Spitzer,  
105 Fox Run,  
East GreenwichRI  
jill.spitzer@dell.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
Dear RI DEM team,

Attached are my personal comments as a resident of East Greenwich regarding the proposed Medrecycler-RI, Inc. facility in Warwick.

Thanks,
Jim Grundy
72 Brayton St.
East Greenwich, RI 02818
As a resident of East Greenwich, I have the following comments regarding the application by Medrecycler-RI, Inc. to open and operate a medical waste disposal facility in Warwick. My comments are my own as a private citizen. I appreciate using new technologies, such as pyrolysis, to help mitigate our negative impacts on the environment. I do, however, have some questions and concerns related to the application as it was released to the public for comment, particularly concerning potential release of toxic contaminants in the facility waste streams.

As noted in the cover letter of the Minor Source Permit 2454-2457, granted by RI DEM Office of Air Resources on May 7, 2020, Medrecycler-RI Inc. “may be subject to the requirements of 40 CFR 60, Subpart A (General Provisions) and Subpart JJJ (Standards of Performance for Stationary Spark Ignition Internal Combustion Engines). Please contact the U.S. Environmental Protection Agency – Region 1 for a compliance determination.”

Has Medrecycler-RI, inc. contacted the U.S. EPA Region 1 for a compliance determination?

In the Minor Source Permit, Part B.4 notes that the facility is subject to air emission limits on Listed Toxic Air Contaminants as specified in 250-RICR-120-05-9.17, Appendix A. The specified annual limit for PCDDs, PCDFs, and dioxin-like PCBs is $3 \times 10^{-7}$ lb/year.

In the permit application by MedRecycler-RI, Inc., it noted in Section 40, Applicable Regulations for the Process, that the “processing facility has no air emissions as regulated by NESHAP.” It failed to identify relevant RI DEM air emissions regulations. During the virtual public meeting to discuss the permit on March 15, 2021, Mr. Richard Bingham, the technology supplier to Medrecycler-RI, Inc., noted that any dioxins or furans that may be formed during the process would be captured or destroyed either through scrubbing or thermal oxidation.

Although Attachment A of the application, which may have more information on estimated air emissions, was not available for public review, the main body of the application never once offers an estimate of PCDD/PCDF and dioxin-like PCBs during any of the processes. Nor does the application reference any demonstration or pilot scale data to suggest the particular process that is suggested will meet the emission limits of these compounds as required by the Listed Toxic Air Contaminants. While pyrolysis has been shown to produce fewer PCDD/PCDFs than combustion, pyrolysis of chlorine-containing wastes at 850 °C still produce substantial amounts of these compounds.¹

It should be the responsibility of the applicant to provide estimates of emissions of Listed Toxic

¹
Air Contaminants prior to application approval, just as emissions of SO\textsubscript{x} and NO\textsubscript{x} are estimated in Figure 2 of the application. A quick calculation, assuming the molecular weight of 2,3,7,8-TCDD is a good estimate of the average weight of PCDD/PCDFs and dioxin-like PCBs, gives a minimum Listed Toxic Air Contaminant Limit of roughly $3.3 \times 10^{-8}$ lb Cl in PCDD/PCDF/yr. Comparing that to the anticipated feedstock of roughly 2400 tons Cl/yr (assuming 70 ton/d waste at 8.54% Cl for 310 d), the process would only need to release about $7 \times 10^{-13}$ % of the incoming chlorine as PCDDs/PCDFs through the stack to exceed RI DEM emission requirements. To claim the process can achieve acceptable levels of removal needs substantiation.

Section 40 of the application also does not mention potential regulations related to solid waste disposal. The applicant should also estimate concentrations of hazardous substances that may be present in the output solids, as the solids may be subject to disposal as hazardous waste under RCRA.

According to the Minor Source Permit, testing for Listed Toxic Air Contaminants is not required during startup and shutdown phases of process operation. Startup and shutdown represent times when the process is operating sub-optimally, which are also times when contaminants may be more likely to be emitted. Testing during these periods, in addition to the required monthly testing, would give better estimates of emissions of Listed Toxic Air Contaminants.


DEPARTMENT RESPONSE:
- The commenter asks about the U.S. Environmental Protection Agency. While the Department has kept them informed about the site, they have no direct role in the permit review.
- See VIII. Hazardous Waste Versus Medical Waste
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Good Evening Yan,

Please accept this attached document as a public comment to go with my zoom comments on the topic. I will have others.

Thank you and could you acknowledge this email.

Jim Mullowney, President
Pharma-Cycle, LLC.
Associate Member American Society of Clinical Oncology
Member of the American Chemical Society
Member American Society of Health-System Pharmacists

(617) 755-0883
March 2021

TO: State of Rhode Island  
Department of Environmental Management  
Office of Land Revitalization & Sustainable Materials Management

FROM: Jim Mullowney  
President & CEO, Pharma-Cycle LLC  
Science Advisor to the Cytotoxic Safety Council

RE: Comment Hearing on a Medical Waste Management Facility License

Offering comment in opposition to the issuance of a new license to MedRecyclerRI, Inc to treat medical waste.

As a chemist and medical waste expert, I serve as a science advisor to the Cytotoxic Safety Council and own a Rhode Island based company that safely disposes of excreted cytotoxic drugs. Many drugs used to treat cancer have their roots in chemical weapons and are DNA-altering. Any level of exposure to these dangerous chemicals can cause cancer and birth defects now and in the future.

In 2009, I gave a presentation to EPA headquarters entitled “Drugs Are Chemicals Too.” As a result of the information provided in that discussion, almost every medical waste incinerator in the U.S. was shut down. It’s a simple statement. Nothing has changed since that 2009 presentation.

Make no mistake, MedRecycler Pyrolysis will destroy any living thing which is fine for treating biological hazards that die when exposed to sunlight. The proposed incinerator does not have the same effect on chemicals.

Rhode Island air permits focus on pathogens and other living dangers. Looking at the proposed MedRecycler facility solely on this basis, of course it is safe. What is not being considered in the other dangerous chemicals that are classified by the DEM as “medical waste.”

A significant amount of this “medical waste” will contain the most dangerous chemicals ever invented. During WWII, the U.S. Navy vessel S.S. John Harvey was carrying liquid Mustard Gas (aka Mustargen, a common chemotherapy drug) was bombed in Bari Harbor in Italy, catching fire and gasifying the Mustard Gas. Thousands were killed, but it was discovered the cancer patients got better, this was the birth of chemotherapy.¹

¹ The Day of Battle by Rick Atkinson “The Entire World Was Burning” page266 - 278

These very dangerous chemicals are used very effectively to treat cancer, but as an unintended byproduct of chemotherapy treatment, chemo patients excrete up to 90% of
chemo drugs in their original active form. If the chemicals remaining in cancer patients’ “medical waste” are incinerated, they will become airborne chemical weapons that threaten us and future generations. These chemicals are mutagenic (cause birth defects), teratogenic (skips a generation before causing a birth defect) and carcinogenic (cause cancer).

These chemicals are drugs. The MedRecycler system does not eliminate or destroy them.

The EPA recognized the dangers of incinerating medical waste and incorporated that fact into medical waste incineration regulations. EPA regulations do not allow incineration of drugs in any form, including drugs remaining in bodily fluids.

The proposed MedRecycler facility in West Warwick is a medical waste incinerator. It will take in nearly 23% oxygen and return less than 2% oxygen in the Syngas.

Anyone who has ever lit a campfire knows that the wood itself does not burn. The gases created by the heat burn. Pyrolysis captures that gas before it catches fire. The MedReclyer facility is capturing that gas, moving it feet away, and incinerating it.

Pyrolysis has been around since the 1870’s with its beginnings in coal gasification. Those in the environmental protection world know what a disaster that process left for future generations.

This MedRecycler medical waste will use a century-old
process that caused terrible damage to our environment. Their facility will put chemical weapons into the air we breathe, the air our children and families breathe, and the air future generations will breathe. They will wind up not only in our air, but in the Bay, in our soil, and in our drinking water. **And ultimately in us. The consequences are dire.**

The U.S. regulation covering medical waste incinerators (40 CFR 60.55C) was changed in 2009 when I, and many other advocates, sounded the alarm. **The regulation prohibits pharmaceuticals from being disposed of in a medical waste incinerator. PERIOD.** This regulation does not discriminate as to whether that pharmaceutical is a trace residue, a bottle of pills, a vial of chemo drugs, or is contained in bodily fluids or contaminated waste from cytotoxic drugs.

**The World Health Organization**

The E.U. is leading the charge in collecting and segregating chemotherapy patient excreta in hospitals and outpatient settings because they recognize just how dangerous this chemical waste is. The U.S. is lagging in this regard. We don’t adequately educate cancer patients or enforce the regulations set forth in USP800 (see below). Hospitals and outpatients are flushing contaminated waste directly into toilets where it ultimately enters our waterways. If this MedRecycler facility is approved, cytotoxic human waste will undoubtedly be forwarded to this facility in a “red bag.” With the proposed process, the chemotherapy chemicals will be incinerated and will spew life-threatening cytotoxins out of the stack and into our air.

> “Any discharge of genotoxic waste into the environment could have disastrous ecological consequences.”
> — WHO

**U.S. Government Regulations**
In 2019 United States Pharmacopeia (USP), a regulatory body of the FDA, issued USP800 protecting people from cytotoxic chemotherapy drugs.

This act of Congress, The Drug Quality and Security Act (Public Law 113-54), was signed by Senators Sheldon Whitehouse, Senator Jack Reed, Representative David Cicilline and Representative Jim Langevin. These distinguished legislators are all very aware of the dangers of these cytotoxic drugs and have been given detailed presentations on the problem.

USP800 mandates that everyone who handles these chemotherapy drugs, from pharmacist to nurses to techs and even the people un-packing the boxes containing these drugs, must be protected. In fact, the regulations exceed those necessary to protect workers who are dealing with COVID. They must use TWO pair of special chemotherapy gloves. Once used, both pairs of these gloves, the box, the empty vial and every cytotoxic-drug-contaminated item must be disposed of as medical waste. That means all of the chemo-contaminated waste coming out of every hospital in within 500 miles will end up at this proposed MedRecycler facility. Subsequently the chemicals will enter the Rhode Island environment and will expose our families to extremely hazardous chemicals that cause birth defects and cancer.

USP 800 also includes protection from the cytotoxic drugs contained in urine, feces, vomit and sweat of patients. When these human excreta are collected and “redbagged,” it will also reach the proposed MedRecycler facility to be incinerated with the same result. Chemo chemicals will be released right into our air. And it if is not collected, it still reaches our environment when it is flushed right down the toilet.

OSHA allows ZERO human exposure to chemotherapy drugs, the details of which can be found in their Hazardous Drug Policy. Ten years ago, every hospital in the country was notified of the dire consequences of exposure to these chemicals in a letter from OSHA, NIOSH and the Joint Commission on Healthcare. They take this stuff very seriously.

State of Rhode Island Regulations

In 2012, the Rhode Island Legislature formed a committee to evaluate the dangers involved with medical waste that was being flushed into toilets and subsequently entering our water. This led the Rhode Island DEM to create a new category of hazardous waste: “Extremely Hazardous Waste R006.” This regulation specifically places waste that “contains chemotherapy agents that are antineoplastic or cytotoxic, including but not limited to drugs listed in the NIOSH list of Antineoplastic and Other Hazardous Drugs” into this newly created category.

The medical waste collected and incinerated by MedRecycler will release chemotherapy-infused medical waste, identified by the DEM as “extremely hazardous waste” right into the RI air. More cancer and birth defects will be a direct result of this action.
Lack of Enforcement

The insidious nature of improper disposal of cytotoxic human waste is not limited to the Rhode Island DEM. In fact, the EPA, the FDA, Health and Human Services, the healthcare industry are agencies we rely on to protect people from the grave dangers of secondhand exposure to chemotherapy drugs. Cancer is a big business. Hospitals, doctors, veterinarians and pharmaceutical companies reap billions taking care of patients with cancer. And with good reason. Even the U.S. Department of Defense shut down their chemical weapons incinerators because of the harmful effects on people and environment. We need to fight chemistry with chemistry, not an incinerator.

Unfortunately, the drugs used to cure cancer also cause cancer. And often the dire consequences of secondhand exposure to these dangerous chemicals aren’t seen for months or even years to come. Your doctor knows it. The hospitals know it. Pharmacists and Big Pharma know it. Unfortunately, most patients and families are unaware and are unwittingly exposing their caregivers and loved ones. Preventable cases of cancer and birth defects are continuing to happen every day.

The regulations are in place; however, they are not being enforced. Why? There is no mechanism to pay for protecting our people. Pharmaceutical companies are afraid of the liability. Insurance companies cannot get reimbursed for any safe disposal mechanism without a CMS number. And what about those who are uninsured? If only the wealthy can afford to protect their families and our environment, what happens to those who have no means to pay for safe disposal?

There are safe and reliable ways to control secondhand exposure to chemotherapy drugs while we protect our people and the environment. We can prevent many, many cases of cancer and birth defects and protect the environment in the process. We did it with secondhand smoke. Now it’s time to step up and move forward, not approve the MedRecycler facility which will return us to a doomed past.

This is and continues to be a global health crisis. Approval of the MedRecycler medical waste incinerator will not help; in fact, it will exacerbate an already dire situation.

DEPARTMENT RESPONSE:

- A significant portion of this discussion is focused on chemotherapy patients excreting or defecating into sewer systems. This is not relevant to the issue at hand.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste
Good Afternoon Yan and Mark,

Would you confirm that this updated comment will be added to the record and not replaced.

Thank you. For your help.

Jim Mullowney, President
Pharma-Cycle, LLC.
Associate Member American Society of Clinical Oncology
Member of the American Chemical Society
Member American Society of Health-System Pharmacists

(617) 755-0883
April 14th, 2021

TO: State of Rhode Island
    Department of Environmental Management
    Office of Land Revitalization & Sustainable Materials Management

FROM: Jim Mullowney
    President & CEO, Pharma-Cycle LLC
    Science Advisor to the Cytotoxic Safety Council

RE: Additional Comment Hearing on a Medical Waste Management Facility License

Offering comment in opposition to the issuance of a new license to MedRecyclerRI, Inc to treat medical waste.

I am an environmental chemist and medical waste expert with more than three decades of experience. I have spent the past 13 years addressing the dangers posed by trace amounts of chemotherapy drugs. Many drugs used to treat cancer have their roots in chemical weapons and are DNA-altering. Any level of exposure to these dangerous chemicals can cause cancer and birth defects, now and in the future, they are called Non-Threshold chemicals. Forget everything you thought you knew about 500 year old toxicology “the dose makes the poison” does not apply.

In 2009, I made a presentation to EPA headquarters entitled “Drugs Are Chemicals Too” that demonstrated how incineration of hazardous drugs releases these dangerous chemicals into the air. As a result, almost every medical waste incinerator in the U.S. was shut down. Nothing has changed since 2009. The EPA still does not allow pharmaceuticals to be incinerated.

Make no mistake, MedRecycler pyrolysis will destroy any living thing. The process is fine for treating biological hazards that die when exposed to sunlight, but the proposed incinerator does not have the same effect on drugs. Incinerating even trace amounts of pharmaceutical chemicals contained in medical waste will release dangerous chemicals into our air.

Rhode Island air permits focus on pathogens and other living dangers. Looking at the proposed MedRecycler facility solely on this basis, of course it is safe. What is not being considered in the other dangerous chemicals that are classified by the DEM as “medical waste.”
Medical Waste Contains Dangerous Chemicals

A significant amount of “medical waste” will contain the most dangerous chemicals ever invented. During WWII, the U.S. Navy vessel S.S. John Harvey, carrying liquid Mustard Gas (aka Mustargen, a common chemotherapy drug), was bombed in Bari Harbor in Italy. The vessel caught fire, gasifying the Mustard Gas. Thousands were killed, but it was discovered the cancer patients got better. This was the birth of chemotherapy.²

While these very dangerous chemicals are used very effectively to treat cancer, there is an unintended byproduct of chemotherapy. Chemo patients excrete up to 90% of chemo drugs in their original active form in the first few days following treatment. When chemicals remaining in cancer patients’ “medical waste” are incinerated, they will become airborne chemical weapons that threaten us and future generations. These chemicals are mutagenic (cause birth defects), teratogenic (skips a generation before causing a birth defect) and carcinogenic (cause cancer).

These chemicals are drugs. The MedRecycler system does not eliminate or destroy them. MedRecycler proposes a chemical reduction reaction. Following is what happens to a common chemotherapy drug in a chemical reduction reaction if the chemical is altered at all.

Cyclophosphamide

Nitrogen Mustards are created, Mustard Gas.

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² The Day of Battle by Rick Atkinson “The Entire World Was Burning” page266 – 278
EPA Regulations

The EPA recognizes the dangers of incinerating medical waste and incorporates that fact into medical waste incineration regulations. EPA Medical Waste regulations do not allow incineration of drugs in any form, including drugs remaining in bodily fluids.

The proposed MedRecycler facility in West Warwick is a medical waste incinerator. It will take in nearly 23% oxygen and return less than 2% oxygen in the Syngas. That is incineration.

Pyrolysis has been around since the 1870’s with its beginnings in coal gasification. Those in the environmental protection world know what a disaster that process left for future generations, most notably in Rhode Island (specifically the Tiverton Bay Street disaster and the Disaster where I live in Newport).

This process took coal, something that occurs naturally in the earth, and caused incredible damage. Now the Rhode Island government wants to allow the same process even though it knows the dire consequences. This is insidious.

This proposed facility is little more than a still, the kind that is used to make moonshine. Any good still removes the water from the desired product. The undesired side-effect problem is the chemotherapy drugs that are dissolved in that water. Water does not burn; it is used to put out fires. The proposed facility will generate 46,939 tons of water that contains dissolved chemotherapy drugs and other chemicals. Much of this water will be vaporized and exhausted into the air.

Remember how decades ago, acid rain peeled the paint off our cars? The chemicals in the air came from plants in Ohio all the way to Rhode Island. The hazardous fumes from the proposed MedRecycler facility will travel far and easily reach all of Rhode Island. Their facility will put chemical weapons into the air we breathe, the air our children and families breathe, and the air future generations will breathe. They will wind up not only in our air, but in the Bay, in our soil, and in our drinking water. And ultimately in us. The consequences are dire.

The U.S. regulation covering medical waste incinerators (40 CFR 60.55C) was changed in 2009 when I, and many other advocates, sounded the alarm. The regulation prohibits pharmaceuticals from being disposed of in a medical waste incinerator. PERIOD. This regulation does not discriminate as to whether that pharmaceutical is a trace residue, a bottle of pills, a vial of chemo drugs, or is contained in bodily fluids or contaminated waste from cytotoxic drugs.

The World Health Organization
The E.U. is leading the charge in collecting and segregating chemotherapy patient excreta in hospitals and outpatient settings because they recognize just how dangerous these chemicals are. The European Parliament overwhelmingly voted on March 25, 2021 to support the Stop Cancer at Work campaign’s demands for legislative action now – not just guidance – to include hazardous drugs (HMPs) in Annex I of the CMD Cancer and Mutagen Directive. The EU also added Reprotoxins to the Directive.

“There is a wide range of reproductive health problems caused by workplace exposure to reprotoxins: reduced fertility or infertility, erectile dysfunction, menstrual cycle and ovulatory disorders, miscarriage, stillbirth, babies born too soon or too small, birth defects, child developmental disorders, to name a few. Occupational exposure to reprotoxins is especially prevalent in the healthcare sector, where workers are exposed to harmful treatments, such as chemotherapy.” The reproductive toxins affect both men and women. Remember Non-Threshold or Non dose dependent, any amount is harmful.

The U.S. is lagging in this regard. We do not adequately educate cancer patients or enforce the regulations set forth in USP800 (see below). Hospitals and outpatients are dumping contaminated waste directly into toilets where it ultimately enters our waterways. If this MedRecycler facility is approved, cytotoxic human waste will undoubtedly be forwarded to this facility in a “red bag.” As I stated previously, with the proposed process, the chemotherapy chemicals will be incinerated and will spew lifethreatening cytotoxins out of the stack and into our air.

“The proposed MedRecycle facility plans to exclude direct incineration of RCRA chemotherapy drugs because we all know how dangerous they are, but still plans to accept “TRACE CHEMOTHERAPY WASTE” (any waste that is less than 3% chemotherapy chemicals), which would actually include all chemo-contaminated material. They miss the mark and ignore the fact that a chemo patient’s bodily fluids and

……WHO
other excreta contain the ingested chemo drugs in their original and active form. The proposed facility plans to incinerate these contaminated bodily fluids.

U.S. Government Regulations

In 2019 United States Pharmacopeia (USP), a regulatory body of the FDA, issued USP800 protecting people from cytotoxic chemotherapy drugs.

This act of Congress, The Drug Quality and Security Act (Public Law 113-54), was signed by Senators Sheldon Whitehouse, Senator Jack Reed, Representative David Cicilline and Representative Jim Langevin. These distinguished legislators are all very aware of the dangers of these cytotoxic drugs and have been given detailed presentations on the problem.

USP800 mandates that everyone who handles chemotherapy drugs, from pharmacist to nurses to techs and even the people un-packing the boxes containing these drugs, must be protected. In fact, the regulations exceed the requirements currently in place to protect workers who are dealing with our current, very dangerous COVID pandemic. Workers must use TWO pair of special chemotherapy gloves. Once used, both pairs of these gloves, the box, the empty vial and every cytotoxic-drug-contaminated item, with less than 3% of the chemical must be disposed of as Trace Chemotherapy Waste. 3% is still a lot of a cytotoxic chemical.

That means all of the chemo-contaminated waste coming out of every hospital in within 500 miles will end up at this proposed MedRecycler facility. Subsequently the chemicals will enter the Rhode Island environment and will expose our families to extremely hazardous chemicals that cause birth defects and cancer.

USP 800 also includes protection from the cytotoxic drugs contained in urine, feces, vomit and sweat of patients. When these human excreta are collected and “redbagged,” it will also reach the proposed MedRecycler facility to be incinerated with the same result. Chemo chemicals will be released right into our air. And it if is not collected, it still reaches our environment when it is flushed right down the toilet.

OSHA allows ZERO human exposure to chemotherapy drugs, the details of which can be found in their Hazardous Drug Policy. Ten years ago, every hospital in the country was notified of the dire consequences of exposure to these chemicals in a letter from OSHA,
NIOSH and the Joint Commission on Healthcare. These agencies take this stuff very seriously.

**State of Rhode Island Regulations**

In 2012, the Rhode Island Legislature formed a committee to evaluate the dangers involved with medical waste that was being flushed into toilets and subsequently entering our water. This led the Rhode Island DEM to create a new category of hazardous waste: “Extremely Hazardous Waste R06.” This regulation specifically places waste that “contains chemotherapy agents that are antineoplastic or cytotoxic, including but not limited to drugs listed in the NIOSH list of Antineoplastic and Other Hazardous Drugs” into this newly created category.

In 2015, a bill came before the RI legislature requiring the control of cytotoxic drugs in human waste be paid for as part of the treatment. Testimony on the dire consequences of allowing cytotoxic human waste to be flushed into our water was given by worldwide experts. The former head of epidemiology of the Harvard School of Public Health, Dr. Peter Boyle provided testimony that can be viewed here. He was followed by other experts. The bill was held up because no one could answer the age-old question: “Who is going to pay for it”?

Subsequently, the bill was later changed to a “product stewardship bill” to require pharmaceutical companies to pay for the cost. The Pharmaceutical Research and Manufacturers Association (PhRMA), the largest lobbying group in the world descended on the RI legislature and ultimately killed the bill. As a result, cytotoxic human waste continues to be flushed into our water every single day.

And now, an added risk comes along. Our air will be contaminated with the same medical waste. In addition to the hazardous medical waste that is flushed each day, they will collect and incinerate the same cytotoxic materials and release them into our air. The DEM has categorized this cytotoxic human waste as “extremely hazardous waste.” **More cancer and more birth defects will happen be a direct result of this action.**

**Where is the Department of Health?**

The Rhode Island Department of Health is totally aware of these issues and chooses to ignore the health of our citizens because it is too much work and not “in the news.” I gave a [presentation to Dr. Nicole Alexander Scott](#) that was deemed too political. She took a blind eye the same way she ignores this medical waste incinerator.

MedRecycler, RIDEM, RIDOH, the Legislature and the Governor all ignore the fact that these chemicals are being excreted profusely by chemotherapy patients and are opening up the residents of RI to [secondhand exposure](#) to these extremely hazardous chemotherapy chemicals. Doctors and hospitals take an oath to “do no harm.” We should all be concerned that we need to control the chemical weapons they prescribe all the way
through excretion by the patient. Cytotoxic human waste should not be sent to the proposed recycler in this state.

**Lack of Enforcement**

The insidious nature of improper disposal of cytotoxic human waste is not limited to the Rhode Island DEM. In fact, the EPA, the FDA, Health and Human Services, and the healthcare industry at large are agencies we rely on to protect people from the grave dangers of secondhand exposure to chemotherapy drugs. But cancer is a big business. Hospitals, doctors, veterinarians, and pharmaceutical companies reap billions taking care of patients with cancer.

Unfortunately, the drugs used to cure cancer also cause cancer. And often the dire consequences of secondhand exposure to these dangerous chemicals are not seen for months or even years to come. Your doctor knows it. The hospitals know it. Pharmacists and Big Pharma know it. However, most patients and families are unaware and are unwittingly exposing their caregivers and loved ones. Preventable cases of cancer and birth defects are continuing to happen every day.

Regulations are in place; however, they are not being enforced. Why? There is no mechanism to pay for protecting our people. Pharmaceutical companies are afraid of the liability. Insurance companies cannot get reimbursed for any safe disposal mechanism without a CMS number. And what about those who are uninsured? If only the wealthy can afford to protect their families and our environment, what happens to those who have no means to pay for safe disposal?

The U.S. Department of Defense shut down their chemical weapons incinerators because of the harmful effects on people and environment. We need to fight chemistry with chemistry, not an incinerator. Other government agencies should follow the DOD’s lead.

**The Impact on Property Values**

It is well known that excreted chemotherapy contaminates patient’s homes. In the case of a patient on well water and a septic system, this contamination can impact the value of a property and even leave it unsaleable.

I have had many conversations with realtors who have had a home for sale where a cancer patient previously resided. It was alarming to see nothing was growing over the leaching field. The septic system had failed because the excreted chemotherapy destroyed the good bacteria that digested the human waste. And yet, these homes can be sold with no requirement for disclosure. The septic systems cannot be returned to normal. The proposed incinerator will also have a widespread effect on property values throughout Rhode Island.
Would you let your daughter or son buy a house where a cancer patient had been treated, especially if the property is served a septic system and a well? Without proper control of these drugs, the patient’s home can become contaminated with trace amounts of chemotherapy chemicals, rendering the property worthless.

**Current Proposed Legislation Before the RI House**

Rhode Island H5923 is currently before the RI House of Representatives. This bill would prohibit high heat waste facilities in the state, however, does not go far enough. We have proposed an amendment to the bill to offer wider protection to Rhode Islanders.

**Additional Subsection for H5923 to be included in substitute Amendment**


No producer or handler of Extremely Hazardous Wastes, as the same are defined in Rhode Island Department of Environmental Management Regulation #DEM OWM-HW 01-14, shall allow such Extremely Hazardous Wastes to be diverted to or disposed of in a High Heat Processing Facility. Responsibility for proper disposal of those wastes shall remain solely that of the manufacturers of such products. Notwithstanding anything that may be considered to the contrary in R.I. Gen. Laws 23-19.17-2(5)(iv), there shall be no exception to this requirement and concomitant responsibility for Extremely Hazardous Wastes that are prescribed, distributed, or administered in a hospital or clinic setting (whether inpatient or out-patient) and subsequently released, emitted, or otherwise joined into or disposed of with a household waste stream, and in the case of Extremely Hazardous Wastes which are prescribed drugs, the oversight of proper disposal by the manufacturer shall be that of the prescribing pharmacy.

This amendment would not only stop the uncontrolled discharge of “Extremely Hazardous Wastes” down the toilet and keep cytotoxic chemicals out of our water and air but would also set up a program to require pharmaceutical companies to bear the cost of containment.

There are safe and reliable ways to control secondhand exposure to chemotherapy drugs while still allowing cancer patients to get the treatment they need safely. We can and must prevent many, many cases of cancer and birth defects and protect the environment in the process. We did it with secondhand smoke. Now it’s time to step up and move forward. We cannot approve the MedRecycler facility which will return us to a doomed past.
This is and continues to be a global health crisis. **Approval of the MedRecycler medical waste incinerator will not help; in fact, it will exacerbate an already dire situation.**
Medical waste incinerator will spew chemical weapons over east bay residents.

The Rhode Island Department of Environmental Management recently announced its intent to issue a license to MedRecycler to treat medical waste. My daughter is a life-long resident of Rhode Island and I have lived here for over 30 years. I am a chemist in the hazardous waste industry and medical waste expert, and I strongly oppose this action.

Make no mistake, Med Recycler’s proposed facility is an incinerator, no matter that it is called a “leading-edge processing facility”. The proposed facility has the capacity to destroy any living thing, which is fine for treating biological hazards, but totally ineffective at destroying chemicals.

Many drugs used to treat cancer have their roots in chemical weapons (mustard gas to name one) and are DNA-altering. These extremely dangerous chemicals can effectively treat cancer, but in the first days following treatment, chemo patients excrete up to 90% of chemo drugs in their original active form. If this cytotoxic human “medical waste” is incinerated, chemo chemicals will become airborne chemical weapons that not only threaten us, but future generations. These chemicals are mutagenic (cause birth defects), teratogenic (skips a generation before causing a birth defect) and carcinogenic (cause cancer).

The MedRecycler system does not eliminate or destroy cytotoxic drugs. Any level of exposure to these dangerous chemicals can cause cancer and birth defects now and in the future.

The MedRecycler incinerator will spew chemical weapons into the air we, and future generations, breathe. Cytotoxic chemicals will wind up not only in our air, but in the Bay, in our soil, in our drinking water and ultimately in us. The consequences are dire for all Rhode Islanders and with the prevailing south west winds the residents of Barrington, Warren and Bristol are targets of the toxic cloud.

RI air permits focus on pathogens and other living biological hazards. Looking at the proposed MedRecycler facility solely on this basis, of course it is safe. What is not being considered are the chemo chemicals classified by the DEM as “Extremely Hazardous Wastes.” A significant amount of this “medical waste” will contain the most dangerous chemicals ever invented.

Approval of this incineration process would trade one ignored problem for another. Currently, chemo-contaminated human waste is being flushed directly into toilets where it ultimately enters Greenwich Bay, the shores of Barrington, and all of Rhode Island. If this MedRecycler facility is approved, cytotoxic waste, human or not, from every hospital within 500 miles will undoubtedly be forwarded to this MedRecycler facility in where it will be incinerated instead of being flushed.
EPA regulations do not allow incineration of drugs in any form, even the pharmaceutical is a trace residue, a few pills, a vial of chemo drugs, or is contained in bodily fluids. OSHA allows zero human exposure to chemotherapy drugs.

U.S. Pharmacopeia rules mandate protection for everyone who handles chemotherapy drugs, and requires all used gloves, boxes, and empty vials be disposed of as “trace chemotherapy waste.” That includes protection from the chemicals contained in patient excreta, but no one is enforcing that part of the regulation or adequately educating cancer patients about the risks for the families.

Exposure to secondhand chemotherapy is a global health crisis. The E.U. recognizes the risks and is leading the charge in collecting and segregating chemotherapy patient excreta. The U.S. is not.

The bottom line? Flushing chemo patients’ contaminated excreta or incinerating it yields the same results: more cancer and more birth defects. The DEM seems willing to spend a lot of money and risk our health one way or another.

The good news? There are safe, reliable ways to solve this problem. We can continue to treat cancer with chemotherapy drugs and prevent secondhand exposure to chemotherapy chemicals without contaminating our water or our air. Big Pharma and insurance companies are well aware of the hidden dangers associated with chemotherapy. They know there is an answer to the problem, but they are unwilling to acknowledge the facts or pay for the solution. It’s going to take government intervention to make that happen.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and
MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

James Mullowney,
38 Pelham St.,
Newport RI
jmullowney@pharma-cycle.com

DEPARTMENT RESPONSE:

- A significant portion of this discussion is focused on chemotherapy patients excreting or defecating into sewer systems. This is not relevant to the issue at hand.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
- See XVI. Buffer Zone
Dear Mr. Dennen,

As an East Greenwich resident of over 38 years, it greatly upsets me that a medical waste facility is proposed to be a couple of miles from our home. I left Pawtucket over 38 years ago to get away from the polluting factory down the street from us, where I had to put the windows down every night because the air smell was so bad. This proposal is a NJ owner trying to pollute our state, and from what I have read about him, he had some shady dealings in NJ and is not to be trusted.

We have a beautiful area here next to the bay, and doing this to us would be hazardous to the area and to the citizens of both towns. This should not go through.

Thank you for listening,

Joan and Jim Burbridge, 6 Hyland Ave., East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Dear Mr. Li,

As a resident of East Greenwich for 31 years who lives there with my family of three, we are only 2.5 miles from the proposed medical waste treatment plant. We chose EG to raise our 3 children because it was away from the poor air quality in Providence/Pawtucket/Johnston areas and other pollutants in these areas. If this proposal goes through, we will be breathing the contaminated air from this plant on a daily basis and lord knows what it will do to our water quality. The college students who live across the street and day care center in the neighborhood will be directly impacted also. As a retired RN, I believe the HEALTH OF THE COMMUNITY is priority over corporate profits, and the residents of both W. Warwick and E. Greenwich should have a say in whether this proposal should go through (unless you want to see a lot of lawsuits heading your way).

Sincerely,
Joan Burbridge (E. Greenwich)

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
From: (Name) From: (Address)
Joan Wollin  wollinfamily@cox.net

[EXTERNAL] : Med recycler zoom
Hello Mark,
Just let you know that I tried to attend the March 15 zoom meeting but it was closed out after 4:00. I am against the locating of the med recycler plant so close to a residential area as well as the issue that the proposal is incomplete and environmental impacts have not been considered.
Thank you.
Joan Wollin

Sent from my iPhone

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
I am yet another concerned resident of East Greenwich objecting to a permit being issued to MedRecycler, RI Inc.

Why the DEM and the powers that be in the state of Rhode Island would introduce a technology that has not been proven safe into one of the most densely populated states in the country is beyond me. It is not a green technology and there are way too many unanswered questions.

In addition this seems to be yet another situation where the state has not been transparent when it comes to providing information to the citizens who will be most affected. In the midst of a pandemic it appears the DEM has put this project on the fast track while the local residents had absolutely no knowledge that this facility was pretty much a done deal.

I hope you will reconsider the advancement of this permit.

Joan Spain
81 Tanglewood Drive
East Greenwich

Sent from my iPad

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See X. Adequacy of Public Notice
Dear Mr Li,

I am a resident of West Warwick and live in the area of the proposed MedRecycle plant.
I am VERY concerned about safety and quite frankly quality of life for my disabled son and myself, a senior.

Due to physical limitations including asthma, we stay at home all of the time with the exception of hopefully soon shopping locally at DAVE’s plaza once again after vaccination.

You can see, for us, there is no escaping air quality or safety issues that may arise with this new UNTESTED process at this facility.

Mr Li, I was VERY disappointed to learn that an air permit has been already granted. What does that mean?
Have you protected me and my son from all odors from the emissions from this facility? Will there be smoke emitted that will force me to be inside 24/7 because I have asthma? We do not have central air conditioning and rely on open windows for venting. Will I be able to sit on my deck with the nice weather without risk of foul smelling whatever being emitted? I am very concerned, since this facility is to run/burn 24/7, there will be NO relief for me, ever. Please let me know what I can expect.

Mr Li, has MEDRECYCLE proven without ANY DOUBT that the processes used will be safe for me and my son to continue living in the town I grew up in? If you believe so, can you please share with me how MedRecycle has proven this as it is my understanding that this process has not ever been used on medical waste.

Finally, Mr Li, even if you can get passed what I refer to as suspect inconsistencies posed on the application and the technical or legal humbo jumbo I ask you sir, would you allow your loved ones to live by this unproven waste facility?

I sincerely appreciate and await your response.

Thank you

JoAnn OGrady

Sent from my iPhone
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
Dear Ms. Li,

We are writing to express our STRONG OPPOSITION to the proposed Medrecycler facility at 1600 Division Road.

Every world citizen needs to be very concerned about environmental toxins in our environment, as they pertain to the health of individuals and to the planet. The technology to be used at the proposed facility, pyrolosis, is yet untested. Therefore, this means that NO FACILITIES that use this approach should be opened. Efficacy data to prove that pyrolosis causes no harm to humans or to the planet would need to be gathered (over multiple studies) in order for this technology to be used ANYWHERE.

That is reason enough to abandon this project. However, the NJ company that is proposing this facility is currently not solvent. It is asking the state to put up $17.2 millions in bond funding. Should the company default in the future, RI taxpayers would be responsible for this burden. We have already seen this happen with the company started by Kurt Schilling. Rhode Island needs to attract businesses to the state that are solvent and that are NOT HARMFUL to the environment.

Sincerely,

Joanne Eichinger, Ph. D.
Louis J. Heifetz, Ph.D.
Diane Burridge, MBA
vision Road
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
Dear Yan Li,

I oppose the Med Recycler facility under consideration for 1600 Division Road on the West Warwick/ East Greenwich line. This facility would be 2.5 miles from my home and I strongly object to it for a number of health and environment reasons. Housing and cooking medical waste in order to burn it and then ultimately generate electricity is not appropriate for co-location with residential and educational facilities.

Additionally, the related transportation and warehousing of the medical refuse products destined for this facility is an objectionable prospect. The truck traffic alone will lead to an increase in air pollution, and the parked trucks will emit an offensive odor.

According to the Conservation law Foundation, emissions from pyrolysis contain cancer-causing compounds. This should not be approved with 400 students nearby at New England Tech, and the safety of the residents of West and East Greenwich subject to the whimsy of wind.

Is this facility subject to governance by the Clean Air Act? What safety measures are in place to ensure a lack of contamination for the air, water and soil?

Since there is no existing pyrolysis system in the United States like the proposed one near my home, where is the evidence this will be safe?

We are just beginning to approach the other side of the Covid – please don’t approve another potential health disaster. I rely on the Department of Environmental Management to make prudent environmental decisions - don't let me down.

Sincerely,

Joannie Hinman

278 Hemlock Drive
East Greenwich, RI 02818

Joannie.Hinman@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
• See *VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk*
• See XIX Odor Issues
Joannie Hinman
joanniehinman@gmail.com

[EXTERNAL] : Med Recycling objection

Hello Yan,

After listening to the public comment DEM meeting on March 15th I am more appalled than ever regarding the prospect of this deplorable Med Recycling facility being built. My objections are similar to those vocalized by those hundreds of participants who were able to access the call: environmental impacts to the air, noise pollution, traffic, the potential for medical waste spills, location on the other side of the WALL from another company, across the street from NETech student, near a daycare, unproven and untested technology parading as 'green' and 'jobs creator', violations of your own DEM protocols in considering the approval.

I mean...it's just ridiculous. STOP STOP STOP.

I encourage the DEM to apply the Precautionary Principle, an established tenet of environmental law to his decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. I am an East Greenwich resident who lives near the proposed location on Division Road.

Sincerely,
Joannie Hinman

mlock Drive
East Greenwich, Rhode Island

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XVI. Buffer Zone
Dear Mark,

I oppose the Med Recycler facility under consideration for 1600 Division Road on the West Warwick/ East Greenwich line. This facility would be 2.5 miles from my home and I strongly object to it for a number of health and environment reasons. Housing and cooking medical waste in order to burn it and then ultimately generate electricity is not appropriate for co-location with residential and educational facilities.

Additionally, the related transportation and warehousing of the medical refuse products destined for this facility is an objectionable prospect. The truck traffic alone will lead to an increase in air pollution, and the parked trucks will emit an offensive odor.

According to the Conservation law Foundation, emissions from pyrolysis contain cancer-causing compounds. Why would this be approved in a residential area, with 400 students nearby at New England Tech, and the residents of West and East Greenwich subject to the whimsy of wind?

Is this facility subject to governance by the Clean Air Act? What safety measures are in place to ensure a lack of contamination for the air, water and soil?

Since there is no existing pyrolysis system in the United States like the proposed one near my home, where is the evidence this will be safe?

We are just beginning to approach the other side of the Covid – please don’t approve another potential health disaster. I'm counting on you and the DEM to preserve our environment and help keep us safe. I shared my objections with Yan Li as well.

Sincerely,

Joannie Hinman
278 Hemlock Drive
East Greenwich, RI 02818
Joannie.Hinman@gmail.com

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XIX Odor Issues
Dear DEM leadership, I would appreciate it if you take the time to review this 2 page letter detailing research on pyrolysis with regard to the solid waste permit proposal for Medrecycler in West Warwick before your meeting tomorrow. Thank you ahead of time for reviewing my findings. I will be sending the letter to my local representatives as well. Have a nice day. Sincerely, Joshua Jarbeau MD

Joshua Jarbeau jockjarb@yahoo.com
March 13, 2021

Dear Rhode Island DEM and To Whom It May Concern:

As a Rhode Island resident for the last 18 years, I would like to voice some concerning environmental issues with regards to the solid waste permit proposed for the pyrolysis facility being proposed by Medrecycler-RI in West Warwick. In the proceeding paragraphs you will find a compilation of material on this particular project, other pyrolysis plants, and various EPA summaries. The first few paragraphs include mostly research on the project to be followed by my personal opinion and references.

The proposed pyrolysis plant would be located on 1600 Division Road in West Warwick in a suburban location. The population of the 3 towns (West Warwick, Warwick, and East Greenwich) adjacent to the facility totals roughly 123,000 which is 12% of the state’s population. The facility is less than 750 feet from a preschool, ¾ a mile from New England Tech College, and 3.5 miles from Narragansett bay. The prevalent wind direction from the facility is south, southwest blowing toward Warwick, Cranston, west bay, and the upper bay.

The proposed facility would process 43 million pounds of medical waste yearly from various Northeast states via interstate 95. Most of the waste would be imported from out of our state. Based on the company’s proposal, the following can be expected with regard to gas emissions. 41 million lbs. of carbon dioxide a year (about 4,000 cars worth), 4.8 million lbs of argon, and among other emissions a small but measurable amount of hydrogen chloride, sulfur dioxide, nitrogen dioxide gases. This is all per the
Medrecycler-RI application. Also, based on the Medrecycler-RI proposal, emissions are below air toxics and therefore an Air Quality Impact Study (AQIS) is not necessary.

There are currently zero pyrolysis plants in the United States operating that dispose of medical waste. An EPA report in December of 2020 reports 15 pyrolysis plants in the U.S. currently. Several of these are not operating for various reasons including lack of profitability and/or lawsuits. Although slow pyrolysis has been around for a long time, the use of fast pyrolysis to convert municipal waste to bio-oil and syngas is relatively new. A 2012 EPA report of operating pyrolysis technology showed only a handful of operating companies using the technology. Of note at that time Agilyx in Tigard, Oregon and JBI in Niagara Falls, New York showed air emission data recording volatile organic compounds (VOCs), hydrocarbons, and carbon monoxide (CO) emissions.

With regard to bio-oil, the chief product of pyrolysis, the 2006 EPA review reports “More than 300 specific compounds have been identified in biomass pyrolysis oil and some of these compounds are known carcinogens such as benzene and phenanthene.” “The low pH of these oils, however, would obviously have detrimental effects on aquaculture in the event of a large spill in a river, lake, or stream.” “Public acceptance or perception may be an issue, particularly if the health and safety issues are unknown. Odor is another issue related to public acceptance. Bio-oil has a strong smoky smell that is unlikely to be masked by other compounds.”

A significant amount of this plastic used in medicine and placed in medical waste bins is PVC based. Polyvinylchloride (PVCs) has the molecular structure C₂H₃Cl. Per the EPA report published in December 2020, “PVC plastic typology produces hazardous chlorine gas in both thermal and catalytic pyrolysis application….PVC also contains dioxin-producing chlorides and can lead to the formation and emission of hydrochloric acid (HCL)”

So I have some grave concerns about this plant and horrible implications it could have environmentally based on the data above:

Potential HAZMAT clean up and exposure if any trucks involved in accidents carrying 43 million pounds of medical waste through the state a year.
Argon gas settling to ground level near the preschool. Argon is colorless, tasteless, and inert. However, it is a heavy gas and sinks in the air column displacing oxygen and can cause asphyxiation.

The company feels an Air quality impact study is not necessary (remember this will be the only facility of its kind in the U.S. to pyrolyze medical waste)

Potential smell of hydrogen sulfide (rotten eggs) which can be tasted and smelled at 0.3 parts per million. Based on prevailing winds would flow toward Warwick and the west bay.
Potential air discoloration with nitrogen dioxide in the air (the chemical that responsible for the red/orange tinge over southern California.

The risk of hydrogen chloride gas being released and settling in the bay turning into hydrochloric acid affecting the shell fishing industry and the estuaries in the western part of the bay

Risk of bio-oil with carcinogens from a large spill getting into the bay via sewers/drain which empty into rivers leading into the bay.

The risk of PVC plastic C2H3Cl going through pyrolysis. There is no mention of it in throughput that I could find on the application.1

My most significant concern is about the health, safety, and welfare of the facility employees and general public with regard to the shredding of medical waste and aerosolized pathogens. I am an ER physician and I contribute to medical waste on a daily basis. On an average work day I am placing COVID laden gowns, blood soaked gauze, body fluids loaded with MRSA bacteria, and dead body tissues in our medical waste bags. Are there even protocols to check the safety of shredding this material near such a populated area?

There are so many red flags with this project, but really the biggest is location. This is the type of facility that should be in both a heavy industrialized zone and a remote zone away from important bodies of water and population. The new technology, the fact that it will be the only one of its kind in the U.S., the potential smell of the emissions, and the unlikely but potential incidence of a factory malfunction causing a bio-oil leak with proximity to the bay are additional red flags. I would hope the DEM use some common sense, the data presented above, and scrap this albatross altogether. We are too densely populated to have a facility like this anywhere in the state. Thank you for your consideration of this letter.

Sincerely,
Joshua Jarbeau  MD

REFERENCES


DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIX Odor Issues
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

As a lifelong East Greenwich Resident who is now raising my 3 daughters here, I have a vested interest in the opposition to this facility.

The science safety on this not close to settled and the company has failed to do due diligence in quelling community concern.

In your authority as a representative of The Rhode Island Department of Environmental Management - You have no choice but to deny this permit.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jody Stone,
194 Spring St,
East Greenwich RI
thestoneseg@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
Joe Carberry  josephfcarberry@gmail.com
[EXTERNAL] : Deny permits for MedRecycler Site in West Warwick, RI  
March 15, 2021

Dear Ms. Li,

As a resident of East Greenwich, Rhode Island, an active member in the community, a parent and a citizen concerned about the global effects of climate change, I'm writing to oppose any permits for MedRecycler to build a medical waste facility in West Warwick.

The dangerously unsafe pyrolysis process that MedRecycler plans to use is hardly different from incineration, no matter how much greenwashing the company attempts. The burning of this waste will create gaseous hydrocarbons, tar, oil, ash and slag - all of which contain known toxic and climate damaging pollutants. It's bad enough that 70 tons, or perhaps even as much as 140 tons (as Mr. Campanella would like to expand the facility) will be brought into Rhode Island on a daily basis, but this will generate tons of pollutants and greenhouse gases further damaging the climate. What makes it even worse is that the plan is to then burn the residual material for fuel, making the greenhouse gas emissions exponential. The process to form, and then to burn will all use non-renewable fossil fuels. This is not a green process. This is not recycling. This is not renewable. This is gross neglect of our planet in the face of making a quick profit.

The health and safety of anyone who lives, works, goes to school or even passes through the area where the facility is to be located needs to be considered. There are so many unknowns, how can one claim that there is a single benefit to having this facility when weighed against the potential health risks of even one person? Please understand, I'm not suggesting that the facility should simply be moved to another community. This type of biohazard burning facility that will plague us with risks and long term costs for generations, should not be built anywhere. It should not be in West Warwick; it should not be in Kent County; it should not be in Rhode Island; it should not be in the United States. This type of facility should not exist anywhere on this planet.

Thank you for reading my comments and concerns. I'm very much looking forward to taking part in the public forum on March 15.

Sincerely,

Joseph F. Carberry

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello,

As an independent consultant, Ph.D. in Chemical Engineering, a registered Professional Engineer in Rhode Island, a former consultant to the E.P.A. and a 13 year former member of the East Greenwich Planning Board, I believe I am more qualified than most to comment on this proposal.

As a Planning Board member, I marvel at cunningness of the developers for their choice of location, not because it is a good location, but it is ideally situated so that the governing body, the City of West Warwick, does not have to deal with residential abutters located in their municipality. Residences in Warwick and East Greenwich are so much closer to this site than any West Warwick residence. Absolutely brilliant but totally devious and underhanded. Unfortunately I witnessed similar efforts in my tenure on the Planning Board. Fortunately, in all cases, I and the majority of the Board were able to turn aside this type of development. This was not without personal hardship and sacrifice. In one case I was subjected to slanderous charges originated by a developer whose request for a Deviation was denied. I commend you for taking this decision making role and hope you do not suffer the same anguish I did as a result of making the right decision.

Also, as a Planning Board member, I always recognized zoning laws to be a sacred covenant between the residences of the community and the community decision makers. Variances or deviations should never be granted unless all parties are for it and benefit proportionally from it. Whenever possible, the underlying laws should be changed so that variances or deviations are not required.

As a Chemical Engineer, I have seen first hand the havoc that a facility of this kind could wreck upon the surrounding neighborhood if a “hiccup” would occur in their day to day operation, most notably in my work in Brazil, where the once lush rain forest was replaced with a terrain devoid of trees, birds and flying insects. I am not suggesting that this facility would create an environmental disaster of the same magnitude, only that chemical plants installed and operated by trained personnel can malfunction because of operator error and/or equipment malfunction despite everyone’s good intentions and best efforts. And I promise you this, hiccups will occur. Closer to home, recall on occasion driving on route 95 in Warwick next to the waste treatment plant there. 99+% of the time, all is well, but once in a blue moon the facility makes its presence known with the foul stench of mistreated sewerage. Sewerage smell is a nuisance, a similar event at this type of facility could be much more damaging. Fortunately, there are no residences/schools/day cares within “smelling distance” of the sewer plant. Such is not the case here. Plus the odor could contain much more hazardous materials.
A facility of this nature is better sited on the fringes of an industrial park, far from any residences, schools or day care facilities. Please do not succumb to special interests.

Thank you,

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
I am a resident of Rhode Island and a retired chemical engineer.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.
From: (Name) From: (Address)
John Doucette jwdoucette@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

There are questions about the viability of this proposed facility. From the amount of energy required to burn this waste to what gets released into the atmosphere.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

John Doucette,
532 Charles Street,
Providence RI
jwdoucette@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
From: John Liesching  
johnliesching@gmail.com  

[EXTERNAL] : Medical Waste Facility  
Do NOT approve this facility -- the risks significantly outweigh any potential unclaimed untested unproven benefit.

Why even waste time in discussing.

DEPARTMENT RESPONSE:  
• No response needed
From: (Name) From: (Address)

john McDonough     jmcdonough@rossielectric.com

[EXTERNAL] : Medrycler Project
Please see attached letter supporting this project in West Warwick.

Thanks

John S. McDonough
Rossi Electric Co.
T 401-946-8866
C 401-640-7512

Web Site: https://rossielectric.com [rossielectric.com]
<https://urldefense.com/v3/__https://rossielectric.com__;!!KKphUJtCzQ!edN-7gLUyOMtgOBZsQGx7DWjOjTihgwBbfkBp8Yfzvl9OvDabMLeKMQldR5OGsT4sqrA$>
April 9, 2021
Office of Land Revitalization and Sustainable Materials Management
RI DEM
235 Promenade Street Providence, RI 02908 Re: Medrecycler Application
To Whom It May Concern:

I would like to express our support for MedRecycler’s innovative, medical waste recycling facility and the jobs that will be brought to this state. At these uncertain times, any company that is willing to start a business in this state should be welcome with open arms. They will bring good paying jobs for all that they will be employed at the facility. The proposed project under review meets all state and federal applicable codes. We have been working with Medrecycler as their electrical contractor since the start of the project, over a year ago. It has been a pleasure working with them to design and install the required infrastructure that will be needed to run the facility effectively and safety. The idea of using the waste gas produced by the facility to generate electricity that is then put back into the building for consumption is a great idea. This clean energy is great for the environment and surrounding areas. To impede the progression of this project would be a mistake and cost the state much needed tax dollars and jobs. Those opposed to the project have not taken the time to understand the facts and how the facility will operate. It’s time to cut the red tape for companies that want to come to this state, pay taxes, and bring jobs. Let’s welcome them.

Yours truly,

John S. McDonough
Rossi Electric Co., Inc.
Project Manager

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public; The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

John Schneider,  
110 River Farm Dr,  
East Greenwich RI  
jschnei4@alumni.nd.edu

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
Deny MedRecycler’s medical waste treatment application

To even entertain this proposal is beyond my belief. Putting an untested and unproven process of incinerating medical waste in the middle of such a densely populated area and having residents become test subjects is morally corrupt. This proposal needs to be denied and the health of our community needs to be prioritized.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
Jon Martin
Jmartin67@outlook.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I live in this neighborhood. I am concerned for my family and my community. I feel that this is getting rushed through because it does not affect you. Think about the lives you are impacting, the children that are impacted. Are you willing to put your life on the line for this? We are not willing to be a test subject for ‘new technology’. Would you want to live across the street or have your families or relative live across the street? Think about this before you make your final decision.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jon Martin,
20 Lynn Circle,
East GreenwichRI
jmartin67@outlook.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
Jonathan newkirkjonathan3833@hotmail.com

[EXTERNAL]: Deny MedRecycler’s medical waste treatment application

Keep this unproven experimental process out of our safe clean air. It’s proposed location is too close to neighborhoods, wetlands and high-traffic areas. It doesn’t belong. The risk to local wildlife and residents does outweighs the few jobs and minimal tax revenue it promises. The process is not “green” - it produces exhaust. Furthermore, since we have no way of tracking exactly what medical waste is going into the plant, there is no way to know or plan for what comes out. Certain medications and medical waste creates toxic exhaust. How do you plan for that toxic exhaust if you’re not cataloging exactly what is going in? It’s a medical waste dumpster fire set up next to where are children grow up. I don’t know what DEM is for if not to prevent atrocities like this. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Jonathan newkirk,
75 Atherton Rd,
East GreenwichRI
newkirkjonathan3833@hotmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Jonathan Newkirk
75 Atherton Rd.
East Greenwich, RI
02818

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
The town council here in West Warwick did not give its residents a vote yet Johnston turned the Medcycler project down. They did the same when they somehow got the land behind my home that was wetlands with the Hawkinson River running through it now buildable for multi family in a single family zoning. This after the town hall filled with residents and lawyers with a petition to stop the project with 100% residents opposed. This Greenbush area is the closest to the track of land now being considered for the Medcycler Project. This was also the area that Gov. Lincoln Almond gave millions of dollars to protect the rivers. The town council has failed the will of its residents for unexplained reasons, now this council is failing our neighbors. The lawyer on that project is the same as Medcycler used. Save The Bay is now following closely because there is a pond on Medcycler land that flows through Warwick into Greenwich Cove. After years cleaning the Cove and bay they are very concerned with the release of ash into the waterways in that area. Specifically the Maskerchugg River, which is adjacent to the building and flows into the bay, the Fry Brook is just feet away, and the Hawkinson River, a vital River to so many of our ponds and lakes nearby. This will have catastrophic effect on our environment, and for a little state we cannot survive this risky endeavor. The EPA is our last defense and I plead that this project be halted. The environment should NEVER be political we the people are the stewards.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Joseph Marciano  jmarcian87@gmail.com

[EXTERNAL] : Do not want MedRecycler-RI facility in West Warwick

?Hello Janet, Mark & Yan,

I am an East Greenwich resident who lives close to the proposed site for the waste facility and wanted to voice my concerns and frustrations regarding this. I am strongly opposed to the proposed medical waste facility in West Warwick.

This is the last kind of business we would want in the area, especially since it is untested. There are so many companies, communities, a college and daycare close by. We have small children in that daycare and we would not feel comfortable sending them there if an untested process was being run at a medical waste company one parking lot away.

There is no proven data to show what happens when medical waste is burned, what this does to the waste water, how much energy is truly consumed versus produced and truly sounds like a fancier version of incineration. How can this go into our state or community? It already has not been approved in Johnston RI. As the DEM I feel like it is your responsibility and what you are tasked with doing to keep us safe.

This whole process seems like it was rushed at the beginning and only now is really coming to light. As a parent, resident and concerned tax payer I am asking for you to help us.

As parents we do everything in our power to keep our children safe and healthy and the last thing we would want is for them to potentially be breathing in these pollutants. On top of potential pollutants, there will be a lot more traffic from the trucks carrying the medical waste and more noise from the building similar to a leaf blower running 24/7. Based upon comments from the CEO it already sounds like the number of trucks would be greater than the 5 or so per day that he originally quoted due to growth and increased volume on an already unknown process.

If this company wants to test out processes they should do it in their hometown in NJ, not ours.

Our community would be extremely grateful if you would please deny their required DEM permits and stop this project!!

Thank you for your time!

Concerned parent and neighbor,

Joe Marciano

Sent from my iPhone
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See X. Adequacy of Public Notice
- See V. Issues Related to Storage of Waste
Hello. I live in the Greenbush section of West Warwick next door to an elementary school. My husband works at Worthington Industries which is in close proximity to the Medrecycle plane. I don't think there is enough research done to establish that this will be safe for the environment. This plant is very close to neighborhoods with young children not to mention daycares and schools. This did not come to my knowledge until recently. I feel betrayed by our elected officials when the least they could have done was notify the neighboring areas about this. I hope you will take into consideration the safety of the environment in the surrounding areas and the people who live here. Thank you

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See X. Adequacy of Public Notice
Thank you I appreciate the information. I’m all about new businesses starting especially in such a crisis we are living through.

The area needs to be looked at for many reasons as far as building a medical waste center.

My son at the age of nine had a 5cm brain tumor, cancer and a stroke.

The neighborhood in my eyes has had many issues as far as young children with rare cancers and deaths.

It maybe best for this medical waste place go somewhere that is not around so many children.

I’m 45 years old and grew up never knowing anyone with cancers during my schooling.

I could write a book about the neighborhood off East Greenwich Ave as far as the childhood cancers during my sons upbringing, this waste place would not help matters.

Thank you

Joyce Knott

54 Kulas Rd

West Warwick R.I.

On Friday, March 12, 2021, 03:52:18 PM EST, Dennen, Mark (DEM) <mark.dennen@dem.ri.gov> wrote:

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Judith jacleave@icloud.com

[EXTERNAL] : Oversees the solid waste application

My husband and are are totally against the medical waste incinerator being located in Any area of RI. This consideration is a travesty for our beautiful state. And that it is being disguised as “green” is absurd!

Judith and Brent Cleaveland
Sent from my iPhone

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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Juli Palumbo,
41 Miss Fry Drive,
East GreenwichRI
palujul@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: Statewide Planning Approvals
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See XVI. Buffer Zone
From: Julia Martins  hockeybooknut@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Dear Acting Supervisor Mark Dennen,

My name is Julia Martins, and I am in high school. I live in West Warwick. For many years, I have enjoyed the comforts of clean, fresh air, whether I walked around the neighborhood, or played outside. The medical waste facility is dangerous. There will be little to no oversight, and the process used to burn the waste, pyrolysis, releases dioxins. Dioxins cause cancers, heart diseases and lung diseases, and not monitoring them poses serious risk. There will be a lot of dioxins released, since about 70 tons of waste will be processed at this facility each year. Lastly, I believe it is no random coincidence that the facility was placed in West Warwick. West Warwick is one of the poorest communities in Rhode Island, and building the facility here only perpetuates the ugly truth of environmental injustice and inequality.

We do not want this facility here.
Thank you,
Julia Martins

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Julia Martins, 18 Acorn Lane,
West Warwick RI
hockeybooknut@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Karen - karen@diamondstarpm.com

[EXTERNAL] : Medrcycler - Objection

As a long time resident of West Warwick, I am writing to you about the proposed medical waste facility to be build in West Warwick,

Everything I have read about this plant validates my concerns. The water, air and ground contamination is extremely concerning especially with a company that has no experience with this type of process. Many people who spoke at the hearing held on March 15th were in opposition to this facility and come from all parts of the professional world and clearly stated the downfalls and safety issues related to having a plant such as this in our state. The idea that we would allow this type of untested process to be placed anywhere in the state of RI troublesome. We should not be the testing grounds for such an untested process.

I am hoping that you will oppose this proposal on behalf of all of the residents that live in Rhode Island that would adversely be affected by this plant being built. There is too much that is currently unknow about a plant like this. The people of RI should be provided with all the information, both the pro’s and con’s, and they should be allowed to vote on such an important proposal such as this. We put out to vote building a casino, so it only stand to reason that we should be given the opportunity to vote on this plant being built in our community which is a much more important issue.

I appreciate any help you can provide on this matter.

Regards,

Karen Maw
Broker/Owner
Diamond Star Realty & Property Management
PO Box 8397
Cranston, RI 02920 - Mailing Address

90B Jefferson Blvd. - Office Location
Warwick, RI 02888
401-942-1555 Phone
401-461-7255 Fax

www.diamondstarpropertymanagement.com
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DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Hi,

I just signed an action form from the CLF foundation opposing the Medrecycler proposal in (West Warwick and East Greenwich) before you for consideration. I am forwarding my written portion directly to you just in case it didn't go through. I wanted to write to you earlier but wanted to wait until I could get as much information as possible. (I also wanted you to know that I was unable to log into the Zoom meeting on March 15th, on both my Ipad and Iphone, shortly after it began. So please add my name to the list.) My Comments:

I live in Western Coventry, near the CT border, but I am against this proposal for many of the reasons the Conservation Law Foundation (CLF) cited in this well researched article found here: https://www.clf.org/blog/burning-medical-waste-dangers/ [clf.org] <https://urldefense.com/v3/__https://www.clf.org/blog/burning-medical-waste-dangers__>

This type of facility does not belong in such a small, densely populated state, where one accident or mishap could be disastrous, whether it be toxins that are emitted into our air and/or water, or a traffic accident involving any of the dozens of tractor trailers transporting these hazardous materials on our local roads, 24/7. How much more CO2 will these vehicles be emitting into our air, along with the additional CO2 that the company admits will be emitted? This doesn’t make sense especially since Gov McKee signed the new climate bill into law ensuring the state reaches its goals to "reduce climate-damaging emissions while protecting communities and transitioning to clean, renewable energy." This proposal does neither and has too many unanswered questions and potential dangers. Please do the right thing and help all Rhode Islanders by voting AGAINST this proposal. Thank you,

Karen Gareau

Thank You,
Karen Gareau

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste
From: (Name) From: (Address)
Karen Gareau Gareauks@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I live in Western Coventry, near the CT border, but I am against this proposal for many of the reasons the Conservation Law Foundation (CLF) cited in this well researched article found here:
https://urldefense.com/v3/__https://www.clf.org/blog/burning-medical-waste-dangers/__;!!KKphUJtCzQ!cYASgWVos1v3w-RSSJC64DQk_duAQw5ypEMOJaHZ-rppij0h9a2NjT6Qi0nGoL0mW5fS [clf.org]

This type of facility does not belong in such a small, densely populated state, where one accident or mishap could be disastrous, whether it be toxins that are emitted into our air and/or water, or a traffic accident involving any of the dozens of tractor trailers transporting these hazardous materials on our local roads, 24/7. How much more CO2 will these vehicles be emitting into our air, along with the additional CO2 that the company admits will be emitted? This doesn’t make sense especially since Gov. McKee signed the new climate bill into law ensuring the state reaches its goals to "reduce climate-damaging emissions while protecting communities and transitioning to clean, renewable energy." This proposal does neither and has too many unanswered questions and potential dangers. Please do the right thing and protect all Rhode Islanders by voting AGAINST this proposal. Thank you,
Karen Gareau

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.
Karen Gareau,
1301 Maple Valley Rd,
GreeneRI
gareauks@gmail.com

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
Karen Kane  
karenrkane@aol.com

[EXTERNAL]:
I am very concerned about the possibility of Medrecycler being approved to build their facility on the W. Warwick/East Greenwich town line.

Even if it is proven to be absolutely safe I still do not like where it is to be located. I have no affiliation with the nursery school that it is to be built close to but how could anyone possibly consider endangering the children to spend their days there.

I also feel like EG is going to get all of the traffic, etc. but will have absolutely no benefit. W. Warwick will of course be the town that benefits. This reminds me of the days when we had to fight to keep the Casino out of that area. Put in somewhere that will not infringe on people's lives if it is absolutely proven to be safe.

Karen Kane
ne Glen Drive
East Greenwich

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Kari Glynn
kariglynn11@gmail.com

? Hello,

I am a resident off of Division Rd. in East Greenwich and I want to make my concerns known regarding the proposed MedRecyler facility on Division Road. Despite what the owner is stating, this technology is not widely used nor accepted anywhere in the United States. The thought of waste that has potential contaminants like COVID-19, chemo drugs and others is deeply concerning to me. What happens if something goes wrong and dangerous toxins and waste are released? Who is going to make sure our community is safe? That area would be deemed a hazardous waste site with repercussions to the surrounding businesses and residents. This is not the place to test this technology and will not going to produce the energy or the jobs claimed by the business owner. The risk is so great, I urge you to reject this license request.

Thank you,

Kari Glynn

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
From: (Name) From: (Address)
Karl Heinselman  kheinsel11@gmail.com

[EXTERNAL] : Medical waste facility
We are totally opposed to allowing this facility to operate in close proximity to residential areas. The homeowners should not be put at risk, that would be totally irresponsible!

Respectfully,
Karl and Carol Heinselman
Stone Ridge area

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
This is a dangerous and toxic project that is going to affect the health of my family and impact our property value. I am extremely opposed to such a controversial project by out of state investors coming to our town because no one else wants it. I implore DEM to protect the people, wildlife and environment and stop this greed. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Kathleen Baglini,
50 crossbow lane,
West WarwickRI
baglinjkctrm@msn.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
From: (Name) From: (Address)
Kathryn Curnow thecurnowfamily@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Please consider the people in the neighboring areas that will have no choice but be exposed to the environmental effects of Medrecycler. We don't want to suffer possible deadly health implications in the future from this unproven burning technology being so close to where we live or work. Have you seen the news about burn pits and what burning materials at Ground zero or in war zones has done to our first responders and veterans? Are we going to be on the news in years to come with hindsight regret that the emissions caused deadly health conditions? If you can’t say this is safe with absolute certainty then you are playing with our health. Please find another place where you will not be gambling with human lives.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250- RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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Kathryn Curnow,
10 Limerock Drive,
East GreenwichRI
thecurnowfamily@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: Statewide Planning Approvals
• See XVI. Buffer Zone
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
I am writing to express my opposition to the proposed MedRecycler Pyrolysis facility on the border of West Warwick and East Greenwich. I am a resident of North Kingstown just south of the facility and spend time shopping and going to doctor appointments less than a quarter mile from this facility.

I oppose any permits for MedRecycler to build a medical waste pyrolysis facility in our state. Medical waste is known to contain persistent, bioaccumulative toxins like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. I am concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char.

My reasons for opposition include:

* The pyrolysis technology proposed has not been tested by a third party and shown to be safe.
* The pyrolysis process will release gasses which include many harmful chemicals. MedRecycler claims that they will not release any harmful chemicals. However, their plan does not include adequate processes for preventing the release of, filtering of, or reclaiming of harmful chemicals in their exhaust. Furthermore, their plan does not provide for continuous monitoring of the exhaust to measure the levels of harmful chemicals in the exhaust.
* DEM is charged with the enforcement of environmental regulations but does not have the resources to provide 24/7 continual monitoring of the exhaust for compliance.
* MedRecycler has produced contradictory statements about how much waste they plan to process and how much pollution they expect to produce.
* MedRecycler has made contradictory statements about discharge of waste water and provides no processes for the continual monitoring of the waste water.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar.

Additionally, I have a number of objections on procedural grounds:
* Why does the DEM Notice of Intent to Approve say that Medrecycler - RI can STORE medical waste when the application states that waste will NOT be stored on site?

* Why does the DEM Notice of Intent to Approve say that Medrecycler - RI "no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite"?

This is quite a disparity from what the public is being told.

* The original intent, based on planning board minutes, was for 4 delivery trucks a day "generally in the morning" or as stated in DEM info session "scheduled by appointment". The application states this facility will operate 24 hours a day, seven days a week. Will trucks be delivering materials all day or is there a set window? Will someone be on site to have 24 hour monitoring?

* The application is clearly still referencing the original Johnston site as noted in Population and Service Area. Shouldn't this be updated in the application?

I have also reached out to Medrecylcer via social media to obtain more information on waste water discharge and emissions testing. They did not provide any additional information nor did they make an effort to answer my questions. They merely referred me to the already distributed information, leaving my questions unanswered. Their lack of transparency throughout the permitting and public comment period does not inspire confidence. They should be granted permits based on unproved and untested claims. The limitations of monitoring the safety and emissions from the site are deeply troubling from the health, safety, and environmental perspectives. Until this technology is tested and proven safe, I respectfully ask DEM to deny any permits to the MedRecycler facility.

Thank you for your time and consideration,

Katie Zimmerman

Kristen Lane

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: C. Issues related to Sewage Discharge
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- The commenter correctly notes that the application lists the population and service area as that around Johnston instead of East Greenwich. Firstly, given the fact that this is a regional analysis, the distance between the two is very small. More importantly, although this is relevant for a market analysis, such analysis is not relevant to the Department’s role.
- See V. Issues Related to Storage of Waste
From: (Name)  From: (Address)
Kathy Lynch  klynch922@gmail.com
[EXTERNAL] : Medrecycler
I strongly oppose the medical waste treatment facility being placed in this area. The area is close to densely residential neighborhoods. The potential harmful pollution and exposure to toxins are unknown. Say no to this facility. Thank you,
Kathy Lynch

Sent from my iPhone

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Katie Silberman
katie.silberman@gmail.com

[EXTERNAL] : Oppose Permit for MedRecycler Facility
February 5, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street, Providence, RI 02908
Attention: Yan Li, vie email: yan.li@dem.ri.gov

Re: Oppose Permit for MedRecycler Facility

Dear Yan Li:

As residents of East Greenwich, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in neighboring West Warwick.

Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA, 2017) is an untested, hazardous technology that is entirely inappropriate for a residential neighborhood. The citizens of West Warwick and East Greenwich -- while bearing all of the risk of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste which would travel through our towns every day. Medical waste is known to contain mercury, harmful plastics and other toxins even before COVID-19: we do not want infectious COVID-19 waste in our towns.

During the information session in January, the project developer admitted that he fully intends to expand the facility to accept medical waste from throughout the northeast, from New York to New England: he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including a childcare center and a college in close proximity to the MedRecycler proposed site -- and our voices of opposition should count in this decision.

As Rep. Justine Caldwell has stated, East Greenwich “will have the emissions, the trucks in our neighborhood, the potential for accidents, and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since the true risks of using pyrolysis to treat medical waste are currently unknown, DEM should err on the side of caution to protect human health and the environment.
“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action.”


Please prioritize the health of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering our comments.

Sincerely,

Katherine Silberman
39 Crestridge Drive
East Greenwich, RI 02818
katie.silberman@gmail.com <mailto:katie.silberman@gmail.com>

In support:

Katie Tsimikas
80 Sunset Drive
East Greenwich, RI 02818
KatieTsimikas@gmail.com <mailto:KatieTsimikas@gmail.com>

Daisy Bassen, MD
20 Devon Ct.
East Greenwich, RI 02818
dgbassen@gmail.com <mailto:dgbassen@gmail.com>

Jennifer Longa
49 Bow St
East Greenwich, RI 02818
jenn.longa@gmail.com

Sherri McGraw
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Ms. Coit, Ms. Li and Mr. Dennan,

Attached please find a letter opposing any permits for MedRecycler, signed by 1,644 residents of West Warwick, East Greenwich, and nearby towns. This is not a petition, but rather a letter of opposition co-signed by neighbors.

I wrote this letter in February, and everything I've learned about MedRecycler since then has only given me more fear, more doubts, and more cause for concern about this untested, inappropriate business.

The lack of any buffer zone to businesses literally in the same building (as well as childcare and college kids in immediate proximity), the frightening issue of chemotherapy chemical waste, the many procedural legal challenges to this permitting process, the fact that Mr. Campanella has literally been implicated in multi-million dollar fraud [nytimes.com](https://urldefense.com/v3/__https://www.nytimes.com/2020/05/26/nyregion/coronavirus-fraud-masks-new-york.html?referringSource=articleShare schemes -- all of these add more weight to the undeniable arguments against permitting this facility.

Additionally, I am deeply concerned that DEM's public participation process was irrevocably flawed by DEM's decision to cap the number of people who could log on to the March 15 public hearing zoom call at 300. Our coalition has documented more than 50 people who tried to log on to the zoom and literally could not access the ostensibly public hearing because the attendee limit had been reached. This is unacceptable. The residents of West Warwick, East Greenwich and nearby towns are being asked to bear all of the risk of this facility, to our health and environment, and at the very least, our voices should literally be heard in this process.

I contacted Mr. Dennan and Ms. Li the week before the hearing by phone and email to let them know that we had over 1,000 signatures on our letter at that point, and expected a very large turn-out on the call. Nonetheless, DEM made the decision to cap the number of attendees at 300. This had the predictable result of disenfranchising many people who wanted to participate but could not, including members of the media. On March 10, Mr. Dennan wrote Denise Lopez, a nearby resident, "We have spoken to our IT staff and confirmed that the maximum number of participants on zoom is 300 at any one time. We will however schedule a second zoom hearing if not all commenters are able to participate." Although we let Mr. Dennan know repeatedly after March 15 that many residents could not access the call, the promised second hearing never happened.

I recognize that the MedRecycler process has been complex and contentious, and thank the DEM staff for all of your work to facilitate a just outcome for the residents of Rhode Island. Please deny this permit.
Thank you,
Katherine Silberman
East Greenwich

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting
• See XVI. Buffer Zone
• See IX. Limitations on Attendees at Public Hearing
KATIE SILBERMAN  katie.silberman@gmail.com
April 11, 2021
Rhode Island Department of Environmental Management
Attention: Yan Li
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street, Providence, RI 02908
Re: Deny Permits for MedRecycler Facility
Dear Ms. Li:

As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick.

Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA 2017) is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day.

Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. Given the two daycare centers and a college in close proximity to the proposed site, it is shocking that a facility emitting lead alone would be allowed to operate nearby. Additionally, with residential neighborhoods surrounding the site, we are especially concerned about the health effects of dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm -and the potential for radioactive waste to come to the facility (www.epa.gov/dioxin).

During DEM’s January 25, 2021, Public Informational Workshop on Facility’s License Application, project developer Nicholas Campanella admitted that he intends to expand the facility to accept medical waste from throughout the northeast; he said that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders - including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste. Those of us who live in East Greenwich, including several neighborhoods that would be directly impacted by
emissions from this facility, feel particularly disenfranchised by this ostensibly
democratic process. Given that the facility’s driveway and access roads are actually in
East Greenwich, as Rep. Justine Caldwell has stated, East Greenwich “will have the
emissions … and the questionable material being brought into the area without anyone on
the receiving end ensuring that it is safe and that its contents are what it purports to be. It
is unconscionable that our town leaders would have no standing in this matter when the
abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of
environmental law, to this decision. Since pyrolysis has never been used to treat medical
waste, the true risks are currently unknown. The residents of West Warwick and East
Greenwich do not consent to our children, our families, and our neighborhoods being
used as guinea pigs for an untested technology, which could cause unknown harm. What
happens if there is a malfunction, an accident, a fire, or unpredictably harmful emissions
from this plant? How do you reverse that damage? Once the children at the two nearby
daycares are exposed to lead from the MedRecycler facility, how do you undo that harm?
The answer is: it is impossible. Therefore, DEM should err on the side of caution to
protect human health and the environment.

“When an activity raises threats of harm to human health or the environment,
precautionary measures should be taken even if some cause and effect relationships are
not fully established scientifically. In this context the proponent of an activity, rather than
the public, should bear the burden of proof. The process of applying the precautionary
principle must be open, informed and democratic and must include potentially affected
parties. It must also involve an examination of the full range of alternatives, including no
action.”

The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely
distinguishable from a medical waste incinerator with a greenwashed name, and medical
waste incinerators are notoriously toxic, polluting facilities that are inconsistent with
residential communities. This is the definition of regulated medical waste:

Pathological waste. Tissues, organs, body parts, and body fluids removed during surgery
and autopsy.
Human blood and blood products. Waste blood, serum, plasma and blood products.
Cultures and stocks of infectious agents (microbiological waste). Specimens from
medical and pathology laboratories. Includes culture dishes and devices used to transfer,
inoculate, and mix. Also includes discarded live and attenuated vaccines.
Contaminated sharps. Contaminated hypodermic needles, syringes, scalpels, and
broken glass.
Isolation waste. Generated by hospitalized patients isolated to protect others from
communicable disease.
Contaminated animal carcasses, body parts and bedding. From animals intentionally
exposed to pathogens in research, biologicals production, or in vivo pharmaceuticals
testing.
Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to import to this site. On the same January 25 call, Mr. Campanella admitted that he plans to start by processing 70 tons of medical waste/day, but he chose this site partly because he can expand in the same building to accept up to 140 tons/day. Industrial facilities are as imperfect and fallible as the humans who manage them. They malfunction, have accidents and do not always perform as planned. With the predicted volumes of hazardous waste, even small accidents can have a big impact on the surrounding community. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who live and work near or downwind of this site.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar.

Furthermore, we want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Zooming out from the local perspective to a statewide, national, and even global view, the facts are clear that our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future. In fact, Rhode Island is in the midst of debating whether to strengthen our greenhouse gas emission limits with the new Act on Climate bill, currently pending in the legislature. In her recent State of the State address, Governor Raimondo said, “Rhode Islanders can be proud that we are the state leading the nation in the fight against climate change.”

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering our comments. We look forward to the March 15 public hearing on this matter.

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3 April 11 Note: this letter was originally written in February. On April 10, 2021, this bill was signed into law by Governor McKee. This makes the current argument against MedRecycler even stronger from the state perspective.
Sincerely,
This letter has been signed by 1644 local residents as of April 11, 2021. Signature list attached separately.

Contact:
Katherine Silberman
39 Crestridge Drive East Greenwich, RI 02818 katie.silberman@gmail.com

In the interest of brevity, names are not show here, see the original compilation of comments for a list of signers.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Hello, my name is Katherine Silberman, I am a resident of East Greenwich and the primary author of a letter in opposition to MedRecycler that has currently been signed by 1,484 residents. I don't have time to read the entire letter, but I’d like to read excerpts.

First, I’d like to say that I’m receiving many messages from EG and West Warwick residents who are trying to access this call, but cannot due to the 300-person zoom capacity. I contacted DEM by phone and email last week to let them know that we had over 1,000 signatures on our letter and expected a huge turnout, so that they could prepare. I believe the fact that people literally cannot join the call means that this is not authentic or sufficient public participation.

As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick.

Pyrolysis, which has been called a “high risk, low yield process for waste management,” is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day.

Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char.

With two daycare centers and residential neighborhoods surrounding the site, we are especially concerned about the health effects of lead and dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects [medicalnewstoday.com] <https://urldefense.com/v3/__https://www.medicalnewstoday.com/articles/17685*health-
Mr. Campanella has stated that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste.

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. The residents of West Warwick and East Greenwich do not consent to our children, our families, and our neighborhoods being used as guinea pigs for an untested technology, which could cause unknown harm.

What happens if there is a malfunction, an accident, a fire, or unpredictably harmful emissions from this plant? How do you undo that harm? The answer is: it is impossible. Therefore, DEM should err on the side of caution to protect human health and the environment.

The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely distinguishable from a medical waste incinerator with a greenwashed name, and medical waste incinerators are notoriously toxic, polluting facilities that are inconsistent with residential communities. The definition of regulated medical waste includes human blood, body parts, and live vaccines, among many other biohazards.

Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to import to this site. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who live and work near or downwind of this site.

We want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future.

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM
to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you.

DEPARTMENT RESPONSE:
- See previous response above
- See IX. Limitations on Attendees at Public Hearing
Hi Yan?, my name is Kelly Hinrichs and my family and I live in East Greenwich right off of Division Rd., less than a 5 minute walk from the proposed site of the Medrecycler facility. We are extremely concerned with the fact that you are considering a permit for this facility in the middle of a residential area, next to a daycare, across from a restaurant and public golf course, college and several businesses given that the process they are going to use has not been previously tested. They can make all the claims they want regarding how “safe” and “green” it is but having not been tested those claims are baseless. My husband and daughter have asthma and one of our sons has a congenital heart condition which restricts oxygenated blood flow to his lungs. They have a hard enough time with the poor air quality in Rhode Island and this facility, putting out toxic emissions at ANY rate, will only contribute to deteriorate the air quality further making their quality of life and countless others in the community significantly reduced. It has been hard enough this past year keeping them healthy during a pandemic, do we really need to compromise the health of residents intentionally? This company being based in New Jersey could have had their pick of uninhabited land in New Jersey or even New York where there is an abundance, however they are choosing to put it in a residential community where there is a small “industrial park” in the tiniest state in the country? The emissions from all the trucks carting in the medical waste alone should be enough to deny the permit, let alone the toxic emissions from the facility. I pray you make the ethical and moral decision to deny the permit to Medrecycler and protect the community and environment from this false “green” initiative. Is it really worth any amount of money to have an environmental catastrophe on your hands? I don’t think so. They need to find a more remote location in RI, far away from any residential area if that’s even possible, otherwise set up in another state. This type of facility is NOT what Rhode Islanders wanted when we voted yes on using funds for green initiatives, I can assure you that. Again, I will pray that God will put it on your heart to do the right thing and deny this permit. Thank you for your time and God Bless!

Sincerely,
Kelly Hinrichs

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Good morning,

Below are my questions concerning the proposed medical waste facility.

Medical waste regulations: MedRecycler must prove, “on the basis of thorough tests,” that its technology is “protective with respect to total impact on the environment” and that it ensures “the health, safety and welfare of both facility employees and the general public.” MedRecycler’s technology has never been used on medical waste and MedRecycler.

1. How is MedRecycler going to demonstrate it will comply with Rhode Island’s medical waste regulations?

2. How is MedRecycler going to ensure the health and safety of the general public?

Solid waste regulations: MedRecycler’s facility must be “designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility.”

1. Given the risks of burning medical waste, the untested nature of MedRecycler’s technology, and the close proximity of businesses and residents, how is this company going to comply with this standard?

Buffer zone: My understanding is that for a facility like this, a buffer zone is required around the plant. This site has no buffer zone. MedRecycler will share a wall with the business next door, and there are daycares, schools and businesses very nearby.

1. How is MedRecycler planning to get around the buffer zone requirement?

Thank you,
Kelly Nicoll
565 Quaker Lane Unit 4
West Warwick, RI 02893
401-556-2516

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
We say NO, we do not support this Medical Waste Treatment Facility in West Warwick, RI. This Medical Waste Treatment Facility processing plant is located way too close to family neighborhoods, schools and pre school day care centers and the New England Institute of Technology University. Also, there is a golf course across Division Road from the proposed site.

This type of Medical Waste Treatment Facility should be located out of this small state....there’s no place for it, we have too many neighborhoods. Maybe at a larger industrial complex such as Quonset Industrial park....far away from neighborhoods.

Even though they say there is no risk of pollution or contamination escaping from this Medical Waste Treatment Facility, historically the general public finds out years down the road (which is usually too late to do anything about it) that there has been a leak that is hazardous to the public and now we have to clean it up. Also, the public has been exposed to these contaminate and are suffering medical conditions while the Medical Waste Treatment Facility are making money from this plant.

So again, we say “NO” to the approval of the Medical Waste Treatment Facility.

The Johnson’s, West Warwick, RI residence

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
To place a project with an unproven process of incinerating medical waste in the middle of a densely populated area and have residents become test subjects is morally corrupt. This proposal should be denied and the health of Rhode Island and its residents prioritized. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Kenneth Fleury,
35 Highview Drive,
West Warwick RI
kfleury@astronovainc.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
As an East Greenwich resident, I am writing to express my strong opposition to the MedRecycler-RI, Inc. medical waste treatment facility that is proposed for West Warwick.

There is no financial gain it could bring that would be worth making our community - especially our children - guinea pigs for an untested technology that could cause horrific harm.

Please do the right thing for Rhode Island and deny the medical waste license for the MedRecycler-RI, Inc. medical waste treatment facility.

Sincerely,
Kerci Stroud

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: Kerry Hayes  klhayes111@verizon.net
[EXTERNAL]: permits for MedRecycler Facility
Dear Ms. Li and Mr. Dennen,

As a resident of West Warwick I am writing again to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick, or anywhere else in Rhode Island. Pyrolysis which has been called a high, risk low yield process for waste management (GAIA 2017) is a potentially hazardous technology that does not belong in residential areas or near schools. Those of us who live, work and send our children to school in this area would have no way of knowing what types of hazardous materials would be imported and processed everyday. Medical waste is known to contain bioaccumulative toxins such as mercury which will not be eliminated by pyrolysis.

I am gravely concerned about the potential for harmful air and water pollution created through the pyrolysis process including carbon dioxide, lead, mercury, ash and char. As a public school teacher I am aware of the life long effects that exposure to lead can cause. Dioxins which will also result from this process have been linked to cancers, liver damage and birth defects to name a few. It is appalling that a facility with the potential to cause these health and safety concerns could even potentially be allowed to operate in a residential area so close to schools and daycare centers. are unknown

The simple fact of the matter is we the residents of West Warwick would have no idea what type of waste is being trucked into our community. Pyrolysis has not been used to treat medical waste, therefore the true risks are unknown. I do not want my family, my neighbors, the first responders and local businesses in my community to be used as a guinea pigs for a company which claims to be something it is not...green.

Industrial facilities owned, operated and staffed by people. People are not perfect. We make mistakes. We cause accidents. Machines malfunction and don't always perform the way we want or expect them to. When there is an accident or a malfunction how do we undo the damage caused to our families, our communities and our environment? We can't! It will be too late.

MedRecycler comes with too many unknowns. There is too little known about the process itself. It will be unknown exactly what type of medical/hazardous waste and being treated. I implore you to prioritize the health and safety of our families, our community and our environment. Deny any permits for the medRecycler facilities.

Thank you for your consideration,
Kerry Trotta
2 Arcadia Ct
West Warwick, RI 02893

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste
To Whom it may Concern,

I am writing to express my concern over the proposed Medrecycler Inc. medical waste incineration site in West Warwick. As a resident of West Warwick I am concerned about a facility like this opening up anywhere in our town. I do not believe a facility like this is appropriate in a residential area. The location in question has houses and condominiums across the street. The childcare center my youngest child attends is directly next door. I have grave concerns about the health, safety and environmental impact burning medical waste poses. Regardless of developer claims, this type of technology has been criticized as being inefficient. More significantly, this technology is not being used to incinerate medical waste anywhere else in our country. If Medrecycler is granted permission to operate this type of business we are effectively giving them permission to treat the families in our communities as guinea pigs. There is too much unknown about this process. I respectfully ask that you prioritize community and environmental health and safety, by denying Medrecycler, Inc's request to establish this type of business in West Warwick, or anywhere in Rhode Island for that matter.

Thank you for your time and attention on this matter. I look forward to discussing further at the open comments meeting in March.

Sincerely,
Kerry Trotta
West Warwick, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Kevan McAleer mcaleerkevan@gmail.com

[EXTERNAL] : Opposition of MedRecyle-RI

Kevan McAleer mcaleerkevan@gmail.com

1The Rhode Island Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
Mr. Mark Dennen mark.dennen@dem.ri.gov Ms. Yan Li yan.li@dem.ri.gov
235 Promenade Street
Providence, Rhode Island 02908
April 11, 2021

Kevan McAleer, Stephanie Egan, and Alma Egan
1607 Middle Road
East Greenwich, Rhode Island 02818

Dear Mr. Dennan and Ms. Li:

We are writing to express our opposition to the Medrecycler-RI facility that is currently planned to open in our community. We strongly urge you to reject the permit application from Medrecycler-RI. We are extremely concerned for the environment of Rhode Island and for the health of all Rhode Islanders.

As stewards of our beautiful state, DEM is charged with the protection of our air, our land, and our waterways. A medical waste pyrolysis facility has not been tested; therefore it has not been proven safe. Pyrolysis to incinerate medical waste, that includes toxins and dioxins, does not exist in our country or in the world! Unbelievably, this facility plans to accept medical waste from all of New England and the surrounding region, to incinerate 70 tons of waste per day with the plans of expanding to 140 tons per day. Please do not allow a medical waste pyrolysis facility to open in Rhode Island. The company that plans to open this facility has zero experience with pyrolysis and deigns to present it as green energy. In fact, the risks of medical waste pyrolysis are unknown. Pyrolysis has never been tested nor used for medical waste, nor is it a green energy. There is no data to support the safety of a medical waste pyrolysis facility or the potential hazards that it may pose for our community of residential neighborhoods, daycares, local businesses, and a college. This high-risk facility is simply unfit for Rhode Island.

We urge you to reject the permit for Medrecycler-RI. Keep Rhode Island and Rhode Islanders healthy and safe.

Thank you for your time and consideration of this extremely important matter.

Regards,

Kevan McAleer, Stephanie Egan, and Alma Egan

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: (Name) From: (Address)
Kevin Budris  kbudris@clf.org
[EXTERNAL] : MedRecycler -- Conservation Law
Foundation comments in opposition
Ms. Li:

Please find attached comments on behalf of Conservation Law Foundation opposing MedRecycler’s application for a medical waste treatment facility license.

Thank you,

Kevin

Kevin Budris
Staff Attorney
Conservation Law Foundation
235 Promenade Street, Suite 560
Mailbox 28
Providence, RI 02908

P: 401-228-1910
E: kbudris@clf.org <mailto:kbudris@clf.org>

For a thriving New England

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Kevin Budris, CLF, kbudris@clf.org
April 14, 2021

By Email

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management 235 Promenade Street
Providence, RI 02908 Attention: Yan Li

Re: MedRecycler Application for Medical Waste Treatment Facility License

Dear Ms. Li:

Thank you for the opportunity to submit comments regarding MedRecycler-RI, Inc.’s (“MedRecycler”) revised application for a medical waste treatment facility license (“Application”) pursuant to R.I.G.L. § 23-18.9-9 to construct and operate a medical waste pyrolysis facility at 1600 Division Road in West Warwick (“MedRecycler Facility” or “Facility”). Conservation Law Foundation (“CLF”) opposes the Application and urges the Rhode Island Department of Environmental Management (“RIDEM”) to deny the Application.

CLF is a nonprofit, member-supported environmental organization working to conserve natural resources, protect public health, and build healthy communities in Rhode Island and throughout New England. CLF’s Zero Waste Project aims to protect New England communities from dangerous and problematically sited waste facilities, including all facilities that process waste with high-heat technologies, including incineration, gasification, or pyrolysis.

CLF respectfully requests that RIDEM deny the Application and refuse to grant MedRecycler a medical waste treatment facility license for the following reasons:

The proposed MedRecycler Facility would pose unnecessary risks to public health and the environment;

The Application does not comply with Rhode Island Solid Waste Statutes (R.I.G.L. § 23-18.9, et seq.) because it does not include a certificate of final determination from the town of West Warwick or a certificate of approval from the State Planning Council;

The Application does not comply with Rhode Island Medical Waste Regulations (250 R.I. Code R. § 140-15-1) because MedRecycler has not proven, “on the basis of thorough tests,” that the “alternative technology” the Facility will use to treat and destroy regulated medical waste (“Medical Waste”) will be protective of the environment or that it will ensure the health, safety, and welfare of employees and the general public;
The Application does not comply with Rhode Island Solid Waste Regulations (250 R.I. Code R. § 140-05-1) because there is no “buffer zone” around the proposed Facility to mitigate nuisance impacts and because the Application does not demonstrate that the proposed Facility will be designed, operated, and maintained in a manner that will protect health and safety; and

All supporting documentation has not been made available for public comment.

MedRecycler has proposed to use pyrolysis to “convert” Medical Waste into fuel, oils, tars, ash, and char; and to then burn those materials to generate heat, electricity, and an additional waste product called “slag.” Despite the health and environmental hazards associated with waste pyrolysis, MedRecycler has failed to adequately test its technology or to comply with basic statutory and regulatory requirements in submitting its Application.

I. Background

MedRecycler’s Application and the Proposed Facility

On July 28, 2020, MedRecycler submitted to DEM its revised Application for a medical waste treatment facility license.1 If the Application is granted, the proposed MedRecycler Facility will accept 70 tons of Medical Waste per day; heat that Medical Waste to 1,472–1,652 degrees Fahrenheit in a pyrolysis chamber to generate gaseous hydrocarbons (“syngas”), oils, tars, ash, and char; and burn each of those resulting materials.2

MedRecycler plans to accept Medical Waste in sealed containers, which MedRecycler will feed into a “shredder/macerator” without opening.3 The Medical Waste accepted by MedRecycler will include cultures and stocks, pathological and anatomical waste, human waste, blood and blood products, sharps, animal waste, chemical waste, “incinerate only” wastes, unused sharps, spill cleanup material, and mixtures of Medical Waste and other non-hazardous waste.4 Generally speaking, hospitals, laboratories, mortuaries, animal research centers, blood banks, and nursing homes are all significant sources of Medical Waste.5 Up to eighty-five percent of

2 Id. at 8–10, 19–20.
3 Id. at 14–16, 41.
4 Id. at 46; see also 250 R.I. Code R. § 140-15-1.2(C).
Medical Waste is general non-hazardous waste as opposed to infectious or toxic waste.\textsuperscript{6} And about twenty-five percent of Medical Waste is plastic.\textsuperscript{7}

After MedRecycler shreds the Medical Waste, it will route the shredded waste through a “thermal dryer” and then feed it into one of two pyrolysis chambers.\textsuperscript{8} MedRecycler plans to generate heat for the thermal dryer and the pyrolysis chambers by burning syngas, methane gas, and/or liquified propane gas.\textsuperscript{9} According to the Application, MedRecycler will heat the shredded, dried Medical Waste in the absence of oxygen in the pyrolysis chamber to generate syngas, tars and oils, and ash and char.\textsuperscript{10} The syngas will be routed through coolers, tar condensers (to remove tars), oil condensers (to remove oils), scrubbers intended to remove particulate matter, and then to a storage tank.\textsuperscript{11}

MedRecycler plans to burn syngas in three different locations at the Facility: burners to heat the thermal dryer, burners to heat the pyrolysis chambers, and engines located outside the facility that will burn syngas to generate electricity.\textsuperscript{12} MedRecycler also plans to burn the tars, oils, ash, and char in a “vitrification furnace,” which will also supply heat to the pyrolysis chambers.\textsuperscript{13} Exhaust from the thermal dryer, the pyrolysis chamber, the engines, and the vitrification furnace is sent to a “Thermal Oxidizer” where the gasses “are conditioned for release.”\textsuperscript{14}

Despite MedRecycler’s repeated claims that its pyrolysis technology is a “closed system,”\textsuperscript{15} the MedRecycler Facility will produce air emissions (including up to 24,585 tons of carbon dioxide per year), slag (a solid waste product generated from burning ash and char in the vitrification furnace, and which MedRecycler describes as “a glassy inert product”), waste water (which MedRecycler states it will “recycle[] through the Pyrolysis System”), and a “carbon based char.”\textsuperscript{16} MedRecycler also states in the Application that after “waste is processed, treated, and destroyed, there may be small amounts of slag on the floor.”\textsuperscript{17} Although MedRecycler claims in
the Application that the slag and char will be “inert,” it does not describe any testing protocol to verify the composition of the slag or char. And despite stating that the char “will be recycled in Hot Mix Asphalt,” the Application does not provide a detailed disposal plan for the slag or char.

Technotherm, Inc. (“Technotherm”) will provide the pyrolysis equipment for the proposed MedRecycler Facility. According to the Application, Technotherm’s technology has been used in facilities outside the U.S. that process waste from an animal slaughterhouse, plastic waste, and wood biomass. Nothing in the Application indicates that Technotherm’s technology has previously been used to process Medical Waste or to burn syngas, tars, oils, ash, or char derived from Medical Waste.

The location for the proposed MedRecycler Facility—1600 Division Road—is a multi-tenant building in West Warwick that houses, among other businesses, an athletic equipment company, a craft brew supply store, and an electronic health records service. A childcare center is located approximately three hundred feet from 1600 Division Road at 1635 Division Road.

B. RIDEM Notice of Intent
On January 11, 2021, RIDEM issued a Notice of Intent to Approve the Application (“Notice of Intent”). In the Notice of Intent, RIDEM communicated its “intent to approve the license pursuant to R.I.G.L. 23-18.9-9.” The Notice of Intent describes the statutorily mandated public comment period and explains that the tentative approval is subject to a set of fourteen conditions. Those conditions include, but are not limited to, MedRecycler’s compliance with West Warwick safety and zoning requirements and state and federal regulations; the submission of a “Contingency Plan” approved by the West Warwick Fire Department; “pre-operational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens”; and submission of “detailed protocols

18 Id. at 54.
19 Id. at 7.
20 Id.
22 See https://www.everythingtrackandfield.com/.
24 See https://amazingcharts.com/.
27 Id. at 1.
for routine testing of the system at least every 40 hours of operation.” 28 RIDEM also reserved the right “to issue a denial or approval of the final application.” 29

C. Governing Law


Medical Waste is a “special category of solid waste” 32 for which the general assembly has found a need for heightened regulations and “additional enforcement vehicles.” 33 Rhode Island Medical Waste Regulations are intended, among other purposes, to “protect the public health and the environment from the effects of improper management of medical waste through the assurance of proper, adequate and sound management of regulated medical waste.” 34 They apply to owners and operators of facilities that treat, destroy, or dispose of Medical Waste. 35

Medical Waste facilities include “destination,” “destruction,” “transfer,” and “treatment” facilities. 36 Each of these facilities is subject to Rhode Island Solid Waste Regulations, 37 which require that a license applicant “must demonstrate their ability to comply with all General Operating Standards” set forth in the Solid Waste Regulations. 38

28 Id. at 2–4.
29 Id. at 5.
30 See Application at 3; Notice of Intent at 1–2.
32 Id. § 23-19.12-3(7).
33 Id. § 23-19.12-1(b).
35 Id. § 140-15-1.15(A).
36 Id. §§ 140-15-1.5(A)(9), (11), (41), & (46).
37 Id. §§ 140-15-1.5(A)(9), (11), (41), & (46).
38 250 R.I. Code R. § 140-05-1.7(B).

**Waste Pyrolysis is Not “Clean” Nor Does it Generate Renewable Energy.**

MedRecycler’s proposed pyrolysis process is tantamount to burning 70 tons of Medical Waste per day. By heating Medical Waste to more than 1,400 degrees Fahrenheit in the pyrolysis chamber, MedRecycler will generate waste-derived syngas, tars, oils, ash, and char.\(^3^9\) MedRecycler plans to then burn each of those products onsite at 1600 Division Road.\(^4^0\) Every ton of waste that MedRecycler accepts will be pyrolyzed in the absence of oxygen, and every ton of material created by that process will be combusted in the presence of oxygen.

Despite MedRecycler’s repeated claims that this process will be “clean,”\(^4^1\) waste pyrolysis, and the combustion of materials derived from waste pyrolysis, can generate the same toxic and climate-damaging pollutants as traditional “mass-burn” waste incineration. Pyrolyzing mixed waste, especially waste that contains significant proportions of plastic, can form persistent organic pollutants such as polychlorinated furans (“furans”), polychlorinated dibenzodioxins (“dioxins”), and polychlorinated biphenyls (“PCBs”); lead, mercury, and other heavy metals; toxic gases like hydrogen cyanide and carbon monoxide; and nitrogen oxides and sulfur dioxides.\(^4^2\) These toxics necessarily end up in one or more of the pyrolysis outputs: the syngas, tars, oils, ash, char, and/or slag.\(^4^3\)

Ash, char, and slag produced during waste pyrolysis usually contain toxics like mercury, lead, and dioxins.\(^4^4\) Despite claiming that the ash, char, and slag will be “inert,” and that MedRecycler plans to “recycle” the char into asphalt, the Application does not provide any testing protocols to

\(^3^9\) See Application at 19–28.

\(^4^0\) Id.


verify that these materials are non-hazardous.45 Waste-derived fuels and tars and oils “scrubbed” from those fuels—all of which MedRecycler plans to burn onsite—can contain heavy metals and dioxins.46 Burning these fuels, tars, and oils can emit more particulate matter, more lead, and more sulfur than burning diesel fuel.47 These types of emissions are precisely why Rhode Island has a statutorily codified policy against solid waste incineration.48

MedRecycler claims that the proposed Facility will generate renewable energy.49 But burning waste-derived syngas, a key element in MedRecycler’s proposal, releases climate-damaging gases, including carbon dioxide, along with particulate matter, heavy metals, sulfur, and dioxins.50 Turning Medical Waste that contains up to 25% plastic into fuel, and then burning that fuel, is the functional equivalent of burning fossil fuels. More than ninety-nine percent of plastics are derived from fossil fuels.51 Burning fuels derived from plastics releases the stored carbon in those fossil fuels.52 And Rhode Island explicitly excludes “[w]aste-to-energy combustion of any sort or manner,” other than the combustion of eligible biomass-derived fuels, from its definition of “renewable energy resources.”53

45 See Application at 53–54.
48 R.I.G.L. § 23-19-3(14) (“[D]ue to the myriad of over four hundred (400) toxic pollutants including lead, mercury, dioxins, and acid gases known to be emitted by solid waste incinerators, the known and unknown threats posed by solid waste incinerators to the health and safety of Rhode Islanders, particularly children, along with the known and unknown threats to the environment are unacceptable.”).
50 See Rollinson, supra note 46; Azouly, supra note 47, at 48; see also Application at 40 (MedRecycler states that the Facility has the potential to emit more than 24,000 tons of carbon dioxide each year).
52 See Rollinson, supra note 46; see also U.S. EPA, Solid Waste Management and Greenhouse Gases, a Life-Cycle Assessment of Emissions and Sinks 76 (3d ed. 2006) (“Combustion of plastics results in substantial net [greenhouse gas] emissions. . . . This result is primarily because of the high content of nonbiomass carbon in plastics.”)
Moreover, MedRecycler’s plan to use Medical Waste as the “feedstock” for its pyrolysis process carries with it unique challenges and risks that MedRecycler does not account for in its Application. Pyrolysis usually utilizes homogenous feedstock such as woodchips or other biomass, animal waste, or plastics. MedRecycler’s pyrolysis equipment is no exception, having been designed for use on slaughterhouse waste, plastics, and biomass. Medical Waste, however, is heterogenous, comprising varying proportions of pathological and anatomical wastes; liquids such as blood; plastics from sharps, cleanup materials, and other non-hazardous waste; chemical wastes; paper; and textiles. The varying composition of heterogenous waste can make it difficult to maintain proper pyrolysis chamber temperatures, which can result in unstable operations and can increase the formation of toxic byproducts like dioxins. That MedRecycler will not be opening the Medical Waste containers to verify composition further increases these risks. MedRecycler’s unsubstantiated claims notwithstanding, the proposed Facility poses significant risks to public health and the environment. The Application fails to take seriously, or even account for, the significant health and environmental threats posed by Medical Waste pyrolysis. RIDEM should consider these threats, and MedRecycler’s inattention to them, in deciding whether to grant the Application and issue a medical waste treatment facility license.


Two facilities in Rhode Island are currently authorized to treat Medical Waste: Rhode Island hospital in Providence and a Stericycle facility in Woonsocket. MedRecycler does not claim anywhere in its Application that these facilities are unable to meet current medical waste-processing needs in Rhode Island. MedRecycler has stated that at least some of the Medical Waste treated and burned at the proposed Facility will come from out-of-state generators, yet MedRecycler does not specify the sources of Medical Waste in the Application.

54 See Tangri, supra note 42, at 5; Rollinson, supra note 46.
55 See Application at 7.
56 See id. at 46; 250 R.I. Code R. § 140-15-1.2(C); Gibbens, supra note 7; World Health Organization, supra note 5.
57 See Tangri, supra note 42, at 5.
58 Application at 14–16, 41.
MedRecycler claims that the Facility will help extend the life of Rhode Island’s Central Landfill. If the Facility imports a significant portion of Medical Waste from out of state, however, it may have the opposite effect. As discussed above, the ash and char generated by the Facility will likely contain toxics like lead and dioxins. It will therefore be unsuitable as aggregate, and it will need to be landfilled. If MedRecycler’s “feedstock” predominantly comes from out of state, it will not be diverting from the Landfill—the ash and char will instead be adding to the Landfill and shortening its lifespan.

C. The Proposed Facility Will Interfere with Efforts to Reduce and Divert Medical Waste.

In extolling the supposed virtues of the proposed Facility, MedRecycler treats Medical Waste as an inevitability—a constant supply of waste that must either be landfilled, incinerated, or pyrolyzed. MedRecycler’s assumption is inaccurate and misleading. Like all other waste, Medical Waste can be reduced and/or diverted, obviating the need to choose between burning or burying most of this waste stream.

Only about fifteen percent of the waste generated by health care facilities is infectious or toxic. That waste will always require some manner of treatment, but much of the remaining eighty-five percent—made up of paper and plastic packaging, bedding and other textiles, food waste, single-use medical equipment and pouches, and other wastes—can be diverted, recycled, or reused if hospitals, clinics, and other facilities have the right systems and practices in place. Rhode Island Hospital has already taken steps in this direction by collecting sterile wrap from operating rooms for recycling and reducing operating room waste by up to twenty percent in the process. Boston area hospitals have begun sterilizing personal protective equipment like respirator masks so that they can be reused rather than thrown away.

62 See World Health Organization, supra note 5.
These source reduction and recycling efforts can significantly reduce greenhouse gas emissions compared to either landfilling or burning Medical Waste.66 MedRecycler’s treatment of Medical Waste as “feedstock,”67 however, would compete with efforts like these to reduce and divert waste. The World Health Organization recommends addressing Medical Waste by improving waste segregation and diversion and sterilizing, rather than burning, the remaining waste.68 CLF accordingly urges RIDEM to consider the negative impact of MedRecycler’s proposal on efforts to reduce and divert Medical Waste.

III. MedRecycler’s Application Does Not Comply With Rhode Island Solid Waste Statutes.
Rhode Island Solid Waste Statutes require an applicant for a license to construct and operate a “solid waste disposal facility” to submit “simultaneously with the application”: (1) “a certificate of final determination” from the host municipality “that the site conforms with all applicable local land use and control ordinances”; and (2) “a certificate of approval of the proposed site issued by the state planning council.”69 MedRecycler’s Application does not comply with either of these requirements, and RIDEM should accordingly deny the Application.

A. MedRecycler Has Applied to Construct and Operate a “Solid Waste Disposal Facility.”
The host municipality and state planning council certificate requirements apply to MedRecycler’s Application because the proposed Facility is properly considered a “solid waste disposal facility” within the meaning of R.I.G.L § 23-18.9-9(a)(1). The Supreme Court of Rhode Island has interpreted the “solid waste disposal facility” requirements of § 23-18.9-9(a)(1) to apply to any application to operate a “solid waste management facility.”70 MedRecycler submitted its Application pursuant to R.I.G.L. § 23-18.9-9, governing licenses to construct or operate solid waste management facilities.71 Moreover, any facility that processes, treats, or


66 Cf. U.S. EPA, supra note 52, at 116–20 (comparing greenhouse gas emissions reductions potential for source reduction, recycling, composting, incinerating, and landfilling different components of municipal solid waste, including plastic)
67 See, e.g., Application at 17.
68 World Health Organization, supra note 5.
71 See Application at 3; Notice of Intent at 1.
disposes of Medical Waste is considered a “solid waste management facility” under the Solid Waste Statutes, Medical Waste Regulations, and Solid Waste Regulations. Because the proposed Facility is a “solid waste management facility” and thus a “solid waste disposal facility,” RIDEM must deny the Application if it does not satisfy the requirements set forth in R.I.G.L § 23-18.9-9(a)(1).

B. The Application Does Not Include a Certificate of Final Determination from West Warwick.

RIDEM should deny the Application because MedRecycler did not submit “simultaneously with the application a certificate of final determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances.” Nowhere in the Application or its attachments does MedRecycler include a certificate of final determination from West Warwick. And MedRecycler says nothing in Application about whether West Warwick has made any determination as to whether the proposed Facility conforms with West Warwick land use or control ordinances.

According to the West Warwick Planning Board, the town has not yet made such a final determination. On May 15, 2019, the West Warwick Planning Board granted MedRecycler “Master Plan approval” for the proposed Facility. Master Plan approval is the first of three steps required for a major land development like the proposed MedRecycler Facility. MedRecycler must still apply for and be granted Preliminary Plan approval and Final Plan approval.

72 See R.I.G.L. § 23-18.9-7(13) (defining solid waste management facility as “any plant, structure, equipment, real and personal property . . . operated for the purposes of processing, treating, or disposing solid waste”); id. § 23-19.12-10(a) (a license to “engage in the storage, treatment and/or destruction of regulated medical waste” is considered “a special category of license issued to solid waste management facilities”); 250 R.I. Code R. § 140-15-1.2(C) (defining Medical Waste as “a special category of solid waste”); id. § 140-15-1.5(9), (11), (41), & (46) (Medical Waste destination facilities, destruction facilities, transfer facilities, and treatment facilities are all subject to Rhode Island Solid Waste Regulations).


74 See May 15, 2019 West Warwick Planning Board Decision, attached as “Exhibit A”; see also West Warwick Planning Board Meeting Notice for April 5, 2021, available at https://clerkshq.com/westwarwick-ri, and attached as “Exhibit B.”

75 See R.I.G.L. § 45-23-39(b) (“Major plan review consists of three stages of review, master plan, preliminary plan and final plan.”); West Warwick Subdivision and Land Development
Regulations § 17-13(B), available at http://www.westwarwickri.org/vertical/sites/%7B7B7B7C7E47-F7C1-4511-8CF3-EA8EBAF7D539%7D/uploads/Subdivision_Land_Development_Regulations.pdf.

approval. Without Master Plan, Preliminary Plan, and Final Plan approval, West Warwick cannot certify, and indeed has not certified, that it has made a “final determination” that the proposed Facility conforms with all relevant ordinances. MedRecycler did not submit with the Application the required “certificate of final determination” from West Warwick because such a final determination has not yet been made. RIDEM should therefore deny the Application for failure to comply with R.I.G.L. § 23-18.9-9(a)(1).

C. The Application Does Not Include a Certificate of Approval from the State Planning Council.

RIDEM should also deny the Application because MedRecycler did not submit “simultaneously with the application a certificate of approval of the proposed site issued by the state planning council.” The State Planning Council “shall only approve a site after great weight has been afforded to the detrimental impact that the placement of such a facility shall have on its surrounding communities and only after evaluation of alternative sites and assessment of comparative environmental impact at the sites.” Moreover, the State Planning Council “shall not issue its certificate prior to the publication of public notice and the expiration of the public comment period regarding the proposed site.” MedRecycler does not include as a part of its Application a certificate of approval from the State Planning Council, and there is nothing in the Application or its attachments that would suggest the State Planning Council has approved the proposed site for the Facility pursuant to R.I.G.L. § 23-18.9-9(a)(1).

The State Planning Council has notified MedRecycler that the council reviewed the proposed Facility and determined that it conforms with the State Guide Plan. This determination is, however, different than a certificate of approval under R.I.G.L. § 23-18.9-9(a)(1). The former is an exercise of power under Rule 1.3 of the Rules and Standards of the State Planning Council. The latter takes place under Rule 1.6 of the Rules and Standards of the State Planning Council and requires not only conformance with the State Guide Plan, but also compliance with solid waste facility siting criteria and a demonstration that the “site is at least comparable to alternative


Id.

Id.

See Dec. 6, 2019 Letter from Meredith Brady, attached as “Exhibit C.”

670 R.I. Code R. § 00-00-1.3.
sites, taking into consideration comparative environmental impact and regional
distribution of sites.”\textsuperscript{82}
Unlike a Rule 1.6 certificate of approval, a Rule 1.3 determination does not require
public notice and comment, nor does it require the State Planning Council to afford
“great weight” to the “detrimental impact” that a proposed facility will have “on its
surrounding community.”\textsuperscript{83} Affording great weight to the detrimental impact on the
nearby community is especially important here, where, as discussed above in Part II, the
proposed Facility poses significant risks to public health and the environment.
MedRecycler did not submit with the Application the required “certificate of approval”
under R.I.G.L. § 23-18.9-9(a)(1) because the State Planning Council has not issued any
such certificate of approval. RIDEM should therefore deny the Application for failure to

IV. MedRecycler’s Application Does Not Comply With Rhode Island Medical
Waste Regulations.

RIDEM should deny the Application because MedRecycler has not proven, “on the basis
of thorough tests,” that the “alternative technology” the Facility will use to treat and
destroy Medical Waste will be “protective with respect to total impact on the
environment” or that it will “ensure the health, safety and welfare of both facility
employees and the general public.”\textsuperscript{84}

The Medical Waste regulations set out “approved” methods for Medical Waste treatment
and destruction that include, but are not limited to, incineration, chemical disinfection,
and steam sterilization.\textsuperscript{85} When a Medical Waste facility utilizes “any other treatment,
destruction and/or disposal technologies,” those technologies are considered “alternative
technologies.”\textsuperscript{86} RIDEM “shall not grant approval” for the use of alternative technologies
“unless and until such technologies are proven, on the basis of thorough tests” to satisfy
five criteria.\textsuperscript{87} These criteria include that the alternative technologies are “protective with
respect to total impact on the environment” and that they “ensure the health, safety and
welfare of both facility employees and the general public.”\textsuperscript{88}

\textsuperscript{82} Id. § 00-00-1.6.7.
\textsuperscript{83} Compare 670 R.I. Code R. § 00-00-1.3, with R.I.G.L. § 23-18.9-9(a)(1), and 670 R.I.
Code R. § 00-00-1.6.
\textsuperscript{84} See 250 R.I. Code § 140-15-1.15(F)(5).
\textsuperscript{85} Id. § 140-15-1.15(F)(3).
\textsuperscript{86} Id. § 140-15-1.15(F)(4).
\textsuperscript{87} Id. § 140-15-1.15(F)(5)(a).
\textsuperscript{88} Id.
RIDEM has interpreted these provisions to require a two-step process to approve alternative technology. First, RIDEM, in consultation with the Department of Health, reviews the technology to determine if the technology “has the engineering capabilities to comply” with RIDEM’s regulations.89 Second, RIDEM must review and approve a final permit application “to ensure that the proposed facility’s operational and testing protocols” using this alternative technology “satisfy all the requirements of the regulations.”90

Although RIDEM may liberally construe the Medical Waste Regulations,91 it may not ignore the clear and unambiguous directive that RIDEM “shall not grant approval” to use an alternative technology “unless and until” that technology is proven, “on the basis of thorough tests,” to be “protective with respect to total impact on the environment” and that it ensures “the health, safety and welfare of both facility employees and the general public.”92 MedRecycler has not included in the Application “thorough” test results—or any test results—that satisfy either of those criteria.93 The lack of testing is particularly concerning given that MedRecycler’s technology has never been used on Medical Waste,94 and that the use of pyrolysis on heterogenous waste presents significant challenges that can endanger public health and the environment.95

In the absence of the required “thorough tests,” MedRecycler’s proposed technology cannot be approved as alternative technology under the Medical Waste Regulations, and RIDEM should accordingly deny the Application.

89 March 16, 2020 Letter from Yan Li to Nicholas Campanella, attached as “Exhibit D.”
90 Id.
92 Id. § 140-15-1.15(F)(a).
93 MedRecycler has submitted to RIDEM a “Macerator Biological Testing Protocol,” designed to ensure spore destruction as a part of the Medical Waste shredding process. See Macerator Biological Testing Protocol (Nov. 6, 2020), available at http://dem.ri.gov/programs/benviron/waste/pn/pn-medrecycler-testing.pdf. This testing protocol, by its nature, does not constitute proof, “on the basis of thorough tests,” that the shredder is protective of the environment or that it ensures health and safety. Moreover, this protocol has no bearing on whether the pyrolysis chamber, syngas engines, vitrification furnace, or any other equipment that heats or combusts Medical Waste or Medical Waste-derived fuel are protective of the environment or ensure health and safety.
94 See Application at 7.
95 See supra, Part II.
V. MedRecycler’s Application Does Not Comply With Rhode Island Solid Waste Regulations.

An application for a license to construct or operate a solid waste management facility must demonstrate the applicant’s “ability to comply with all General Operating Standards” set forth in the Solid Waste Regulations. The General Operating Standards require a solid waste management facility to “maintain a buffer zone area that serves to mitigate nuisance impacts such as dust, litter, odor, and noise from the facility to human activities,” and to be “designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility.” MedRecycler’s Application does not demonstrate that the proposed Facility will be able to comply with either of these General Operating Standards, and RIDEM should therefore deny the Application.

A. There is No Buffer Zone Around the Proposed Facility to Mitigate Nuisance Impacts.

Rhode Island Solid Waste Regulations define a “buffer zone” as “an area of land between a . . . Solid Waste Management Facility and neighboring facilities or homes which shield these abutters from negative impacts of the . . . Solid Waste Management Facility operations.” The buffer zone around a solid waste management facility must be either “an area of undeveloped vegetated land retained in its natural undisturbed condition, or created to resemble a naturally occurring vegetated area, or approved equal.” The Application makes clear that there will be no buffer zone around the MedRecycler Facility sufficient to shield abutters from nuisances or other “negative impacts.”

MedRecycler plans to construct and operate its proposed Facility in a multi-tenant building at 1600 Division Road in West Warwick. As can be seen in the “Plant Layout” included in Attachment A to the Application, the Facility will be separated from the nearest abutters by no more than an interior wall. The engines burning Medical Waste–derived syngas will be outside the building within view of a parking lot that serves tenants at 1600 Division Road.

96 250 R.I. Code. R. § 140-05-1.7(B).
97 Id. § 140-05-1.9(P).
98 Id. § 140-05-1.9(M)(1).
99 Id. § 140-05-1.5(A)(1).
100 Id. § 140-05-1.9(P).
102 See MedRecycler Plant Layout, attached as “Exhibit E.”
103 See id.
Playground Prep, a childcare center located approximately 300 feet from the main building at 1635 Division Road, is separated from 1600 Division Road by a parking lot and a row of trees.104

There is therefore no “area of undeveloped vegetated land” or “approved equal” between the proposed MedRecycler facility and other tenants at 1600 Division Road or between the proposed Facility and Playground Prep. Neither an interior wall, nor parking lots, nor a thin row of trees will protect abutters and neighbors from potential nuisance impacts from the proposed Facility.

The need for a buffer zone is particularly acute given the public health risks explained above in Part II. Moreover, MedRecycler has stated that the engines burning Medical Waste–derived syngas will produce up to 80 decibels of noise105 and that “[t]here may occasionally be unusual odors associated with the [Facility].”106 Without a buffer zone, the Facility will be unable to comply with solid waste management facility General Operating Standards. RIDEM should therefore deny the Application.

B. The Application Does Not Demonstrate That the Proposed Facility Will Be Designed, Operated, and Maintained in a Manner That Will Protect Health and Safety. MedRecycler also has not demonstrated in the Application that the proposed Facility will be “designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility.”107 There are significant risks associated with MedRecycler’s proposed Facility.108 Among other deficiencies, MedRecycler has not included with the Application any protocols or test results that demonstrate that the ash, char, or slag produced at the Facility will not contain toxics like lead or dioxins109 or that MedRecycler’s pyrolysis technology will ensure the health and safety of employees or the general public.110 The lack of protocols or test results with respect to the slag is particularly concerning given that after “waste is processed, treated, and destroyed, there may be small amounts of slag on the floor.”111

104 See Google Maps screenshot of 1600 Division Road, available at https://www.google.com/maps/@41.6642092,-71.5097454,577m/data=!3m1!1e3, and attached as “Exhibit F.”
105 Application at 27.
106 Id. at 51.
108 See supra, Part II.
109 Id.
110 See supra, Part IV.
111 Application at 51.
Moreover, in the Notice of Intent, RIDEM states that “[p]rior to acceptance of Regulated Medical Waste, Medrecycler-RI shall perform pre-operational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens.” 112 Requiring this testing only after RIDEM has granted a license reverses the required sequence and perverts the intent of the Solid Waste Regulations.

The regulations require that an applicant for a license to operate a solid waste management facility must demonstrate its ability to comply with all General Operating Standards in the application—i.e., before the license is granted. 113 After-the-fact testing does not satisfy the Solid Waste Regulations.

MedRecycler has not demonstrated that the proposed Facility will be designed, operated, and maintained in a manner that will protect health and safety, and RIDEM should therefore deny the Application.

VI. The Draft License Does Not Include “All Supporting Documentation” as Required By Rhode Island Solid Waste Statutes.

Under Rhode Island Solid Waste Statutes, a draft license to construct or operate a solid waste management facility issued by RIDEM must be made available for public comment along with “all supporting documentation.” 114 RIDEM has not made available all necessary supporting documentation, and thus the Notice of Intent is incomplete and RIDEM cannot issue a final license to MedRecycler.

The Notice of Intent describes several pieces of supporting documentation that MedRecycler has not yet provided, and that therefore have not been made available for public comment. These include: (1) a “Contingency Plan” approved by the West Warwick Fire Department; (2) “detailed testing protocols for the pre-operational testing” of MedRecycler’s system “to verify that treatment and containment of the waste is sufficient”; and (3) “detailed protocols for the routine testing of the system at least every 40 hours of operation.” 115 This information is directly relevant to whether the Application complies with the Medical Waste Regulations and Solid Waste Regulations, as discussed above in Parts IV and V. Asking MedRecycler to provide this information only after a license has been granted flies in the face of the Solid Waste Statutes’ public comment requirement.

Moreover, that certain protocols have not yet been submitted necessarily means that MedRecycler has not yet tested the safety and efficacy of its proposed pyrolysis technology

112 Notice of Intent at 3.
113 See 250 R.I. Code. R. § 140-05-1.7(B).
115 Notice of Intent at 2–4.
when used on Medical Waste. Test results are needed before RIDEM can grant approval to MedRecycler’s “alternative technologies,” before MedRecycler can demonstrate that the Proposed Facility will be designed, operated, and maintained in a manner that will protect health and safety, and before the close of the public comment period. The failure to include this necessary documentation deprives the public of a meaningful opportunity to comment on MedRecycler’s Application and the Notice of Intent.

VII. Conclusion

For the reasons stated above—and pursuant to the Rhode Island Solid Waste Statutes, Medical Waste Regulations, and Solid Waste Regulations, and all local, state, and federal provisions germane to public health, safety, and the environment—CLF respectfully urges RIDEM to deny MedRecycler’s Application for a medical waste treatment facility license.

Thank you for your consideration.

Respectfully submitted,
Kevin Budris
Zero Waste Project Conservation Law Foundation

cc: Janet Coit (by email) Terrence Gray (by email) Mark Dennen (by email)

See supra, Part IV.
See supra, Part V.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste
• See XIV. Issues Related to Disposal of Ash
• See XIX Odor Issues
• See XVI. Buffer Zone
Good Afternoon,
I am writing this email in opposition to the application submitted to the DEM by Medrecycler-RI to operate a medical waste treatment facility at 1600 Division Road in West Warwick. As a resident of East Greenwich our home is quite close to this proposed site; and as Rhode Island is a small state there are a collective of thousands of homes, businesses, schools, parks etc. in surrounding communities that would be adversely effected by this proposed project.

The DEM website provides the specific application with the original submission January 2019 with rev 9 posted as current as of July 28, 2020. The public Zoom meetings on this matter have been overwhelmingly in opposition from residents and concerned citizens from all walks of life with personal anecdotes to extremely substantive scientific and documented discussion by industry experts.

Interestingly those in support of this proposal (Medrecycler-RI included) have not provided strong compelling documented scientific proof as to the safety and pure efficacy of the pyrolysis specific to medical waste. The manufacturer Technotherm can only reference 3 sites with their technology in the entire world in the following countries:

1. Country Meats- South Africa-waste form- animal slaughterhouse
2. Ecorevert-South Africa-waste form-All types of waste, design for plastic
3. Huntington-United Kingdom-waste form-Biomass(wood)

It is important to note that South Africa is noted to have the second worst trending record in 2020 as it relates to the environment defined by the EPI. (Environmental Performance Index) I am sure you are aware this is a method of quantifying and numerically marking the environmental performance of a state's policies. This index was developed from the Pilot Environmental Performance Index, first published in 2002, and designed to supplement the environmental targets set forth in the United Nations Millenium Development Goals.

Worst 10 countries by Trend EPI[11] [en.wikipedia.org][12] [en.wikipedia.org] The EPI rank is shown in parentheses.

- Turkmenistan [en.wikipedia.org] (131)
- South Africa [en.wikipedia.org] (128)
- Iraq [en.wikipedia.org] (132)
- Kazakhstan [en.wikipedia.org] (129)
- Kyrgyzstan [en.wikipedia.org] (101)
- Estonia [en.wikipedia.org] (54)
- Bosnia & Herzegovina [en.wikipedia.org] (124)
- Saudi Arabia [en.wikipedia.org] (82)
- Kuwait [en.wikipedia.org] (126)
- Russia [en.wikipedia.org] (106)

references as they relate to above ranking

There is not one site noted above that definitively uses the Technotherm technology intended to be deployed by Medrecycler-RI to treat medical waste. Why does DEM want to be the first to approve such an unproven endeavor to put the citizens and environment of Rhode Island in harms way?

My point in citing the above is to ask you the question do we want to be in company with South Africa the country that has this poor environmental ranking, has 2 of these sites already in operation and is the home to the manufacturer of this unproven technology for medical waste? Early in 2021 the EPA published a research brief while not 100% on point related to medical waste stated the following regarding pyrolysis, "pyrolysis and gasification represent a significant financial investment compared with direct biosolid land application alternatives, and there are a number of challenges and data gaps with these technologies."

This quote after our federal Environmental Protection Agency admittedly procured months of deep research on the topic with leading experts on the subject. This is clearly still unproven technology.


I also take note in regards to this proposal of the most recently available DEM Mission as stated in the 2019-2022 Strategic Plan;

**OUR MISSION:** is to protect, restore, manage and promote Rhode Islands environment and natural resources to preserve and improve our quality of life. The Strategic Plan is designed to outline a clear direction for us to achieve our mission as we continue to grow, innovate and improve as a department.

To date I know there have been hundreds to thousands of individuals who have expressed their sentiment to this proposed application requesting that DEM categorically deny this application. The supporting documentation in opposition has included multiple issues from environmental hazard, a multitude of potential health hazards, and even a myriad of economic hazards and risks which I know do not fall under the purview of the DEM directly but as you know all of these factors are connected in some way.

There is no point for me to restate each fact and data point as previously submitted, as I am sure you are well versed in the facts as presented by the people of Rhode Island and those gravely concerned with this matter.

All I ask is that in reviewing all of these letters you receive in opposition of this project and the limited number of letters in support of this project that you do more than just read the facts in front of you. Listen, see, feel and understand what the overwhelming majority of Rhode Islanders are asking you to do, which is to vehemently deny this application.

I know some of you are residents of Rhode Island and the deciding members of DEM pondering the final decision in regards to this application, consider your own Mission Statement and the long lasting effects of your mission for Rhode Island generations to come.

Respectfully,

Kevin Gertsman

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: (Name) From: (Address)

Kevin M, kvnkosher787@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

>> Shalom & GOD Bless America & All Americans Across The USA !!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Kevin M,
160 Broad Street,
Providence RI

kvnkosher787@gmail.com

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Hello Mark,

Thank you for hosting the public comment forum last evening (March 15th).

I would like to submit the following for your consideration regarding the application by Medrecycler-RI Inc for a proposed Medical Waste Treatment Facility on 1600 Division Road in West Warwick.

As a neighbor, resident of Rhode Island and a former employee of nationalgrid it is with great concern that I submit this comment and without prejudice.

Having been involved with nearly all of the power plants based throughout New England and specifically those within the great state of Rhode Island, I feel I am well qualified to comment on the following points.

Green Energy – Its Not – as we all know Green Energy is Renewable Energy and using fossil fuel to start a process is not green, nor environmentally sound in the face of eliminating greenhouse gases.

Renewable Energy – Its Not – its waste to energy, unfortunately its medical waste to boot, highly toxic and potentially lethal, laden with glass and metal as well.

Environmentally Safe – Its Not – every single fossil fuel plant emits greenhouse gases, this is no exception, even if it were just on ‘start-up’, its still burning fossil fuel.

Having to had to apply for (and be granted) a ‘Minor Source’ permit is proof enough that this is not an Environmentally Safe project.

Location, Location, Location – congested artery leading to the facility, residential neighborhood within shouting distance and a day care center abutting the property are all MAJOR CONCERNS.

No Contingency Plans Approved, Lack of Information (experience) on this type of equipment for emergency responders to fully understand how to handle situations that may arise.

Hazardous Chemicals and Gas including Hydrochloric Acid will be created by the process and present even more harmful toxins for humans to potentially come in contact with at levels above acceptable risk standards. If the concentration of HCI gas in the air is above 0.035% humans will have difficulty breathing and may result in death.
It is for those reasons and more that the citizens of Rhode Island need to ensure that this plant is not allowed to be built in our great state, we have too much to risk!

Thank You,
Respectfully Submitted,
Kevin Malloy
140 Blueberry Drive
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
From: (Name) From: (Address)
Kho Da Long cyclonus83@hotmail.com
[EXTERNAL] : Medrecycler

Hi,

I think this will be a lifesaver. Its self sufficient and it generates energy too?

Regards,
Darren

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Good morning,

I am writing to provide my opposition to the medical waste facility being proposed in West Warwick.

I have been watching this debate for a few months online and, seeing that the two sides are saying very different things, I decided to keep an open mind. After doing my own research and thoroughly hearing the arguments on both sides, I have concluded that this facility is not worth the potential risk.

From what I understand, the upside is that West Warwick gets some jobs (30 permanent) and some tax revenue. I do not see the “green energy” upside to the supporter’s argument, as lugging in medical waste from other New England states does not sound very “green” for Rhode Island.

The breadth of the downside appears unknown at this point, though there are certainly some solid, tangible reasons why this permit should be denied and zero good reasons why it should be allowed. This benefit simply does not outweigh the risk, as the safety of the technology for this use cannot be guaranteed. I am stunned by lawmaker’s hesitancy at this point to just say “no” for this reason alone. Why would you risk the health and safety of Rhode Islanders for 30 jobs? The money generated in tax revenue will not cover any potential lawsuits and/or medical bills should anyone be harmed by this action. I cannot understand how this is being approved in an industrial complex, where people work in the same building; next to a daycare, across the street from a university and golf club. My heart breaks for these people, as each day they’ll go to work wondering “what is the quality of the air I’m breathing?” I guarantee that daycare will go out of business – what parent would dare send their child there? I also guarantee that complex will be empty but for the MedRecycler in a year, as many companies will wonder: why take the risk? We won’t know, until this technology is proven to be safe, that any illnesses are NOT caused by the actions of this recycling business. I see a future where every New England Tech student, golfer, daycare employee, etc. who develops cancer or asthma in the future will hire a lawyer to examine whether MedRecycler was the root cause. I hope they add the Town of West Warwick and the State of Rhode Island to those lawsuits for being so reckless, allowing this to exist without being 100% certain that it’s safe. They can’t say this now, and nothing short of 100% is good enough when you’re talking health and safety issues.

This project is short-sighted. At best, it provides a few jobs while potentially harming other small businesses and creating anxiety in the community about a future unknown. At worst, it could do serious physical damage to Rhode Island residents. There are so many places in this country, even in this state, where land is aplenty and there are no residences or businesses for miles. Why not start there? Why put something
so risky in the heart of a commercial, residential and industrial complex. I remain confused at lawmaker’s hesitancy to just say “no.” it seems like the only logical response.

Thank you for reading. Feel free to contact me if you would like to discuss further.

Warm regards,

Kimberly A. Kinzie
143 Hemlock Drive

East Greenwich, RI 02818
401-862-0601
Kimkinzie35@gmail.com <mailto:Kimkinzie35@gmail.com>

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Mr. Dennen:

Unfortunately, due to technological issues I was precluded from joining yesterday’s Zoom hearing to vehemently express my opposition to the proposed MedRecycler treatment facility targeted for East Greenwich. I find it unconscionable that MedRecycler, Inc., a firm domiciled in New Jersey, would file an application to locate this type of facility so close to East Greenwich / West Warwick residential and business properties here in Rhode Island. This type of facility, under the guise of being “renewable” energy, poses a significant health risk for two of Rhode Island’s most vibrant communities. Additionally, this type of facility will most assuredly impact home values for residents literally right across the street from this plant. To improve their bottom line, this New Jersey based company has expressed a callous disregard for the health, safety and economic investments of Rhode Islanders.

Rhode Island has acres upon acres of open space. As a result, I can’t understand why DEM would even consider permitting this type of plant in the proposed location? For our community, it’s all risk with no reward.

I sincerely hope DEM will DENY this permit in the current location adjacent to our community.

Thank You for listening,

Kwong Nuey

130 Granite Drive, East Greenwich

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Dear official Dennen:

I am writing this letter to protest the possibility of granting a permit to the MedRecycler plant that has been proposed. Respectfully, this would be a grave mistake. As you are undoubtedly aware, the technology that they are proposing Pyrolysis, has not yet been tested with medical waste. While I consider myself pro business and appreciate creative thinking and entrepreneurship, it seems unfathomable that such risks would be taken in such a densely populated residential area. This is a very bad idea, where nearby residents like me may be placed at increased risk of unknown health exposures.

Hoping that you vote no on this proposal

Sincerely yours,

Krishanu Gupta
10 Signal Ridge Way, East Greenwich, RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Hello,

I am opposed to the medical waste facility proposed for West Warwick.

As someone who lives on the border of Warwick and West Warwick, I am against a medical facility that doesn't have the proper safeguards in place to prevent additional medical waste from entering the air and therefore contaminating our beautiful state.

I am also a practicing herbalist, gardener, hiker, and someone who cares deeply about the future of our lands and waters here in RI and all the species that inhabit it. This medical waste facility is going to put all the things I care most about at risk.

Until there is a safer way—even if it costs more—to process medical waste, then we should err on the side of caution and say no to the medical waste facility in West Warwick.

Thank you,
Kristen Runvik
55 Bridal Ave, Warwick, RI 02886

Kristen Runvik
Formulator + Herbalist
Lagom Body Co. [lagombody.co]

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
To Whom It May Concern:

I am writing to voice my concern and opposition to the proposed Medical waste Recycling facility in West Warwick. I am an East Greenwich resident on upper Division Road, very close to the proposed site. I have two school-aged children in local schools and work from home. The potential for both airborne and ground-water toxins is especially concerning to me as we all have chronic asthma that would be exacerbated by any unnecessary pollution. We are also on a well system, so all of our drinking water comes directly from the ground.

Testing of new technologies should NOT be allowed in this highly congested area where impact would be felt to surrounding communities. After reading all the misinformation the company has put forth, and the scientific information on pyrolysis, I don't think this company should be allowed to set up anywhere to use pyrolysis for medical waste.

Thank you,

Kristen Kim
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: Kurt Schatz  kurtschatz@hotmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

When you pare down the so called technology of the MedRecycler’s operation it is basically an incinerator. Incinerators are prohibited by statute. This same type of miracle medical waste / solid waste treatment plant was proposed 20 years ago. I think it was called "Star Chamber" and it claimed it would burn so hot all waste and pollution byproducts would burn off leaving no ash behind. Back then and as with MedRecyclers the technology is unproven and most likely unattainable. Until it can be ascertained that the technology is possible the application must be denied.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Kurt Schatz,
405 Maureen Cir,
MaplevilleRI
kurtschatz@hotmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
• The commenter is mistaken in that incinerators are not prohibited by statute but are regulated under Solid Waste and Medical Waste Regulations.
Larry Cornell
Ldccrib29@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application
This is a very bad health hazard for our State. Do not approve.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Larry Cornell,
111 Liverpool st,
WarwickRI
Ldccrib29@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Lauren Hedde lkf222@gmail.com
March 24, 2021
RE: Proposed med recycler facility
To Whom it May Concern,
I am the mother of three small children, a Family Physician, and a local farmer in East Greenwich. I have been a resident of East Greenwich, RI for the past 2 years and West Greenwich for the prior 4. Our home is located just over two miles from the proposed medical waste facility at 1600 Division Road in West Warwick. As I have started to educate myself about Medrecycler, I am appalled that plans for facility have progressed this far. Here are some of my concerns.

As a primary care physician with a medical practice in East Greenwich as well, I am greatly concerned from a health and safety perspective. Medrecycler plans to use a technology that is essentially untested. There are currently no other facilities in the United States that use pyrolysis to process medical waste. This means related risks are virtually unknown. We know that plastic medical releases hazardous heavy and toxic pollutants when burned. Exposure to these pollutants over time cause known health risks and conditions. The amount of waste processing being proposed by the Medrecycler plant locally rivals the largest medical waste incinerator in the country, which is located in Baltimore, MD. Placing a facility with untested processes and known risks of that size and magnitude in a residential community defies common sense.

The proposed site of Medrecycler is directly next to a daycare, across the street from a golf course and a restaurant, near two ponds, a college, and surrounded by many neighborhoods and schools in the East Greenwich/West Warwick area.

The "businessman" behind Medrecycler, is not a local resident. He was implicated last spring for his involvement in a Covid-related mask scam. His assurances that Medrecycler will be a "good and safe neighbor" in spite of the fact that the methods and longterm results are untested and unresearched, carry little.

I also have significant concerns about the environmental implications of having this facility in Rhode Island. As the "Ocean State", we are Literally surrounded by important bodies of water. How can it be guaranteed that pollutants from this facility will not end up in the bay? Between airborne pollutants, the potential for car accidents involving any of the trucks carrying 43 million pounds of hazardous waste through the state each year, and the potential for human error or malfunctions at the facility, it is naive to think that this facility will be other than a danger to the oceans and environment of Rhode Island.
Finally, I have concerns about the impact that Medrecycler will have on our town in general. Medical waste facilities are known to give off a foul odor and cause discoloration of the air. The town of East Greenwich has an excellent school system, a charming waterfront downtown, and has long been a highly desirable place to live. The presence of a facility such as Medrecycler is likely to make East Greenwich a far less desirable place to live and may have a detrimental effect on home values in the area. In conclusion, I feel very strongly that Medrecycler should not be allowed to operate a facility at 1600 Division Road in West Warwick, or in fact, anywhere else in Rhode Island. There are far too many known and unknown risks. As one of the densest areas in one of the densest states in the country — the location for an untested facility makes no sense. As the DEM website states, "Our mission put simply is to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family?". I implore the DEM to abide by its own mission statement and deny any permits to Medrecycler. Thank you for your consideration.

Sincerely,

Lauren Hedde, DO

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XIX Odor Issues
Hello Mr. Dennen,

I am writing as a very concerned resident of East Greenwich. My young children are growing up here, and there has not been sufficient proof that this MedRecycler plan is at all safe. A facility of this type should not be in our backyard. My husband has a doctorate in chemical engineering, and upon looking into the plans he agrees that this residential area is NOT the place for such a plan. I implore you to stop this potentially extremely harmful project from moving forward.

Thank you,

Lauren Burke

Lauren Hunter Burke

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
This is just more of the same with toxic pollution.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Lauren Niedel,
8 Camp St,
ChepachetRI
lniedel@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Sir or Madam,

My name is Lawrence Lee, MD, and my home is 35 Granite Drive, East Greenwich. I would urge you to deny the permit application for the Med Recycler-RI facility that is proposed for 1600 Division Road, West Warwick. As you know, this address directly abuts East Greenwich. There are significant concerns that must be applied to this type of facility adjacent to residential neighborhoods and dormitories (New England Tech).

1. Technology: the pyrolysis technique uses very high temperatures in an anoxic environment to degrade organic materials into gases that are subsequently burned (with subsequent electrical generation) and also byproduct ash and a tar like fluid that may be vitrified to produce slag. Theoretically, there should be no intact biological material released, and toxic materials would have to be scrubbed from the flue gas. The liquid or vitrified slag will contain toxic material but should be isolated from release. Incoming medical waste of up to 70 tons/day would be coming from all New England and would need to be processed on arrival — this processing will likely require drying and shredding, all of which will need to be done without allowing escape of biohazards or microbes. Only under nominal operating conditions is it reasonable to expect that all of the conditions outlined for satisfactory performance of the plant can be met. If process control goes out of parameters at any of myriad steps, toxic or infectious material will be released either into the air up through the stack. Can 80 tons of biohazard waste be unloaded daily without spillage? Can we assure that there will be no contamination of rain runoff? It is mandated that the shredder must be covered; what about when it must be opened for maintenance? In a review of thermal treatment options for medical waste, a 2020 paper by Xiaowei Cai and Changming Du balanced the pros vs cons this way (Plasma Chem Plasma Process. 2020 Sep 7 1-46) contained these observations, note “major security concerns and require reliable control equipment”, and consider that if oxygen (air) were allowed to leak into the reaction chamber, then dioxans and furans become a possibility going up the stack!

<table>
<thead>
<tr>
<th>Pyrolysis</th>
<th>Increased energy efficiency</th>
<th>Combustible gases raise major security concerns and require reliable control equipment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auto-thermal conditions</td>
<td></td>
<td>Pollutants like NO(_x), SO(_2), char, tar, ash, etc. need to be removed</td>
</tr>
<tr>
<td>Generation of value-added products</td>
<td></td>
<td></td>
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<tr>
<td>Improved pollution control: the lack of oxygen precludes the formation of dioxins and furans</td>
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2. History: Pyrolysis is a fairly novel technology in the United States; therefore, there is very limited experience with it in the environmental protection community. As I understand it, projects have been built in Russia, India, and China. Most of these are pilot or demonstration projects. Sadly, these countries have, as you well know, some of the worst records, worldwide, for environmental protection. Why would we wish to join
them in the commercialization of what is still a largely experimental technology when applied to commercial scale?

3. Workforce experience: there can be no U.S. workers experienced in running this type of a facility. This means that we will have managers that are learning on the job, and perhaps worse yet, inexperienced workers trying to keep up with 80 tons of contaminated medical waste per day. As far as they can see, this waste will look pretty much like everyday trash. But it isn’t!! Is it honest to expect that tasked with moving this volume of biohazardous waste, that there will not be oversights, slip ups, short cuts, accidents, or coverups? I think it is inevitable. Why would you approve placing such a facility across from a college and a residential community?

In sum, this is not the time or the place to jump into a commercial scale operation of this type with a company that has no expertise in even running a demonstration or prototype facility using this technology, even if it is technologically promising. I hope you can appreciate this is not a reflexive, “NIMBY” response. I implore you to do the responsible thing.

Lawrence W. Lee, MA, MD, FAAOS

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XI. Monarch Pyrolysis Facility in New Mexico
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Leanne Lasher Lchiaverini@gmail.com

Please do not allow a medical waste facility in RI. The potential health risks are too great. And I am concerned about my property value as well. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Leanne Lasher,
205 Stone Ridge Dr,
East GreenwichRI
lchiaverini@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Will fetal tissue be processed at any stage in this West Warwick facility?

DEPARTMENT RESPONSE:

- See XVIII. Distinctions within the Category of Human Pathological Wastes
From: (Name)  From: (Address)
lemgottlieb@cox.net  lemgottlieb@cox.net

[EXTERNAL] : FW: misunderstanding Medrecycler questions
Since it’s unclear that you received the questions on the first email, I’m sending them here again. Thanks!!—Liselle Gottlieb

1. What’s the size of the trucks in length.

2. Trucks’ daily arrival and departure hours. Is transport permitted between 9:00 pm and 7:00 a.m.

3. How many trucks are delivering waste daily.
4. How many trucks are removing processed materials daily.

5. Once materials come in on trucks, how long before it’s transferred off the truck and into the facility.

6. How long is waste permitted to sit in the facility before it must be processed.

7. How long does the “ashlike substance” sit on the property before being transferred out.

8. When ash-like substance leaves the facility, what size of trucks are used and what form of container is used for transfer.

9. Are emissions visible in the air.

10. Does the public have any means of knowing when emissions are actively taking place.

DEPARTMENT RESPONSE:
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- The current application has calls for 24/7 operation without restrictions on delivery.
- The application does not specify the size of the trucks that will remove the ash.
From: lemgottlieb@cox.net <lemgottlieb@cox.net>
Sent: Saturday, February 27, 2021 3:09 PM
To: 'yan.Li@dem.ri.gov' <yan.Li@dem.ri.gov>

: questions re. MedRecycler

What’s the size of the trucks in length.

Trucks’ daily arrival and departure hours. Is transport permitted between 9:00 pm and 7:00 a.m.

How many trucks are delivering waste daily.

How many trucks are removing processed materials daily.

Once materials come in on trucks, how long before it’s transferred off the truck and into the facility.

How long is waste permitted to sit in the facility before it must be processed.

How long does the “ashlike substance” sit on the property before being transferred out.

When ash-like substance leaves the facility, what size of trucks are used and what form of container is used for transfer.

Are emissions visible in the air.

Does the public have any means of knowing when emissions are actively taking place.

DEPARTMENT RESPONSE:

- See response above.
Can you specify which facilities in the state have emissions levels comparable to the emissions level granted to this facility.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : No approval for MedRecycler. Is DEM willing to risk RI as the source of the next pandemic?

The application of MedRecycler for a license or registration to Operate a Pyrolysis and Energy Production Medical Solid Waste Treatment Facility pursuant to Title 23-Chapter 18.9 of the General Laws of Rhode Island should never be approved.

**Is DEM willing to risk RI launching the next pandemic?**

**How can MedRecycler be considered anything but a major threat? How can a permit be issued when the following are considered?**

**MedRecycler and pyrolysis are both unproven and untested.**

MedRecycler has never operated a plant with this technology, and has no idea what it will encounter. Pyrolysis has been called a “high risk process for waste management,” (GAIA 2017). The company and the technology are both unproven for the safe processing of infectious agents, especially in a highly congested area with two daycare centers, a college, shopping centers, movie theaters, restaurants and residential neighborhoods. No testing has been performed to verify if bacterial spores will be released during the shredding process.

**An unproven company and its technology are doubly dangerous.**

MedRecycler will accept unknown biohazards in an age of emerging pandemics such as super-infectious COVID-19 as well as tissues, organs, body and fluids, cultures, infectious microbiological waste from medical and pathology labs, contaminated sharps, isolation waste generated by hospitalized patients isolated to protect others from communicable disease, and carcasses and body parts from animals intentionally exposed to pathogens during biohazard research. Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm – and the potential for radioactive waste to come to the facility.

**MedRecycler is unneeded.**

The EPA Capacity report for medical waste disposal says no additional plants are needed here. We already have Stericycle, SanPro, Daniels Health and many more.

**Its plan is to grow far larger.**

MedRecycler states that it will begin by processing up to 70 tons per day of medical waste and will store up to 25 trailers of medical waste onsite (with the potential for leakage). It says it will receive no more than four full truckloads of waste daily, or eight trucks in total but intends to expand the facility to accept up to 140 tons of medical waste per day from throughout the Northeast.

**RIDEM has grounds for rejecting MedRecycler’s application.**

RIDEM states: “When an activity raises threats of harm to human health or the environment, precautionary measures should be taken.” Although RI DEM has issued a Notice of Intent to Approve, pre[1]operational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens has not been conducted.
During the March 15 hearing, please ask Nicholas Campanella, MedRecycler’s New Jersey based developer whether he will move his family to a location adjacent to MedRecyler.
I would like to hear Yan Li’s answer to the same question, as well as that of Mark Dennen, or that of DEM Director Janet L. Coit?

East Greenwich resident
Len Tinkoff

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : East Greenwich home values will dramatically drop if MedRecycler is approved
From: Len Tinkoff <ltinkoff@cox.net>

Who’d want to move here with medical waste pollution threatening families and kids? Not me! And how many residents will move away? Many.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Basis for the rejection of MedRecycler in Rhode Island: 11 Reasons

Page  Content
2   Preface: GAIA report reveals billions wasted on gasification over 30 years of failures.

Waste Gasification & Pyrolysis: High Risk, Low Yield Processes for Waste Management; Summary of Research by the Global Alliance for Incinerator Alternatives, dated March 2, 2017

GAIA concludes that the potential returns on waste gasification are smaller and more uncertain, and the risks much higher, than proponents claim. Over $2 billion was invested in the projects listed in this report alone, all of which closed or were canceled before commencing operations.

3   MedRecycler does not comply with many points of Rhode Island Law. How can RIDEM justify the issuance of a preliminary permit?

3. Pyrolysis Technology is unproven, and has been termed a “high risk process for waste management,” (GAIA 2017) See ‘Patented blunderings’, efficiency awareness, and self-sustainability claims in the pyrolysis energy from waste sector, by Rollinsona and Oladejob. This states “that a pyrolysis plant for self-sustaining Energy from Waste is thermodynamically unproven, practically implausible, and environmentally unsound.”

4. MedRecycler has no experience with Pyrolysis, or with recycling of any kind. How can its CEO state, “I guarantee that the project is going to be safe [and] is going to be a good neighbor.” Is DEM willing to risk RI becoming the source of the next pandemic?

4. MedRecycler presents a clear and present danger to a densely populated, abutting business, educational and residential community

5. There is nothing “green” or “recycled” about MedRecycler, yet the company bills itself as such.

5. Rhode Island Law requires that DEM must place great weight on the wishes of residents. Overwhelmingly, residents do not want this for reasons described in this document.
6. MedRecycler’s plan is to grow far larger by actively soliciting the receipt of Medical waste from throughout the Northeast.

6. Where will the 21,000 tons of carbon dioxide and 2,737,000 – 5,110,000 tons of Toxic Solid Waste MedRecycler creates each year go?

6. Why Pre-Approval, Pre-Startup and Ongoing Testing to assure safety cannot be trusted or effective

7. What happens to East Greenwich, West Warwick and Warwick health, property values and quality of life?

7. MedRecycler is unneeded, per EPA’s Capacity report for medical waste disposal

Preface:

GAIA report reveals billions wasted on gasification over 30 years of failures. Global Alliance for Incinerator Alternatives Mar 02, 2017, 07:11 ET BERKELEY, Calif., PRNewswire-USNewswire/ This may be found at no-burn.org/gasification-
pyrolysis-risk-analysis


A new risk assessment from GAIA finds that companies promoting "waste-to-energy" projects like gasification and pyrolysis have a 30-year track record of failures and unfulfilled promises. After decades of an industry promising a solution that both manages waste and produces energy, the vast majority of proposed plants were never built or were shut down.

Companies have been experimenting with these technologies for over three decades.

This report finds that while there is little data available on the operations of attempted commercial facilities, there are numerous examples of plants that have been forced to shut down due to technical failures and financial failures.

In addition, other projects have failed in the proposal stage after raising significant investment due to community opposition and government scrutiny into false and exaggerated claims.

Over $2 billion was invested in the projects listed in this report alone, all of which closed or were canceled before commencing operations.

Companies involved include Air Products & Chemicals, Thermoselect, Plasco, Compact Power, Caithness, Interserve, and Brightstar.

Technical and economic challenges for gasification projects include failing to meet projected energy generation, revenue generation, and emission targets. Gasification plants also have historically sought public subsidies to be profitable. In particular, vendors seek
renewable energy subsidies, however, such facilities would emit carbon dioxide from fossil fuel-sourced material including waste plastic and coal, contradicting the purpose of renewable energy.

Many gasification projects have failed because of financial non-viability. Examples include: - The 2016 cancellation of two Tees Valley, UK gasification projects which lost U.S. company Air Products between US $900 million and $1 billion. The Thermoselect gasification facility in Karlsruhe, Germany lost over $500 million in 5 years of operations. - In the UK, Interserve left the "energy-from-waste" field after losing £70 million on gasification projects, and other companies have gone bankrupt attempting to construct gasification or similar processes, include Energos, BCB Environmental, Waste2Energy, Bioscence, Compact Power, and New Earth Solutions Group. 

GAIA concludes that the potential returns on waste gasification are smaller and more uncertain, and the risks much higher, than proponents claim. 

MedRecycler does not comply with many points of Rhode Island Law. How can RIDEM justify the issuance of a preliminary permit?

RI definitions of “renewable energy” specifically exclude waste-to-energy combustion of “any sort or manner.” The electricity it creates doesn’t qualify for renewable-energy incentives offered by the state and National Grid. Yet, MedRecycler has billed itself as a Medical Waste to Clean and Renewable Green Energy Project.

MedRecycler has failed to submit the required certificate of approval of the proposed site to the state Planning Council, which is required because it sits across the street from a residential zones in West Warwick and East Greenwich. The General Assembly created a mechanism for this type of interlocal planning concern.

MedRecycler has failed to submit requisite emergency response and evacuation plans, spill control plans, contingencies for unexpected facility shutdown, facility safety testing plans, bonding for facility decommissioning and a host of other concerns. 

DEM’s application requires the facility to have an undeveloped vegetated buffer surrounding the facility. There is no buffer zone, only a half-inch piece of wallboard separating MedRecycler from other businesses in the 1600 Division Street building which houses 100+ employees. MedRecycler did not address this in its application. For purposes of comparison, the Dublin CA Municipal Code Ordinance 18-20, passed December 15, 2020 cites “A minimum buffer zone of 5,000 feet between a facility site (for waste of this type) and any site bordering (sic) an immobile population is therefore required, unless the developer can demonstrate by risk assessment and as part of the local permitting process that a smaller buffer zone provides adequate protection for the immobile population.”

MedRecycler’s application did not include the state’s requirement for a certificate of approval from the State Planning Council for the use of the site on Division Road in West Warwick. This approval requires a public hearing and comment period separate from a DEM hearing. East Greenwich’s Solicitor, Peter Skwirz confirmed with Meredith Brady, the head of Division of Statewide Planning, that her office never issued such a letter, nor was it asked to do so.”
“Therefore under the statute, RIDEM should not be considering this application,” per Skwirz.

**Pyrolysis Technology is unproven, and has been termed a “high risk process for waste management.”** (GAIA 2017)

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to:

- Be protective with respect to total impact on the environment
- Ensure the health, safety and welfare of both facility employees and the general public.”

Please reference the technical paper *‘Patented blunderings’, efficiency awareness, and self-sustainability claims in the pyrolysis energy from waste sector*, by Andrew Neil Rollinson and Jumoke Mojisola Oladejob. This states “that a pyrolysis plant for self-sustaining Energy from Waste is thermodynamically unproven, practically implausible, and environmentally unsound.”

In this paper, “A linkage between widespread commercial failures and a lack of focus on thermodynamic fundamentals is also identified, along with an environment of indifference or ignorance towards energy balances and sustainability when these technologies are presented, assessed and financed.”

MedRecycler cited just two facilities in the US as comparisons in its application submitted to RIDEM.

One was in Florida which closed shortly after opening.
The other was the Monarch Waste Technologies hospital medical infectious waste disposal facility on Nambe tribal land in New Mexico. The Nambe Tribe has filed a petition with the New Mexico EPA asking for the removal of Monarch and subsequent cleansing of the area. Also, please revisit the Preface to the 11 Reasons. This cites numerous examples of plants that have been forced to shut down due to technical failures and financial failures with $Billions lost.

MedRecycler has absolutely no experience with Pyrolysis, or with recycling of any kind.

Its parent, Sun Pacific Holding (headquartered in NJ) has two operations beside MedRecycler-RI. These are a solar assembly business and a bus stop advertising service called Street Smart Outdoors, which manages bus shelter advertising. With no experience, how can MedRecycler’s CEO state, with absolutely no recycling experience, “I guarantee that the project is going to be safe [and] is going to be a good neighbor.”

He says that MedRecycler is going to do whatever is required by officials that are reviewing our process.” Yet Rhode Island has no experience with Pyrolysis either. **How would it know what is required?**

*Is DEM willing to risk RI becoming the source of the next pandemic?*
**MedRecycler presents a clear and present danger to a densely populated, abutting business, educational and residential community**

*It would be located directly adjacent to two daycares, a college, shopping centers, movie theaters, restaurants, a hotel, and residential neighborhoods in West Warwick/East Greenwich.*

MedRecycler will accept unknown biohazards in an age of emerging pandemics such as super-infectious COVID-19. These include tissues, organs, human body parts and fluids, cultures, infectious microbiological waste from medical and pathology labs, contaminated sharps, isolation waste generated by hospitalized patients isolated to protect others from communicable disease, and carcasses and body parts from animals intentionally exposed to pathogens during biohazard research. Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm – and the potential for radioactive waste to come to the facility.

As stated in RI §§ 23DEM-19-3(14) and (16), solid waste incineration releases more than four seven hundred (400) toxic pollutants including lead, mercury, dioxins, and acid gasses; poses 8 unacceptable threats to the health and safety of Rhode Islanders and the environment; and is the 9 most costly method of waste disposal; 10 (2) Other forms of high-heat waste processing including, but not limited to, gasification, 11 pyrolysis, plasma-arc, and chemical recycling, emit the same pollutants and pose the same 12 unacceptable threats to health, safety, and the environment as solid waste incineration, and are 13 likewise costly and unproven methods of waste disposal; 14 (3) Emissions from solid waste incineration and other high-heat waste processing facilities 15 and emissions from the combustion of fuels generated through gasification and pyrolysis contribute 16 to climate change; 17 (4) Energy derived from the combustion of solid waste, and from the combustion of fuels 18 derived from solid waste, is not renewable energy.

Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm – and the potential for radioactive waste to come to the facility.

**There is nothing “green” or “recycled” about MedRecycler.**

With absolutely no experience with recycling, how can Sun Pacific Holdings bill itself as “a green energy company that specializes in solar and waste to energy technologies.” It says that “The Company focuses on deploying its subject matter capabilities and experiences in green energy solutions.”

Every part of the pyrolysis process is an energy consuming technology which releases hazardous chemicals into the atmosphere and potentially our water system. Yet MedRecycler’s lawyer bills it as “A green project that we think it helps the environment in general.”
MedRecycler will release nearly 21,000 tons of carbon dioxide a year, according to its application.

Per Kevin Budris, with the Conservation Law Foundation, an environmental advocacy organization “The type of pyrolysis facility that they’re proposing for West Warwick is, in effect, just another form of incineration,” “Whether you call it incineration, or pyrolysis, or gasification, or any other type of term used to refer to this kind of high-heat waste treatment, you are burning medical waste.”

Pyrolysis is barely distinguishable from a medical waste incinerator. Medical waste incinerators are notoriously toxic, polluting facilities. None of this is clean, environmentally friendly or renewable," "The statements that have been made that no burning will occur at this facility just aren't true." (Kevin Budris, with the Conservation Law Foundation, an environmental advocacy organization) "Many operators find that the energy produced is little more than that demanded to operate the energy intensive system." GAIA March 2017

**Rhode Island Law requires that DEM must place great weight on the wishes of residents.**

To date, over 3000 residents have signed a petition opposing MedRecycler. “No Medical Waste” signs can be seen throughout the towns, and hundreds appear for DEM Hearings.

MedRecycler’s plan is to grow far larger by actively soliciting the receipt of Medical waste from throughout the Northeast.

MedRecycler states that it will **begin by processing up to 70 tons of medical waste per day.** It will store up to 25 trailers of medical waste onsite (with the potential for leakage). **It plans to expand the facility to accept up to 140 tons of medical waste per day from throughout the Northeast.**

Make no mistake. The MedRecycler plan for expansion will not be a passive exercise. Its sales force will fan out across the Northeast, actively soliciting the receipt of dangerous medical waste for transport here to poison the children, women and men of West Warwick, Warwick and East Greenwich.

Where will the 21,000 tons of carbon dioxide emissions and 2,737,000 – 5,110,000 tons of Toxic Solid Waste MedRecycler creates each year go?

MedRecycler says “The ash residue that’s left over is usually about ten percent. What we do is put it into a container, and we sell it to either asphalt companies or concrete companies and they use it in their mix. So we repurpose almost 100 percent of everything we bring in and we dispose of.” *This is wishful thinking. No company has agreed to accept this toxic waste. MedRecycler says the char will be kept out of RI’s landfill. Yet the only comparable Pyrolysis operation in the US states “the medical waste biproduct of pyrolysis is an inert carbon char which they send to the landfill.”* Note that a petition has been filed by Native
American abutters with New Mexico EPA asking for the removal of Monarch and the area properly cleansed

MedRecycler’s claim that about ten percent of the proposed 75 tons of medical waste a day that it projects will come into the system is a very different number from that in the application MedRecycler sent to Commerce Rhode Island when it was seeking bonds to help fund his project. In the application MedRecycler said five tons per day will be sold to concrete companies for mix, but ten percent of 75 tons is 7.5 tons of solid waste, a significant difference.

Pre-Approval, Pre-Startup and Ongoing Testing to assure safety cannot be trusted or effective

Notices of dangerous emissions to the public would be voluntary by MedRecycler DEM admits its inspections would be sporadic due to understaffing How can a permit be issued when no testing can be performed to verify if bacterial spores will be released prior to operation of the plant? RIDEM states “When an activity raises threats of harm to human health or the environment, precautionary measures should be taken. Although RI DEM has issued a Notice of Intent to Approve, preoperational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens has not been conducted.

What happens to East Greenwich, West Warwick and Warwick health, property values and quality of life?

Who would move here or go to New England Tech when businesses, students and residents learn that “What comes out of the system is often highly toxic” (dioxins, mercury, lead, nitric oxides) — the same pollutants released from burning waste at traditional incinerators, per The Conservation Law Foundation? Neighbors will be subjected to foul odors, as abutters to the Woonsocket Stericycle Plant are. A man who lives close to the Monarch New Mexico Pyrolysis facility is on record as saying “the “sniff” test tells us the stuff is in the air we smell all the time, adding that the smell was worse “burning the biolab body parts. “It had an odor to it,” he said. See https://losalamosreporter.com/2019/12/08/nambe-tribal-member-raises-concerns-about-monarchs-medical-waste-facility/

Finally:

MedRecycler is unneeded: The EPA Capacity report for medical waste disposal says no additional plants are needed here. We already have Stericycle in Rhode Island, and SanPro, Daniels Health and many more in adjoining states.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VI. Bond Funding and Project Financing Issues
• See XI. Monarch Pyrolysis Facility in New Mexico
• See XII. Department Staffing Issues
• See XIV. Issues Related to Disposal of Ash
• See XVI. Buffer Zone
• See XIX Odor Issues
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
East Greenwich resident

From: (Name) From: (Address)
Len Tinkoff ltinkoff@cox.net

Hello!

Took me quite a while to research new and compelling sources and pull together the best of what has already been said.

This may help DEM with its decision regarding the application of MedRecycler.

Please give it a read.

Len Tinkoff
East Greenwich, RI
401-639-7705
As you know, MedRecycler-RI has applied to RI DEM for a license to operate a pyrolysis and energy production Medical Waste Treatment Facility which would process up to 70 tons of hazardous biomedical waste per day.

It would be directly adjacent to two daycares, a college, shopping centers, movie theaters, restaurants, a hotel, a golf course, and residential neighborhoods in West Warwick/East Greenwich

As you consider this application, please consider the following facts.

They were compiled from Media Coverage, Scientific Journals, MedRecycler’s Filings to DEM, SEC Reports, quotes by Scientific & Recycling Authorities, US Environmental Protection Agency information, and local, Rhode Island, and US Law.

Its toxic emissions are dangerous
It is unneeded and unwanted

MedRecycler has absolutely no experience with Pyrolysis, or with recycling of any kind.

MedRecycler doesn’t comply with local, Rhode Island, and US Law

Rather than its 30 promised new jobs, there will be a net loss of jobs as local businesses move away.

Property values in Kent County will sharply fall.

By the company’s own admission, “The MedRecycler facility does not have funding, and may not be profitable even in the best case.

Rhode Island has declined to invest in Medrecycler-RI’s parent company, Sun Pacific, over concerns about its financial situation, prompting the creation of MedRecycler. 
Pyrolysis Medical Waste Recycling is known to release foul odors that violate local and state law.

The promised production of excess energy for Rhode Island is doubtful.
Pre-Approval, Pre-Startup and Ongoing Testing to assure safety cannot be trusted or effective

There is nothing “green” about pyrolysis - a violent polluter of the atmosphere
Dangerous High Heat Incinerator Proposals like MedRecycler’s are being rejected in Rhode Island and across the U.S.A. Only two Medical Waste Pyrolysis plants have
operated in the US. One has closed and we understand that the Monarch Plant in New Mexico is in the process of closing.

The attached summary provides the supporting facts behind these statements.

We hope you will examine them and reject MedRecycler’s Application.

Very truly yours

Leonard Tinkoff. 346 Middle Road. East Greenwich, RI 02818 ltinkoff@cox.net
East Greenwich resident since 1985.

Rebuttal to the MedRecycler application to RIDEM for a Pyrolysis and Energy Production Medical Solid Waste Treatment Facility in the Town of West Warwick, RI.

April 3, 2021

Summary Bottom Line:
MedRecycler is seeking a license to process up to 70 tons of hazardous biomedical waste per day in a location directly adjacent to two daycares, a college, shopping centers, movie theaters, restaurants, a hotel, a golf course, and residential neighborhoods in West Warwick/East Greenwich.

Dangerous

Whether you call it incineration, or pyrolysis, or gasification, or any other type of term used to refer to this kind of high-heat waste treatment, you are burning medical waste. *Kevin Budris, Conservation Law Foundation*

This recycling plant will produce 21,000 tons of carbon dioxide, 1.5 tons of hydrochloric acid, and 2,700 – 5,100 tons of toxic solid ash *per MedRecycler Pyrolysis and Energy Production Medical Solid Waste Treatment Facility/ Application January 2019 Revision 9 July 28, 2020.*

“A pyrolysis plant for self-sustaining Energy from Waste is thermodynamically unproven, practically implausible, and environmentally unsound.” *ScienceDirect’s February 2019 Report*

“This is no time for Rhode Island to change course and start using an untested and dangerous technology to burn its medical waste – all without adequate monitoring. We are not, nor should we be, the dumping ground for the region’s waste, medical or otherwise.” *Rhode Island Should Not Be New England’s Dumping Ground for Medical Waste. Conservation Law Foundation JUN 16, 2020*
Solid waste incineration releases more than four hundred toxic pollutants including lead, mercury, dioxins, and acid gasses. Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm. Dioxins travel up to hundreds of kilometers in the air and remain for 9-15 years on surface soil and more than 50 years in a body of water. Module 2, The Healthcare Waste Management System. WHO World Health Organization Global Healthcare Waste Project

Unneeded. Unwanted.

Another Medical Products Recycling Plant is not needed in RI, per the EPA’s Capacity report for medical waste disposal.

The report says that other recycling plants now in operation in Rhode Island and in adjoining states are entirely adequate. These include Stericycle and Daniels Health, each with 30+ years of specialization in biohazardous medical waste recycling. Rhode Island Law requires that DEM must place great weight on the wishes of residents. Almost 3,200 people have signed a petition rejecting any approval of MedRecycler. If MedRecycler sticks with its plan to burn 70 tons of waste per day, it would rival the largest medical waste incinerator in the country – Maryland’s Curtis Bay Medical Waste Services Incinerator. Conservation Law Foundation JUN 16, 2020

MedRecycler has no experience with Pyrolysis, or with recycling of any kind. MedRecycler’s parent, Sun Pacific Holding (headquartered in NJ, but registered in Nevada) lists two operations beside MedRecycler-RI. These are a solar assembly business and a bus stop advertising service called Street Smart Outdoors, which manages bus shelter advertising. Sun Pacific’s SEC Filing (SEC CIK 0001343465) shows that Sun Pacific Holding Corp is primarily in the business of retail eating places (with a SIC Code of 5812)

Its CEO says, “It’ll be one of the first plants, probably in all of the US, that processes this type of medical waste and turns it into energy.” Just one such plant was operating in the US, and it is reported to be in the process of being shut down.

How can its CEO state: “I guarantee that the project is going to be safe and is going to be a good neighbor.”

“I don’t know of any (pyrolysis system) like this. That’s what makes it challenging.” Mark Dennen, Rhode Island DEM’s supervising environmental scientist.

What about the promise of 30 new jobs?
Reality: The net loss of jobs in Kent County caused by local businesses that move away will be severe.

In just one instance, Eric Falk, CEO of MF Athletic now located in the 1600 Division Street West Warwick building to be used by MedRecycler said “I have 70 employees which I would probably move as soon as possible out of West Warwick unless I could be 100 percent sure...We haven’t really been told anything about it as tenants in the building. How do they know it’s safe?” EGNews, Jun 11, 2020

**Property values in Kent County will sharply fall.**
Who would move here or stay in East Greenwich, West Warwick, Coventry, West Greenwich and Warwick under the smell and danger of MedRecycler’s toxic emissions? What parent would endanger the health of their children? What businesses would attract customers?

**In financial trouble and seeking $17 million in Tax Exempt Bonds to survive**
Medrecycler-RI shall provide a financial assurance mechanism compliant with the Regulations, and approved by the Department, prior to accepting waste. RI DEM January, 2021

By the company’s own admission, “The MedRecycler facility does not have funding, and may not be profitable even in the best case.” Risk assessment from the Global Alliance for Incinerator Alternatives

Sun Pacific Holdings’ SEC Form 10-K dated May 20, 2020 says “Currently, the Company has been and is insolvent.” Since our inception, we have failed to create cash flows from revenues sufficient to cover basic costs. Our independent registered public accounting firm has indicated in their report that these conditions raise substantial doubt about our ability to continue as a going concern for a period of 12 months from the issuance date of this report.”

“One of the reasons MedRecycler’s CEO has said he’s coming to Rhode Island is because of the state’s economic development incentives.” East Greenwich News, March 2021.

“There is no assurance that the Company will ever be profitable.” Sun Pacific Holdings’ SEC Form 10-K/A Sun Pacific Holding Corp. [Amend] Annual report Submitted 12/7/2020

Rhode Island has declined to invest in Medrecycler-RI’s parent company, Sun Pacific, over concerns about its financial situation, prompting the creation of MedRecycler.

Pyrolysis Medical Biohazardous Waste Recycling is known to release foul odors
A resident living next to the US’s sole Pyrolysis Medical Biohazard Plant states “Residents living nearby complain that the smell is so bad that they avoid walking their dogs or going for jogs outside.” Per complaint of abutting resident Marquel Musgrave New Mexico DEM specific to the plant’s odor problems.
The release of foul odors would be in direct contradiction to Section 5.8.3 of The West Warwick Code of Ordinances.

RI DEM General Rules Prohibit Generation of Objectionable Odors beyond the property line.
The promised production of excess energy for Rhode Island is doubtful.

Per its website heading, “MedRecycler is a leading-edge processing facility that will turn waste into renewable energy.” Revision 9 July 28, 2020 MedRecycler Application for Medical Waste Treatment Facility

RI definitions of “renewable energy” specifically exclude waste-to-energy combustion of “any sort or manner.” The electricity it creates doesn’t qualify for renewable-energy incentives offered by the state and National Grid.

Technical and economic challenges for gasification projects include failing to meet projected energy generation, revenue generation, and emission targets.” “The energy produced is little more than that demanded to operate the energy intensive system.” GAIA March 2017

“Pyrolysis is an inefficient process, both in terms of economics and energy use. Pyrolysis costs a whopping €6,000 ($7100) to €9,000 ($10,500) to produce only 1 kilowatt of energy, which is twice the cost of photovoltaic solar energy in the same period.” Global Alliance for Incinerator Alternatives 2018

**Doesn’t comply with local, Rhode Island, and US Law**
Section 17-5 "General Purposes" of the West Warwick Town Subdivision and Land Development regulations states "That there will be no significant negative environmental impacts from the proposed development."

The United States regulation covering medical waste incinerators (40 CFR 60.55C) **prohibits pharmaceuticals from being disposed of in a medical waste incinerator.** This regulation does not discriminate as to whether that pharmaceutical is a trace residue, a bottle of pills, a vial of chemo drugs, or is contained in bodily fluids or contaminated waste from cytotoxic drugs. Jim Mullowney, chemist, medical waste expert, and President of Pharma-Cycle, LLC

MedRecycler will accept, per MedRecycler-RI Application Revision 9: Cultures and stocks; Pathological/Anatomical waste; Human waste, blood and blood products; Sharps; Animal waste; Chemical Waste; Incinerate Only Wastes; Unused sharps; Spill/cleanup material; Mixtures; Legend drug waste.

DEM requires the facility to have an undeveloped vegetated buffer surrounding the facility. There is no buffer zone, only a half-inch piece of wallboard separating MedRecycler from other businesses in the building. EcoRI News March 2021
Pre-Approval, Pre-Startup and Ongoing Testing to assure safety cannot be trusted or effective

RIDEM admits its inspections would be sporadic due to understaffing. Rhode Island’s medical waste regulations germane to pyrolysis require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to be protective with respect to total impact on the environment, and ensure the health, safety and welfare of both facility employees and the general public.”

Nothing “green” about pyrolysis - a violent polluter of the atmosphere

“What we know about these facilities is that they are polluting. They are very expensive. They are energy inefficient. They destroy resources that could and should be recycled,” Jerry Elmer, senior attorney for the Conservation Law Foundation, in a Feb. 28 RI House hearing for H5448.

“MedRecycler labels itself and its high-heat technology, called pyrolysis, as environmentally friendly. But burning waste of any kind is far from safe for the environment, let alone the people living in neighboring communities. In fact, medical waste incinerators emit some of the most dangerous pollutants known to humankind, and the proposed facility in West Warwick would be no different”. Conservation Law Foundation June 16, 2020

“The medical waste collected and incinerated by MedRecycler will release chemotherapy-infused medical waste, identified by the DEM as ‘extremely hazardous waste’ right into the Rhode Island air. More cancer and birth defects will be a direct result. of this action.” Jim Mullowney, chemist, medical waste expert, and President of Pharma-Cycle, LLC

Dangerous High Heat Incinerator Proposals like MedRecycler’s are being rejected in Rhode Island and across the U.S.A.

The City of Providence just acted to ban dangerous high-heat waste incinerators altogether, saying “No One Should Be Forced to Live in the Shadow of a Waste Disposal Facility.”

New York passed a law in 2019 that banned a facility proposed by Circular enerG in the Finger Lakes region which would have generated electricity from “the combustion, gasification or pyrolysis of solid waste or from fuel from solid waste. As here, state, community and business leadership banded together to stop them. “

MedRecycler claims that it” is exactly the type of industrial use that the zoning ordinances of West Warwick and East Greenwich have envisioned at this location for many years.”

Really?
What is Pyrolysis?

Pyrolysis is similar to incineration in that they both use high heat to break down materials to produce a flammable gas, bio oils, and ash. “The type of pyrolysis facility that they’re proposing for West Warwick is, in effect, just another form of incineration. Whether you call it incineration, or pyrolysis, or gasification, or any other type of term used to refer to this kind of high-heat waste treatment, you are burning medical waste. “Burning plastic using any type of high-heat process is toxic and this is one of the main reasons the World Health Organization discourages burning medical waste.” Kevin Budris, with the Conservation Law Foundation, an environmental advocacy organization

Medical waste incinerators are the second-largest source of dioxin emissions in the country. US Environmental Protection Agency

Pyrolysis is barely distinguishable from a medical waste incinerator. Medical waste incinerators are notoriously toxic, polluting facilities. “None of this is clean, environmentally friendly or renewable. The statements that have been made that no burning will occur at this facility just aren't true." Kevin Budris, Conservation Law Foundation

“Traditional “mass burn” incinerators as well as the new generation of two-staged incinerators (what we call “incinerators in disguise” that use plasma arc, pyrolysis and gasification technologies) all emit a wide range of pollutants into the air and are a disincentive for recycling and other “zero waste” pollution prevention efforts.” Greenaction for Health and Environmental Justice

Solid waste incineration releases more than four hundred toxic pollutants including lead, mercury, dioxins, and acid gasses Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm – and the potential for radioactive waste to come to the facility. Stated in RI §§ 23DEM-19-3(14) and (16)

Medical waste is made up of about 25% plastic, making it all the more toxic to burn. When plastic is incinerated, it releases hazardous heavy metals like lead and mercury, as well as highly toxic pollutants like dioxins, into the air. Dioxins, in particular, pose tremendous risks for those living in frontline communities – those who live and work near incinerators and are regularly exposed to toxic emissions. Dioxins are poisonous compounds that break down very slowly in our environment and in our bodies. They can cause cancer, liver and endocrine damage, infertility, and birth defects. Kevin Budris, with the Conservation Law Foundation, an environmental advocacy organization

Has pyrolysis proven to be safe and successful?
The ScienceDirect February 2019 Report ‘Patented blunderings’, efficiency awareness, and self-sustainability claims in the pyrolysis energy from waste sector states: “A
pyrolysis plant for self-sustaining Energy from Waste is thermodynamically unproven, practically implausible, and environmentally unsound.”

A new risk assessment from GAIA finds that companies promoting "waste-to-energy" projects like gasification and pyrolysis have a 30-year track record of failures, unfulfilled promises, and $ Billions lost.

“After decades of an industry promising a solution that both manages waste and produces energy, the vast majority of proposed plants were never built, were canceled before commencing operations, or were shut down.” Over $2 billion was invested globally in these waste gasification projects. *per GAIA in its March 2, 2017 report.*

**Dangerous High Heat Incinerator Proposals like MedRecycler are being rejected in Rhode Island and across the U.S.A.**

The City of Providence just acted to ban dangerous high-heat waste incinerators altogether, saying “No One Should Be Forced to Live in the Shadow of a Waste Disposal Facility.” A temperature limit was included. “That temperature limit will keep out incineration, gasification, pyrolysis, plasma arc, chemical recycling, and any other supposedly “new” technology that the waste industry cooks up to burn trash.” Kevin Budris, Conservation Law Foundation.

As with MedRecycler, the proposal spurred weeks of state, business and community leaders who repeatedly spoke out against the depot. These included John M. Kelly, president of Meeting Street, an education complex not far from the site, Senate President Dominick Ruggerio, Providence Community Health Centers, and the NAACP Providence Branch. *Convergence RI 2/24/2020*

New York passed a law in 2019 that banned a facility proposed by Circular enerG in the Finger Lakes region which would have generated electricity from “the combustion, gasification or pyrolysis of solid waste or from fuel from solid waste. As here, state, community and business leadership banded together to stop them.

**MedRecycler has no experience with Pyrolysis, or with recycling of any kind.**

MedRecycler’s parent, Sun Pacific Holding (headquartered in NJ, but registered in Nevada) lists two operations beside MedRecycler-RI. These are a solar assembly business and a bus stop advertising service called Street Smart Outdoors, which manages bus shelter advertising. *Sun Pacific’s SEC Filing (SEC CIK 0001343465) shows that Sun Pacific Holding Corp is primarily in the business of retail eating places (with a SIC Code of 5812)*

MedRecycler’s holding company, Sun Pacific Holding’s CEO said, “It’ll be one of the first plants, probably in all of the US, that processes this type of medical waste and turns it into energy.”
“I don’t know of any (pyrolysis system) like this. That’s what makes it challenging.”
Mark Dennen, Rhode Island DEM’s supervising environmental scientist.

The business seems to have no senior management team to speak of. MarketWatch

**MedRecycler presents a clear and present threat to West Warwick, surrounding towns, and property values.**

MedRecycler would be located directly adjacent to two daycares, a college, shopping centers, movie theaters, restaurants, a hotel, a golf course, and residential neighborhoods in West Warwick/East Greenwich.

Even though it has no experience with recycling of any kind, MedRecycler’s CEO states: “‘I guarantee that the project is going to be safe [and] is going to be a good neighbor.’”

“Air Emissions From a Medical Waste Incinerator include trace metals: As, Cd, Cr, Cu, Hg, Mg, Ni, Pb – acid gases: HCl, SO2 , NOx, dioxins and furans, including 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) – other organic compounds: benzene, carbon tetrachloride, chlorophenols, trichloroethylene, toluene, xylenes, trichlorotrifluoroethane, polycyclic aromatic hydrocarbons, vinyl chloride, and carbon monoxide. Dioxins travel up to hundreds of kilometers in the air and remain for 9-15 years on surface soil and more than 50 years in a body of water. Dioxin was classified as a known human carcinogen by IARC in 1997, and cause leukemia, soft-tissue sarcoma, non-hodgkin’s lymphoma, respiratory cancer (of lung and bronchus, larynx, and trachea, prostate cancer, developmental effects, birth defects, impact on child learning ability and attention, suppression of the immune system, decreased fertility, Diabetes and more. Module 2: The Healthcare Waste Management System (who.int) World Healthcare Organization Global Healthcare Waste Project

6. **There’s nothing “green” about pyrolysis - a violent polluter of the atmosphere**

   “What we know about these facilities is that they are polluting. They are very expensive. They are energy inefficient. They destroy resources that could and should be recycled,” Jerry Elmer, senior attorney for the Conservation Law Foundation, in a Feb. 28 RI House hearing for H5448.

   “Paperwork filed with the state asks for 10 deliveries a day and up to 25 truckloads of waste could be stored at the facility.” EcoRI News. 2/16/2021

7. **Where will the 21,000 tons of carbon dioxide emissions MedRecycler releases into the air, 1.5 tons of hydrochloric acid, and 2,700 – 5,100 tons of toxic solid ash residue MedRecycler creates each year go?**

   Per the MedRecycler-RI Application Revision 9 Table 8 shows the “Potential to Emit” is “Offgas Solids Potential To Emit: 303,381 tons. Solids Output: 6,935 tons.”

   So, how can MedRecycler state that “the equipment releases little to no emissions and works as a closed-loop “green” system.”
Practice Greenhealth (https://www.nationalgeographic.com/science/article/can-medical-care-exist-without-plastic) estimates that 25 percent of the waste generated by a hospital is plastic. Further, “All pyrolysis EfW or ‘plastic to fuels’ products must be combusted to liberate energy, thus releasing the same quantity of carbon dioxide than if the plastic had been incinerated directly. Pyrolysis can never be a sustainable answer to the inconvenient truth of Big Plastic.” *Why pyrolysis and ‘plastic to fuels’ is not a solution to the plastics problem. Posted Dec 4 2018 by Andrew Rollinson, renewable energy specialist, Blushful Earth.*

MedRecycler says “The ash residue that’s left over is usually about ten percent. What we do is put it into a container, and we sell it to either asphalt companies or concrete companies and they use it in their mix. So we repurpose almost 100 percent of everything we bring in and we dispose of.” However, the amount of residual waste produced during a pyrolysis treatment is about 15 to 20 percent of the overall feedstock.” *Global Alliance for Incinerator Alternatives 2018*

This is wishful thinking. No company has yet agreed to accept this toxic waste. MedRecycler says the char will be kept out of RI’s landfill. This isn’t by choice. “The Johnston landfill doesn’t currently accept medical waste even after it’s been treated in one of Rhode Island’s two autoclaves” *EcoRI News, March 16, 2021 reporting on the 3/15 RIDEM MedRecycler Public Commentary Meeting*

Yet the only comparable Pyrolysis operation in the US states “the medical waste by product of pyrolysis is an inert carbon char which they send to the landfill.” Note that a petition has been filed by Native American abutters with New Mexico EPA asking for the removal of Monarch and the area properly cleansed

### 8. Businesses, schools, and neighborhoods will be impacted by the unlawful foul odors that Pyrolysis plants are known to release?

The Town of West Warwick states that its “zoning regulations are developed and maintained to promote the public health, safety, and general welfare. However MedRecycler states: “There may occasionally be unusual odors associated with the Medrecycler-RI, Inc process. Facility management makes every effort to minimize odors through deodorizers, filtration and storage constraints.”

Just one pyrolysis plant treating Hazardous Medical Waste exists in the US. This is Monarch Waste Technologies which is located on Nambe tribal land in New Mexico. It processes a much smaller volume of waste than the West Warwick operation intends to. The Monarch facility is located on Nambe tribal land in New Mexico. The Nambe Tribe has filed a petition with the New Mexico EPA asking for the removal of Monarch and subsequent cleansing of the area.

Many complaints have been lodged with New Mexico DEM specific to the plant’s odor problems. Per abutting resident Marquel Musgrave, “In our area, residents living nearby
complain that the smell is so bad that they avoid walking their dogs or going for jogs outside.” Another resident who lives near the Monarch New Mexico Pyrolysis facility is on record as saying “the “sniff” test tells us the stuff is in the air we smell all the time, adding that the smell was worse “burning the biolab body parts. “It had an odor to it,” he said. See https://losalamosreporter.com/2019/12/08/nambe-tribal-member-raises-concerns-about-monarchs-medical-waste-facility/

9. The release of foul odors would be in direct contradiction to Section 5.8.3 of The West Warwick Code of Ordinances.

This specifically states: Odor. No odorous emission shall be permitted which is determined to be obnoxious or which unduly transfers with or prevents the comfortable enjoyment of life or property. No emission of odorous gases noticeable to the human sense of smell or other odorous matter in such quantities as are at the property line shall be permitted.

Rhode Island DEM General Rules Prohibit Generation of Objectionable Odors Beyond Property Line. “Odors: A solid waste management facility or composting facility, whether licensed or unlicensed, shall not emit or cause to be emitted into the atmosphere any air contaminant or combination of air contaminants which creates an objectionable odor beyond the property line of said facility. General Rule Prohibits Generation of Objectionable Odors Beyond Property Line (ri.gov)

“When a state or local air quality permitting authority issues a Title V operating permit, the EPA will object if EPA determines that the permit is not in compliance with any applicable requirement or requirements under 40 CFR Part 70. 40 CFR section 70.8 (c)” Petition to Object to the Stericycle Medical Waste Incinerator, Salt Lake City, Utah Title V Operating Permit (epa.gov) March 16, 2009

MedRecycler says “Emissions from the facility will be less than the equivalent of four cars travelling 11,500 miles per year at 55 miles per hour. Would the exhaust of four cars’ engines (V8’s?) spinning at 4000 RPM sitting across the street from New England Institute of Technology make an impact?

10. MedRecycler promises new jobs for local citizens. In reality, the net loss of jobs will be severe, and new jobs for locals will be on the low end of the pay scale. MedRecycler’s CEO “focused on jobs and tax revenue in comments made in RIDEM’s 3/15/21 Public Commentary session. MedRecycler has promised “The company will create approximately 30 new jobs for local residents once operational and fully completed.” MedRecycler’s Application shows approximately 16 jobs when operations commence.

Of these, 8 jobs require experience with Pyrolysis and Medical Waste Recycling. There is no assurance that local residents offer these skills, leaving 8 non-skilled jobs at the low end of the pay scale for current citizens of West Warwick.
In reality, the net loss of jobs caused by businesses moving away will be severe. In just one instance, Eric Falk, CEO of MF Athletic now located in the 1600 Division Street West Warwick building to be used by MedRecycler said “I have 70 employees which I would probably move as soon as possible out of West Warwick unless I could be 100 percent sure... We haven’t really been told anything about it as tenants in the building. How do they know it’s safe?” EGNews, Jun 11, 2020

**What happens to local property values?**
Who would move here or stay here under the threat of its toxic emissions? What parent would endanger the health of their children? East Greenwich, West Warwick, Coventry, West Greenwich and Warwick health, property values and quality of life will sharply fall.

**What about the promised production of clean energy?**
MedRecycler states in its application, “Electricity will initially be used to power the facility and adjacent companies. Over a one year period, the facility is projected to produce 1.2-1.3 MW of clean energy. Eventually it will be sold to the power grid. Ultimately, the facility will generate enough electricity to power 1,000 homes per year.”

"Many operators find that the energy produced is little more than that demanded to operate the energy intensive system." GAIA March 2017

GAIA concluded that “the potential returns on waste gasification are smaller and more uncertain, and the risks much higher, than proponents claim.” Technical and economic challenges for gasification projects include failing to meet projected energy generation, revenue generation, and emission targets.”

**Pre-Approval, Pre-Startup and Ongoing Testing to assure safety cannot be trusted or effective**
MedRecycler was granted a minor source permit by the RIDEM/Office of Air Resources on May 7, 2020. This permit contains emissions limits, monitoring and startup testing requirements both before and after the facility begins operation.

DEM admits its inspections would be sporadic due to understaffing. *Proposed Medical Waste Facility has Neighbors on Edge* EcoRI News 2/16/21

The system to be used in West Warwick is manufactured by Technotherm of South Africa. The company has only three other pyrolysis systems around the world and none are used exclusively to process medical waste. Who repairs the equipment in the event of a breakdown? Technotherm, the manufacturer, shows no service organization in the US (after a web search).

**What are the chances that MedRecycler will succeed financially, in order to contribute taxes to West Warwick? Where will promised “new tax revenue” come from?**
The MedRecycler Rhode Island project, which is its parent company SNPW’s biggest project, does not have funding, and may not be profitable "even in the best case" by the company's own admission. There is no assurance that the Company will ever be profitable.” SEC Form 10-K/A Sun Pacific Holding Corp. [Amend] Annual report Submitted 12/7/2020

SEC Form 10-K dated May 20, 2020 pages 6 and 10, respectively reports on Sun Pacific Holdings, MedRecyler’s parent company: “Currently, the Company has been and is insolvent.” Since our inception, we have failed to create cash flows from revenues sufficient to cover basic costs. Our independent registered public accounting firm has indicated in their report that these conditions raise substantial doubt about our ability to continue as a going concern for a period of 12 months from the issuance date of this report.

Its 2019 annual report. Page 12 states: “Given the Company’s insolvency, there is a high risk that the Company may be forced to file for bankruptcy if the Company is unable to meet its capital requirements in 2019.”

“One of the reasons MedRecycler’s CEO has said he’s coming to Rhode Island is because of the state’s economic development incentives.” East Greenwich News, March 2021.

Without the infusion of $17 Million In R.I. Tax-Exempt Bonds, can MedRecycler exist? EcoRI reports it needed to make an APRA request for Sun Pacific Documentation which reveal that Rhode Island Commerce takes ownership of the MedRecycler-RI facility and equipment if the bonds default.”

2016-2019 Sun Pacific Revenue Trend, per Seeking Alpha:

“Gasification plants have historically sought public subsidies to be profitable. GAIA (Global Alliance for Incinerator Alternatives). Marketwatch outlines that, including debts, the company is facing insolvency.

Rhode Island has declined to invest in Medrecycler-RI’s parent company, Sun Pacific, over concerns about its financial situation, prompting the creation of MedRecycler. MedRecycler To Be Financed W/$17 Million In R.I. Tax-Exempt Bonds East Greenwich News Mar 14, 2021

It has been made clear by the Rhode Island authorities approving long term bond facilities for the MedRecycler-RI, Inc. project, that the Company cannot have an ownership interest given its poor creditworthiness and insolvency. SEC Form 10-K/A Sun Pacific Holding Corp. [Amend] Annual report Submitted 12/7/2020

William Ash, head of financial services at Rhode Island Commerce has stated in an affidavit that the state (via the bond issuer RIIFC) takes title to the project owner’s real property, will hold the lease and lease back the project to MedRecycler until the bonds are fully paid (Affidavit of William Ash 6/2/2020). There is no remedy in the state bonds (Amended and Stated Inducement Resolution...10/24/2019) for defaults.

MedRecycler has not been able to post a bonding for factory decommissioning. https://sec.report/Ticker/SNPW

MedRecycler does not comply with critical points of Rhode Island Law.
RI definitions of “renewable energy” specifically exclude waste-to-energy combustion of “any sort or manner.” The electricity it creates doesn’t qualify for renewable-energy incentives offered by the state and National Grid. EcoRI News, February 2020
Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a (3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to be protective with respect to total impact on the environment, and ensure the health, safety and welfare of both facility employees and the general public.”

DEM requires the facility to have an undeveloped vegetated buffer surrounding the facility. There is no buffer zone, only a half-inch piece of wallboard separating MedRecycler from other businesses in the building.

What about the wishes of the citizens and businesses of West Warwick and East Greenwich?

Rhode Island Law requires that DEM must place great weight on the wishes of residents. Over 3200 residents have signed a petition rejecting any approval of MedRecycler. Street signs stating “No Medical Waste Facility” can be found in front of hundreds of homes and businesses. Can MedRecycler Compete in the Hazardous Medical Waste Industry?

It is not enough to simply dispose of biohazardous waste to compete in the Biohazardous Waste Business.

Medical facilities demand more than a service that picks up biohazardous waste. For example, Stericycle “offers specialized biohazardous waste collection, transportation,
treatment, and disposal, and assists clients with in-house OSHA and HIPAA experts and online access to training and compliance customized to their needs.”

MedRecycler claims that it” is exactly the type of industrial use that the zoning ordinances of West Warwick and East Greenwich have envisioned at this location for many years.”
Really?

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
- See VI. Bond Funding and Project Financing Issues
- See XI. Monarch Pyrolysis Facility in New Mexico
- See XII. Department Staffing Issues
- See XIX Odor Issues
[EXTERNAL] : No approval for MedRecycler. Is DEM willing to risk RI as the source of the next pandemic?

The application of MedRecycler for a license or registration to Operate a Pyrolysis and Energy Production Medical Solid Waste Treatment Facility pursuant to Title 23-Chapter 18.9 of the General Laws of Rhode Island should never be approved.

Is DEM willing to risk RI launching the next pandemic?

How can MedRecycler be considered anything but a major threat? How can a permit be issued when the following are considered? MedRecycler and pyrolysis are both unproven and untested.

MedRecycler has never operated a plant with this technology, and has no idea what it will encounter. Pyrolysis has been called a “high risk process for waste management,” (GAIA 2017). The company and the technology are both unproven for the safe processing of infectious agents, especially in a highly congested area with two daycare centers, a college, shopping centers, movie theaters, restaurants and residential neighborhoods. No testing has been performed to verify if bacterial spores will be released during the shredding process.

An unproven company and its technology are doubly dangerous.

MedRecycler will accept unknown biohazards in an age of emerging pandemics such as super-infectious COVID-19 as well as tissues, organs, body and fluids, cultures, infectious microbiological waste from medical and pathology labs, contaminated sharps, isolation waste generated by hospitalized patients isolated to protect others from communicable disease, and carcasses and body parts from animals intentionally exposed to pathogens during biohazard research. Especially concerning are the health effects of dioxins – known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm – and the potential for radioactive waste to come to the facility.

MedRecycler is unneeded.

The EPA Capacity report for medical waste disposal says no additional plants are needed here. We already have Stericycle, SanPro, Daniels Health and many more.

Its plan is to grow far larger.

MedRecycler states that it will begin by processing up to 70 tons per day of medical waste and will store up to 25 trailers of medical waste onsite(with the potential for leakage). It says it will receive no more than four full truckloads of waste daily, or eight trucks in total but intends to expand the facility to accept up to 140 tons of medical waste per day from throughout the Northeast.

RIDEM has grounds for rejecting MedRecycler’s application.
RIDEM states: “When an activity raises threats of harm to human health or the environment, precautionary measures should be taken.” Although RI DEM has issued a Notice of Intent to Approve, pre-operational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens has not been conducted.

During the March 15 hearing, please ask Nicholas Campanella, MedRecycler’s New Jersey based developer whether he will move his family to a location adjacent to MedRecyler.

I would like to hear Yan Li’s answer to the same question, as well as that of Mark Dennen, or that of DEM Director Janet L. Coit?
Nancy Tinkoff, East Greenwich resident

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Mr. Dennen:

At the outset I would like to make it clear that I am not a scientist or medical expert, nor have I researched the applicable RI/Federal Regulations. However, as a resident of Rhode Island I would like to express my strong objection to approving the pending DEM Medrecycler, RI facility application.

As someone born and raised in Flint, Michigan, I fear that approval of the pending application may pose a risk and potential consequences as great or greater than the environmental/economic disaster suffered by Flint and its residents. No doubt the governmental officials approving the revised Flint water treatment procedure did not intentionally cause the resultant crisis. What they failed to take into consideration was the potential harm to the community and its residents if their revised water treatment procedure was not adequate to protect Flint and its residents. The Medrecycle, RI proposal utilizes technology untested for its intended use, per several expert sources.

In addition to the above, it appears that the proposal lacks several Administrative steps and requisite approvals mandated by Rhode Island law before the DEM can legally consider the application. Further, based upon the information presented during the March 16th Zoom presentation, the referenced Medrecycler, RI application is not complete given that mandatory documents and or materials required by Rhode Island law were not included with the application.

Should the project be approved, there should be provision to reimburse East Greenwich for increased police, emergency services and fire department costs. Also, with multiple heavy trucks loads using state and East Greenwich roads/center entrance bringing at least 70 tons of medical waste to the facility on a daily basis, the approval, if issued, should provide that Medrecycler, RI be responsible for reasonable increased road/entrance maintenance costs incurred by the State, West Warwick and East Greenwich, as applicable, to be determined by accepted industry standards.

As such, I conclude that the pending application is not valid due to failure to follow mandatory steps and obtaining approvals mandated by Rhode Island law. Furthermore, the law for permitting a medical recycling facility mandates a vegetative buffer around facilities that handle solid waste. There is no such buffer. The application for this facility provides that the premises will be within a building with an adjacent
tenant employing 72 people. Even if the application is determined to be valid, the information presented by Environmental, Medical Recycling and Medical experts demonstrate that using pyrolysis, which is untested for its intended use, poses reasonably foreseeable environmental risks. The proposed facility is also proximate to childcare and educational facilities that may be put at risk; these entities strongly oppose approval of the facility.

Other factors that I would like to bring to your attention include, but are not limited to:

Medical waste is not considered a renewable source of power under RI law and as such does not qualify for state energy incentives aimed at development, which the project relies upon.

2) The application to the RIFC for bonding states that there will be no discharge into the sewer system. However, a subsequent document before the RIFC states that it expects to release 20,000 gallons daily into the sewer system. A question on the same form/document regarding emission of air pollution was left blank by the applicant.

3) Another inconsistency in the application is that there is a statement that no trucks shall be stored on the site and that 4 to 8 truck loads of waste will be delivered to the facility daily, yet subsequent paperwork filed with the state asks for up to 10 deliveries a day and up 25 truckloads of waste to be stored at the facility. Truckloads of medical waste in trucks sitting outside the facility poses a substantial risk to public health and welfare.

4) The expert opinions on the Zoom call suggest that there is a substantial possibility that pollution may be emitted into the air and overall environment. The initial application stated that there would be minimal carbon dioxide emissions but the application before the DEM states that the system would emit 20,000 tons of carbon dioxide per year.

5) Also, the proposal contemplates solid waste being trucked from New York and other New England states. Trucks may be involved in accidents during transit across these states and locally, thereby imposing the risk of environmental contamination. Their proposal does not address procedures to handle environmental disasters.

6) A hazardous waste consultant who owns the firm Pharma-Cycle opined that the chemicals emitted from the proposed facility are likely to “end up in the air, bay and in our drinking water”.

7) According to Dr. Khan, an Oncologist familiar with medical waste disposal, the type of scrubber proposed for this facility is untested on the Medical materials that will be processed at the facility.
8) In a prior hearing a representative of DEM stated that any notices of dangerous emissions would be voluntary on behalf of the applicant; due to staffing constraints state inspections would be sporadic. There is no developed plan for environmental issues/disasters.

9) There is no provision that the Medical waste materials processed be inspected to make certain that radioactive or otherwise harmful substances were not being processed.

10) It would seem to me likely that an approval would be required by the US EPA Department.

From: (Name) From: (Address)
Leytin, Victoria victoria.leytin@brownphysicians
[EXTERNAL] : Written comments from RIACEP regarding
MedRecycler (opposed)
Ms Li -
Attached is a letter in opposition of the MedRecycler facility from the RI Chapter of the American College of Emergency Physicians.
Thank you for your attention.
Dr Victoria Leytin

IMPORTANT NOTICE: This email and any files transmitted with it are confidential and intended solely for the use of the individual(s) or entity to whom they are addressed. If you have received this email in error, please forward the email to the sender and then delete it completely from your computer.

DEPARTMENT RESPONSE:
- The commenter mentions discrepancies between representations made to other entities (RIFC) as to whether a sewer discharge permit will be needed. This is an issue between those agencies and the West Warwick Sewer Authority.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process : C. Issues related to sewer discharge.
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See VII. Transportation of Waste Through the Community
- See XII. Department Staffing Issues
This letter is written in opposition of any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick, or elsewhere in Rhode Island. We are Rhode Island’s Chapter of the American College of Emergency Physicians (RI ACEP). We represent 250 emergency doctors living and working in Rhode Island.

As physicians, we have a vested interest in the health of the population we serve, including the residents of West Warwick and East Greenwich. Pyrolysis is a potentially hazardous technology which not only uses significant amounts of fossil fuels and releases greenhouse gases; it also liberates from medical waste multiple toxic substances including dioxins, nitrogen oxides, among others. The plan to import waste, including substances which are known carcinogens, from out of state for processing in this facility will bring pollutants to Rhode Island and its neighborhoods.

Pyrolysis is an inefficient way of dealing with medical waste. Significant amounts of greenhouse gases are released from the fossil fuels used to conduct the pyrolysis, as well as from the burning of the gases released from the medical waste itself. These greenhouse gases lead to climate change which brings with it heat waves, ocean acidification and ocean level rise, worsening pollution, extreme weather events, etc. This has a direct effect on the health of the ecosystem and its human inhabitants.

As emergency medicine physicians, the members of RI ACEP stand on the front lines of the healthcare system and care for all Rhode Islanders. More and more we are treating diseases which are exacerbated by our changing climate - including illnesses such as asthma and COPD, heat exhaustion, heart attack, stroke, infectious diseases (like Lyme disease or waterborne bacteria), allergies, psychiatric illness, and others. Our current COVID-19 pandemic is linked to climate change - mortality from this terrible virus rises as the particulate concentration in the atmosphere rises. As climate change
worsens, we will likely see more pandemics. A study from Brown University in 2015 found that Emergency Department visits increase significantly as temperature rises, as does all-cause mortality. The WHO (World Health Organization) has called pollution “the invisible killer”, estimating that it is responsible for more than a quarter of heart attacks. These health risks posed by climate change are not evenly distributed among the population; the most vulnerable Rhode Islanders will be the worst affected.

The MedRecycler facility will kill Rhode Islanders. We urge you to deny any permits to the MedRecycler facility, and to disallow any such facility from entering and polluting Rhode Island.

Sincerely,

Otis Warren, MD
President, RI ACEP

Victoria Leytin, MD
RI ACEP Climate Change and Health Committee
Rhode Island ACEP
405 Promenade Street, Suite A
Providence, RI 02908 TEL (401) 331-3207
FAX (401)751-8050
WWW.RIACEP.ORG email mBIALEK@rimed.org

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
As an East Greenwich resident, I write in opposition to the proposed MedRecycler facility. Our residential air, water and land must not be ground zero of a completely unproven technology. Experts in this field cite major reservations about its capabilities especially in medical waste, i.e. it has never been done before, ergo we cannot know what will happen. This site is also totally inappropriate for any industrial waste storage or processing, given its proximity to the daycare and college where young people and children spend much of their time. The lawsuits that may occur from residents and towns if any byproducts are detected should be enough cause to desist from this project; the prospect of exposing innocent people (not to mention local wildlife) to dangerous materials has never been enough to stop a multi-million dollar business from doing its worst. Rhode Island has a reputation as one of the most corrupt states in this country. This deal smacks of cronyism and inside deals, as I cannot comprehend another reason any environmentally minded citizen would support this money making scheme.

We must stay on the right side of history and stop this. There is NO evidence that pyrolysis can be safe or even efficient in this way. It may certainly end up using more energy than it creates. Twenty or thirty jobs created is an actual joke and I'm disgusted that I have to write a letter like this to try to protect MY CHILDREN from potentially toxic exposures. Any future public participation meetings should be UNLIMITED for citizens of this supposed democracy to allow their voice to be heard and to witness this unfolding injustice.

Lily Querusio

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear RI DEM,

After listening to the public forum for West Warwick/East Greenwich and the proposed MedRecycler project, I felt compelled to reach out to your office. As an RI small business owner, I was disappointed to learn that DEM would consider granting approval to a project that will, so obviously, damage the health and safety of our community.

I can attest to the real environmental concerns about the MedRecycler Waste Incinerator. I worked in the South Bronx of NYC, in a public school neighboring medical waste incinerators. The rates of asthma and severe respiratory disease among the resident population was (and continues to be) staggering. These medical waste smokestacks have state of the art cleaning scrubbers, meant to meet climate emission controls, and still the human and environmental effects are horrendous. Warmer seasons bring air quality in these neighborhoods to nearly unbreathable levels. The water quality of rivers and canals in the neighborhoods are completely toxic- irreparably polluted from years of waste water disposal and runoff. I moved to East Greenwich to start a family in a place with healthy air qualities and clean groundwater. The MedRecycler project would destroy both overnight.

Should this sound alarmist, I urge you to speak with the many experts opposed to this project. Kevin Budris, with the Conservation Law Foundation, who has science to support the fact that burning medical waste is not a source of green energy. Our own State House is also making strides towards striking medical waste burning as an option for the Ocean State, Bridget Valverde is an excellent source for these details. Looking into the details proposed by MedRecycler to DEM- they have NO SPILL PLAN, meaning they have no idea how or plan to clean up a problem. They state that they will burn 70 tons of medical waste a day, 24 hours a day. The fact that MedRecycler has rebranded "incinerator" to "pyrolosis" is semantics. Gases and vapors will be expelled into our air and these noxious fumes will be contaminated with known carcinogens that we will first breathe, then consume in our drinking water and through the plants we eat that are watered by this pollution. Waste water generated from their process will be diverted into our systems where it will contaminate our coastlines, beaches and their delicate ecosystems. This is a huge health and environmental step backwards in a time where we have the capabilities and ethical compass to move our local environment in a clean and efficient direction. This is the exact opposite of being the 'good neighbor" that MedRecycler proposes to be.

I understand that Rhode Island places an important emphasis on business and economic health. Through this lenz of creating 40 jobs, it may be tempting to view the MeRecycler project as a positive thing for the state. Keeping in mind that the parent company Sun Pacific Holding Corp, LLC, has never been solvent, and is reliant upon
$17.5m in bonds from Commerce RI, let's also look at the long term impact of the pollution that this plant will create:

* 1600 Division Road (the address for MedRecycler) is a shared office park. The existing tenants currently employ over 100 Rhode Islanders. They will all be forced to relocate (possibly out of the state) to a location where their employees are safe from the hazardous air and water pollution of their neighbors.
* Ground water will become polluted in East Greenwich, and flow south to the rest of the state and into the Bay. The majority of drinking water in East Greenwich homes is through well water systems.
* Now the air and water quality becomes so undesirable in East Greenwich, that people move away.
* This exodus floods the real estate market, driving prices down, then the town struggles to find people willing to live in a polluted environment and tax assessments nose dive. The schools tank. Small businesses flee.
* Where East Greenwich was once a jewel in the Rhode Island ecosystem of skilled workers, residents, small business, thriving Main St economy and a great school system; we now have a polluted backwater where you can't give away homes and wouldn't eat a thing grown in the soil.

Please think this through and give the situation the gravity it deserves. Please DENY solid waste permits and any further permits to your office from MedRecycler (or SunTrust Holdings, LLC). It is really a life and death decision for our town.

Sincerely,

Lily Scott
--

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**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XVI. Buffer Zone
Dear Mr Li, I am writing to you in regards to the proposed medical waste company trying to open their business on the East Greenwich/ West Warwick line. I have lived just a few miles from this site for many many years and it is very frightening to me. I would ask that you please do whatever you can to protect the people of Kent County and stop this company from operating in the middle of our community where there are homes, schools, businesses and most of all children to be concerned about. I think there may be a place for this business to operate but it should be far away from where people live and play. I am most concerned about the quality of our air and how they may potentially harm the land and water surrounding the proposed site. I don’t know if you do or do not live in the area but try to put yourself in our place. I hope you will do whatever is necessary to stop this business and protect us. Thank You, Linda Gentile 777 Cowesett Rd Warwick, RI 401-241-1032

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XVI. Buffer Zone

Sent from my iPhone
Linda Bloom  labloom66@yahoo.com

[EXTERNAL] : Medical recycling facility

Dear Mr/Ms. Li and Mr. Dennen,

I'm writing to express my concerns, my frustrations, my fears, and the many unanswered questions I have regarding the proposed medical recycling facility in the City of West Warwick.

I live in Kent County, on the Warwick/East Greenwich line, about a mile or so from the proposed facility. I have a two-year old grandson, and a granddaughter on the way. They will be spending a lot of time at my house while their parents are working. My concerns are not only for myself but for ALL the citizens and communities in Kent County and throughout the entire State of Rhode Island. We are a small state and a facility such as this, with a magnitude of processing 70 tons of medical waste per day, 24/7, effects ALL of us, not just one community.

These are my concerns and they warrant immediate consideration regarding the proposed implementation of this facility:

* The pyrolysis process is common in the chemical industry to produce fossil-fuel byproducts BUT there are few examples of its commercial use to process waste. There are 3 plants in South Africa but there are none in the United States! And for the "commercial" sector it is not a proven one in the United States!

* Truckloads upon truckloads containing medical waste will be stored onsite for up to two weeks. What does that even mean??? Contaminates being spread? Radioactive contaminates? Air pollutants? Offensive odors being emitted day and night, 24/7? What will the proper protocols be to even oversee such contagions and offenses?

* In May 2019, Sun Pacific Holding Corp.'s PR firm released a statement that a 10-year lease with a 10-year option was identified, negotiated and executed on an approximately 48,000 square foot facility for the medical waste to energy project at 1600 Division Road in West Warwick.

* WHY was a lease already a done deal? Unless the "fix was in" to approve the medical waste facility?

* WHY would the City of WW approve to commence office buildout in the medical waste to energy facility without any public hearing?

* WHY would we allow the little State of Rhode Island to be the guinea pig that tests this untested technology?

* WHY would we allow this next to a child daycare center?
* WHY would we allow this next to a university, a neighborhood, a golf course?

* I have read that pyrolysis is common in the "chemical" industry, BUT there have been no studies that show this is proven in the "commercial" sector.

* The med recycler company touts the pyrolysis process with an outcome of strictly green and clean. WHERE is the due diligence that studied pyrolysis in the commercial sector and in a heavily populated environment?

* HOW do we even know that what they are doing will not allow cancer causing emissions into the environment? The Conservation Law Foundation noted in their findings that emission from pyrolysis contain cancer-causing compounds. That ash consists of dioxins, mercury, and heavy metals - pollutants that can make their way into waterways and drinking water supplies.

* I have not seen any due diligence studies. Which leads me to believe that this is untested technology - so WHY would this facility even be a consideration?

* Lack of transparency - only until recently has this facility received press coverage, which is all due in part to the concerned citizens who are speaking out against it. But prior to that, it's been crickets. Which leads me to wonder... WHY?

WHY has there not been more open discussions about this facility between the city council and the taxpayers, i.e. homeowners and business owners? And one cannot claim it's due to Covid because we are living in an age where Zoom meetings are the common way to communicate. So, again I ask the question, WHY? In my mind it seems odd and devious, and to me the answer is it was deliberate, and it was intended to keep people in the dark and to push through a back-door deal.

* WHAT if something goes wrong at the site and it needs major remediation? The Town of West Warwick SHOULD require a cleanup bond by a notable company with high ratings to GUARANTEE that if the company goes out of business, the site can be remediated. Has that even been brought up for discussion?

* WHAT if something does go wrong? How does the Town of West Warwick know that Sun Pacific Holding Corp. will carry enough insurance to cover the expense for a proper and a safe clean-up? And what does that even mean? The facility is next to East Greenwich and Coventry. But we do not live in a bubble. This is a small state with small boundaries and we have a highly dense population of people vs. landmass. How do you put a price tag on lives? Once the cat is out of the bag, i.e. emissions are let loose into the environment, how does that even get cleaned up? How does that cover the cost of loved ones being harmed? We can look at examples like 9/11 and the pollution that went into the air, and what happened there. I think we know the answer to that question and those brave first responders paid a very heavy price, with their lives.
I understand that we as a society need to do a better job at handling the waste that we as humans create. However, I do not support the way in which this technology will be used nor do I believe it is proven to work in the commercial sector. I am fearful that if this facility does go in and something goes wrong, it will be too late. The damage and devastation which is an unknown "X" factor will be done, and the ramifications may last for years, or even decades. We must work on better ways to manage the waste, not just look at this current proposal as a quick fix and a quick way to bring in tax dollars. We know as Rhode Islanders that this state does have its financial hardships. But the good news is that Rhode Island is due to receive a huge infusion of federal funding from the recently approved American Rescue Plan Act. I think we should look to those dollars to help our state create better ways to handle medical waste and NOT from unproven companies with no track record. That is not using common sense and is leaving the door wide open for creating havoc and devastation to people, to animals, and to the environment.

We should stay away from making rash decisions and from allowing this type of facility to be pushed through for approval.

I do not know Mr. Campanella but from what I've read, he is a New Jersey businessman and a developer with a business degree from the New York Institute of Technology... he's not a scientist or an engineer. This does not sit well with me, nor does it give me the confidence or give him the credibility that a project such as this should require. Sun Pacific Holding Corp., the company where Mr. Campanella is Chairman/CEO/CFO, operates as a holding company. "The Company, through its subsidiaries, manufactures, designs, and installs solar panels and lighting products, such as LED trash bins and bus shelters, as well as electrical enclosures, lamps, ballasts, wallpacks, metal halide, induction, and solar collectors. Sun Pacific Holding markets its products worldwide." I do not see anything that shows his company does anything relative to or engages in the process of pyrolysis. Again, I see no convincing resume that he or his team are experts in the field with the pyrolysis process. However, I do see on Yahoo!Finance that his shareholders are chatting about the proposed MedRecycler facility going into Rhode Island. AND their shareholders are encouraged by someone who goes by WhoaNikky to send in their support of the project to Yan Li -- "Don’t forget to send in your support for the MedRecycling project after meeting on 3/15."


And this person on Yahoo!Finance goes by ConsiderationOne5181 -- and they wrote to Yan Li and posted on the Yahoo board:

"Just submitted my comment and received a reply immediately."

Thank you for your comment. It will be included in the administrative record and all substantive comments will be reviewed and receive a written response.
And this person said they would write to you, or already has. Their Yahoo!Finance name on the chat board is Fantastic-Neck-3049 "I will submit my comment this week. I live in MA, but I guess it doesn't matter. I definitely think we need one of these in our state."

These people are not residents of Rhode Island, they are Sun Pacific shareholders who could care less about the ramifications of this facility, they only care about the money they think they will make if the project is approved. As a taxpaying resident of the State of Rhode Island and someone who lives near the proposed site, I find the cheap encouragement of sending in support disturbing, shallow, underhanded, without merit, and their submissions shouldn't even be a consideration, they should be tossed out! Shouldn't the only submissions be from those who actually live in the state?

DEPARTMENT RESPONSE:

- The commenter raises the issue that another commenter apparently lives out of state. As per the Department’s rules and state law, any interested party may submit comments and has the right to have those comments be entered into the administrative record to be reviewed and considered.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See X. Adequacy of Public Notice
- See XII. Concerns Regarding Radioactive Waste
- See XVI. Buffer Zone
Hi Mark,

Thank you for allowing me to speak today via DEM zoom. The following is the comment I made.

RI has only 4000 hospital beds between 14 hospitals, plus medical offices, nursing homes and other medical facilities. 70 tons of medical waste per day seems excessive for such a very small state. I’m concerned that Med Recyclers will be accepting waste from other states. Without collected scientific data that might give DEM a greenlight to approve this facility, I’m asking RIDEM to not allow Rhode Islanders to be guinea pigs for this potentially unsafe project.

Linda Grenier of Coventry

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVII. Out of State Waste
Linda Williams
lindawilliams9@me.com

I am writing to you because I do not want the medi waste plant in my town. I am totally against it. Especially, after a doctor stated it was dangerous for children there is a daycare right near the site. Please, do not let this go forward. Ty for your time.
Sincerely, Linda Williams 401-391-9465.
PS If it is approved I will sell my home.

Sent from my iPhone

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
I write to you as a concerned resident of East Greenwich regarding the proposed medical waste plant and the impact it will have not only on the environment but the people living around it as well. RI already is a leader in cancer rates. I know that all too well having battled NHL for over 3 years. The thought of a medical waste incinerator emitting bio-hazardous wastes from syringes, latex gloves, specimens, hazardous chemo bags and God knows what else in my backyard, and my mother's who resides nearby in West Warwick, is frightening to say the least. I've had many rounds of chemo and I know full well how powerful these drugs are. I had to use restrooms closed to the public that were designated for "bio-hazard" materials, or in other words, chemo patients' excrement. The residue remaining in the plastic pouches to be incinerated, along with other plastics, bio wastes is not something I want my family, friends and neighbors breathing in.

This plant will be belching out waste products 24 hours a day, 7 days a week. It is the only plant of its kind in this country other than the one in the desert of New Mexico. I wonder why? Watch the cancer rates sore in NM in a few years. No doubt this plant will be importing bio-hazardous wastes from from all over the country to feed it's hungry incinerators. I think it is a disgrace that it should be even considered in such a densely populated area/state. Right next to a preschool too. I'm sure those parents will be searching for a new facility. It is not only East Greenwich and West Warwick I am concerned about. I worry for the whole state. Winds will share the poison with all of us. And certainly, if this facility is permitted to set up shop in small suburban towns, no doubt more of these environmental menaces will be knocking on RI's doors. It is all about profit over health and environment and that's shameful. I hope you would agree and share the same sentiment or I'm sure I'll be seeing a lot more of my neighbors at the Infusion Center. Please take a stand for the residents of these effected towns and the state of RI. Please put the people and environment before the almighty dollar.

Thank you,

Lisa DiIorio

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XI. Monarch Pyrolysis Facility in New Mexico
- See VIII. Hazardous Waste Versus Medical Waste
Hello Yan,

It is indeed a small world that you are receiving all of the backlash on this facility. Of course, our town is too small and densely populated to support this proposed facility.

You have heard a lot of the medical arguments against the endocrine disruption and various unknown effects of this unproven technology, so I won’t belabor that. What I also know after 21 years adjacent to this, is that there have been an inordinate amount of cancer cases in the neighborhood. Certainly there is no use for anything such as Med recycler, so close to the daycare, the campus, the hotel, and multiple families; many of whom are young.

Surely the effects of this will impact the air and water throughout the region, so it is certainly not just a problem for West Warwick and East Greenwich. From what I have read, this is far from “green energy.”

I urge you to review this with the congestion in mind and do everything in your power to prevent it!!

Many thanks for your attention to this,

Lisa Fertik

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello again Mark and Yan:

I just wish to express again our strong opposition to this facility in West Warwick with access by East Greenwich, nor any location in this most densely populated state.

The zoom meeting discussion last month was overwhelming against it with very strong evidence of it's potential toxicity, odor, traffic, and so many other problems.

There seem to be no arguments in favor of it and the economic impact would be negligible, while the environmental impact could be devastating ...far from what the developer is purporting to accomplish.

Please stop this from happening in our tiny state with water our lifeblood!

Thanks for your serious consideration of this dire situation.

Ms Lisa Fertik
Dr Scott Fertik

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
Hi Mark,

I am happy that I am attending the meeting this afternoon. Without a doubt, I support the many in opposition to the MedRecycler license being proposed. I also want to point out that Mr. Campanella said that it seems that most people are not worried about the process, but the environmental impacts. It is clear that this is incorrect. The pyrolosis process itself is completely under scrutiny as well as the environmental impacts. There is no doubt that we need to take steps to increase the life of our landfills and find a better way to dispose of these products. We need to be forward thinking in this area. It is our responsibility to do this in the safest way possible for our environment and the people living near this project. The MedRecycler proposal is not ready to be approved.

Thank you for your time and efforts.

Lisa Nula

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Please see the attached letter in opposition to MedRecycler.
Thank you,
Lisa Nula

Lisa Nula <nula@cox.net>
3/13/21

To the Department of Environmental Management,
This letter is sent to you in opposition of the possible license that may be given to MedRecycler. My thoughts on this are simple. This technology needs third party testing and it needs to be away from a residential district which includes a daycare and college. I completely agree that medical waste is a problem in the US and needs to be addressed. This type of procedure, pyrolysis, is very bad for the environment. The combustable gases and pollutants alone are a huge concern in the area that has been chosen. Please do not grant a license to MedRecycler.

Thank you,
Lisa Nula
30 Partridge Run
East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Lisa Pomeroy
lisapomeroy@mindspring.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application
MedRecycler will destroy the community in which we live not just for us but for generations to come.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.IG.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Lisa Pomeroy,
495 Stone Ridge Drive,
East GreenwichAL
lisapomeroy@mindspring.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: (Name) From: (Address)
Lisa Rutherford lrutherford@oceanstatesignal.c

[EXTERNAL] : Medrecycler

Good Morning Ms Li,

I am writing to you this morning to express my concern with the proposed Medrecycler, Inc. medical waste incineration site in West Warwick. As a resident of the Town of East Greenwich I am deeply concerned for the health and well being this company could have on our community. This type of facility should not be allowed to reside in our neighborhoods.

The industrial park that Medrecycler is being proposed for is both very residential and very close to many other retail businesses. The type of process to produce energy has been found to not be a clean energy source. This is unsafe and should not be allowed anywhere in Rhode Island especially not in our residential neighborhoods.

Please do not approve this facility in our towns. Thank you for your attention to this matter.

Sincerely,

Lisa & Timothy Rutherford – Residents of East Greenwich, RI

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
With regard to the Medrecycler facility in West Warwick, it’s stated that odor abatement materials will be used in the waste storage system prior to waste being processed.

That storage system itself must be maintained. Please outline when, where and how the maintenance of the storage system is conducted. The concern here is whether measures are taken to abate the odors emanating from the odor abatement system itself. If it has to be cleaned, will odors be emitted in that process?

DEPARTMENT RESPONSE:
- See V. Issues Related to Storage of Waste
- See XIX Odor Issues
I am sending this email STRONGLY OPPOSING the location of a Medical Waste Processing Plant at 1600 Division Rd (just behind where I live with my wife and 3 boys in Stoneridge).

According to an article I read regarding this plant, it’s the first of its kind proposed in the United States with many untested technologies, can emit foul odors and can produce air pollution which could contain cancer causing compounds into the air or into waterways (among many other negatives).

As a physician, I can’t emphasize enough the potential dangers to the health of our young children this type of plant poses to the surrounding neighborhoods.

I’m sure you would not want to have your name associated with such a facility when it turns out that it has negatively impacted the health and well being of children in the area.

I’m certain there are better sites in the state where such a facility could be located away from families and neighborhoods.

I urge you to reconsider and REJECT this location.

Respectfully,
Liudvikas Jagminas, MD FACEP
Pardon any typos & autocorrects

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
From: (Name) From: (Address)
liudvikas ludi5@me.com

[EXTERNAL] : Med Recycle Zoom call
    I live in Stoneridge and tried to log into the Zoom call but couldn’t - evidently it reached a maximum number of participants which I feel is wrong. How can anyone limit the number of participants at an open public forum who wish to comment AGAINST this facility.

    Regards,
Ludi Jagminas

Pardon any typos & autocorrects
Sent from my iPhone

DEPARTMENT RESPONSE:
    • See IX. Limitations on Attendees at Public Hearing
Lois Bassen  lsbassen@gmail.com

[EXTERNAL] : DEM PROPOSAL FOR MEDICAL WASTE

INCINERATOR
We are terribly concerned about the very controversial medical waste incinerator planned for the border of West Warwick and East Greenwich.

Speaker of the House, Joe Shekarchi, you were a lawyer for the company hoping to build this incinerator. THIS IS UGLY AT BEST.

The incinerator proposed by an NJ-based company will use new technology that does not have a good reputation or long-standing research of its health effects. They are hiding this high-temperature process behind "renewable energy" but the company cannot tell us how much energy will be developed.

Trucks from all over New England will bring this waste to West Warwick using a challenging interchange deemed one of the most dangerous in the state.

PLEASE DO NOT APPROVE THIS.
Thank you, L & M Bassen, East Greenwich [formerly Lincoln]

DEPARTMENT RESPONSE:
•  See I. Issues Related to the Department’s Role in the Permitting Process
Good Afternoon,

I am going to try to keep this as short and to the point as possible. I am writing to you in regards to MedrecyclerRI and their petition to open in West Warwick, next to a daycare, college, as well as several other businesses. I am deeply opposed to allowing a medical waste disposal business with untested technology and processes from opening in West Warwick. I did see that DEM sent out a "Notice of Intent to Approve" to MedrecyclerRI. What studies did you do to test the safety and validity of the pyrolysis process that they claim to be safe? Who paid for said studies? From all of the research that I have done, pyrolysis has not been proven to be safe. I understand that in the last DEM public meeting, Mr Campanella stated that pyrolysis is being used on a reservation in Arizona, but I could not find any information on this. If pyrolysis is so safe and effective, why isn't it being used everywhere? Why aren't more cities and states using it to produce energy? I am also concerned that Mr Campanella stated in one of the West Warwick Town Council Meetings that they would be accepting radioactive material and leaving said material in the trucks "until the radioactive depletes." I am under the understanding that not only is that not how radioactive material works, but that leaving radioactive material outside in a parking lot is not safe.

I am very concerned that the Department of Environmental Management allowing this type of untested waste management process to open in Rhode Island, and next to a daycare, college, homes and other businesses.

There are many issues with this business opening in West Warwick. I hope that DEM rethinks its position in this matter.

Lokelani Delovio

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIII. Concerns Regarding Radioactive Waste
Hello DEM staff,

My name is Lorraine Martin and I am a resident of East Greenwich. I am writing as a concerned EG resident, concerned Rhode Islander, concerned neighbor, mother and pediatric registered nurse. During the informational zoom conference with Medrecycler, Mr Dennen stated this is a difficult situation because this exact technology has not been used to process the exact type of waste proposed to be processed. Do not quote me exactly but it was something to that fact. I am asking for you to not issue the medical waste processing permit to Medrecycler. This exact plant should be built in a far off area and used to process the exact waste proposed and test should be ran then to confirm its safety. It should not be the opposite way around. Issuing a permit and allowing Rhode Islanders be test dummies for this technology is not the right thing to do.

Best,
Lorraine

Sent from my iPhone

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Dear Ms Lynch,

Please let the powers to be at the DEM know that I strongly oppose the implementation of this medical waste recycling plant in Rhode Island. This new technology is unproven, and could pose a significant health risk to the residents in West Warwick and East Greenwich, and likely beyond. I do strongly support green initiatives, but until this is proven, I don't consider it environmentally prudent to implement anywhere in this state. I don't understand how any state agency could support such a risk to its population without more proven facts about the risks of this technology.

Thank you.

Joan Roby
60 Deep Meadow Ln
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: (Name) From: (Address)
Lynch, Owen  olynch@mail.smu.edu        Re:
[EXTERNAL] : Re: Med Recycler Hearing

Mark, I saw you note later saying not to use the chat for technical information. So fair enough. As a academic, with joint appointment in an engineering school, the quasi-scientific claims being made by med-recycler especially when it threaten my families well-being is very difficult to stomach. I implore your office to do the right thing. Owen Lynch

Sent from my iPhone


DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Too many times residents have been told this won’t be a problem. There will be no toxins getting into the air, soil, or water. This has happened over and over again. Then residents are left with acrid smells in their air, polluted water, and toxic soil. Medical waste can have long lasting, health devastating results that don’t stop and impede the lives of those affected.

Once the business is established, residents are stuck with the results forever. Why subject people to a lose-lose situation. It’s not fair!

The business owners will deny responsibility. Residents will be stuck in a living hell, unable to sell their property, why subject people to this? Would you want to deal with this disaster?

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RI-CMR-140-15-1), Rhode Island solid waste regulations (250-RI-CMR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Lynda Marzahn,
16 Mile Road,
CoventryRI
lyovmar174@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Turning waste into fuel and then burning it does not generate renewable energy. Plus, both the pyrolysis process and the burning of waste-derived fuel can produce hazardous toxics that are harmful to human health.

I would not want this near my house & it will drive down property values as well as the health risks!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Lynn Costa,
72 Priscilla Ave, -,
WarwickRI
ldgcosta@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.
• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Lynne Moulton,
525 Stone Ridge Drive,
East GreenwichRI
lynnemoulton@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
To whom it may concern:

I live at 6 Quiver Drive, West Warwick RI 02893. I am adamantly opposed to the proposed medical waste plant.

Sincerely,

Mary Jane Seleyman

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Marcella Remer Thompson, PhD, MS, RN, FAAOHN
Environmental Health Scientist
(Adjunct) Assistant Professor of Nursing, University of Rhode Island
Consultant to the Narragansett Tribe
marcella.thompson.6@gmail.com <mailto:marcella.6.thompson@gmail.com>
+1.401.569.7548
RI Department of Environmental Management
Providence, RI

RE: Medical Waste Facility in West Warwick

Review Board Members:

I am Marcella R. Thompson, PhD, MS, RN, FAAOHN, an environmental health scientist. I retired this past year from the University of Rhode Island as Assistant Professor of Nursing and Co-Leader of Community Engagement for Brown University’s Superfund Research Program. Prior to my entry to academia, I was principal safety engineer for Cherry Semiconductor and subsequently ON Semiconductor Corporation in East Greenwich. Also, I chaired the RI Commission for Mercury Reduction and Education when the legislation was initially passed by RI legislature and signed into law by then Governor Carcieri. My research focuses on mercury, polychlorinated biphenyls (PCBs) and lead co-exposures among childbearing-aged women in the U.S. Currently, I am principal investigator on a multi-year multi-phased environmental health research project evaluating mercury and PCB contamination of fish and shellfish in ponds located in South County.

I am NOT in support of opening this facility in Rhode Island.

The efficacy of pyrolysis depends upon process parameters such as vacuum degree and condensing temperature. A study on pyrolysis product characteristics of medical waste and fractional condensation of the pyrolysis oil was published in the March 2020 issue of *Energy*. Fang et al. analyzed solid, liquid and gas byproducts. Their study emphasized the importance and impacts of high-viscosity components. This tar plugs process equipment and piping resulting in unplanned interruptions in operations. Any thought to running operations 24/7 is wishful thinking. How many hours per month will the facility be shut down for routine maintenance while the tractor trailers of waste continue to arrive? Has anyone from RIDEM or the impacted towns spoken with their counterparts where a similar facility is operating processing medical waste?

Disposable plastic products e.g., high density polyethylene and polypropylene are major components in medical waste (Som et al. 2018). Pyrolysis of these items will result in the release of dioxins, furans and polycyclic aromatic hydrocarbons (PAHs) as well as hydrochloric acid (HCl) in flue gas emissions and pyrolytic oils (Zhu et al. 2007; Su et al. 2021). Dioxins and furans are known human carcinogens. PAHs are characterized by USEPA as priority pollutants. During pyrolysis, hot gases are quenched in an effort to inhibit but not eliminate recombination reactions of dioxins and furans (Nema et al., 2002). Additionally, the presence of chlorine (Cl) might promote generation of dioxins
and furans. The generation of hydrochloric acid (HCl) will negatively impact the value of the pyrolytic oils.

Various types of plastic products used in the medicine and health require differing pyrolysis dynamics. These differences have important implications for reactor optimization, waste stream reduction, and pollution control (Ding et al., 2021). PAHs have been found in significant concentrations in pyrolytic oil and char products (Mohseni-Bandpei et al., 2019). PAHs in char vary greatly with temperature and residence time (Zofagharpour et al., 2020). As a result, even slight variations in the pyrolytic process can lead to increased environmental health risk and human exposure. Periodic monitoring of flue gases is insufficient. Strict performance bonds based on controlling stack emissions and contaminants in char products should be strongly considered for a requirement to operate.

This is not renewable energy nor is it green. The end products of pyrolyzing 70 tons of medical waste per day, 365 days per year are pyrolytic oils, combustible tar and gas. Burning the tar to generate heat for the process and burning gas to produce electricity will generate and release carbon dioxide and hydrocarbons as byproducts known to adversely contribute to air pollution and climate change. The RI Department of Health (2019) has demonstrated a statistically significant increase in rates of asthma among children living near the Route 95 corridor due to a combination of point source and non-point pollution sources. RI has the 9th highest childhood asthma rate in the United States. This proposed facility will add to this problem substantially. Tractor-trailer truck traffic will add to air pollution as well.

Medical facilities in Rhode Island will contribute very little to the 70 tons of medical waste that will be accepted and processed. An estimated 75-90% will arrive from out of state and perhaps out of country. (I remember a time when we shipped our medical waste to Canada for incineration.)

Promising to not process chemical (pharmaceutical including chemotherapeutics) or anatomical waste (whole body parts and tissues) is an empty promise. The facility has no method of confirming the trailers’ contents prior to processing. Most residents are concerned about the noise (85 dBA) associated with 24/7 facility operations as well as the ins and outs of tractor-trailers dropping off their containers 24/7. Comparatively, East Greenwich has a noise ordinance that varies from 55-75 dBA with the lower levels enforceable from 10p to 7a. While this facility is in West Warwick, abutters will be subject to noise levels in excess of 30 dBA during overnight hours. The odor of medical waste from 25 trailers stored onsite will permeate most of the neighborhood and disburse throughout the community by way of prevailing winds. Televised images of the long line of 50-foot trailers holding dead bodies resulting from the CoVID pandemic is a searing image – at least those trailers are refrigerated to retard biological degradation. While the odors are quite offensive, particularly in the heat and humidity of an August summer, what is being generated in these petri dish trailers over the waiting period of two weeks is of more potential concern, particularly if the medical waste is generated by Class 1 biosafety research laboratories.
I am not in support of permitting this facility to pyrolyze medical waste. There are too many variables in operating the process that are not well controlled with too little environmental oversight. Sincerely,

Marcella Remer Thompson, PhD, MS, RN, FAAOHN
Environmental Health Scientist

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VII. Transportation of Waste Through the Community
- See XVII. Out of State Waste
- See XIX Odor Issues
Ms. Li,

I have read that incinerated plastics release toxic pollutants like mercury and dioxins. The World Health Organization discourages the burning of medical waste. How can DEM justify granting a permit to Medrecycler when no facility using pyrolysis for medical waste is available for scientific testing?

Marilyn Zartatian

Sent from my iPhone

DEPARTMENT RESPONSE:

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms. Li,

During the January Zoom meeting, someone posed this question to Mr. Campanella, “Why West Warwick?” After some discussion, Mark interjected that DEM was only involved with the science, not location of the facility. I read that there must be a buffer zone for such facilities so DEM SHOULD be aware of location, especially when Medrecycler shares a wall with another company.

Marilyn Zartatian

Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See XVI. Buffer Zone
Mark Dennon  
RI Department of Environmental Management  
Providence, Rhode Island  

Dear Mark;

Yesterday I had the opportunity to join the zoom presentation and hearing regarding the proposed medical waste treatment facility off of Division Street East Greenwich/West Warwick. I was particularly interested in joining the hearing to gain information, and more fully understand information about the proposed facility. As a former Planning Board Member, Town Council Member and Town Council President in East Greenwich, I have worked closely with the experts at DEM and have had great respect and confidence in the strict regulations and enforcement required, so important to protect the public health as well as the environment of our beautiful State.

The scientific presentations made by a number of the participants were excellent. I had not been aware that the proposed medical waste facility planned to utilize a process that is currently untested technology. Pyrolysis, a high heat process is used to break down undetermined medical wastes, and has been untested for use in this manner. Further study is needed to clarify and understand the environmental impact such a process might have on our air quality, drinking and bay water quality, as well as potential health impacts for residents and nearby workers. The proposed site offers no buffer zone and is in close proximity to neighborhoods, a child care facility, a college campus and dormitory as well as other nearby businesses. The proposed facility would actually be in a building shared by a current business, I have great concerns about the potential contamination and damage that might be caused by an unproven process in such a populated location. I also have great concern if actual construction has started, as was mentioned by a witness at the hearing. An additional concern is in reference to the truckloads of medical waste being transported on route 95 and then into the curving access to the potential site. The proposed location is in a populated environmentally sensitive area.

The opportunity for providing 20 full time employment opportunities was mentioned. Employment opportunities are important to our economy, however, in the case of the proposed untested proposal, I strongly believe that the potential negative impact and damage outweighs any reason for moving forward. As an East Greenwich resident, and concerned citizen, I ask that the experts at DEM look closely, review the scientific facts and reject approval for the proposed facility in this location Medical waste needs to be addressed, but this is not the site for such a potentially hazardous facility.

Sincerely,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XVI. Buffer Zone
Marisa Kambour
marisakambour@gmail.com

[EXTERNAL] : MedRecycler Opposition Testimony
March 12, 2021

Dear Ms. Yi,

As a resident of East Greenwich, a parent, and a concerned global citizen, I am writing to oppose any permits for MedRecycler to build a medical waste facility in West Warwick.

We are in the midst of a global climate crisis. More than ever, the choices we make about our waste, our emissions, and our resources need to put the health of our planet at the forefront. As the Ocean State, Rhode Island should be positioning itself as a leader in true green technology. MedRecycler is trying to greenwash their operation by using words such as “renewable”, but there is nothing green or environmentally-friendly about their proposal. To begin, they would require a significant amount of external energy—sourced from fossil fuels—to achieve the high temperatures needed for pyrolysis. Next, they would be generating and burning materials filled with toxins, emitting 20,000 tons of carbon dioxide and other pollutants—the same as those created by waste incineration—every year. What is green or renewable about any of that? Approving this facility would be an embarrassment to our state and our fellow residents, the equivalent of saying that Rhode Island is not taking the threat of climate change seriously.

Health and safety also need to be prioritized. MedRecycler’s facility simply cannot meet Rhode Island’s medical waste regulations, which require proof that its technology is “protective with respect to total impact on the environment”, as well as ensuring “the health, safety and welfare of both facility employees and the general public.” This technology has not been used on medical waste. Taking large amounts of hazardous material (including up to 25% plastic) and subjecting them to incredibly intense heat is not what a logical person could call an inherently safe undertaking. The long term risks of human exposure to such processes and toxins are unknown.

Additionally, even a small accident could have a disastrous impact on the community. If this is the case, how can MedRecycler prove that its proposal is safe for the environment, its employees, or the community members? I ask you to please err on the side of caution instead of choosing to jeopardize health and safety.

This facility does not belong in West Warwick. It does not belong in Rhode Island. It does not belong anywhere on this planet. It’s not worth the harm it will do, or any of the accompanying risks.

Thank you for considering my comments.

Sincerely,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
Not only is this not proven to be effective, it WILL BE HAZARDOUS TO HUMAN HEALTH.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;
• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and
  • MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Marissa Heroux,
2 Hebert Street,
West Warwick RI
marisssaheroux@gmail.com

DEPARTMENT RESPONSE:
  • See I. Issues Related to the Department’s Role in the Permitting Process
  • See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
  • See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
  • See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
  • See XVI. Buffer Zone
Good morning.

I strongly oppose the building of the above plant.

Chemicals released into the air will expose families to hazardous chemicals that cause birth defects and cancer.

Why is this even on the table??

Find another way to dispose of this material in a safe and healthy manner.

Thank you.

Mark Beveridge
School Counselor
West Warwick High School
Guidance Department
Webster Knight Drive
West Warwick, RI 02893
401-825-6543
MBeveridge@westwarwickpublicschools.com

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DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Everything we have worked our entire lives for is tied up in our homes. We simply can't accept a plan that will dramatically reduce our property values. Burning waste in our neighborhood can not happen. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-ERICR-140-15-1), Rhode Island solid waste regulations (250-ERICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
From: (Name) From: (Address)
Mark Boyer  boyerassociates@att.net
[EXTERNAL] : Medical Waste License for Medrecycler-RI Inc. Facility

Mark:

I received an e-mail from Stephen St. Amand on March 12, 2021, regarding the proposed Medrecycler-RI Inc. medical waste treatment facility in West Warwick. I could not respond earlier due to an injury. I certainly have serious concerns regarding this facility. The State of Rhode Island has a very dense population. The residual waste which will be released through a stack into the atmosphere has great concerns in many ways.

I am Chairman of the Kent County Water Authority. We have wells which generate good potable water, and we purchase most of our water for our customers from the open Scituate Reservoir. Please be aware that the water we deliver to our customers has been considered the second best quality water in the United States. Number one is in the State of Texas.

This medical waste process is to be found nowhere in the United States. I have gone through approximately 40 pages of data on this process, and I found at least 15 valves and sensors which cut off the process if something goes wrong. In this day and age mechanical failure is inevitable with a process such as this. We should learn from the ongoing pandemic that any release into the atmosphere is suspect to contamination or whatever. It so happens that much more than medical waste will be processed at this facility. It is my understanding that there will be more public hearings in towns or maybe DEM.

Water quality is tantamount to any process depositing emissions into the atmosphere.

Robert B. Boyer, Chairman
Kent County Water Authority

Boyer Associates
1071 Main Street
West Warwick, RI 02893
Office 401.821.8872
Fax 401.826.1993

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
The DEM is charged with protecting the natural resources and people of Rhode Island. In the matter of the proposed MedRecycler facility in West Warwick the duty of DEM couldn't be more clear.

Science based analysis requires data. There is little to no data on pyrolysis and medical waste, especially at the potential scale MedRecycler is proposing. We cannot be confident that the facility will work the way the applicant states. Therefore it is appropriate to apply more caution, not less.

Scientists also recognize no system is perfect: human error occurs, equipment breaks down, and natural disasters do damage. All of these risk factors demand redundant safety measures to reduce the impact of such a failure that invariably will occur - it is a not a matter of if, but when. The most important safety measure the proposed MedRecycler facility lacks is space; an appropriate buffer from other people. History has shown time and time again that procedures and backup systems will fail. The only failsafe would be more space.

While the proposed technology may be an innovative solution to a difficult problem, it should not be tested in a location that puts at risk so many people, including dozens of children at a nearby daycare facility. An honest assessment of risk and probability would require this facility to be located somewhere with a much larger buffer between it and other residential and commercial space.

Sadly, the "I know a guy" culture of Rhode Island has allowed this project to reach such a late stage without applying this common sense. The residents of East Greenwich and West Warwick now rely on the career scientists at DEM to stand up to political pressure and do the job we-the-people have hired them to do - protect us from environmental hazards.

Thank you for your consideration,

Marla Mellino
54 Venus Dr., East Greenwich, RI (1/4 mile north of Division in Cowesett)

DEPARTMENT RESPONSE:

- *See I. Issues Related to the Department’s Role in the Permitting Process*
- *See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process*
- *See XVI. Buffer Zone*
From: (Name) From: (Address)  
martyjob@aol.com  martyjob@aol.com

[EXTERNAL] : PYROLYSIS PLANT
I have not done a lot of research on the proposed plant, actually very little but in general I am NOT opposed to the plant. Too many times we will oppose anything new if there are things we do not understand, I am not one of those.

However I do elect people, and hope that the people I elect will appoint people, that are smarter than me and will do the proper research on matters that come before them. In this case that would be you.

Please research, listen to facts and make a proper determination based on those facts.

Thank You  
Martin P. Andrews  
10 Shady Hill Dr.  
West Warwick, RI 02893-2337

DEPARTMENT RESPONSE:  
• See I. Issues Related to the Department’s Role in the Permitting Process  
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
It will destroy our habitat! Does not comply with RI regulations. This system is unproven and can’t guarantee our safety. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Mary Acquino,
8 Robin Road,
AshawayRI
mpacquino@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
I am writing to protest this plan to build this facility for several important reasons:
* The plan has not been thoroughly considered and proven safe to county residents.
* Burning medical waste creates dangerous fumes. This is not a solution.
* The amount of waste is not well defined - different quantities show up differently in various information sources.
* The company’s financial status and prior management is questionable, to say the least, and no county - or the state as a whole - should be investing taxpayer dollars in partnership with such a business. Not only risking financial loss, but dangerous outcome to RI citizens.

Please do not advance this project. It is dangerous to Rhode Islanders!

Mary Greene
105 Fowler St
North Kingstown, RI 02852

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VI. Bond Funding and Project Financing Issues
From: (Name) From: (Address)
Mary Handy  pollyhandy@me.com

Dear Mr. Dennen,

I am writing to voice my strong opposition to the proposed Medrecycler plant at 1600 Division Road, West Warwick. I write as an East Greenwich resident and concerned citizen.

I am grateful to you for hosting the hearing on Monday. I was strongly opposed to the facility prior to the hearing. I am vehemently opposed to it now. I do not wish for myself, my family, my neighbors, the infants and children at Playground Prep nor the students at New England Tech to be unwilling and unwitting subjects of this experiment with untested, unproven technology. While the address itself is zoned commercial, the reality is, it is part of a larger residential neighborhood.

I was shocked to learn that testing for safety will be done after the facility is operational. I was equally appalled by the lack of a required buffer zone, spill plans, contingency plans, evacuation plans etc...

The only two voices I heard speak in favor of the facility were the company owner and Chief Technology Officer, both of whom are the only ones who stand to gain financially from the facility.

Thank you for your consideration. Please record me as a vociferous NO!

Mary C Handy
10 Fox Run
East Greenwich, RI

Sent from my iPad

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Mary MacIntosh
marymacintosh@cox.net

[EXTERNAL]: Deny MedRecycler’s medical waste treatment application

As a local resident, I believe that the RI DEM should deny MedRecycler's application for a medical waste treatment permit. It is clear from the information shared to date that the permit would not be in the best interest of Rhode Islanders and cannot be approved safely. The facility does not comply with Rhode Island's medical waste regulations, solid waste regulations or the laws governing solid waste license applications as it is not based on a proven technology, the state does not have an appropriate standard on which to monitor and regulate the activity, it will endanger the lives of people living, working and going to school in the area, it will not have an appropriate buffer zone particularly with the day care center nearby, and the application does not have all required approvals in hand. Approving this application is not in the best interest of Rhode Islanders and area residents and businesses and it would be a great danger to such individuals for the application to be approved. I live in close proximity to the proposed area and approval of the application will also have a negative impact on our family's health and well being, as well as property values. Please deny this application. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Mary MacIntosh,
335 Moosehorn Road,
East Greenwich RI
marymacintosh@cox.net
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Mary Semeraro
mary.semeraro@gmail.com

The DEM is charged with protecting the natural resources and people of Rhode Island. In the matter of the proposed MedRecycler facility in West Warwick the duty of DEM couldn't be more clear.

Science based analysis requires data. There is little to no data on pyrolysis and medical waste, especially at the potential scale MedRecycler is proposing. We cannot be confident that the facility will work the way the applicant states. Therefore it is appropriate to apply more caution, not less.

Scientists also recognize no system is perfect: human error occurs, equipment breaks down, and natural disasters do damage. All of these risk factors demand redundant safety measures to reduce the impact of such a failure that invariably will occur - it is a not a matter of if, but when. The most important safety measure the proposed MedRecycler facility lacks is space; an appropriate buffer from other people. History has shown time and time again that procedures and backup systems will fail. The only failsafe would be more space.

While the proposed technology may be an innovative solution to a difficult problem, it should not be tested in a location that puts at risk so many people, including dozens of children at a nearby daycare facility. An honest assessment of risk and probability would require this facility to be located somewhere with a much larger buffer between it and other residential and commercial space.

Sadly, the "I know a guy" culture of Rhode Island has allowed this project to reach such a late stage without applying this common sense. The residents of East Greenwich and West Warwick now rely on the career scientists at DEM to stand up to political pressure and do the job we-the-people have hired them to do - protect us from environmental hazards.

Thank you for your consideration,

Mary Semeraro
190 Watch Hill Dr, East Greenwich (1/2 mile from the proposed location)

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department's Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Mary Welch
campnanpop@gmail.com

I am writing to oppose the MedRecycling treatment program on Division Street between West Warwick and East Greenwich for the following reasons:

1. It will release more than 400 toxic pollutants, such as lead, mercury, dioxins and acid gases.
2. It threatens the health and safety of all Rhode Islanders and of the environment.
3. This is the most costly of Waste disposal methods.
4. Various damaging emissions will occur.

The above are only some of the harmful results should this program be given the green light.
Please keep them in mind before coming to a conclusion.
Rhode Island deserves better.

Mary Welch
10 Deep Meadow Lane
East Greenwich, RI

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : OPPOSED -- Medical Waste Treatment Facility in Kent County
I’m reading up on the proposed Medical Waste Facility that is proposed near NE Tech in Kent County and am 100% opposed to such a facility. The information shared so far makes me believe that this is unsafe and should not be approved. There is an insufficient regulatory foundation for this and we Kent County residents are not looking to be the next Flint Michigan. We are on well water and are located in the impacted area. Please do not approve this proposal.

Mary MacIntosh
335 Moosehorn Road
East Greenwich, RI 02818.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Dear Yan Li,

I am writing you today to voice my strong opposition to the proposed medical waste facility on Division Rd. As a native Rhode Islander, a home owner of multiple properties in this beautiful state, and a mother raising three children in East Greenwich, I am fiercely against the proposal to build a medical waste plant in our densely populated town. We relocated our young family to East Greenwich from Providence in recent years to pursue a healthier lifestyle of clean air, open green spaces, reputable public schools and better quality of life. With a facility processing toxic waste a mile from our home, I am very concerned with the direct affects to my children’s health and well being, pollution to our water, air and soil. Please add my name to the daily growing list of community members opposing the Medical Waste facility.

Thank you for your time.
Sincerely,
Masha Zayas Fishman

--
--

Masha S. Zayas M.Ed., Ed.S.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
I am an East Greenwich resident living at 20 Princess Pine Drive which is 6 miles by car from the proposed location of the Medrecycler Waste Management facility. I am writing to express my opposition to a license being issued to Medrecycler. Given the questions being raised about the technology to be employed, I have tried to learn more about the technology and the background of the applicant. As many others have noted it is difficult to find any comparable data points for use of this type of technology. Further I am finding it hard to find any experience that Nicholas Campanella brings to the table or anything other factors that make it clear that concerns being raised about the project are being credibly answered. My opinion is that common sense dictates that putting a waste facility using an unproven technology in a heavily populated area is a poor decision. With those factors in mind, I would urge the DEM to deny the license being requested.

Sincerely,

Charles M Dunbar

20 Princess Pine Dr
East Greenwich RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Dear Yan Li,

I am an 88 year old Korean War Veteran and we need your help in preventing a New Jersey Company from coming to our area. This Company MedRecycler is proposing to open a plant at 1600 Division Road, bordering West Warwick and East Greenwich. This proposed plant would be next to a Daycare Center and across the road from a Condominium complex, consisting mainly of seniors and within a 1/2 mile from New England Institute of Technology, across the road from a public golf course, close to a Medical Center and residential areas. Not a typical location for a Medical Waste Center.

This Company will be using a system called Pyrolysis which uses extreme heat to break down medical waste, such as needles, tubing, gloves and other medical waste. There is only one other Company in the United States using this system to break down medical waste and it is located on tribal land in New Mexico and it is a smaller operation. The Company is contending that this process would turn medical waste into electricity, a renewable-energy project. However, Kevin Budris, staff attorney with the conservation Law Foundation in Rhode Island, states that burning waste is not renewable, it's not sustainable, it's climate damaging, and it's highly polluting. His contention is that Rhode Island should do everything it can to keep these types of projects out of the State.

No one completely understands the ecological impact that this waste disposal system will have on the State. What kind of odors and emissions will they have on the environment of the people living in the area. Will they be the silent killers?

Respectfully yours,
R.T. "Matt" Mattioli
85 Cricket Street
East Greenwich, RI 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XIX Odor Issues
We reject the building of the Medical Waste Incinerator Project on the proposed site off of Division Street in East Greenwich Rhode Island. The environmental impact could potentially be devastating to the area. The impact on the air quality, subsoil land contamination and contaminating the water and aquifer resources can be irreversible if radioactive materials are incinerated at this proposed site. The damage to the infrastructure i.e roads and bridges will be considerable and the associated congestion of large trucks bringing in materials from out of state 24 hours a day is unacceptable.

Again, we reject the building of this Medical Waste Incinerator for reasons mentioned above.

Thank you for the opportunity to formally respond on this issue.

Sincerely,

Matthew and Carol Rosol
East Greenwich Preserve
15 Fieldstone Drive
East Greenwich, Rhode Island 02818

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XIII. Concerns Regarding Radioactive Waste
From: (Name) From: (Address)
Matthew matt@neo90s.com

[EXTERNAL] : Public Comment Against MedRecycler Permitting

Dear Ms. Li,

I am writing in regards to the proposed permitting of the MedRecycler facility at the border of West Warwick and East Greenwich as part of the public comment period. I was unable to attend the Zoom meeting on March 15, 2021. It is my understanding that the Zoom platform was unable to handle the number of people who wished to attend and participate in that meeting. The permit in front of DEM needs to be unconditionally rejected.

I am a resident of North Kingstown and pass the proposed location regularly. I oppose any permits for MedRecycler to build a medical waste pyrolysis facility in our state. Medical waste is known to contain persistent, bioaccumulative toxins like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. I am concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char.

My reasons for opposition include:

* The pyrolysis technology proposed has not been tested by a third party and shown to be safe.
* The pyrolysis process will release gasses which include many harmful chemicals. MedRecycler claims that they will not release any harmful chemicals. However, their plan does not include adequate processes for preventing the release of, filtering of, or reclaiming of harmful chemicals in their exhaust. Furthermore, their plan does not provide for continuous monitoring of the exhaust to measure the levels of harmful chemicals in the exhaust.
* DEM is charged with the enforcement of environmental regulations but does not have the resources to provide 24/7 continual monitoring of the exhaust for compliance.
* MedRecycler has produced contradictory statements about how much waste they plan to process and how much pollution they expect to produce.
* MedRecycler has made contradictory statements about discharge of waste water and provides no processes for the continual monitoring of the waste water.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections 250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”) require that for DEM to approve any alternative technology to treat medical waste, the technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably
hazardous nature of the materials being treated -- clearly does not come close to reaching that bar.

Additionally, I have a number of objections on procedural grounds:

* Why does the DEM Notice of Intent to Approve say that Medrecycler - RI can STORE medical waste when the application states that waste will NOT be stored on site?
  * Why does the DEM Notice of Intent to Approve say that Medrecycler - RI "no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite"?
  
This is quite a disparity from what the public is being told.

* The original intent, based on planning board minutes, was for 4 delivery trucks a day "generally in the morning" or as stated in DEM info session "scheduled by appointment". The application states this facility will operate 24 hours a day, seven days a week. Will trucks be delivering materials all day or is there a set window? Will someone be on site to have 24 hour monitoring?

* The application is clearly still referencing the original Johnston site as noted in Population and Service Area. Shouldn't this be updated in the application?

The permit in front of DEM needs to be unconditionally rejected.

Respectfully,

Matthew Zimmerman
25 Kristen Ln
North Kingstown RI 02852

DEPARTMENT RESPONSE:

- The commenter correctly points out that the population service area is incorrectly listed as Johnston instead of West Warwick. That being said, this information may be useful for market analysis but is not relevant to the Department’s review.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: C. Issues Related to Sewage discharge
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VII. Transportation of Waste Through the Community
- See IX. Limitations on Attendees at Public Hearing
Maura Keating
maura.e.keating@gmail.com

I am a resident of East Greenwich and I am opposed to the MedRecycler treatment facility currently proposed in East Greenwich. Pyrolysis has not been tested on medical waste and I fear the consequences of testing unknown technology so close to populated areas.

I am a librarian and can find no evidence that the treatment of medical waste by pyrolysis is safe. In fact, I find warnings of the treatment of PVC and plastics by the EPA when treated by pyrolysis which is worrying to me.

My family lives quite close to the facility. My children have asthma. My husband has cancer. I fear that the possible pollutants that are not known now but may contribute to the ill health of our community in the future. The area is very close to residents and businesses and should have a larger buffer zone.

Thank you for the opportunity to comment.

Maura Keating
125 Cresthill Dr
East Greenwich RI 02818

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
I am sure that you have been receiving many emails and letters from my neighbors in Ward 5 West Warwick about Nick Campanella trying to open his business, Medrecycler, in Ward 5.

I would like to add my voice to theirs in dissent of allowing this company to do business. From everything I have read and heard about the pyrolysis system it is unproven and potentially very dangerous to our community and our state.

At the West Warwick town council meeting on February 2, 2021 during the public comment portion, one of the members mentioned that as far as they know the State of RI has already approved Medrecycler operation in the state and that now it is up to DEM to listen to public comment and consider objections.

How much sway are the residents going to have if the State has already approved it and it looks like according to DEM's letter dated January 11, 2021, "Notice of Intent to Approve" to Medrecycler they have as well?

Please let me know what I can do to help prevent this business from opening in our backyard. And, please let me know your feelings about this.

Maureen Delovio
48 Kimberly Lane
West Warwick, RI 02893

**DEPARTMENT RESPONSE:**
- See I. Issues Related to the Department’s Role in the Permitting Process
Maureen Delovio
mdelovio@gmail.com

[EXTERNAL] : MedRecycler

I am a resident of West Warwick and I live 2.7 miles from 1600 Division Road. However, I am a lot closer as the crow flies.

The "Notice of Intent to Approve" letter that DEM sent to MedRecycler says to me that DEM has already (or should have already done) done its research and its investigation into this company, its processes, and the impact it will have on the people and land of RI. However, if you are depending on residents who are not experts in the field of pyrolysis and medical waste disposal and management as most of us are not, then you have your procedures backwards. Either this is a safe operation and will not detrimentally impact the people and environment or it will. And, if after research and critically thinking the answer is still unknown then you should err on the side of caution and say NO to MedRecycler's application. We the people put our faith in YOU and your expertise.

All Rhode Islanders count on RIDEM, along with our town and state governments, to be the stewards, watchdogs, and defenders of our environment in this state. If there is any question of this company causing harm to the environment and thus to the people DEM should deny MedRecycler's application.

I concur with all those many knowledgeable and credentialed people who spoke on March 15th zoom call against Medrecyler doing business anywhere in RI. I say a resounding NO.

Thank you for looking at the evidence, doing your own research, and listening to the people who WILL be harmed.

Maureen Delovio
48 Kimberly Lane
West Warwick, RI 02893
401-206-3337

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi,
I live in East Greenwich at 90 Brookside drive. I do not want a med waste processing in my community.
Thank you,
Max Goldman

Sent from my iPhone

DEPARTMENT RESPONSE:
• No response needed.
From: Max Salt
ezkovapress@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I’m all for renewable energy, and converting waste to energy, but only if it can be done without generating more waste, especially if that waste might be toxic.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Max Salt,
1 Nomail St,
CoventryRI
zelkovapress@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Dear Ms. Li,

While reviewing your department’s laws regarding the storage of medical waste, I came across number 1.8 that states, STORAGE OF MEDICAL WASTE SHALL NOT EXCEED 50lbs. If MedRecycler is allowed to have trucks parked at the facility, doesn’t this violate the law? Certainly the amount of waste in one truck far exceeds the 50 lb limit. Number 6 states that MEDICAL WASTE NOT BE COMPACTED. If the waste is in large containers for transport, wouldn’t the waste be compacted? I would appreciate clarity on both laws. Thank you.

Marilyn Zartarian
25 Crickett Circle
E. Greenwich. RI

DEPARTMENT RESPONSE:

The regulation in question, 1.8(C)(5) is quoted below in its entirety. It specifies that waste stored may not exceed 50 pounds or seven calendar days, whichever allows for a longer period of storage. So assuming the applicant would store more than 50 pounds, they would be limited to storage of waste for 7 days.

The regulated medical waste shall be maintained in a non-putrescent state. Total storage of regulated medical waste shall not exceed fifty (50) pounds or seven (7) calendar days, whichever condition shall allow storage for the longer period of time.

- Generators of medical waste are prohibited from compacting or grinding medical waste. The normal practice is not to compact waste but simply to place it in appropriate containers as per state and federal laws. As per Rule 1.8(C)(6) Compaction or grinding of untreated waste is only allowed if the process is fully self-contained. See also II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process.
If MedRecycler can not meet RI regulatory standards as the ones below why is this even a conversation?

- Medical waste regulations section 1.15(F): MedRecycler must prove, “on the basis of thorough tests,” that its technology is “protective with respect to total impact on the environment” and that it ensures “the health, safety and welfare of both facility employees and the general public.” MedRecycler’s technology has never been used on medical waste and MedRecycler cannot prove that it is adequately protective.

- Solid waste regulations section 1.9(M): MedRecycler’s facility must be “designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility.” Given the risks of burning medical waste, the untested nature of MedRecycler’s technology, and the close proximity of businesses and residents, MedRecycler cannot demonstrate that it will be able to comply with this standard.

During DEM’s recent information session, it was clear that the pyrolysis process has not been tested. Untested and unproven technology that will import medical waste into our state, our roadways and into our communities should not be permitted in close proximity to residential areas. There is absolutely no way to determine the local impact of this. Who will bear the burden if this plant fails, emits odors or dioxins, or impacts water supplies the residents of East Greenwich.

I strongly oppose this new medical waste facility.

Meaghan Almon, EG Resident

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XIX Odor Issues
I live in Saunderstown and would be horrified to hear that the state approved a medical waste facility in my town.

Shouldn’t DEM be abhorrently opposed to this concept??

From your website:
The Rhode Island Department of Environmental Management (DEM) serves as the chief steward of the state’s natural resources – from beautiful Narragansett Bay to our local waters and green spaces to the air we breathe. Our mission put simply is to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family.

Putting this facility so near a residential area, students and even other commercial businesses where many rely on well water, is preposterous and goes completely against the “About Us” statement on your website.

How are you protecting our waters and air with this facility?

PLEASE, do not allow this.

Best,
Meaghan

Meaghan Dresser

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Please accept this email as I add my voice to the ever-increasing voices of concerned citizens throughout our State with respect to the proposed medical waste treatment facility on the West Warwick/East Greenwich line.

Most concerning is that the proposed facility will engage in “pyrolysis,” an untested method of disposing medical waste. It is very worrisome that pathological wastes such as human tissue, organs, blood and body fluids, contaminated needles, and plastics be disposed of with an untested method. There is great risk of irreparable harm to our community and environment should this facility be allowed to use pyrolysis on 70 tons (and potentially larger quantities) of medical waste per day. Of note, this location is near 2 daycare centers, close to a college campus and 3 1/2 miles from Narragansett Bay. Further, the trucks carrying such hazardous material will be doing so in an already congested area. Should an accident occur, it would result in foreseeable harm to businesses in that area as well as others who use the local roads.

Should an industrial accident or fire occur at this location, local residents and businesses would be subject to harmful toxins released into the environment.

This type of facility does not belong anywhere in R.I. Should pyrolysis one day be tested and proven to be appropriate for the disposal of medical waste, such a facility belongs in a remote or heavy industrial area, not 750 feet from a daycare.

I urge you to deny MedRecycler’s permit request. Pyrolysis is untested, it is NOT “green,” and it does not belong anywhere in our State.

Thank you.

Melissa Brooks
Red Barn Lane
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XVI. Buffer Zone
Melissa Chernick  
melissa_chernick@yahoo.com

[EXTERNAL] : Opposition to MedRecycler

Good morning,

I wanted to reach out and ask your opinion on the proposal of Medrecycler going in on Division Rd.

I am vehemently opposed to it as it would greatly impact the town including the health of those who reside close by, the child care facility not to mention the traffic pattern. What is the thinking in regard to putting a recycling center with medical waste so close to a residential community especially since it was turned down in Johnston.

I’d like to better understand things on a higher level. is there state bond funding supporting this project and what type of legislation could be put in to prevent these types of facilities from being proposed so close to our homes.

Many thanks for your prompt response to this matter,

Melissa Chernick
60 Signal Ridge Way
East Greenwich

Melissa

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
Dear Yan Li,

I am writing to voice my objection to the possibility of MedRecycler beginning operations at 1600 Division St.

The fact that pyrolysis will be used and polluting the air is of grave concern. I am unclear how they were able to receive a minor source permit when all research shows that pyrolysis is dangerous. They are claiming that their process is green, however, no environmentalist agrees that this process is green.

As a state, we need to ensure that these processes are safe. Before it's too late and damaging something needs to be done. Their methods do NOT meet RI Regulatory Standards. In order to meet the standards, we need to make sure that MedRecycler does NOT start using pyrolysis in our state. Doing so would create damage that would potentially be irreversible.

Please, we implore you to do everything you can to stop this very dangerous company from coming to using our beautiful state and destroying it.

Thank you for listening,

Melissa & Andrew Chernick

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: [Name]
From: [Address]
melissa@shaw
melissa@shawsearch.com

[EXTERNAL]: Public Comment on MedRecycler West Warwick

The DEM is charged with protecting the natural resources and people of Rhode Island. In the matter of the proposed MedRecycler facility in West Warwick the duty of DEM couldn't be more clear.

Science based analysis requires data. There is little to no data on pyrolysis and medical waste, especially at the potential scale MedRecycler is proposing. We cannot be confident that the facility will work the way the applicant states. Therefore it is appropriate to apply more caution, not less.

Scientists also recognize no system is perfect: human error occurs, equipment breaks down, and natural disasters do damage. All of these risk factors demand redundant safety measures to reduce the impact of such a failure that invariably will occur - it is a not a matter of if, but when. The most important safety measure the proposed MedRecycler facility lacks is space; an appropriate buffer from other people. History has shown time and time again that procedures and backup systems will fail. The only failsafe would be more space.

While the proposed technology may be an innovative solution to a difficult problem, it should not be tested in a location that puts at risk so many people, including dozens of children at a nearby daycare facility. An honest assessment of risk and probability would require this facility to be located somewhere with a much larger buffer between it and other residential and commercial space.

Sadly, the "I know a guy" culture of Rhode Island has allowed this project to reach such a late stage without applying this common sense. The residents of East Greenwich and West Warwick now rely on the career scientists at DEM to stand up to political pressure and do the job we-the-people have hired them to do - protect us from environmental hazards.

Thank you for your consideration,

Melissa Shaw

110 Woodbridge Drive East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Does the DEM have experience in evaluating this type of technology? Does the DEM have plans to hire an expert to evaluate the emissions? Does the DEM have expert staff to monitor the medical feedstock to assure that there are no pharmaceuticals or pharmaceutical residue in the feedstock? What plans are there on case of an emergency on the premises? Has the site been approved by the State Planning Council, which is a prerequisite for issuance of a permit? There are too many questions left unanswered MedRecycler's application. Further, the company has no previous experience running a plant of this type. Why should Rhode Islanders be the guinea pigs for an unproven and untested technology?

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Michael Ashworth,
81 Kulas Road,
West WarwickAL
michael.d.ashworth@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See XVI. Buffer Zone
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Comments in opposition to MedRecycler proposal in West Warwick:

I am writing to oppose the MedRecycler proposal for a facility in West Warwick. The company has not and cannot prove that treating medical waste with pyrolysis is safe for human health and the environment. This technology is untested on medical waste. Area residents and businesses would become test subjects for health and environmental effects. The proposal does not provide for the required buffer zone around the facility. It would be adjoining a business and is in very close proximity to day care centers, schools and residences. I urge DEM to reject a permit for this project.

Thank you for considering my comments.

Respectfully submitted,

Michael B. Isaacs
46 Bunker Hill Lane
East Greenwich, RI 02818-2308
michael.b.isaacs@gmail.com

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
From: (Name) From: (Address)

Michael Hayes Mikehayes0000@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

The decision to welcome this business and unproven technology brings absolutely zero benefit to me or my family of four. I cannot fathom how a floundering company whose stock does not trade on any reputable exchange is the state’s best answer to what must be a dire financial situation. While I am hopeful that we can delay the start of operations long enough to bankrupt this organization and its shareholders, I like many of my neighbors will list my house for sale and leave this town and state. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Michael Hayes,
245 Watch Hl,
East Greenwich RI
mikehayes0000@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Michael Murphy
mmurphy@advanced.com

Dear Sir, I am a resident who lives on Division rd East Greenwich RI. I also Own an electronics factory, Advanced Interconnections, across RT 95 in the West Warwick Industrial park, Location 5 Energy way.

I have over 75 employees have been in operation since 1982, we sell globally and supply military, medical, automotive, telecommunication and many other customers.

I am in strong objection to the approval to allow a medical waste facility to operate at 1600 Division rd.

The concerns are many, Unproven technology, health and safety of citizens, traffic of waste trucks, legal, buffer zones, disaster plans etc.

I am in contact with my legal advisers and also Washington on this issue.

Please do not approve this Medrecyler application!

Thank You

Michael Murphy
President
Advanced Interconnections Corp

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
From: Michael Riley
From: mriley007@hotmail.com

[EXTERNAL] : Medrycycler

Please oppose the plan to put a medical waste recycler on division road

Michael Riley

Sent from my iPad

DEPARTMENT RESPONSE:
• No response needed.
I am in strong opposition to this project. It has great potential to damage the environment (we live nearby) and it is an unproven process. Please DO NOT approve a license.

Thanks,
Michael Weiss

Sent from my iPhone

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Michele Claeson
mmanosh@aol.com

I’m an East Greenwich resident and I have major concerns about this proposed operation. I live nearby and I am completely against this project. Please put a stop to this!

Michele Claeson
dle Road
EG, RI

DEPARTMENT RESPONSE:
• No response needed.
DEM please deny MedRecycler’s permit application for burning medical waste in RI. I care about my state and the health and well being of all those who live here. Especially those who homes and businesses including a daycare are in close proximity. I feel no one should be exposed to or breathe in hazardous toxins. Besides how can you trust a company who themselves have no experience in the pyrolysis process. Why should RI be the Guinea pigs? Why take a chance and put millions of people's safety and health at risk? Let keep RI beautiful and clean. Please protect RI's environment and its residents and deny MedRecyler's application for a medical waste treatment permit. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Michelle Tougas,
17 Anthony Street,
Coventry RI
mmlt1@cox.net

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and
the Minor Source Air Permit

• See XVI. Buffer Zone
Hi, my name is Miguel Figueroa and I’m a student here in East Greenwich, Rhode Island. I wanted to comment on the proposed Sun Pacific Holdings incinerator that may or may not be built near the East Greenwich/West Warwick border. The project is the subject of a lot of frustration in my community, and I’m willing to bet my neighbors in West Warwick are experiencing the same thing. It seems that everyone who pays attention to local news is opposed to this building project for their own reasons. Though I’m pretty far left politically, I have found myself on the same side as even the most conservative people in my community in our apparently unanimous opposition to this construction project. But because I’m a Sunriser, I thought I’d take a different approach to this and give my environmentalist’s take on why this project should not be approved.

First of all, Mr. Campanella (CEO of MedRecycler RI and Sun Pacific Holdings) and his attorney Representative Shekarchi will go on about the “green”ness of their pyrolysis method like they did when they first proposed the project in May of 2019. I would like to encourage the DEM to ignore that noise. The incinerator, as I’m sure you’re all aware, will produce what the company calls “synthesis gas.” You may know it as biomethane. Its sister fuel, natural gas, is extracted with the same pyrolysis method and has an identical chemical composition. And like natural gas, when you burn biomethane, it produces energy at the cost of releasing greenhouse gases that trap heat in our atmosphere and accelerate global warming. In other words, biomethane is not clean. And pyrolysis isn’t clean either. Do not let them tell you that it is. Now, I will admit, the human organs, animal body parts, and used hospital supplies that Mr. Campanella’s subsidiary wants the state’s permission to burn are not technically fossils yet. So biomethane isn’t technically considered a fossil fuel yet. Ya got me. But that doesn’t make the process green by any means.

Secondly, I know that Rep. Shekarchi has clarified that the entire incinerator plant will be a closed system, and that no gas will escape. In his words, this makes the project “green.” Now, there’s probably a natural gas line explosion on a Native American reservation for every word of that sentence. And I’m sure that all of those fossil fuel companies gave the same kind of assurance to the communities they later poisoned. But I’m not indigenous, so I’m not even gonna get into that. Representative Shekarchi, DEM members, I don’t care what MedRecycler RI is doing with the biomethane. My concern is what will happen to the biomethane when MedRecycler RI harvests it and sells it to energy companies to be burned as a fuel source. And I would like to remind the DEM and anyone else listening that these are the same energy companies that have donated more than $12,000 to Rep. Shekarchi’s reelection campaigns, according to Follow The Money. In fact, Rep. Shekarchi has made six times more in campaign contributions than the next highest-fundraising candidate. Now, the Union of Concerned Scientists published a paper in 2013 that stated that medical recyclers like the one proposed for West Warwick would only produce enough energy to cover 3% of California’s natural gas use, even if they burned all of the state’s hospital trash. Assuming Rhode Island and California have at
least similar natural gas consumption rates, there is no practical reason to harvest biomethane as a fuel source, unless it is making you, personally, a lot of money.

That brings me to my last point. Killing the planet is a lucrative industry. But take it from Chevron, at some point people are going to start getting frustrated when you dump 600 gallons of oil directly into San Francisco Bay. Mr. Campanella is currently facing the ire of 1,000 angry suburban Karens and their Twitter leftist kids. And that’s a crowd that tends to be difficult to bargain with. It’s easy to fall into this trap of believing that Mr. Campanella and folks like him are evil and don’t care about anything other than their bottom line. But I don’t think Mr. Campanella is an evil person. He has some good points. He’s right that landfills are gross. He’s right that letting our trash gases float away into the atmosphere like some kind of collective fart is a bad way to go about our business. We shouldn’t be dumping our garbage into landfills and ruining our environment like that. But here is where Mr. Campanella is wrong: the difference isn’t between destroying our planet and destroying our planet lucratively. We don’t have to keep destroying our planet. We don’t have to keep burning natural materials to create fuel. We don’t have to keep burning fossil fuels and pumping the toxins into black and brown communities. We can make ethical and sustainable infrastructure. As a Sunrise organizer, I spoke with Rhode Islanders of all ages, beliefs, and backgrounds who felt the same way that I do now. It’s time for a Green New Deal in our state. It’s time to completely reimagine our infrastructure so this doesn’t have to be a problem in the future. Australia and the entire West Coast burned to the ground last year. Texas doesn’t have power. Puerto Rico has been dealing with hurricane after hurricane and Rhode Island could be next at any moment. Things aren’t going to get better. But if we adopt a new mindset, we can stop them from getting worse. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I live at 81 Kulas Rd, West Warwick, RI 02893.

I've done research on this pyrolysis technique. It's not widely used nor is it widely accepted practice. Back in March 2020 when I started tracking this there were 3 operating plants in the world, 2 in South Africa and 1 in England. There are no plants of this type in the United States. The track record for this type of plant is not good.

I'm a retired insurance broker with degrees in Law, MS Geophysics, and PhD Business Administration. I might also add that I placed the insurance for Camp, Dresser and McKee (CDM) when they were the largest remediation engineering firm in 1985 when I worked for Frank B. Hall.

The feedstock is proposed to be covid-19 medical waste and other medical waste which will be stored on site until it's processed. This has a risk of contagion.

Further for the plant to be successful it must run 24/7 and will inordinately increase the tractor trailer traffic in the NEIT Campus area and the East Greenwich residential area.

If the plant is allowed to open and it fails, what mechanism will be in place to guarantee cleanup of the hazardous waste site that will be left?

The Town Planner and Town Council of West Warwick have tried to sneak this project through without comment from the residents bordering East Greenwich, of which I am one.

I strongly believe that this project is not in the best interests of the Towns of East Greenwich and West Warwick. Further, there is a stink of a backroom deal here. This was never properly vetted by the town of West Warwick.

There's quite a voluminous negative discussion on Facebook dating back to March of 2020. https://m.facebook.com/groups/190753688189056/permalink/584550332142721/ [m.facebook.com]

If you decide to grant the license, I implore you that there be a guaranteed remediation plan in place (in the form of an insurance policy) and that any license be contingent on that policy remaining in effect in perpetuity. I might also add that I placed the insurance for Camp, Dresser and McKee (CDM) when they were the largest remediation engineering firm in 1985.

Mike Ashworth. 401.212.6907

https://www.linkedin.com/in/michaelashworth [linkedin.com]

http://heartbrothers.org/mike-ashworth-survivor-story [heartbrothers.org]

Here's some medical research on the pyrolysis process.

**Large-Scale Pyrolysis Oil Production: A Technology Assessment and Economic Analysis**
M. Ringer, V. Putsche, and J. Scahill

From National Renewable Energy Study, 2006

https://www.nrel.gov/docs/fy07osti/37779.pdf

**3.4 Environmental / Health**

Given the large number of compounds in bio-oil, it obviously raises concerns about the human health and environmental effects of this material. As reported earlier in this document, more than 300 specific compounds have been identified in biomass pyrolysis oil and some of those compounds are known carcinogens such as benzene and
phenanthrene. In addition there are many compounds in bio-oil that have not been identified and their toxicity or health effects are not known by the research community developing biomass fast pyrolysis technologies. Because this is an important issue to the eventual commercialization of this technology, researchers began to investigate the health effects of bio-oil in the mid 1980s. Elliot [26] used the Ames test to look at the mutagenic activity of bio-oil as a function of the thermal severity of the process used to generate the oils. With the low temperature “primary” oils, produced in the range of 500° - 600° C no mutagenic activity was observed. However, when the bacteria were exposed to oils produced at the highest severity a marked increase in mutagenicity occurred. When other investigators conducted similar studies with samples of bio-oil produced using different biomass feedstocks and different processes, they saw mixed results. Scott [35] exposed two different strains of bacteria to two separate bio-oil samples and also saw mixed results. One strain showed mutagenicity and the other did not. In a later series of Ames tests [36] with two separate bio-oil samples produced at NREL using a hardwood and a softwood; both samples displayed mutagenic activity but only slightly when compared to a benzo(a)pyrene standard. These results were considered to be inconclusive.

Elliot conducted additional studies with mammals using a subset of the same bio-oil samples used for the Ames test. Diluted samples of oil were applied to the skin of mice genetically bred to be susceptible to cancer. The low severity “primary” oil showed no statistically significant difference compared to controls that were only painted with the dilutent acetone. However, exposure to the higher severity oils definitely showed a positive carcinogenic response. The two oils from the Waterloo process used for the Ames test were also tested with ovary cell cultures from Chinese hamsters for chromosome damage. Over narrow ranges of dilution, both of these samples exhibited damage to the cells [35].

While some of these tests were inconclusive others showed a clear potential carcinogenic effect. The oils produced at a lower cracking or thermal severity appear to be relatively benign but as the severity goes up the cancer promoting activity also increases. If one refers to Figure 4, this is consistent with the experience seen in the coal tar industry where exposure to polycyclic aromatic hydrocarbons (PAH) was correlated with high incidence of cancer. These same PAHs can be made with biomass under severe cracking conditions. Fortunately the production of high yields of bio-oil requires process operating conditions based on the lowest cracking severity.

When investigating the health aspects of fast pyrolysis processes, the focus was entirely on the liquid product because some of the identified compounds are known carcinogens. The char from many of the processes used for fast pyrolysis can be attrited to very small sizes and some portion is likely to be in the PM 10 and PM 2.5 size range. This refers to particles in the 10 and 2.5 micron size range that pose unique respiratory hazards. Given that these particles are co entrained with the organic vapors it is realistic to expect that some compounds become adsorbed on the surface. To protect workers in an emerging pyrolysis industry, and comply with OSHA reporting requirements, it would be prudent to include health and safety assessment of the char in any future toxicology studies.
The low pH of bio-oils is also a potential environmental and safety issue. In the studies reported in the literature there was no reference to investigations of damaging effects of physical contact with acidic bio-oil. In studies where mammals were dosed by application of oil to the skin the primary objective was to evaluate the cancer promoting potential of these liquids. With a pH of 2.0-2.5 the oil is likely to have damaging effects to the eyes but this has not been conclusively established by controlled studies.

Work done by Piskorz and Radlein [37] used respirometry techniques to show that bio-oil readily biodegrades in soils at rates significantly higher than hydrocarbon fuels. This was also true for biodegradation in water but neutralizing the oil first enhanced this process. Neutralizing the bio oil was not necessary to see the biodegradability in soil. The low pH of these oils, however, would obviously have detrimental effects on aquaculture in the event of a large spill in a river, lake, or stream. Given how often one hears of hydrocarbon fuel tanker truck spills in rivers and streams next to roadways, it would be inevitable for this to happen with bio-oils as well.

Another environmental / health issues relates to the design and operation of the pyrolysis plant or biorefinery producing the bio-oils. Fugitive emissions from the collection, transfer, and further processing would need to be carefully controlled. Fugitive emissions from drying the biomass feed also need to be carefully controlled. Because of the large number of compounds present it is possible that some operating personnel may develop chemical sensitivities to vapors or liquids they are exposed to. Modern process design usually takes this into consideration but critical HAZOPs analysis should be applied to key processing steps where the potential exists.

Mike Ashworth
401.212.6907

https://www.linkedin.com/in/michaelashworth [linkedin.com]

https://heartbrothers.org/mike-ashworth-survivor-story/ [heartbrothers.org]

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I am writing this email as a resident of East Greenwich and with family in surrounding town in Rhode Island. MedRecycler is petitioning for approval to put a facility at 1600 Division Rd, West Warwick. My family is strongly opposed to this approval. The environmental and health issues associated with such a facility are unknown and are detrimental to the communities surrounding and Rhode Island at large. The technology that is being deemed to be used has never been tested for this application. The unknown regarding the facility is what is concerning. Having never been tested for medical waste, the facility can possibly pose a threat to our community, the surrounding wildlife in the area, the pond next to the facility and the students and residents of the nearby New England Technical College and neighborhoods in both East Greenwich and West Warwick.

70 tons of medical waste being burnt a day, 24 hours a day. Untested odorous gases to be release in the air, this poses a huge risk in a highly populated community. Allowing this untested, unregulated facility to operate in a compacted primarily residential area, what will the long term consequences be. Could this site become the W.R. Grace Woburn, MA site of the 1980’s, where children years later were diagnosed with many different types of cancer.

Finally, the owner of MedeRecycler, Nicholas B. Campanella, has been charged with price gouging masks during the worst pandemic this country has ever seen since the 1918 Spanish flu pandemic.


How as residents to be sure that a person with this moral character will follow the guidelines that are set up by the DEM. Furthermore, how can the DEM, in good conscious, allow such a person who allegedly would scam a system during the worst pandemic we have ever seen in our lifetime, be allowed to operate a facility such possible consequence to the air quality of Rhode Island.

In conclusion, implementing such a technology in immediate proximity to neighborhoods, a day care center, colleges and schools, hotels and retail businesses is reckless at best. The DEM has a responsibility to protect the interests of the citizens and residents of Rhode Island. We would be thankful if you could act accordingly.

Sincerely,
Michael and Michelle Potorski
ox Run, East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIX Odor Issues
Dear Mr. Li,

I'm sending this note to add my voice to those objecting to this medical facility on Division Rd. in E/W. Greenwich. I live up the street in Warwick and have family and friends in E/W Greenwich, and I think we'd all be affected adversely by the waste and fumes coming from this facility. I'm asking that they not get the permits they need. This whole business sounds unsafe and should be stopped from operating at this address.

Thank you,

Mary Rooney
wesett Rd.
Warwick, RI

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department's Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
I am writing to express my grave concerns regarding the proposed new license to Medrecycler-RI, Inc. at 1600 Division Road, West Warwick, Rhode Island to treat medical waste.

There is no precedent for using pyrolysis for the burning of medical waste. This technology is unproven, unsafe and inefficient. There are no safeguards, no inspections/verifications of questionable materials delivered, no continuous monitoring of potentially harmful emissions in the proposal by Medrecycler -RI. And the promotion of this facility as producing green, renewable energy is very dubious.

Of greatest concern is the location of this proposed facility. Injecting this unproven technology and potential hazardous activity into a densely populated, residential community is unconscionable and a great risk to all. The area consists of neighborhoods, child care centers, New England Technical University, restaurants and other businesses and is completely unsuitable for this type of industrial project. The quality of life in our community will be severely impacted by the tons and tons of hazardous waste, and ensuing truck traffic in this proposal. This is not the kind of development that is beneficial to the state and community and the risks are immeasurable. For these reasons I am totally opposed to this project and appalled by the intent to issue a license by RIDEM given the concerns and information provided by the applicant. I hope that this license will be denied and this hazardous project stopped.

Nancy Caldwell

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
I am writing to express my grave concerns regarding the proposed new license to MedRecycler-RI, Inc. at 1600 Division Road, West Warwick, Rhode Island to treat medical waste.

RI regulations prohibit the trucking of medical waste into RI for disposal at the Central Landfill in Johnston, yet this proposal perpetuates exactly that - trucking in medical waste from the entire region and beyond to a different, more environmentally fragile location. Medrecycler -RI has provided conflicting information to the West Warwick Town Council, the DEM and the public about their intentions in terms of volume, the number of trucks and storage of this potentially hazardous medical waste. The application states 25 trucks will be stored in excess of 7 days (as regulated) while testifying repeatedly and stating in Medrecycler -RI literature that “No waste will ever be stored on-site.”

Medrecycler -RI has simultaneously claimed both that this technology is brand new, state of the art, and alternatively over 40 years old and proven, depending on the audience. In fact, this technology is untested, unproven, unsafe and inefficient. There is no precedent for using pyrolysis for the exclusive burning of heterogeneous Regulated Medical Waste. Technotherm of South Africa, the company providing the equipment and technology in this project, has only 3 other pyrolysis plants operational globally and NONE use medical waste as fuel. There is NO other facility in the United States using pyrolysis to burn regulated medical waste as feedstock.

The promotion of this facility as producing green, renewable energy is very dubious. Technotherm literature states “The waste will undergo pyrolysis which is considered incineration.” RI excludes waste-to-burn combustion/incineration from consideration as “renewable” energy, and the serious toxic emissions produced in the burning of such waste are far from green. There are no safeguards, no inspections/verifications of questionable materials delivered, no continuous or adequate monitoring of potentially harmful emissions in the proposal by Medrecycler -RI. How is this a safe, green project?

Of greatest concern is the location of this proposed facility. Injecting this unproven technology and potentially hazardous activity into a densely populated, residential community is unacceptable and a great risk to all. The area consists of neighborhoods, child care centers, New England Technical University, restaurants and other businesses and is completely unsuitable for this type of industrial project. The quality of life in our community will be severely impacted by the tons and tons of hazardous waste, unknown and potentially hazardous emissions and ensuing truck traffic in this proposal. This is not the kind of development that is beneficial to the state and community and the risks are immeasurable. For these reasons I am totally opposed to this project and stunned by the intent to issue a license by RIDEM given the concerns and
information provided by the applicant. Please deny this license and stop this hazardous project for the sake of the community and the State of Rhode Island.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See V. Issues Related to Storage of Waste
- See XVI. Buffer Zone
- See VII. Hazardous Waste Versus Medical Waste
As a citizen of Kent County, of Rhode Island, I am very concerned about the proposed MedRecycler-RI facility to be located at 1600 Division Road, West Warwick, especially after the public comments zoom meeting March 15, 2021.

First, as established repeatedly during the comments, pyrolysis has never been used with heterogeneous regulated medical waste as the fuel stock. Why experiment here, in this environmentally fragile area? This is unproven, unsafe and untested technology. There is no accurate testing or monitoring that has been, or can be done, to ensure the operation is safe, and “safe” according to what standard? Unknown, by DEM’s own admission. The emissions which will admittedly flow from this facility will not only contain dangerous greenhouse gasses, dioxins, arsenic and heavy metals from the burning of plastics, but other unknown, unidentified pathogens, contaminants and chemicals from the mixed feedstock. TechnoTree has only 3 plants, none of which processes medical waste and Ms. Campanella has no experience in solid waste or medical waste management.

The very nature of the project itself, promoted as “green,” environmentally safe, renewable energy is doubtful. Pyrolysis is not renewable energy, just a different spin on incineration, making it a waste-to-energy project, not renewable energy as defined in RI statutes. This is verified in TechnoTree’s documentation for their South Africa plant, Item 42, Activity No. 4 (4) Category B - Activity No. 4 (5) Category B - Activity No. 4 (8) Category B - Activity No. 4: REASON: The waste will undergo pyrolysis which is considered incineration.

The location of this facility in a densely populated primarily residential/commercial area is inexplicable. In addition to the potentially hazardous emissions is the harm to 2 nearby ponds, streams and even the aquifer. Noise from the generators running at 85 decibels 24/7 is not inconsequential, and should also be a consideration when assessing the impact on the community.

Of tremendous concern are the truckloads of heterogeneous regulated medical waste – plastics, PPE, infectious products, contaminated waste, blood pathogens, chemotherapy drug residue, lab animal carcasses, human tissue and body parts –each load mixed and of different composition. Discrepancies regarding the volume and handling of this toxic and infectious waste are alarming. In the Application for Pyrolysis and Energy Production Medical Solid Waste Treatment Facility/Application Rev. 9 July 28, 2020, the Application states, Section #6 Medical Waste will not be stored on site. March 15, Mr. Campanella again referred zoom meeting participants to the MedRecycler website which declares: “MedRecycler will receive no more than four full truckloads of waste daily, or eight trucks in total.
No waste will ever be stored on-site. It will only be delivered based on a pre-determined, carefully planned schedule determined by the capacity of the facility systems. The waste will be delivered in sealed containers.

In conflict, DEM Notice of Intent to Approve application states that up to 25 trailers of regulated medical waste will be stored (for up to 14 days) as requested in the application process:

**Will Waste be stored at the Site?** The application proposes that medical waste would be stored on site in trailers and in containers within the building. At any time, no more than 20 containers of regulated medical waste shall be stored inside the facility; no more than 25 trailers of regulated medical waste shall be onsite.

The facility is strongly promoted as being safe because it is a closed system, with negative pressure maintained to ensure that no harmful gasses, pathogens or other contaminants are ever released during the waste maceration and pyrolysis, yet these containers of waste can and WILL be stored on site are in sealed plastic bags and cardboard boxes:

“Medical waste will be in sealed plastic bags and contained in sealed cardboard boxes. 2. The boxes of medical waste will be transferred to a temporary holding area after passing a Geiger counter, weighed and then transferred sealed to the Macerator. Boxes will not be opened”. Trailers filled with plastic bags and cardboard boxes are not airtight, nor under negative pressure. How do you monitor and safeguard NO contamination or pathogens are released from these trailers or as the waste is transferred to the holding area? There is nothing in place. Mr. Campanella insists he will alternately "be a good neighbor" and try to keep the odor under control or that there will be NO odor. That is dubious given testimony regarding the defunct Monarch plant in NM. If you can smell odors, then particles and molecules are escaping into the air and environment. The thermal oxidizing scrubbers cited have not been proven to eliminate this risk.

The details of the inconsistencies, deficiencies and omissions in this application and permitting process are staggering. Please consider the legitimate concerns and objections to this project and safeguard the citizens and environment of West Warwick, East Greenwich, Coventry, Warwick, Kent County, and all of Rhode Island and deny this permit. Thank you for your consideration.

Nancy Caldwell

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VII. Transportation of Waste Through the Community
• See VII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XIX Odor Issues
Good morning,

With great fanfare in beautiful Newport on a gorgeous spring day, Governor McKee signed The 2021 Act on Climate. This landmark legislation is designed to safeguard our economy, public health, and natural environment as the bill “establishes guidelines for more aggressive emission reduction policies and calls for a net-zero Ocean State by 2050. It also amends the 2014 Resilient Rhode Island Act by providing updated and enforceable timelines for emissions standards, as well as emphasizing transparency and accountability.”

MedRecycler will add over 21,000 tons of carbon dioxide/year, among other toxins and pollutants, to RI's fragile environment. This is diametrically opposed to the gas reduction goals of the Act on Climate. Please safeguard our health and natural environment and join the effort to move RI towards a safer, cleaner future by denying the MedRecycler permit to use pyrolysis (2 stage incineration) to process regulated medical waste pending before DEM.

Thank you for your consideration.

Nancy Caldwell

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department's Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
To Whom It May Concern:

This letter is to express our objection to the Medrecycler facility that is proposed in West Warwick at the boundary of East Greenwich. As East Greenwich residents and concerned citizens of RI, we formally request that any approval of this type of facility be denied.

Sincerely,

Mr. & Mrs. Joseph Kimball
10 Ridgefield Dr
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
I and many of my neighbors, who are OPPOSED to a MED waste facility in the area or anywhere in the state of RI, were not able to get in on the call as it was full. When will you have another opportunity for us to voice our concerns? There is no way a toxic medical waste facility can be in such densely populated areas with people especially our children all ready getting inundated by toxins on a daily basis by just being alive on this planet. This CAN NOT HAPPEN! Or there will be hell to pay!

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
From: Nancy Waszkis  
nancyw@gmail.com

[EXTERNAL] : Opposition for MedRecycler to build medical waste pyrolysis facility

TO: Rhode Island Department of Environmental Management

Dear Ms. Li:

As a resident of RI, mother and grandmother of RI residents I am vehemently opposed to the proposed facility. It does not belong in anywhere in RI.

Putting unknown technology with the potential of harmful chemicals going into the air is a very dangerous proposition. Industrial facilities malfunction, have accidents and do not always perform as planned. Even a small accident could have a big impact on the surrounding community.

The I95 corridor is heavily travelled going through densely populated areas. Trucks have accidents also and the possibility of having medical waste spilling on our highways and roads is not a safe proposition.

Burning Medical Waste Is Toxic and Does Not Generate Renewable Energy and is contrary to the company’ s claim.

RI needs to retain high regulatory standards to keep the environment healthy and thus RI residents healthy.

Please do not issue the permits for this project to go forward and thank you for your hard work to keep RI safe.

Sincerely,
Nancy Waszkis

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Greetings. I hope this message finds you well. I can greatly appreciate the need to attract businesses to the state of Rhode Island. However allowing this environmentally toxic business which has not proven to be safe or affective anywhere else in the United States is another disappointment for the state of Rhode Island. Please consider the health and well-being of Rhode Island people versus this harmful environmental risk.

“Teach this triple truth to all: A generous heart, kind speech, and a life of service and compassion are the things which renew humanity.” - Buddha

Nancy Zarrella

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)
Nancy.Nordquist Nancy.Nordquist@cox.net
[EXTERNAL] : Please do not approve the MedRecycler Pyrolysis project for West Warwick or Rhode Island

To whom it may concern;

I have recently purchased a condo approximately 1 mile from the proposed site. If I had known that the proposal to have the MedRecycler pyrolysis processing plant so close to the condo had even progressed to DEM approval, I would have seriously reconsidered purchasing property in the area. I probably would not have purchased the property. My concerns are related to risks to the health and well-being of the people in the area, risks to people and the environment associated to the lack of proven safety for the medical waste processing to be included and the apparent lack of mitigations/resolutions/support in place to handle the risks associated to having this proposed site and of course, the resulting possibility of decreasing property values (which will probably negatively impact taxes to the towns).

FINANCIAL STABILITY OF THE STAKEHOLDERS?
During the DEM’s MedRecycler Zoom meeting on March 15th one of the speakers noted that according to their annual report, the company providing the technology is not financially stable enough to pay their bills making continued support for the processing questionable. Where will support come from if the company goes under? Please review the financial stability of the South African company that will be supplying the equipment for this process. DEM and other committees/departments/councils involved with approving this proposal should also provide confirmation on the financial stability of the company, shouldn’t they?

Also, given financial instability, I do not agree with Rhode Island backing a bond for $17,200,000 for the financial support needed for the MedRecycler project. Note: Rhode Island does not need another ‘38 Studios’.

What evidence is there that Pyrolysis facilities are making the profits to support the tax benefit supporters and owners say will be provided?

THE PROPOSAL HAS BEEN ACTIVE SINCE 2019. WHY WAS IT NOT PUBLICIZED UNTIL THIS YEAR?

I have spoken to a number of the people in this area and very few were aware that such a facility was even under consideration so near to our community. If this process is so safe and would be such a ‘good neighbor’ as Mr. Campanella stated, why has it not been publicized until recently? If this process is so safe, why are there so few active implementations in the US given that the process has been available for over a decade?
PROCESS IS NOT FULLY TESTED FOR MEDICAL WASTE – NO OTHER FACILITY USING PYROLYSIS IS PROCESSING SIMILAR MEDICAL WASTE SO THE PROCESS COULD NOT BE TESTED.

From what I have read, my understanding is that the pyrolysis process has not been fully tested with the types of medical waste products that are targeted for the West Warwick facility. If that is correct, I don't think we should approve the proposed establishment of this untested process in Rhode Island or any populated area. I would think that the risks and issues to health and wellness should be known and mitigated or resolved before the permits are even reviewed; never mind approved.

MITIGATION PROCEDURES ARE TO BE IDENTIFIED AND PUT IN PLACE AFTER PROCESS IS IN PLACE?

It is my understanding that the company is proposing to address the mitigation and/or resolution of health and safety risks AFTER the process is up and running. I would have thought that the company should be presenting risks with clear/comprehensive mitigations/resolutions as part of the permitting and review process and before any approvals are received. How and why is this company allowed to bypass establishment of these procedures before DEM review and approval process or any other approval process?

NO BUFFER AREA AROUND THE PROPOSED FACILITY AS REQUIRED

From what I have heard, there is legally supposed to be a buffer area around such a facility to lessen the risk of any negative impacts. There is no buffer with the location of the facility which will be in an industrial park, near a child day care center, across from the New England Tech school, among many residences and very near wetlands behind the facility. How are we protected? Words from Mr. Campanella that the facility will be safe and a ‘good neighbor’ do not seem to be sufficient.

REVIEW AND APPROVAL PROCESS NOT BEING FOLLOWED BY THE COMPANY OWNERS AND SUPPORTERS

It is my understanding from the March 15th DEM ZOOM meeting that required procedures are not being followed and required approvals have not been received to support the DEM review/approval process. If the owners/beneficiaries of this proposal are not following procedures and requirements in the approval process, how can we trust that they would follow procedures to do what they say they will do post implementation? Why are they trying to force this thru?

Please do not allow this Pyrolysis facility to be approved for Rhode Island. Please keep your focus on protecting the environment and Rhode Islander’s safety and well-being over the possibility of 30 new jobs and questionable tax receipts.

Thank you for your consideration in this matter,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See X. Adequacy of Public Notice
Hello,

I just wanted to make sure that you were aware of the RI Legislature’s bill H-5923 currently in committee, that if approved, would outlaw Pyrolysis and other high heat waste processing anywhere in the state of Rhode Island.

Please take that bill into consideration when you are reviewing the MedRecycler proposal for the pyrolysis plant on Division Street in West Warwick. The testimonies in favor of outlawing pyrolysis and other high heat waste processing can be accessed at RI House weighs outlawing pyrolysis and high heat waste processing – Uprise RI [upriseri.com] <https://urldefense.com/v3/__https://upriseri.com/ri-house-weighs-anti-pyrolysis-bill__/>.

Please do not approve the MedRecycler company’s request to have pyrolysis processing in West Warwick or anywhere else in Rhode Island.

Thank you

Nancy Nordquist

175 Pine Glen Drive
East Greenwich, RI 02818
Nnordqui@gmail.com
Nancy.Nordquist@cox.net <mailto:Nancy.Nordquist@cox.net>
401-471-7518 (H)
781-929-6377 (C)

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Hello,

My name is Nic Englehart and my parents live up the street from the proposed Medrecycler facility.

I have over four years of experience in the waste management industry, specifically hazardous waste. This year I will pursue a CHMM certification. I've worked for Newport Biodiesel, Triumvirate Environmental, ACV Enviro, and even RIDEM as an intern. Currently I'm a state employee ensuring chemical safety at URI, where I'm an alum.

Just like DEM, I want a better Rhode Island. However, I'm not naive. I've seen first hand how a hazardous waste management company tried to recycle medical waste. Triumvirate Environmental's Jeannette PA facility was (and likely still is) a far cry from sustainable, despite the expertise of the Boston-based company.

Mr. Nicholas Campanella doesn't have waste management experience. Reminds me of 38 Studios and Curt Schilling, but with serious environmental risks.

Mr. Campanella has never seen this industry, and I certainly don't believe he's ever smelled medical waste in the back of a tractor trailer on a summer day. Neighbors and taxpayers adjacent to Medrecycler deserve better than this.

My mother, Renu Englehart, has been an active voice in opposition to Medrecycler and I've tried to stay out of it as I'm part of the hazmat industry. I recognize the need for disposal options and the need for tax revenue.

Pyrolysis is being green-washed and I'm concerned that RIDEM is taking the bait. Not to mention the millions in state bonds that have been granted...

Have a nice day.

Regards,
Nic Englehart

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See VI. Bond Funding and Project Financing Issues
I am a resident of East Greenwich and I am writing to you to express my concerns about Medrecycler. I am terrified of the impact that this untested technology will have on the health of our residents including the nearby daycare, restaurant, and families living nearby. I also have concerns about the additional traffic and noise from all of the trucks hauling hazardous waste. Please do what is best for the health and safety of the residents of Rhode Island!

Sincerely,
Nichole Curley

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VII. Transportation of Waste Through the Community
Ms. Li,

Thank you for an opportunity to express my grave concerns about Medrecycler-RI, Inc.’s proposed pyrolysis plant for 1600 Division Road, West Warwick, RI. Mr. Nicholas Campenella’s application to DEM, revised July 28 of last year, requests the creation of a so-called “Energy Production System” to operate around-the-clock, “utilizing Medical Waste as the primary source of feed stock” (pg 4). In the application, there are broad claims that emissions will be “well below the Air Toxic Standards regulated by DEM” (pg 7) and earnest promises that “[f]ugitive emissions from the Pyrolysis system […] are very low to non-existent.” (pg 41). The more I learn about the project, the more concerned I become, and the stronger the corollaries grow with the avoidable water crisis in Flint, MI. Flint’s debacle began with simple cost-saving measures (to temporarily divert water from an adjacent river and save public funds by declining to treat it), attended by assurances that the program posed no harm, and yet it devolved into a deadly public health crisis (the water source chosen was more corrosive and subsequently leached lead from the existing infrastructure).

Broadly, the idea of gassifying prions, plastics and poisons in a residential area is revolting. However, the concerns I wish to raise in this letter are with inconsistencies I have found between Mr. Campenella’s statements to the media, Medrecycler’s publicly available promotional pieces and the company’s applications to town and state officials. These inconsistencies cast credible doubt on the veracity of Medrecycler’s sales pitch(es) and, I fear, may result in long-term, damaging consequences for human health and Rhode Island’s environment.

One such inconsistency is competing reports on the volume of medical waste. The company’s publicly released FAQ ([medrecycler.com](http://medrecycler.com/overview/ [medrecycler.com])) promises, “MedRecycler will receive no more than four full truckloads of waste daily.” However, page 47 on ‘Revision Nine’ of their DEM application bumps that estimation up: “Four (4) to Six (6) tractor trailers will come in each day for processing.” Page 52 increases the figure again to “approximately 10 extra truck/trailers entering and exiting the building per day.” Four, six, ten? How high will the total climb?

Another inconsistency is competing claims on storage. The company’s FAQ claims simply, “No waste will ever be stored on-site” ([medrecycler.com](http://medrecycler.com/overview/ [medrecycler.com])). And yet, DEM’s FAQ ([dem.ri.gov/programs/benvironment/waste/pn/medrecycler-fs.pdf](http://dem.ri.gov/programs/benvironment/waste/pn/medrecycler-fs.pdf), dated
February 5, 2021) promise is contradictory, stating “no more than 25 trailers of regulated medical waste shall be onsite.” Is it zero or 25 trailers?

Also, on page 10 of the DEM application, the company notes (employing a tone of appeasement with the term ‘only’), “All calculations are based on 70 tons/day which equate to only four (4) tractor-trailer loads.” Using the math provided by the company, a trailer-load is 17.5 tons, therefore, 25 trailers could conceivably contain 437.5 tons. Is the promotional piece correct (no waste) or is the DEM FAQ/application correct (up to 437.5 tons of stored waste, not including what is inside the facility)?

A third inconsistency is competing claims on emissions. Page 41 of the application assures, “[f]ugitive emissions from the Pyrolysis system […] are very low to non-existent” yet ten pages later, there is a concession that, “[t]here may occasionally be unusual odors” (pg 51). The very definition of ‘odor’ is detection by an olfactory system of molecules in the air. If an odor is detectable, that is evidence that particulates have become airborne. Environmental groups have repeatedly sounded the alarm that pyrolysis emissions include mercury, lead, dioxins and furans.

The Journal of Analytical and Applied Pyrolysis 84 (2009) 95–102 notes that high heat (850°C) mitigates but does not eliminate the generation of toxic contaminants. Experiments performed on “meat and bone meal (MBM)” (Figure 6) show high levels of doxin-furan congeners 123789-HxCDF, 1234678-HpCDF and 123676-HxCDD. The conclusion warned that “[b]oth pyrolysis and combustion processes must be controlled from an environmental point of view considering the pollutants, with special attention to PAHs and PCDD/Fs. In pyrolysis, there can be a significant increase of congeners and/or an increase of the total toxicity due to the redistribution of the chlorine atoms to the most toxic congeners.”

A fourth inconsistency is on competing claims of energy production. http://medrecycler.com/overview/ [medrecycler.com] reads, “Over a 1 year period, the facility is projected to produce 1.2-1.3 MW [megawatts] of clean energy. This is the amount of power used annually by more than 1,000 homes.” That figure has doubled without explanation in Mr. Campanella’s recent statements to the press where, “Campanella said his system can produce up to 2.8 megawatts of ‘clean energy’ using four pyrolysis machines that create syngas to power three generators.”

But a simple Google search of “what can you run with one megawatt?” turns up the answer that two refrigerators could be powered for one single year. Another search result found that “[o]ne megawatt is equal to one million watts, so for one instant, one megawatt can power 1000 homes. A better question to ask is how many homes can a megawatt-hour (MWh) provide with energy for one hour? If one home needs 1 kWh of energy for
one hour, then 1 MWh of energy can sustain 1000 homes for one hour."
(https://www.answers.com/Q/How_many_homes_can_a_megawatt_power
[answers.com]) Theoretically, could 1.3 MW power “more than 1,000 homes,” as
claimed in the company's promotional materials? Maybe: but not for a significant
duration. The claim is misleading at best—especially factoring in the high energy-
consumption required to reach and maintain such high temperatures at the plant,
24 hours a day (pg 10 of DEM application).

There appear to be many broad and blurred divisions between what this
company promises and what independent researchers have found. The human
health and environmental stakes are too high for Rhode Island to be lured with
questionable claims of so-called renewable energy, tax revenue, twenty long-
term jobs and an earnest avowal to ‘trust us; it’s safe.’

Please don’t allow Kent County, RI become the next Flint, MI where future
forensics experts are forced to tease out “What went wrong?” I urge you to
protect RI's environment and residents by declining approval of Medrecycler-RI's
proposed pyrolysis plant.

Thank you, most sincerely, for your consideration.

Nicole Armstrong
150 Maplewood Drive
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the
  Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and
  the Minor Source Air Permit
• See VII. Transportation of Waste Through the Community
• See V. Issues Related to Storage of Waste
• See XIX Odor Issues
This communication is to register my opposition to the MedRecycler facility under consideration for 1600 Division Road in West Warwick, in close proximity to East Greenwich where I am a resident.

My opposition is based on the following reasons:

-the proposed site is in close proximity of a predominantly residential area.

-the majority of the nearby East Greenwich residences are on lots zoned as F1 or F2, which means deliberately low density farm land where rural activities such as animal husbandry are permitted. In other words, this is not an industrial area.

-the technology is experimental and does not offer sufficient safety guarantees.

-proximity to I-95 as a criterion for selection of this site does not take into account the low density, residential character of the area.

-the project developer, Nicholas Campanella, has plans to expand the facility to the entire Northeast region, which would have even greater impact on the traffic and exposure of the adjacent area.

-Nicholas Campanella does not have a track record of environmentally sound practices. His curriculum vitae does not show any evidence of experience with such a facility, nor of a level of education that suggests he has the scientific expertise to handle such a complex and impactful project without causing harm the adjacent communities.

As a responsible taxpayer and an academic researcher, whose work includes education and publication in the field of sustainability studies, I must register my opposition to a profit-driven scheme that poses a serious threat to the environment, safety, residential character, and traffic density of its immediate proximity.

Sincerely yours,

Micheline Nilsen, Ph.D.
Professor of Art History, Emerita
Indiana University South Bend
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XVI. Buffer Zone
Burning medical waste is not the proper method of disposal anywhere. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Noah Hanmer,
130 Sunrise Drive,
BristolRI
nhanmer@fullchannel.net

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Much more testing must be done before this technology is used, especially in residential areas. Please do not put Rhode Islanders at risk. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
TO: Yan Li at yan.li@dem.ri.gov  Office of Land Revitalization and Sustainable Materials Management, RI DEM, 235 Promenade Street, Providence, RI 02908.

RE: Medical Waste Disposal  Please reject the application for proposed Medrecycle-RI Inc Medical Waste Treatment Facility at 1600 Division Road in West Warwick. Where is an environmental impact report? Most problematic is there is no verification from research that ensures the safety of the waste disposal process proposed. And what is the safety record for the companies involved both here in Rhode Island and elsewhere? This company is a subsidiary.

1- Placing a medical waste disposal plant in proximity to a densely populated residential area is risky.
2- Already wind currents bring to this area industrial burn-off and chemical scents from the Amgen Plant located in West Greenwich adjacent to Route 95. In addition, there are more exhausts from increased vehicle traffic on routes 2,4 and 95.
3- As a resident with breathing sensitivities the consideration for increasing potential pollution in our area is disconcerting for myself and others with similar or worse conditions.
4- There are industrial parks in less densely occupied areas that have access to Route 95.

This RI community would be better served if the plant moved to a location with less potential to endanger the health and welfare of Ri residents and more suitable to its production requirements. Norman Nilsen  654 Shippeetown Road East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Densely populated area; risk for nature and health. Should be built away from cities

MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

oezguer aksoy,
5 sparrow ln,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Ms. Li -

I would like to express my grave concerns regarding the proposed Medrecycler, Inc. medical waste incineration site in West Warwick RI.

These types of facilities should not be allowed to establish themselves in residential communities. The industrial park that Medrecycler is being proposed for is very close to residential area.

I respectfully request that the RIDEM deny the request by Medrecycler, Inc. to establish a business like this in West Warwick, as well as all of Rhode Island.

This energy has been consistently found to not be a clean energy source. The developer claims it is but this technology has been criticized as being inefficient, because it takes so much energy to superheat the waste. But even more critically, it’s unsafe and has concerning health implications. Pyrolysis is used to burn other types of waste in other locations in the US, but medical waste would be a new use and one that should not be tested on any RI residence. Deliveries will not be inspected daily at this facility, with medical waste bags going directly into the incinerator unopened.

Thus, there is no way for the community to know what is being sent and incinerated there in order to ensure it’s not radioactive or otherwise harmful. There is no way to be sure there will be no smell, as Developer stated himself on a recent call. His response that the area is zoned industrial is very concerning. There is a childcare center right next door as is NEW Tech Campus. This is not the kind of development Rhode Island needs, and the people of West Warwick and East Greenwich specifically, are not interested in being guinea pigs for this technology. Please protect our children.

Please do not approve this facility in our towns.

I thank you for your attention to this matter and look forward to discussing it further at the Open Comments meeting on March 15th, 2021.

Sincerely - Olga Trimmer
East Greenwich, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Burning any type of waste is toxic to the health and environment of neighboring communities. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

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• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Olivia Synoracki,
62 Summer Street,
Boston MA
osynoracki@clf.org

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
From: (Name) From: (Address)
Pam Kershaw pbkershaw@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

The real question is: why should waste be burned in WW??? Too many folks will be affected by the toxins. Population density too high. This small town has endured enough over the past years. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Pam Kershaw,
20 Intervale rd,
West warwickRI
pbkershaw@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Dear Mark,

On behalf of myself and North numerous North Kingston residents I am writing to request support to oppose the medical recycler plant. How dare the Department of Environmental management think that we have the resources, space, and need to take on toxic medical recycling?

We as the smallest state can not responsibly or safely receive contaminated waste! Suppose a virus was spread through the containers to the public? We have an important fishing industry, water ecology and shoreline that are way too vulnerable to contamination.

This plant would jeopardize OUR natural resources, public Health and in trade only economically benefit a few who likely won’t be accountable for future disasters they could cause.

Mark, please Say NO to MedRecycler today and forever.

Respectfully, Pamela E Powers

PS Please remember we had medical waste in the Narragansett bay from New York City in the 90s!
This waste will be closer.

The Public Hearing on 3/15/2021 at 4PM via Zoom can be accessed using the link below: https://urldefense.com/v3/__https://us02web.zoom.us/j/5211383116__;!!KKphUJtCzQ!Y uUzLrtqk-eF4d2MdPH1wtbYtlczgPzxal4B8EJkm84SVLrPl8we3AUaEYZElvuJnrXb$[us02web[.]zoom[.]us], Meeting ID: 521 138 3116 Or by phone at: 1-929-205-6099 The application and additional materials can be found at our web page.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)
Pamela Pennine pampennine@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste
treatment application
We need to start cleaning up our environment not adding to it!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Pamela Pennine,
420 Woodward Rd,
Providence RI
pampennine@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Hello,

I was unable to gain access before 4pm to the public comment hearing regarding Medrecycler. The meeting was at full capacity. Do we really need another ciba-geigy, American hoerchst, and Johnston landfill all in one and in the wrong place?

Please keep me on the list should there be a continuation because the number of attendees was so high. Thank you

Pamela Monaghan, MA, MEd

Sent from Mail [go.microsoft.com]

for Windows 10

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IX. Limitations on Attendees at Public Hearing
Hello,

I am writing to ask you to please review all motives regarding the Medrecycler application. The primary person involved in this has been involved in counterfeit Covid protection equipment (as in potentially killing humans for monetary gain). I am seeing Rhode Island’s next “38 Studios” debacle and tax fraud, as well as the next Johnston Landfill/Picillo Superfund site all rolled into one. Rhode Island, with its pristine open space, oceans, premier class A waterways, is simply not the place. Our state’s environmentalists have done so much work, your department D.E.M. has lead the nation with its wetlands regulations, etc. and further more, we have the most dysfunction intersection at the mid-state being Route 2 and Division road with no easy highway access to 95 south and this is where we’re going to allow a major environmental/infrastructure impact?!

Please, please, consider all the ramifications. Thank you.

Pamela Monaghan, MA, Med

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
[EXTERNAL] : Inability to participate in public hearing
March 15 4pm due to imposed capacity limit
Hello Mark Dennen,

This email reiterates and documents my concern for being unable to participate in the public process regarding Medrecycler which was held on March 15, 2021 at 4pm. Due to the imposed capacity limit, I was unable to log on at 3:55pm because the “room” was full. Thank you for addressing this issue.

Pamela Monaghan, MA, MEd

DEPARTMENT RESPONSE:
• See IX. Limitations on Attendees at Public Hearing
Good afternoon.

I am submitting this email on behalf of myself and my wife, Donalda M. Pare, as part of the record and as our public comments in opposition to the above referenced application (the “Application”). We own and reside at the property located at 70 Fox Run in East Greenwich, RI 02818, which is located in a residential development commonly referred to as Signal Ridge—in close proximity to the medical waste treatment facility (the “Facility”) proposed by Medrecycler-RI, Inc. (the “Applicant”) at 1600 Division Road, West Warwick, RI (the “Site”). The Signal Ridge residential development is located across Division Road from the Site and adjacent to the East Greenwich Golf Course. Based on the public hearing held on March 15, 2021 (the “Hearing”) via Zoom, we understand that the Rhode Island Department of Environmental Management (the “Department”) will include and respond to public comments submitted on or before April 14, 2021.

By way of background, I am a practicing attorney and I devote a considerable amount of my practice to land use issues, primarily representing developers. With that in mind, I can assure the Department that my comments are not based on any sense of “NIMBYism” (not it my back yard). I have reviewed the Application materials made available to the public and read the transcript of the Hearing and I am struck by the lack of engineering details, the lack of operational plans, the utter lack of any experience by the Applicant and proposed operator of the Facility, the lack of standards for the installation and operation of this experimental Facility, and the significant procedural shortcomings with the Application. The bottom line is that the Application is not properly before the Department for review and the Department should either afford the Applicant an opportunity to withdraw the Application, without prejudice, or summarily deny the Application for each or all of these reasons. The Department can then take the time, in the public interest and based upon a sound engineering review, to promulgate regulations and standards for this type of Facility. Likewise, the Applicant can then take the time to properly engineer, with appropriate details, and submit a proper Application that satisfies sound engineering standards, with an operator demonstrating the experience necessary to properly and safely operation such a Facility. The risk for permanent damage to the area and surrounding communities is just too high.

My review of the Application leads me to the conclusion that a manufacturer of equipment and an entrepreneur have partnered and submitted the Application without the necessary engineering and safety procedures in place. Likewise, it appears that the State of Rhode Island, through a funding agency, will provide financing. The Application reminds me of an early stage business pitch by an investor group; I don’t blame them for trying but the Facility is much more complicated than a business pitch. I’m confident
that the Department views with skepticism safety “guarantees” from the Applicant, especially with little to no engineering support. If the Applicant is sure of the safety to the point of making such “guarantees” at the Hearing, I would expect respectable environmental engineering firms would be willing to support such assertions. Based on the transcript of the Hearing, it appears that a well-respected engineering firm, which reviewed the Application on behalf of the Town of East Greenwich, would have reached such a conclusion to put all of these neighborhood concerns at ease. They did not do so, however, and it’s clear why: the Application lacks the necessary and foundational engineering support.

While there must always be a first time application of newly innovated technologies, it would appear that this technology, in this instance, has indeed been used in the past—but for purposes other than treating medical waste. I see very little publicly available information on operating plants in the United States or abroad, and I would expect that the Department would seek out information on any existing or previous operating plants by reaching out to those localities. Absent such information in the record, questions abound. Does the Department know the impact that operations of these plants have on their surrounding communities? Does the Department know why these facilities are no longer operating? Were there odors? Were there violations of, or other compliance issues with, regulatory standards? Was this technology used on medical waste? Is this technology safe? Are the safety plans adequate for storage, even if temporary, accidents, fires, explosions, operator errors, etc.? Sound engineering addresses the “what ifs” to mitigate risks and to protect surrounding communities. If the engineering is sound, the Application must be exposed to a peer review to determine if the Facility will be as safe as the Applicant, without support, has asserted. As noted above, the Town of East Greenwich hired a well-respected engineering firm which noted that the Application contained no details on day-to-day operations and lacked testing protocols, and even found that it was unusual that the Application was proceeding. Clearly, the Application remains incomplete, and we are confident that the Department will base its decision on the evidence submitted.

As the Department certainly knows, Section 23-18.9-8(a)(1) of the Rhode Island General Laws imposes standards on the issuance of a license for the Facility, “affording great weight to the detrimental impact on the placement of such a facility shall have on its surrounding communities.” Those of us in one of the surrounding communities are rightfully concerned with the odors, health impact from emissions, storage of medical waste—even if temporary, and unanticipated accidental occurrences; the impact on our local businesses, including a restaurant and day care; the impact on nearby water resources; and the impact on nearby property values. In order to provide the Department with additional and substantial evidence regarding the statutorily required detrimental impact of the Facility on surrounding communities, I have attached an opinion from a well-respected, licensed, and certified real estate appraiser, which concludes that the “values of the Fox Run properties would be negatively impacted by between 10% to 15% due to the proposed [F]acility.” We expect that this would provide the Department with clear and substantial evidence of the detrimental impact that the Facility has on the
surrounding communities. Mr. Valentine’s credentials and qualifications are also attached, and the Department is familiar with his work.

Moreover, the Application suffers from a fatal, procedural flaw: the Application is not properly before the Department. As required by Section 23-18.9-9(a)(1), no final approval from the Town of West Warwick was submitted nor was the approval of the State Planning Council ever secured, which would have required an analysis of alternative locations for the Facility. These procedural defects are based on the express language of the statute, as well as its overarching spirit and intent. After reviewing the West Warwick Zoning Ordinance (the “Ordinance”), the use, as it has been couched, appears to be considered allowable under Section 5.21 entitled “Green, renewable or alternative energy installation and facilities, (green project)”; however, the primary and necessary use as a medical waste treatment facility is not an allowed use in the Ordinance—a most important fact that appears to have been entirely ignored. These statutory prerequisites are important milestones that should not be dismissed on an interpretation of undefined and ambiguous word usage – the statutory process is designed to properly vet the Application for the Facility, a task the Department has historically and ardently undertaken. We urge the Department to follow suit here.

Finally, we are all painfully aware of what happens when entities self-police; and in this instance where no standards exist, the entire State of Rhode Island should be concerned. As neighbors, we will be left to seek enforcement of the law after the fact and/or live with the results of a potential disaster. Before reaching that untenable result, however, the Department must have the Applicant first prove that the Facility will be safe, based on sound engineering and appropriate standards promulgated by the Department. The Department is charged, primarily, with protecting the environment and serves as the “chief steward of the state’s natural resources.” This project cries out for the Department to act in that role. The support for this project is grounded in a pitch for economic development, an issue that has no bearing on and should
April 9, 2021

Mr. Edward Pare, Esquire
70 Fox Run
East Greenwich, RI 02818

Re: Impact on Area Property Values
   Due to Proposed Medical Waste Pyrolysis Facility Located at 1600 Division Road, W. Warwick, RI

Dear Mr. Pare:
At your request, I have conducted the required analysis and drawn certain conclusions as to my opinion of the impact on area residential properties due to the proposed Medical Waste Pyrolysis Facility to be located at 1600 Division Road, West Warwick, RI. I understand that you own and live at 70 Fox Run, East Greenwich, RI 02818 and requested my expert opinion. Your house is located off Division Road which separates West Warwick from East Greenwich.

Based upon my research, it is my professional opinion that the proposed facility will create diminished values of surrounding residential properties due to External Obsolescence.

External Obsolescence
The definition of external obsolescence, “is an element of depreciation; a defect, usually incurable, caused by negative influences outside a site and generally incurable on the part of the owner, landlord, or tenant.” Further review of definitions is Economic Depreciation, defined as, “loss of value from all causes outside the property itself.” Various external factors affect potential economic returns, thus having a direct impact on the market value of a property.

The methodology that would typically be utilized in valuation impact studies is based upon a comparison of sales of single-family residences located in close proximity to an existing negative externality to sales of similar properties in similar neighborhoods without exposure to such an externality. This technique is known as “paired sales analysis” and is widely accepted as a method of determining the impact, if any, on property values due to the influence of external factors.

Mr. Edward Pare, Esquire
70 Fox Run
East Greenwich, RI 02818
In the case of the subject, the externality is the proposed Medical Waste Pyrolysis Facility to be located at 1600 Division Road, West Warwick, RI.

It is my opinion, that the neighborhood will be stigmatized due to the level of public opinion, media attention, comments by local and state officials condemning the proposal, and the untested nature of the medical waste pyrolysis facility.

In the course of my research, I reviewed the comments included in the RI DEM Medical Recycler Permit Public Hearing transcript of March 15, 2021. Paraphrased comments from the testimony include State Representative Justine Caldwell (District 30), who testified in opposition to the proposal, as were the vast majority of her constituents. Representative Caldwell cited a fire in a metal scrap yard on Allens Avenue in Providence. She questioned what the implications if medical waste stock pile caught fire, particularly because the applicant has not agreed to spot check the contents of the waste materials.

State Senator Valverde echoed Representative Caldwell’s concerns over the proposed facility. His constituents were concerned about a medical waste facility adjacent to their children’s daycare, the harmful greenhouse gas emissions, the proximity to wetlands, lowered property values, and increased traffic congestion.

From a real estate value perspective, the level of negative public opinion coupled with the high level of media attention created over this application, will create a level of awareness that will impact prospective home buyer’s decisions regarding the Fox Run neighborhood. This will effectively stigmatize the neighborhood due to the external obsolescence created by the proposed Medical Waste Pyrolysis Facility.

It is my opinion that the values of the Fox Run properties would be negatively impacted by between 10% to 15% due to the proposed facility.

Respectfully submitted,

George F. Valentine

VALENTINE APPRAISAL ASSOCIATES
QUALIFICATIONS OF GEORGE F. VALENTINE

Office: PO Box 4541, Middletown, Rhode Island 02842
Phone (401) 465-3153
E-mail Valentineappraisal@gmail.com
Experience: Residential and Commercial Property Appraiser, 1992 to present

Certification: Rhode Island General Certified Real Estate Appraiser: Certification No. CGA.0A00682 
Massachusetts General Certified Real Estate Appraiser License No.: 5581

Education: New England College, Bachelor of Arts, Business Administration

Appraisal Courses and Seminars Attended and Successfully Completed:

- Course 101 Introduction to Appraising Real Property
- Course 102 Residential Property Valuation
- Course 1BA Capitalization Theory and Techniques
- Course 510 Advanced Income Capitalization
- Course 520 Highest and Best Use and Market Analysis
- Course 550 Advanced Applications
- Course SPP Standards of Professional Practice, Part A
- Course SPP Standards of Professional Practice, Part B

Seminars
- Impact of Lead Paint
- Condemnation by the State Department of Transportation
- Feasibility Analysis & Highest and Best Use Analysis
- The Valuation of Industrial Properties
- Appraising Apartments
- Market Extractions
- Residential Appraisal: Confronting Environmental Issues
- Argus Training
- Report Writing
- Land Use Planning and Eminent Domain in Rhode Island
- 2001 USPAP Update

University of Rhode Island Courses:
- Course Res. 048, Law for Real Estate Title

Examiners

Member: RI Commercial Board of Realtors
- National Association of Realtors
QUALIFICATIONS OF GEORGE F. VALENTINE

Qualified RE Expert:

Rhode Island:     Portsmouth, Newport, South Kingstown, New Shoreham, Tiverton, Portsmouth, Middletown, North Kingstown, Glocester, Lincoln, Charlestown


Significant Clients:

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VI. Bond Funding and Project Financing Issues
• See XI. Monarch Pyrolysis Facility in New Mexico
• See XVI. Buffer Zone
As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick. Pyrolysis, which has been called a “high risk, low yield processes for waste management,” (GAIA 2017) is a potentially hazardous technology that is inappropriate for a residential neighborhood. The nearby residents of West Warwick and East Greenwich -- who bear all of the risks of this dangerous technology, both for human health and the environment -- would have no control nor even knowledge of the hazardous waste imported to our towns every day. Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We are concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis: carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. Given the two daycare centers and a college in close proximity to the proposed site, it is shocking that a facility emitting lead alone would be allowed to operate nearby. Additionally, with residential neighborhoods surrounding the site, we are especially concerned about the health effects of dioxins -- known to cause cancer, liver and endocrine damage, infertility, birth defects, and environmental harm -- and the potential for radioactive waste to come to the facility (www.epa.gov/dioxin [epa.gov]).

During DEM’s January 25, 2021, Public Informational Workshop on Facility’s License Application, project developer Nicholas Campanella admitted that he intends to expand the facility to accept medical waste from throughout the northeast; he said that he chose this site partly due to its proximity to I-95. West Warwick and East Greenwich are not a highway off-ramp for hazardous waste. We are communities of kids, parents, and elders -- including childcare centers, higher education, local businesses and residential neighborhoods in close proximity to the MedRecycler proposed site.

As residents who are deeply rooted in our hometowns -- personally, professionally, financially, and historically -- our voices of opposition should be heard in contrast to the developer, who wants to come to Rhode Island from New Jersey to bring technology from South Africa that is previously untested on medical waste. Those of us who live in East Greenwich, including several neighborhoods that would be directly impacted by emissions from this facility, feel particularly disenfranchised by this ostensibly democratic process. Given that the facility’s driveway and access roads are actually in East Greenwich, as Rep. Justine Caldwell has stated, East Greenwich “will have the emissions … and the questionable material being brought into the area without anyone on the receiving end ensuring that it is safe and that its contents are what it purports to be. It is unconscionable that our town leaders would have no standing in this matter when the abutting properties are in East Greenwich.”

We encourage DEM to apply the Precautionary Principle, an established tenet of environmental law, to this decision. Since pyrolysis has never been used to treat medical waste, the true risks
are currently unknown. The residents of West Warwick and East Greenwich do not consent to
our children, our families, and our neighborhoods being used as guinea pigs for an untested
technology, which could cause unknown harm. What happens if there is a malfunction, an
accident, a fire, or unpredictably harmful emissions from this plant? How do you reverse that
damage? Once the children at the two nearby daycares are exposed to lead from the
MedRecycler facility, how do you undo that harm? The answer is: it is impossible. Therefore,
DEM should err on the side of caution to protect human health and the environment.

“When an activity raises threats of harm to human health or the environment,
precautionary measures should be taken even if some cause and effect relationships are
not fully established scientifically. In this context the proponent of an activity, rather than
the public, should bear the burden of proof. The process of applying the precautionary
principle must be open, informed and democratic and must include potentially affected
parties. It must also involve an examination of the full range of alternatives, including no
action.”


The fact is, there is nothing “green” or “recycled” about MedRecycler. Pyrolysis is barely
distinguishable from a medical waste incinerator with a greenwashed name, and medical waste
incinerators are notoriously toxic, polluting facilities that are inconsistent with residential
communities. This is the definition of regulated medical waste:

● Pathological waste . Tissues, organs, body parts, and body fluids removed during surgery
and autopsy.
● Human blood and blood products . Waste blood, serum, plasma and blood products.
● Cultures and stocks of infectious agents (microbiological waste). Specimens from
medical and pathology laboratories. Includes culture dishes and devices used to transfer,
inoculate, and mix. Also includes discarded live and attenuated vaccines.
● Contaminated sharps . Contaminated hypodermic needles, syringes, scalpel blades,
Pasteur pipettes, and broken glass.
● Isolation waste . Generated by hospitalized patients isolated to protect others from
communicable disease.
● Contaminated animal carcasses, body parts and bedding . From animals intentionally
exposed to pathogens in research, biologicals production, or in vivo pharmaceuticals
testing.

Especially now, in the age of super-infectious COVID-19, these are not appropriate materials to
import to this site. On the same January 25 call, Mr. Campanella admitted that he plans to start
by processing 70 tons of medical waste/ day, but he chose this site partly because he can expand
in the same building to accept up to 140 tons/ day. Industrial facilities are as imperfect and
fallible as the humans who manage them. They malfunction, have accidents and do not always
perform as planned. With the predicted volumes of hazardous waste, even small accidents can
have a big impact on the surrounding community. We are concerned about machine
malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety,
environmental harm (air, water, wildlife and ecosystems), and the health of all of the people who
live and work near or downwind of this site.

Rhode Island’s medical waste regulations germane to pyrolysis (specifically sections
250-RICR-140-15-1.F.5.a(3) and (4) concerning the approval of “Alternative Technologies”)
require that for DEM to approve any alternative technology to treat medical waste, the
technology must be “proven, on the basis of thorough tests to: . . . (3) Be protective with respect
to total impact on the environment; and, (4) Ensure the health, safety and welfare of both facility
employees and the general public.” MedRecycler -- with so many unknowns about the technology itself, combined with the unquestionably hazardous nature of the materials being treated -- clearly does not come close to reaching that bar. Furthermore, we want to stress that our opposition to this facility does not rest on the “Not In My Back Yard” theory of local protectionism. Rather, this facility does not belong in anyone’s backyard. Zooming out from the local perspective to a statewide, national, and even global view, the facts are clear that our state, nation and world are experiencing a climate crisis. It is long past time to reject the polluting technologies of the past, such as burning plastics and other wastes that contribute to climate change, and look to a truly greener future. In fact, Rhode Island is in the midst of debating whether to strengthen our greenhouse gas emission limits with the new Act on Climate bill, currently pending in the legislature. In her recent State of the State address, Governor Raimondo said, “Rhode Islanders can be proud that we are the state leading the nation in the fight against climate change.”

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state, we care deeply about the wellbeing of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the profits of this speculative developer, and deny any permits for MedRecycler.

Thank you for considering our comments. We look forward to the March 15 public hearing on this matter.
Sincerely,

Patricia A. Buonaiuto
285 Sanctuary Drive
East Greenwich, RI 02818

pabuonaiuto@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
EXTERNAL] : Medical Waste Plant in West Warwick
Patricia Keefe <keefe299@gmail.com>

I am opposed to the location of this proposed facility due to the hazardous elements that will be streamed into our somewhat clean air.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Sent from my iPad

Begin forwarded message:

From: Didem Kokturk <didemkokturk20@gmail.com>
Date: April 4, 2021 at 7:57:32 PM EDT
To: pserpa2004@cox.net
Subject: MedRecycle-RI

Hello
I wanted to write to you regarding the MedRecycle-RI that is planning on moving within 2 miles of the condominiums at Greenwich Estates in West Warwick.

At first look this company seems to be a great solution to managing waste but I’m very concerned about the potential hazard that it will pose to our community due to its proximity to our homes, businesses, and schools.

A facility like this which has never been used to process medical waste of this magnitude does not belong in our community. We don’t know the impact that it will have on the air that we breathe and the water we drink, not to mention the noise pollution that a facility of this magnitude will create.

I urge you to reconsider allowing this company to use our town and our state as their test site.

Thank you for your time
Sincerely

Didem Kokturk
--

Didem Kokturk Fine Art
didemkokturk.com [didemkokturk.com]

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See I. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
Dear Dr. Li and Mr. Deneen:

Please accept this email as my official objection to the pyrolysis company MedRecycler as it attempts to conduct its unpleasant business in the beautiful residential areas of West Warwick and East Greenwich. This is a rather densely packed, family populated section where those of us who live here chose it because it is so conducive to raising children, having good schools and having quick and convenient access to highways and other conveniences. It is appalling to me that a company such as this would dare to impose its presence on us. Our quality of life will be forever changed.

Most of us understand why DEM had to grant the initial permit to MedRecycler to proceed. Since that time the residents here have vociferously made their objections to any additional permitting known very clearly. We worry about the negative effects of this business on the air we breathe, the playgrounds our children and grandchildren play outside on, the daycare center our little ones attend, the great potential for industrial accidents, burning, highway accidents and toxic spills so close to us and the yet-unknown effects of the water we drink after runoff from both inside and outside of the facility. Even hosing down the pavement at the truck unloading areas at the end of the workday causes runoff. That water eventually seeps into the soil and finds its way into the earth.

Residents worry about the potential for unpleasant odors in the area. We know that West Warwick officials informed MedRecycler that it could not bring in 25 truckloads of waste per day. I believe that the revised plan allows for eight trucks maximum. During an extended heat wave of six, seven and eight humid days at temperatures of 95 degrees or more, it stands to reason that foul odors are almost guaranteed to emanate from those trucks. Given the contents of the trucks, one cannot reasonably except complete odor control. The use of outdoor swimming pools, backyard cookouts and holiday parties can all expect to be cut short. Given that we have all spent the last year in quarantine and mostly indoors, we should be confident that our outdoor recreational activities will not be spoiled by rotten odors. Please consider our quality of life as you deliberate additional permitting or licensing.

You have all heard about the lack of experience surrounding this process. DEM scientists understand better than we do about the questionable alleged safety of incinerating contaminated medical waste at temperatures of 800 degrees or more. There are unknowns about the long term environmental dangers. Possible negative consequences on the human and animal populations in the area are a huge unknown. The possible consequences for women of childbearing age are open to speculation. No one can guarantee that even minimal exposure to pyrolysis will not harm them or their yet to be born babies. No one can guarantee that a newly conceived baby will not be impacted by this exposure. The rest of us simply worry that the entire operation is just too
problematic. There may even be problems that we have not thought about yet. Who knows for sure what may be discovered ten or more years from now and will be linked directly to this facility? As the present staffing at DEM, please do not risk your own legacy for this novice process.

I apologize for the length of my communication. I have been inundated with phone calls, emails and personal conversations from constituents, neighbors, friends and relatives. Every single one has expressed fear and worry about this facility. As their state representative and as a resident of this area myself, all I can do is to advocate for their interests. Only DEM can put their fears to rest.

I trust that you will ultimately make the right decision grounded in science. Perhaps you could consider a recommendation that this company could look at the Quonset Industrial Park. It is a wide open space and far away from residential areas. There are other options I am sure. Quonset immediately comes to mind.

Thank you for your thoughtful service to our beautiful State of Rhode Island.

Sincerely,
Patricia A. Serpa
State Representative District 27
West Warwick, Coventry, Warwick
Chairwoman House Oversight Committee

Sent from my iPad

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIX Odor Issues
Good evening,

My written testimony regarding the RI DEM Permit Application for a medical waste incinerator to be sited at 1600 Division Road in West Warwick is attached.

Thank you for submitting this document to your record.

Patricia Taylor

--

Patricia Taylor (she/her/hers)
Director of the Plastics And Waste Reduction Project
Environment and Human Health, Inc.
www.ehhi.org/plastics.php [ehhi.org]
<https://urldefense.com/v3/__http://www.ehhi.org/plastics.php__;!!KKphUJtCzQ!fiAXMd8PdyVfg5QOsddr7ZY_5zCvg0-Kcfos4fGR3qF1Ym9mnQq8dg_oWZVEhxqRxMe$>

Telephone: (203) 227-4100
Mobile: (203) 856-3544
ptaylor.ehhi@gmail.com <mailto:ptaylor.ehhi@gmail.com>
Testimony of Patricia Taylor
Director of the Plastics and Waste Reduction Project, Environment and Human Health, Inc.

The proposed medical waste incinerator you are considering to permit expects to process a significant amount of plastics.

EHHI is concerned about the incineration of plastics because of emerging and ongoing science on the health impact of our exposures to plastics and plastic waste. In addition, fine particle pollution presents an ongoing environmental and climate crisis from local to global communities.

We also caution that PFAS — fluorinated chemicals that cause a host of human health harm in very low doses - are used to make medical products that include:

- Surgical gowns and drapes
- Implantable medical devices, like vascular grafts
- Stent grafts
- Surgical meshes
- Heart patches
- Catheter tubes
- Sterile container filters
- Needle retrieval systems
- Tracheostomies
- Catheter guide wire for laparoscopy and inhaler canister coatings, and others.

Should you allow this permit, you must protect the health of vulnerable residents who may be exposed to these harmful compounds in air, ash and water pollution created by the facility.

If that is your plan, then residents warrant notification in real time if the air, soil or water in their community may cause them harm.
Please make any air, soil and water quality monitoring test results you require as part of your permitting process to be immediately, easily and continuously available to the public, either in the form of a reverse 911 system, or through a health disparities map you produce in coordination with your state health department.

Thank you for your attention,

Patricia Taylor
Director of the Plastics and Waste Reduction Project Environment and Human Health, Inc. (EHHI) March 15, 2021

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Ms. Li and Mr. Dennen,

I am a RI licensed physician and a resident of East Greenwich. I write to express my opposition to the proposed MedRecycler Medical Waste Treatment Facility at 1600 Division Road.

While I am a strong proponent of creating jobs for Rhode Islanders, and want to support local businesses in our community, after extensively researching the proposed facility, I have grave concerns about its safety. There are far too many unknowns about the short- and long-term health risks associated with this waste technology. I believe it is would be a terrible mistake to allow this business to move forward without much more research into its potential dangers. Too many times we have seen devastating diseases including various cancers, inflammatory conditions and pulmonary disorders, arise from in populations that live in close proximity to industrial waste sites such as this.

I implore you to put the health and safety of our residents first and to deny the licenses to allow this business to move forward.

Sincerely,
Paul Christopher, MD

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: Paul Garcia  
plgarcia73@gmail.com

Yan Li,

This email is to show my support for the MedRecycler project in Rhode Island. The entry of this project will bring much needed tax revenue and jobs to Rhode Island. In addition, MedRecycler brings eco friendly technology to the State. We encourage you look closely at their alternative energy efforts and give them the green light to move forward with this project.

Thank you for your consideration,

Regards,

Paul Garcia  
Clean Energy Enthusiast

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)
Paul Liu paulyliu@cox.net
[EXTERNAL] : Med Recycling Plant in West Warwick
Dear Mr/Ms. Li,
I am writing to oppose the proposed location of the medical waste facility in West Warwick. I confess that I am being somewhat hypocritical since I work at Lifespan and am partially responsible for the generation of some of the medical waste that needs safe disposal. However, my fear is that the potential toxic side effects have not been delineated with respect to the effluent that will be emitted. My understanding of the process is based on a thorough perusal of an article by Can and Du (Cai, X., & Du, C. (2020). Thermal Plasma Treatment of Medical Waste. Plasma Chemistry and Plasma Processing, 1–46. Advance online publication. https://doi.org/10.1007/s11090-020-10119-6 [doi.org]

Much would depend on what safeguards are in place to “scrub” the emissions from the incineration of the waste. My concern is that this process is used in countries like India and China, not exactly paragons in terms of protecting their citizenry from horrific air pollution. Please register my strong opposition to this plant. Help protect our health and safety.

Regards,
Paul Liu, MD, FACS
Professor of Surgery
Alpert Medical School of Brown University
Resident of East Greenwich

DEPARTMENT RESPONSE:
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hi Yan,
Now, more than ever, it is critical for Rhode Island to protect and preserve its natural beauty and environmental resources.

Please consider the unknown environmental impact that this Medical Waste Facility will have, as well the negative message it sends to residents of Rhode Island. Rhode Island needs a win, a positive news story, something to be proud of.

Please honor the office of the DEM by voting against this facility and standing up for what is best for the community and the State.

Thanks,

Paul Provencal
oelker Drive, Warwick RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
I would like to voice my opposition to approval of the medical waste license application for the proposed MedRecycler-RI Inc. facility at 1600 Division Rd. in West Warwick, RI. Living three miles from the site I have concerns about location of the facility and the environmental impact. In allowing an facility with an untested process especially for application to medical waste RI DEM jeopardizes the health, safety and welfare of ALL Rhode Island residents.

From various resources I have learned the following:
- Pyrolysis is an untested process on medical waste.
- There is no comparable facility in the United States to evaluate emissions.
- The location does not provide the state statute regulation of a buffer zone of “undeveloped, vegetative land retained in its natural, undisturbed condition or created to resemble a natural occurring vegetative area”.
- The location is in extreme close proximity to a child daycare, a residential neighborhood, a college dorm, a golf course, a restaurant, and other businesses located in and near 1600 Division Rd.
- The applicant did not submit the required certificate of approval from the State Planning Council.
- The applicant did not submit the “certificate for final determination that the site conforms with local land use laws from West Warwick” as required by the solid waste statute.

I am concerned that Rhode Island DEM does not have the resources to monitor a facility of this nature for safety concerns such as:
- syngas emissions containing carbon dioxide, heavy metals, dioxins, etc.
- spot checking waste coming in for cancer causing chemo therapy chemicals
- a disposal plan for tars, oils and ash under normal operating conditions and especially in the event of a fire or accident
- contamination of well water in the area
- contamination of nearby wetlands and ponds served by Fry Brook
- a contingency plan for medical waste trucks arriving or waiting for disposal during an unexpected shut down.
Incineration, gasification, pyrolysis, call it what you want, but do not call it green. Per the Rhode Island DEM website, “Our mission put simply is to protect, restore and promote our environment to ensure Rhode Island remains a wonderful place to live, visit and raise a family.” I beg you to chose the health and environment of Rhode Island families over the profits of a developer who has ZERO experience in waste management by DENYING the medical waste license for MedRecycler-RI Inc.

For these reasons I ask that the Department of Environmental Management to DENY the application from MedRecycler. I appreciate you kind attention to this issue.

Paul Rickert

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XII. Department Staffing Issues
- See XIV. Buffer Zone
ARE YOU KIDDING !!!?? MY FAMILY VEHEMENTLY OPPOSES THE PROPOSED DIVISION STREET MEDICAL WASTE FACILITY BECAUSE IT IS MUCH TOO CLOSE TO RESIDENTIAL PROPERTIES AS WELL AS SCHOOLS/DAYCARES AND FOOD ESTABLISHMENTS. IF ALLOWED TO BE BUILT, I BELIEVE THERE WILL SOON BE DAMAGES AND ASSOCIATED LAWSUITS BY THOSE AFFECTED. IS THIS REALLY THE BEST PLACE TO PUT SUCH A FACILITY ??? NO ! POTENTIAL JOBS AND LANDFILL REDUCTION WILL NOT REMOVE THE DISGUSTING AND SCIENTIFICALLY UNSOUND PRACTICE BEING PROPOSED. IF ALLOWED, ONE OF THE NICEST RI TOWNS (WHICH BRINGS IN A LOT OF TAXES AND REVENUE FOR THE TOWN OF EAST GREENWICH) WILL BECOME A TRASH TOWN. WILL THIS PROPOSED FACILITY EVEN PAY TAXES?? AND IF SO TO WHICH TOWN—EAST GRENWICH OR WEST WARWICK ??? UNBELIEVABLE HOW THIS RIDICULOUS PROPOSAL COULD HAVE EVEN GOTTEN SO FAR WITHOUT LOCAL RESIDENTS AND REPRESENTATIVES KNOWING —WHO WAS KEEPING SUCH AS SECRET ?? AND WHAT OTHER SECRETS ARE THEY OR WILL THEY KEEP ?

NO WAY SHOULD THIS BE ALLOWED !

PAULA CALITRI

LIFELONG EAST GREENWICH RESIDENT

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See X. Adequacy of Public Notice
meeting questions

Thank you for the opportunity to submit questions in advance of the March 15, 2021, DEM Office of Land Revitalization and Sustainable Materials Management hearing regarding the subject matter.

- [Department note; As the commenter asks a number of specific questions some responses are below in red.]

* What facility prototype is Medrecycler modeled after? Who is the designer? The Applicant’s name and the stamp of a Rhode Island Registered PE are shown in the application.

* What is the anticipated site staffing and what level of education and training is required for each position? While our regulations do allow us to require training plans, applicants are not required to list every particular job in the application.

* Will this facility/company receive any state or federal assistance in the way of grants, subsidies, or tax relief in connection to any aspect of the business? See VI. Bond Funding and Project Financing Issues

* What are the hours of operation? The application calls for 24/7 operation.

* What experience and subject-matter expertise does the operating company demonstrate? See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process

* How will operational sound be measured and controlled? Will there be time constraints? See below


* Size and length of trucks arriving with medical waste? See VII. Transportation of Waste Through the Community

* Truck arrival and departure hours/schedule? See VII. Transportation of Waste Through the Community

* What will be the size of storage of trailer and storage containers? See VII. Transportation of Waste Through the Community

* What will be stored in the trailers and storage containers on site? See VII. Transportation of Waste Through the Community

* What controls are used in the storage of materials in the sit trailers and containers? See VII. Transportation of Waste Through the Community

* Is there any odor to the emissions? See XIX Odor Issues

* Are items segregated before incineration? No
* What devices will be on-site for monitoring emissions? See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
* How are on-site emissions measured against permissible limits? See above
* To where will the solid ash be transported? See XIV. Issues Related to Disposal of Ash
* What company will be contracted for transport of ash off-site? See above
* How is the solid ash moved from facility, to container, to transport? See above
* What are the acceptable safety standards of measurement (emission limits)? See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
* Does the public have any means of knowing when emissions are actively taking place? See above
* What body parts will be incinerated? See XVIII. Distinctions within the Category of Human Pathological Wastes
* Is transport permitted between 9:00 pm and 7:00 a.m? Yes
* How many trucks are delivering waste daily? See V. Issues Related to Storage of Waste
* How many trucks are removing processed materials daily? See V. Issues Related to Storage of Waste
* Once materials come in on trucks, how long before it’s transferred off the truck and into the facility? See V. Issues Related to Storage of Waste
* How long is waste permitted to sit in the facility before it must be processed? See V. Issues Related to Storage of Waste
* How long does the “ashlike substance” sit on the property before being transferred out? See XIV. Issues Related to Disposal of Ash
* When ash-like substance leaves the facility, what size of trucks are used, and what form of container is used for transfer? See XIV. Issues Related to Disposal of Ash
* Are emissions visible in the air? See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
* Will fetal tissue be incinerated? See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
* What other medical equipment/materials will be incinerated? See XVIII. Distinctions within the Category of Human Pathological Wastes
* When will DEM inspections take place? Will inspections be scheduled, spontaneous, or both? Normally inspections are unannounced.
* Will DEM respond to public complaints once the plant is operational or will this become a local law enforcement issue? Complaints related to Department regulations are investigated by the Department. Complaints about violation of local ordinances are investigated by the appropriate local authorities.
* Will DEM inspectors need additional training prior to inspections? Department inspectors are currently trained and experienced with regard to medical waste facilities.
* Who (or what division) in DEM will be assigned to inspect this facility for compliance issues and licensing? Inspections relative to the Air and Medical Waste permits will be the responsibilities of their respective programs.
* Will the public have access to DEM inspection reports? Will they have to cite the FIA? Inspections are public record and can be accessed upon request.
* What would an environmental failure look like for such an operation and what would cleanup involve? See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
* Will local, municipal emergency management staff need additional training to address this facility? This decision will need to be made at the local level.

Paulette Miller

DEPARTMENT RESPONSE:

- As the commenter asks a number of specific questions some responses are above in red.
- The commenter asks a number of questions relative to hours of operation and scheduling. The application calls for 24/7 operation.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
- See VII. Transportation of Waste Through the Community
- See XIV. Issues Related to Disposal of Ash
- See XVIII. Distinctions within the Category of Human Pathological Wastes
- See XIX Odor Issues
- See V. Issues Related to Storage of Waste
I am opposed to the operation of MedRecycler Co. I’m sure you’ve received many reasons why to oppose this. I attended the Zoom mtg on this and I agree/support many of the educated reasons to not have this facility in our state. An additional concern of mine is with the health and well-being of our youngest citizens. They deserve to live in an environment that is safe to their health. Fresh air is vital! I would want my grandchildren to have the opportunity to continue to play outside without fear of odors and carcinogens being released into the area neighborhoods. I ask that this facility be denied approval to set up operations in the area. It shouldn’t be in an area in close proximity to daycares, an elementary school or New England Tech. Thank you!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Paulette Silva Costello,
20 Medieval Way,
West Warwick RI
pauletteco@hotmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XIX Odor Issues
• See XVI. Buffer Zone
I do not support the MedRecycler facility to burn medical waste. This technology is not a proven burn energy source. Do not let Rhode Island become a ‘test location’ for medical waste incinerators. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Penny Krebs,
Fish Hill Road,
CoventryRI
pennykrebs77ri@gmsil.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: Peter Kingman  
85 Crystal Drive,  
East Greenwich, RI  
peter.kingman1@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

As a Professional Engineer with 45 years of experience, I oppose the MedRecycler Application to the RIDEM to use pyrolysis to process medical waste. It is unproven and untested and the Applicant has no demonstrated experience or ability to operate such a facility. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Peter Kingman,  
85 Crystal Drive,  
East Greenwich, RI  
peter.kingman1@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process  
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals  
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process  
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit  
• See XVI. Buffer Zone
Dear Ms. Li & Mr. Dennen,

Attached please find a supplemental letter from the Town of East Greenwich and the New England Institute of Technology, in addition to the letter they previously submitted. Thank you.

- Peter

Peter F. Skwirz, Esq.
Ursillo, Teitz & Ritch, Ltd.
2 Williams Street
Providence, RI 02903
(401) 331-2222
(401) 751-5257 (fax)
peteskwirz@utrlaw.com <mailto:peteskwirz@utrlaw.com>

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March 12, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management,
235 Promenade Street, Providence, RI 02908
Attention: Yan Li & Mark Dennen Email: yan.li@dem.ri.gov
mark.dennen@dem.ri.gov

Re: Proposed Medical Waste Management Facility License for MedRecycler-RI,
Inc. at 1600 Division Road, West Warwick, Rhode Island

Dear Ms. Li & Mr. Dennen,

As you know, the Rhode Island Department of Environmental Management (RIDEM) issued a notice on January 11, 2021, asking for public comment on the proposed solid waste license (License) for MedRecycler-RI, Inc. (MRI) to operate a proposed facility at 1600 Division Road in West Warwick (Facility). I am hereby submitting this written comment on behalf of the Town of East Greenwich (Town) and the New England Institute of Technology (NEIT). The Town and NEIT have had their consulting engineers, Edward Summerly and Richard Carlone of GZA GeoEnvironmental, Inc. (GZA), thoroughly review the application materials submitted by MRI to RIDEM for the License. GZA has identified a number of issues that ought to be addressed and conditions that ought to be placed on the License to correct certain deficiencies in the application. Those conditions are attached hereto as Exhibit A. To the extent that any approval is issued for this Facility, the Town and NEIT would ask that it not issue until the additional items outlined are provide and that the conditions listed on Exhibit A be incorporated into the License.

However, even assuming that RIDEM and/or MRI agree to these conditions and they become part of the License, it is clear that the application submitted by MRI should not go to hearing and cannot be approved at this time. Below, the Town and NEIT will outline five points where the application is either premature or incomplete and where proceeding would deny the public the right to evaluate and participate in MRI’s application. These five points are, in short:
MRI must, under RIGL 23-18.9-9(a)(1), receive a “final determination” from West Warwick regarding compliance with “local land use and control ordinances” before RIDEM can even consider this application. MRI has not received such a “final determination.”

MRI must, under RIGL 23-18.9-9(a)(1), receive a “certificate of approval” from the State Planning Council for this site before RIDEM can even consider this application. The State Planning Council has not approved this site.

RIDEM has an obligation under RIGL 23-18.9-8(a)(1) to promulgate “standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities.” RIDEM, however, has not promulgated any such standards through notice and comment rulemaking, and there is nothing in the administrative record of this application that addresses how the placement or siting of this Facility would impact the surrounding community. RIDEM cannot approve this Facility until it has enacted the required standards and given the siting concerns of the surrounding community great weight in accordance with those standards.

Under RIGL 23-18.9-9(a)(2)(ii), “all supporting documentation” must be included with the draft License for public comment. This draft License, however, does not provide critical supporting documentation but, instead, calls for this documentation to be provided only after RIDEM approval, when the public will have no chance to comment or challenge the information put forth by the applicant at the hearing.

MRI has not complied with its conditional approval of pyrolysis as an “alternative technology” under 250-RICR-140-15-1.15(F)(4) & (5). Alternative technology approval is a critical feature of RIDEM regulation to protect the public from the potential ill effects of untried methods of medical waste disposal. MRI must be held to strict compliance with the requirements of this conditional approval.

After outlining these issues in greater detail below, the Town and NEIT submit that the appropriate course of action is either for MRI to withdraw its application or for RIDEM to deny the application without prejudice, so that MRI may reapply if and when these issues are fully addressed.

I. MRI must receive Preliminary Plan and Final Plan approval from the West Warwick Planning Board before and it can file for approval with RIDEM.

As RIDEM acknowledges in its Notice of Intent to Approve (NOI), its review of MRI’s application is “pursuant to R.I.G.L. 23-18.9-9,” which sets out RIDEM’s statutorily required review procedures for solid waste management facilities. Review is required under RIGL 23-18.9-9 because, as stated in RIGL 23-19.12-10, a RIDEM license for “storage, treatment and/or destruction of regulated medical waste” is merely “a special category of license issued to solid waste management facilities.”
Pursuant to subsection (a)(1) of RIGL 23-18.9-9, “When an applicant seeks to obtain a license for the construction or operation of a solid waste management facility, such applicant must submit to the director of DEM an application and various certifications relative to legal compliance and approval by various government entities.” Lynch v. Rhode Island Dep’t of Env’t Mgmt., 994 A.2d 64, 71 (R.I. 2010). One of the prerequisites to applying under subsection (a)(1) is that an applicant for “a private solid waste disposal facility shall submit to the director simultaneously with the application a certificate of final determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances or on appeal a final judgment of a court that the proposed site for the facility conforms with all applicable land use and control ordinances of the municipality.” (Emphases added). With regard to medical waste, RIGL 23-19.12-3(3) broadly defines “disposal” as “the discharge, deposit, injection, dumping, spilling, leaking, abandoning, or placing of any regulated medical waste in, on, into, or onto any land, other surface, or building or vehicle, or trailer, or other containment structure, or into any water, watercourse, stormwater system, or sewer system.”

MRI’s Facility certainly involves the “placing of any regulated medical waste in . . . any . . . building” as stated in RIGL 23-19.12-3(3). Therefore, MRI’s proposed Facility would be engaged in “disposal” of medical waste as that term is broadly defined in RIGL 23-19.12-3(3) and, thus, qualifies as a “solid waste disposal facility” under RIGL 23-18.9-9(a)(1). Because the Facility will be privately owned, it falls under the requirement stated in RIGL 23-18.9-9(a)(1) that the “final determination from the municipality” must be submitted simultaneously with the application to RIDEM.

In discussing this with legal counsel for RIDEM, it was suggested that the term “solid waste disposal facility” as used in RIGL 23-18.9-9(a)(1) should be interpreted to be effectively synonymous with the term “landfill,” making this requirement inapplicable to MRI. I respectfully disagree with this overly narrow interpretation of the statute. First, this interpretation does not account for the exceedingly broad definition of “disposal” of regulated medical waste under RIGL 23-19.12-3(3). Second, there is no alternative statutory definition of “disposal” or “solid waste disposal facility” that would support such a limited reading in this case. Third, the General Assembly used the term “landfill” in RIGL 23-18.9-1, et seq., when it wanted to place additional requirements on landfills or refer to landfills specifically. The General Assembly knew how to

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4 See, e.g., RIGL §§ 23-18.9-9(e) (“landfills shall be exempt from any application fees relative to applications it files to expand its existing landfill”); 23-18.9-9.1(b) (“Solid waste landfill facilities shall be prohibited in the following areas”); 23-18.9-9.1(d) (“The state planning council may . . . designate other areas where solid waste landfills . . . are prohibited”); 23-18.9-9.1(e) (“Where an existing solid waste management facility-landfill overlies the groundwater reservoir
say “landfill” when it meant to refer to a landfill. The term “solid waste disposal facility” should not be interpreted as a singular inconsistent instance of the General Assembly using a different term to mean the same thing – especially in this case – where the General Assembly provided an exceedingly broad definition of medical waste disposal in RIGL 23-19.12-3(3). Finally, this reading is inconsistent with Supreme Court precedent in Lynch v. Rhode Island Dep’t of Env’t Mgmt., supra, where the Court discussed that an applicant for a new solid waste management facility was required to supply all the information specified in RIGL 23-18.9-9(a)(1). In the Lynch case, the Court was considering an application for a Construction and Demolition Debris Processing Facility, which, pursuant to RIGL 23-18.9-7(5), must process and remove all incoming waste within three months of receipt. The C&D processing facility at issue in Lynch was certainly not a landfill, indicating that the requirements in RIGL 23-18.9-9(a)(1) are not limited to landfills. As you are likely aware, the Facility is being reviewed as a major land development project before the West Warwick Planning Board. The Facility has received Master Plan Approval from the Planning Board pursuant to RIGL 45-23-40. But that is not the final determination from the municipality where the Facility is sited. Pursuant to RIGL 45-23-49(b), “Major plan review consists of three stages of review, master plan, preliminary plan and final plan.” (Emphases added). RIGL 45-23-32(23) defines “Master plan” as “An overall plan for a proposed project site outlining general, rather than detailed, development intentions. It describes the basic parameters of a major development proposal, rather than giving full engineering details.” Accordingly, the West Warwick Planning Board has only reviewed the “basic parameters” of the Facility and has

to operate a solid waste management facility which is a commercial landfill shall be issued” except under certain conditions) (emphases added), not reviewed the “full engineering details” to ensure compliance with “all applicable local land use and control ordinances.”

Following Master Plan Approval, the Facility must also receive Preliminary Plan and Final Plan approval. RIGL 45-23-32(35) defines “Preliminary plan” as “The required stage of land development and subdivision review which requires detailed engineered drawings and all required state and federal permits.” Only after submission of the Preliminary Plan application will the

... the director is authorized to order... closure of the landfill”); 23-18.9-9.1(f) (“the owner of an existing solid waste management facility-landfill, may bring a civil action in the superior court in which the solid waste management facility-landfill is located”); 23-18.9-9.2 (“no license

5 The language in the definition of Preliminary Plan requiring “all state and federal permits” is somewhat in tension with the language in RIGL 23-18.9-9(a)(1) requiring a “final determination” from the municipality before applying for a solid waste permit. The appropriate way to resolve this tension: “when faced with competing statutory provisions that cannot be harmonized, we adhere to the principle that the specific governs the general.”
Town of West Warwick be authorized to conduct any serious engineering review. Pursuant to RIGL 45-23-60, at the Preliminary Plan stage, the West Warwick Planning Board is required to consider whether the Facility “is consistent with the comprehensive community plan and/or has satisfactorily addressed the issues where there may be inconsistencies.” RIGL 45-23-60 also requires the West Warwick Planning Board to consider at the Preliminary Plan stage whether the Facility “is in compliance with the standards and provisions of the municipality's zoning ordinance.” West Warwick’s review cannot be considered final unless and until these matters are considered and resolved at the Preliminary Plan stage of review.

And, even after approval of the Preliminary Plan, RIGL 45-23-32(13) defines “Final plan” as “The final stage of land development and subdivision review.” (Emphasis added). The Facility has yet to apply for or receive Preliminary Plan or Final Plan approval from the West Warwick Planning Board. Until the Facility has both an approved Preliminary Plan and Final Plan, MRI will be unable to submit “a certificate of final determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances,” as required by RIGL 23-18.9-9. Pursuant to that statute, RIDEM cannot consider granting a license on this application until such a certificate of final determination is submitted.

Many of the engineering details raised by this proposal present issues of local concern, e.g., traffic, noise, odors, drainage, emergency response, etc. RIGL 23-18.9-9 contemplates that these local issues will be fully and finally vetted in the municipality before an application to RIDEM is submitted. Because the required local review is not yet complete, RIDEM cannot issue a license to MRI, or even consider MRI’s application, at this time.

- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See XIX Odor Issues

II. MRI must apply for and receive appropriate review and approval from the State Planning Council for this site before RIDEM may consider this application. In Foster Glocester Reg'l Sch. Bldg. Comm. v. Sette, 996 A.2d 1120, 1126 (R.I. 2010). This is not a run-of-the-mill land development project where the only state permits needed are routine physical alteration permits, etc. Instead, this is a solid waste facility that has a robust statutory review procedure set forth in RIGL 23-18.99 to ensure public health and safety. This statute, specifically dealing with solid waste facilities, expressly requires a “final determination” from the municipality before RIDEM review may proceed. This provision specifically dealing with solid waste facilities should govern over a provision dealing with land development projects and subdivisions more generally.
addition to raising local siting and planning concerns, this application also raises
interlocal siting and planning concerns. For instance, although West Warwick zones the
proposed site for industrial use, just over the municipal border (across the street) in East
Greenwich is a residential zone. It is also in close proximity to a college campus in East
Greenwich where students reside. The abutting residents are greatly and justifiably
concerned with the siting impacts from this unproven and potentially dangerous Facility.

State statute has a mechanism for addressing these interlocal planning concerns, but that
mechanism has not been followed in this case. RIGL 23-18.9-9 provides, “The applicant
shall also submit simultaneously with the application a certificate of approval of
the proposed site issued by the state planning council, except for statutorily mandated
facilities.”3 (Emphases added). The siting of this Facility is not mandated by statute.

Therefore, as part of its application, MRI is required to submit a certificate that this site
has been reviewed and approved by the State Planning Council (SPC).

RIGL 23-18.9-9 provides the SPC “shall only approve a site after great weight has been
afforded to the detrimental impact that the placement of such a facility shall have on
its surrounding communities and only after evaluation of alternative sites and
assessment of comparative environmental impact at the sites in accordance with law and
state planning council rules, . . . and distribution of location of sites for waste facilities
among the regions of this state.” (Emphases added). RIGL 23-18.9-9 provides that SPC
“shall not issue its certificate prior to the publication of public notice and the expiration
of the public comment period regarding the proposed site.” (Emphases added).

3 There is absolutely no statutory basis to conclude that this SPC approval requirement is
limited to landfills. First, unlike the final municipal approval requirement discussed in
Section I, the operative sentence requiring SPC approval only refers to “[t]he applicant”
under RIGL 23-18.9-9 and makes no reference to a “solid waste disposal facility.” MRI
is undeniably “[t]he applicant” under § 23-18.9-9, so is required to have SPC siting
approval. Second, even if RIGL 23-18.99(a)(1) is interpreted as limited to “disposal
facilities,” MRI’s Facility would undoubtedly be engaged in the “disposal” of medical
waste as that term is broadly defined under RIGL 23-19.123(3). Third, as discussed in
Section I, the General Assembly knew how to say “landfill” when it meant to refer to a
landfill, and it didn’t use that term to limit the applicability of the SPC siting approval
requirement. Fourth, in 2018 the General Assembly passed a bill, S2026, attached as
Exhibit F, requiring the SPC to give “great weight . . . to the detrimental impact that the
placement of such a facility shall have on its surrounding communities.” The explanation
of that bill provided by legislative council is “[t]his act would include a facility’s
potential detrimental impact on the community as a factor to be considered when
approving the construction or operation of a solid waste management facility.”
(Emphasis added). Clearly, the purpose of this enactment was not limited to landfills
and, so too, SPC siting approval is not limited to landfills. Finally, as noted above, this
reading is inconsistent with a prior opinion of our Supreme Court, which said, “When an
applicant seeks to obtain a license for the construction or operation of a solid waste
management facility, such applicant must submit to the director of DEM an application
and various certifications relative to legal compliance and approval by various
government entities. Section 23–18.9–9(a)(1).” Lynch v. Rhode Island Dep’t of Env’t
The only action taken by the SPC regarding this Facility is expressed in a December 6, 2019 correspondence, attached as Exhibit B, from the SPC Secretary to the Managing Director of Financial Services at the Economic Development Corporation. The substance of this letter reads in full as follows:

“Pursuant to your request, I am pleased to notify you that the State Planning Council has completed its review of the above-referenced project and has determined that it conforms to the State Guide Plan. Due to a business relationship between the Rhode Island Public Transit Authority (RIPTA) and MedRecycler-RI, Inc., Mr. Scott Avedisian, CEO of RIPTA, did not participate in the review of this proposal.”

This letter provides no indication regarding compliance with solid waste management facility siting requirements. It provides no evaluation or comparison of this site to alternative sites and it gives no consideration to distribution of sites throughout the state. It does not give “great weight” to detrimental impact of the siting, as required by statute. The SPC Secretary only states that this site conforms to the State Guide Plan. And, of huge importance to the Town and NEIT, the SPC did not issue this letter after a public notice and comment period as provided by statute. It is axiomatic that a government agency “may not alter or amend the scope of the statute” that sets forth its duties. See F. Ronci Co. v. Narragansett Bay Water Quality Mgmt. Dist. Comm’n, 561 A.2d 874, 881 (R.I. 1989). Accordingly, RIDEM and the SPC may not shirk their duty to have public notice and comment proceeding for SPC consideration on the siting of this Facility.

Clearly, the 12/6/19 letter from the SPC Secretary does not meet the requirement of RIGL 23-18.9-9(a)(1) that the SPC issue a “certificate of approval” only after giving “great weight . . . to the detrimental impact that the placement of such a facility shall have on its surrounding communities and only after evaluation of alternative sites and assessment of comparative environmental impact.” There is a reason that it does not. In a February 25, 2021, email, attached as Exhibit C, the SPC Secretary, Meredith Brady states that this letter was “an advisory finding [which] is not an approval, . . . We (the State Planning Council, and I, as Secretary) have not received a request for certification under the Solid Waste rule.” (Emphases added).

RIGL 23-18.9-9(a)(1) requires a “certificate of approval” from the SPC as to the siting of the Facility, which requires a its own public notice and comment process with the SPC, before RIDEM can even consider this application. But the SPC has not given such approval or gone through a public notice and comment process and MRI has not even made a request for such review and approval. Instead, the SPC sent an advisory letter to the RIIFC about consistency with the State Guide Plan under an abbreviated – nonpublic – review process. But this advisory letter is in no way a replacement for full review and SPC approval after a public notice and comment period.

As made clear by the SPC Secretary, the SPC has not given its approval for the site. RIDEM cannot consider this application or go through the public hearing process outlined in RIGL 23-18.9-9 unless and until the SPC process is completed and the SPC
issues a certificate of approval for this site. Otherwise, NEIT and the Town, and the residents of East Greenwich that directly abut the site, will lose their forum for raising interlocal planning concerns about the siting of this project. The only appropriate course of action under RIGL 23-18.9-9(a)(1) is for RIDEM to not consider this application unless and until the SPC has conducted the thorough review mandated by statute, the SPC has taken public notice and comment, and until the SPC has given the required “great weight” to the potential impacts on local communities, as it is required to do.

In sum:
By statute, RIDEM cannot even accept an application for the Facility unless MRI simultaneously submits with the application a certificate of approval from the SPC approving the site;
SPC has clearly and unambiguously stated it has not approved the proposed site for the Facility; and
Therefore, RIDEM must reject MRI’s application.

See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals

III. RIDEM has not fulfilled its independent obligation to give “great weight” to the detrimental impact on the surrounding community with regard to siting of the Facility.

As discussed in Section II, above, the Town and NEIT are concerned about the siting of the Facility, as a college campus, an East Greenwich residential zone and a number of East Greenwich residents are directly across the street from the proposed location. As discussed in Section II, the primary mechanism for addressing this concern is SPC siting approval provided in § 23-18.9-9(a)(1), with notice and comment from the public. However, RIGL 23-18.9-8(a)(1) also gives RIDEM an independent obligation to address the siting concerns of the surrounding community and give those concerns “great weight.”

RIGL 23-18.9-8(a)(1) provides, “No person shall operate any solid waste management facility . . . unless a license is obtained from the director.” Prior to 2018, subsection (a)(1) also provided, “The director shall have full power to make all rules and regulations establishing standards to be met for the issuance of the licenses.” In 2018, however, this section was amended by P.L. 2018, ch. 54 & 61 to read, “The director shall have full power to make all rules and regulations establishing standards to be met for the issuance of the licenses with those standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities.” (Emphasis added). The 2018 amendment altered RIDEM’s power to create standards of approval for solid waste management facilities by requiring that RIDEM’s standards address “the placement of such a facility.” These standards regarding placement required by the 2018 amendment must afford “great weight to the detrimental impact . . . on its surrounding community.”
Since the 2018 amendment was enacted, RIDEM has not promulgated any standards regarding placement of solid waste management facilities. RIDEM has not promulgated any standards about when placement causes a detrimental impact on the surrounding community and certainly hasn’t promulgated any standards that afford “great weight” to concerns regarding such impact. Further, nothing in the administrative record for consideration at the public hearing on MRI’s proposal addresses the proximity of the proposed Facility to the East Greenwich residential zone, the residences across the street in the Town of East Greenwich, or the NEIT campus. If the siting of this Facility had been approved by the SPC, as required by statute, then RIDEM might be able to rely on the SPC’s findings to fulfill its obligation under RIGL 23-18.9-8(a)(1). But that hasn’t been done and the record is devoid of any findings by RIDEM that would show that it independently fulfilled its obligation to afford “great weight to the detrimental impact that the placement of” MRI’s proposed Facility would have on the surrounding community.

If the January 25, 2021, public informational meeting is any indication, much of the public comment at the public hearing on March 15 will focus on how it is inappropriate to site this Facility in this area, in close proximity to residences and a residential zone. For instance, one commenter at that 1/25/21 informational meeting asked, “Why here in East Greenwich and not at Quonset where it is primarily industry?” The response of RIDEM’s representative at the meeting, Mark Dennen, was “we don’t tell the applicant where to locate,” implying that RIDEM has no say in the placement or siting of the proposed Facility. That is incorrect. Under the 2018 amendment to RIGL 23-18.9-8(a)(1), RIDEM is required to consider site placement in making its decision and RIDEM must afford concerns regarding potential detrimental impacts resulting from site placement “great weight.”

But RIDEM has promulgated no standards required by the 2018 amendment. RIDEM made no findings in the record on siting of the Facility in this area, and nothing in the application is addressed to site placement concerns. Accordingly, RIDEM is not giving these site placement concerns the weight they are required to be given under the 2018 amendment. This error is compounded by the lack of SPC approval as discussed in Section II. Accordingly, the Town and NEIT submit that this matter should not be considered until RIDEM has developed “standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities” in accordance with the 2018 amendment. Further, this Facility should not be approved until it meets those standards required by the 2018 amendment once

6 See Video of the 1/25/21 informational meeting starting at hour 0:53:00, available at https://us02web.zoom.us/rec/play/7POWou5rN3xtdnjiyKcHm1fvZfTV7Y8KH_hM6BwsoCeYtLalA3lezjkgfE_am8Iy7W3pKQY7XMvzUyM1U.kbbaYLu0ud4sPy6T?continueMode=true&x_zm_rtaid=1ZYAke6SL6gvc_QGTOIQ.1614959051719.8f25b66f279c1e829a69218a8e370a36&x_zm_rhtaid=254 (last checked 3/8/2021)
promulgated by RIDEM. At the very least, RIDEM must demonstrate that it is giving “great weight” to all of the site placement concerns raised during the public comment period.

See I. Issues Related to the Department’s Role in the Permitting Process

IV. All supporting documentation has not been included with the draft License, as required by state statute.

For the reasons stated above, the application MRI submitted is incomplete. Putting that to the side for a moment, the draft License still does not have all the information required for RIDEM to properly hold a public hearing. RIGL 23-18.9-9(a)(2)(i) requires RIDEM, upon receiving an application, to “review the application” and then “give public notice of the intention to issue a draft license or the intention to deny the application.” This public notice of a draft license then forms the basis of a public informational workshop and public hearing, as contemplated by RIGL 2318.9-9(a)(3) & (4). However, before a draft license or tentative denial is ready for the public workshop and hearing process, RIGL 23-18.9-9(a)(2)(ii) requires that “[t]he draft license and/or tentative denial, including all supporting documentation, shall be made available for public comment.” (Emphases added). RIDEM’s draft License for the Facility references certain “supporting documentation” that has yet to be produced. Therefore, all supporting documentation for the draft License has not been included and “made available for public comment,” and the License is not ready to undergo the public approval process contemplated by statute.

Specifically, RIDEM’s NOI for this project requires MRI to produce the following items only after the License has been issued:

A “Contingency Plan” approved by the West Warwick Fire Department;
A RIDEM approved “financial assurance mechanism” containing “a detailed cost estimate that includes an independent third-party quote for cleaning, packaging, shipping and disposal of the maximum permitted capacity of medical waste at the facility, decontaminating and decommissioning all equipment, and verification of closure by a certification of closure from a qualified professional”;

MRI must conduct “pre-operational testing of the system to verify that treatment and containment of the waste is sufficient to protect workers as well as the general public from exposure to pathogens,” and must submit to RIDEM “detailed testing protocols for the pre-operational testing.” The pre-operational testing protocols must provide specific details, in addition to the submission of November 6, 2020 entitled “Macerator Biological Testing Protocol”;

The above referenced testing protocols “shall be performed and validated by a qualified, independent third-party professional with laboratory results” to be submitted to RIDEM; MRI must submit “detailed protocols for routine testing of the system at least every 40 hours of operation.”
Each of these required and critical submissions, with the exception of the postconstruction/pre-operational testing, can and must be made a part of the public hearing process. The Town and NEIT’s consultant, GZA, has opined that the development of these critical testing protocols and contingency plans requires no additional information or data regarding operations and equipment than the applicant already possesses. Accordingly, these plans, documents and protocols are all matters that the Town and NEIT are very interested in having its consulting engineer vet and items on which the public should be allowed to comment. Further, our consulting engineer has opined that MRI should provide this material prior to the public hearing process taking place, so the material may be included with the draft License and available for public comment, as required by RIGL 23-18.9-9(a)(2)(ii).

Simply put, the conditions placed on the permit by RIDEM that are set forth in the NOI leave critical and substantive safety and operational issues to be addressed only as post-issuance submissions by the applicant to RIDEM. This highly unusual approach by RIDEM for such an unproven technology effectively removes these substantive issues from the hearing process. It denies the public the right to review these critical submissions, comment on them or challenge the content of them through the public hearing process. Indeed, as drafted, the public will never even see these submissions. With regard to one such submission, the virus surrogate testing protocol, RIDEM’s representative at the public informational meeting, Mark Dennen, noted “the devil’s in the details.” The details of these testing protocols are so important because, as Mr. Dennen stated at that meeting, “I could make up a test that would pass and I could make up a test that would fail” without changing the actually efficacy of the Facility. But the public is not being given the opportunity to vet those critical details as part of the hearing process. As Mr. Dennen noted, it is critical to get “a test that is reasonable.” The public hearing process mandated by statute requires that the public be given an opportunity to have a say in what is reasonable. Such decisions cannot be made behind closed doors.

Given RIDEM’s admitted lack of expertise in this area, the unproven nature of the technology, its proximity to residents and the potentially deadly consequences of any failure of the process, this protocol (along with the other protocols and contingency plans addressed above) must be submitted for review prior to any public hearing or issuance of the draft license. The public has a clear interest in reviewing, evaluating or challenging any such protocols submitted by MRI. RIDEM should want this public involvement and welcome such public input on this critical safety protocol. Further, this application is procedurally premature anyway, due to lack of SPC approval and final approval from

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7 See Video of the 1/25/21 informational meeting starting at hour 1:41:00, available at https://us02web.zoom.us/rec/play/7POWou5rN3xtdnjyKcHm1fvZfTV7Y8KH_hM6B6ws0cYTIalA3lezjkgfE_am8Iy7W3pKQY7XMvzUyM1U.kbbaYLu0ud4sPy6T?continueMode=true&_x_zm_rtaid=1ZYAke6SL6gyc_QGTOIQ.1614959051719.8f25b66f279c1e829a69218a8e370a36&_x_zm_rhtaid=254 (last checked 3/8/2021)
West Warwick. MRI would have ample opportunity to create and submit these materials for inclusion in the RIDEM public hearing process while it seeks the prerequisite approvals from the SPC and the municipality.

The Town and NEIT hereby request that MRI’s application be withdrawn or denied without prejudice, and not considered again until such time as the MRI submits all of the information required by RIDEM in the conditions proffered in the NOI and the same is made part of the public hearing process. The public has the right to review this information, comment on it and examine any witnesses offering the same. RIDEM should not proceed to hastily issue this License. While this may be to the apparent benefit of the applicant, it would be to the detriment of the public, as many substantive issues relating to operations, health and safety will be entirely removed from public scrutiny. This denies the public the right to participate. It allows the applicant to make critical submissions that will go unchallenged. It is a clear violation of RIGL 23-18.9-9(a)(2)(ii) and the Administrative Procedures Act requirement for a fair hearing in all contested cases. See RIGL 42-35-9(a).

See III. Plans Not Submitted for Public Review

V. MRI has not submitted supporting material sufficient to approve an “Alternative Technology” under 250-RICR-140-15-1.15(F)(4) & (5).

Finally, RIDEM regulations require this Facility to undergo heightened and very specific additional vetting because it is being proposed as an “Alternative Technology” for “Treatment, Destruction, and Disposal of Regulated Medical Wastes,” as contemplated by RIDEM regulation 250-RICR-140-15-1.15(F)(4) & (5). As a starting point, 250-RICR-140-15-1.15(F)(3) prescribes certain widely used technologies for destruction and disposal of medical waste. The appropriate technology to be used varies depending on the type of medical waste, but Rule 1.15(F)(3) includes an exhaustive list that ranges from incineration to chemical disinfection, to steam sterilization followed by grinding. However, pyrolysis – the technology proposed by MRI for the Facility – is not included on this list. Since pyrolysis is not included in the list of technologies in Rule 1.15(F)(3), it requires approval under Rule 1.15(F)(4), which reads, in full, as follows:

“Alternative Technologies: Any other treatment, destruction and/or disposal technology shall only be utilized if such treatment, destruction and/or disposal technology has been approved in writing by the Director.” (Emphasis added).

With regard to receiving Director approval, Rule 1.15(F)(5)(a), titled “Approval of Alternative Technologies,” provides, “The Director shall not grant approval for the use of any other combination of treatment, destruction and/or disposal technologies, unless and until such technologies are proven, on the basis of thorough tests.” (Emphasis added).

These “thorough tests” must support the following findings of facts:

“(1) Completely and reliably inactivate Geobacillus stearothermophilus spores or Bacillus atrophaeus spores at a 4 Log10 reduction or greater; and,
Completely and reliably inactivate vegetative bacteria, fungi, viruses, parasites, and mycobacteria at a 6 Log10 reduction or greater [this requirement is applicable to technologies not based on thermal and chemical treatment]; and,

Be protective with respect to total impact on the environment; and,

Ensure the health, safety and welfare of both facility employees and the general public; and,

Ensure that the total weight and/or volume of the end product of the alternative technology does not exceed the total weight and/or volume of the regulated medical waste prior to treatment and/or destruction. Testing must also demonstrate that inactivation is uniformly and within containers reasonably likely to be treated in the system.”

Attached as Exhibit D is a letter dated March 16, 2020, issued by RIDEM to MRI. This letter states that pyrolysis is conditionally approved as an alternative technology. But before this alternative technology approval was to become final, RIDEM stated it needed to “receive, review and approve” a more detailed efficacy testing plan and related monitoring protocols.” (Emphasis added). These more detailed plans that RIDEM needed to “receive, review and approve” included “[t]esting protocols to evaluate if the decontamination procedures in the macerator as well as other equipment are sufficient to achieve 4 log 10 reduction of Geobacillus stearothermophilus spores or Bacillus atrophaeus spores throughout the system to allow maintenance that will not present a hazard to workers of needle stick or other exposure.” RIDEM also needed to “receive, review and approve . . . [e]missions and safety protocols [that] are compliant with other RIDEM and West Warwick Fire Department requirements.” Only after RIDEM “received, reviewed and approved” this material did the conditional alternative technology approval require MRI “to satisfy a public notice and hearing requirement outlined in the Department’s Solid Waste Regulations.” (Emphasis added).

However, as discussed above, RIDEM has not “received, reviewed and approved” any testing protocols or safety plan approved by the West Warwick Fire Department. Instead, RIDEM simply made production of these items at some future date conditions of the License. Thus, the public has been deprived the right to review and comment on these materials, in direct contravention of the conditional alternative technology approval. As provided in Rule 1.15(F)(5), MRI’s application for this untried technology is not ready for approval “unless and until” certain specific written criteria have been “proven, on the basis of thorough tests.” As required in the conditional alternative technology approval, these requirements are not satisfied unless and until MRI has testing protocols and a safety plan that is “received, reviewed and approved” by RIDEM that is subsequently made publicly available during the “public notice and hearing requirement.” That has not been done in this case. As explained in Section IV, above, it is the Town and NEIT’s position that this should be done and, under the express language of the conditional alternative technology approval detailed above, MRI’s draft License cannot be approved unless and until it is done.
The need for full and detailed information to be provided is confirmed by the recent EPA denial of the one comparable cited by MRI in its application to RIDEM. Attached as Exhibit E is a June 23, 2020, letter from MRI to RIDEM. On page 5, ¶ 10, of Exhibit E, MRI cites Monarch Waste Technologies as “a similar facility in New Mexico” treating “regulated medical waste using a similar treatment technology.” The Federal Register indicates, however, that Monarch was recently denied approval. In the Register, the question was stated: “Does EPA approve the request for an alternative monitoring plan (AMP) for the Monarch Waste Technologies, LLC (MWT) Pyromed Pyrolysis System to be operated at the Nambe Pueblo near Santa Fe, New Mexico as a hospital/medical/infectious waste incinerator (HMIWI) under NSPS Ec?” In response, the Federal Register states:

“No. EPA determines that the petition does not provide specific information about the control equipment installed, nor does it provide sufficient other required information for a petition under 40 CFR 60.56c(j). Due to this lack of information, EPA cannot evaluate the AMP request. EPA previously provided information and guidance to the company related to implementation requirements under NSPS Ec after an on-site meeting and tour of the facility. However, the AMP petition submitted did not incorporate EPA’s information. EPA's response outlines the areas of the petition that are in conflict with federal rule interpretations and requirements.”

The reason this recent denial of Monarch Technologies is important is that it highlights how new and untested this proposed use of technology is. The Town and NEIT respectfully submit that RIDEM should be extra cautious about approving MRI’s submission as an alternative technology without all information being provided up front, as it could create a negative precedent statewide that cannot be undone. RIDEM should hold MRI to the letter of its conditional alternative technology approval and make sure that it provides all of the required information upfront, prior to the public hearing process, so that the public can comment on the same. Because MRI has not done so, its application cannot be considered or approved at this time.

See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process

VI. MRI’s application should be denied without prejudice, so that it can present a complete application at a later date.

MRI’s application is premature at this point in time. Pursuant to RIGL 23-18.9-9(a)(1), MRI’s application will not be complete, and RIDEM cannot consider the application.

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unless and until West Warwick has approved the Preliminary and Final Plans for the Facility. Further, this application should not be considered complete until MRI has asked for and the SPC has fulfilled the interlocal planning function required by statute and RIDEM has fulfilled its obligation to give “great weight” to siting impacts on the surrounding community. Even if the premature posture of this application is overlooked, MRI still has not submitted all of the other material that is required by RIDEM for approval of the project. The NOI from RIDEM calls for a number of supporting documents that have not been made available to the public as required by RIGL 23-18.9-9(a)(2)(ii). MRI has not complied with its conditional alternative technology approval and, thus, RIDEM cannot approve this project as an “Alternative Technology” under 250-RICR-140-15-1.15(F)(4) & (5). Given these deficiencies, MRI’s application cannot proceed or be approved at this time. While MRI may desire additional time to complete the required procedures and correct the deficiencies noted, state statute does not give RIDEM much flexibility when considering an application that is not ready for approval at the public comment stage. RIGL 23-18.9-9(a)(4) sets out a finite public comment period and RIGL 23-18.9-9(a)(5) provides, “Within ninety (90) days of the close of the public comment period, the director shall issue the license or the final denial.” Accordingly, if an application has not satisfied the requirements for approval, it must be denied. The Town and NEIT would suggest one of two courses of action to avoid the otherwise harsh results of RIGL 23-18.9-9(a)(5). First, MRI could withdraw the solid waste permit application at this point and return to RIDEM when the application is in order to be considered and all application materials have been submitted. Alternatively, RIDEM could deny the application without prejudice, so that MRI could come back if and when the following things are done:

MRI has obtained Preliminary Plan and Final Plan approval from the West Warwick Planning Board;

The SPC has thoroughly vetted and approved the siting of this project in compliance with statute;

RIDEM has fulfilled its independent statutory obligation to approve the placement of the site and develop standards that give great weight to detrimental impact on the surrounding community regarding placement of the site.

MRI has submitted all supporting documentation required for the project, including required plans and testing protocols; and MRI has submitted information to support a positive finding on each of the required findings for an “Alternative Technology” in 250RICR-140-15-1.15(F)(5) and complied with its conditional alternative technology approval.

Unless MRI chooses to voluntarily withdraw it application, the Town and NEIT would respectfully request that the application be denied without prejudice to MRI reapplying at such time as the issues raised in this letter are satisfactorily addressed. Thank you for your consideration of this matter.

Sincerely yours,
/s/ Andy Teitz  
/s/ Peter Skwirz

As counsel for the Town of East Greenwich and the New England Institute of Technology

cc: Michael Kelly, Esq.  
Michael Resnick, Esq.  
Counsel for MedRecycler-RI, Inc.  
Via email only

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DEPARTMENT RESPONSE:
- Given the size and detail of comments, Department responses are contained within the document above. Also, for brevity, appendices were omitted.
SUPPLEMENTAL LETTER FROM PETER SKWIRZ

Ursillo, Teitz & Ritch, Ltd.

April 13, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management,
235 Promenade Street, Providence, RI 02908
Attention: Yan Li & Mark Dennen Email: yan.li@dem.ri.gov
               mark.dennen@dem.ri.gov

Re: Proposed Medical Waste Management Facility License for
MedRecycler-RI,
Inc. at 1600 Division Road, West Warwick, Rhode Island, -
supplemental comment

Dear Ms. Li & Mr. Dennen,

Following the public hearing held in the above-referenced matter on March 15, 2021, the
Town of East Greenwich and the New England Institute of Technology (NEIT) are
incorporating all of the objections raised by M-F Athletic, represented at the hearing by
Attorney Jerry Petros, including the supplemental letter submitted on April 7, 2021. East
Greenwich and NEIT concur fully with M-F Athletic’s objections stated in that letter and
Attorney Petros’ presentation of argument at that hearing. MedRecycler has not met or
addressed the buffering requirement of Rule 250-RICR-140-05-1.9(P). Rule 250-RICR-
140-15-1.15(F)(4)&(5) does not contemplate or allow for a two-step, conditional
approval process for an alternative technology.

Further, the Town of East Greenwich and the New England Institute of Technology
(NEIT) are incorporating all of the objections raised by Communities for Environmental
Awareness (CEA), represented at the hearing by Attorney Marisa DeSautel, including the
supplemental letter submitted by her on behalf of CEA. East Greenwich and NEIT
concur fully with CEA’s objections stated in that letter and Attorney DeSautel’s
presentation of argument at that hearing. To the extent necessary for preserving issues
for appeal under RIGL 23-18.9-9(a)(7), the Town of East Greenwich and NEIT hereby
incorporate by reference and raise all issues that were raised by CEA and its counsel.
Further, to the extent necessary for preserving issues for appeal under RIGL 23-18.99(a)(7), the Town of East Greenwich and NEIT hereby incorporate by reference and raise all substantive comments raised in opposition to MedRecycler that were submitted during the public comment period.

Finally, at the public informational meeting held on January 25, 2021, MedRecycler indicated that its operations would not require onsite storage of medical waste, but, instead, would involve the direct processing of four to eight truckloads of medical waste per day.\(^9\) The Town of East Greenwich and NEIT still maintain that MedRecycler should not be issued a solid waste license for all of the reasons previously stated.

However, if RIDEM does issue a license, it should hold MedRecycler to its representation at the public information meeting and RIDEM should place a condition on any approval limiting MedRecycler to receiving eight truckloads of waste per day, with onsite storage of medical waste prohibited.

Sincerely yours,

s/ Andy Teitz  Peter Skwirz
As counsel for the Town of East Greenwich and the New England Institute of Technology

cc: Michael Kelly, Esq.
Michael Resnick, Esq.
Counsel for MedRecycler-RI, Inc.

Counsel for MedRecycler-RI, Inc.

Via email only

Alexandra Callam, Esq.
Jerry Petros, Esq.
Counsel for M-F Athletic

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\(^9\) See Video of the 1/25/21 informational meeting starting at approximately 0:13:00 and 1:17:00, available at https://us02web.zoom.us/rec/play/7POWou5rN3xtdnjyKcHm1fvZfTV7Y8KH_hM6B6w s0cYtL alA3lezkfgF_am8Iy7W3pKQY7XMvzUyM1U.kbbayLu0ud4sPy6T?continueMode=tru e& x _zm_rtaid=1ZYAke6SL6qyc_QGTOlQ.1614959051719.8f25b66f279c1e829a69218a8e37 0a36& _x_zm_rhtaid=254 (last checked 4/9/2021).
Via email only

Marisa DeSautel, Esq.
Counsel for Communities for Environmental Awareness

Via email only

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DEPARTMENT RESPONSE:

- Responses to comments from other attorneys is found elsewhere in this document
Good afternoon.
Please see attached.

Thank you,
Joanne
April 7, 2021

Via Electronic and Regular Mail
(yan.li@dem.ri.gov)

Yan Li
Rhode Island Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street
Providence, RI 02908

Re: Proposed Medical Waste Management Facility License for MedRecycler-RI, Inc.
1600 Division Road, West Warwick, Rhode Island

Dear Mr. Li:

Enclosed please find M-F Athletic’s comments on RIDEM’s January 11, 2021, “Notice of Intent to Approve – Medical Waste Treatment Facility” proposed by MedRecycler-RI, Inc.

Very truly yours,

Gerald J. Petros

GJP:jlh

Enclosure

Comments of M-F Athletic on the Proposed Medical Waste Treatment Facility License for MedRecycler-RI, Inc. at 1600 Division Road, West Warwick, Rhode Island

On behalf of M-F Athletic, we submit the following comments on the Rhode Island Department of Environmental Management’s (“RIDEM”) January 11, 2021, “Notice of
Introduction: RIDEM Must Deny the MedRecycler Application

M-F Athletic (“M-F”) is a second generation, family-owned business that distributes training and conditioning, and track and field equipment for gyms, personal trainers, and schools.

MedRecycler proposes to build its incinerator in a multi-tenant facility located at 1600 Division Road. M-F’s warehouse and office facilities are in the same building and right next door to the proposed MedRecycler incinerator.

M-F’s warehouse would share a common wall with the MedRecycler incinerator. The common wall is constructed of wallboard, so a person could put a hand through that wall. M-F started its business over sixty years ago. M-F never conceived of anyone building a medical waste incinerator in this multi-tenant building when it expended significant funds to build out its leased space.

M-F employs seventy workers at this location. M-F also hosts health and education seminars at this facility, and customers frequently come to the warehouse to pick up orders.

M-F is deeply concerned about this proposal to site a medical waste incinerator on the other side of a sheet of wallboard from its business, and in such close proximity to its employees and customers.

The proposed MedRecycler license (and the Application) contradicts and ignores numerous applicable Solid Waste statutory and regulatory requirements and conditions precedent to the issuance of the proposed license. We cannot understand how RIDEM issued a Notice of Intent to Approve (the “NOI”), when the Application itself is so deficient. The comments below address four of the core requirements that MedRecycler’s Application fails to meet, or even address in some instances. These failures require that RIDEM deny this Application.

MedRecycler’s Application Neither Meets nor Addresses the Buffer Zone Requirement

The proposed Facility must meet all of the provisions set forth in RIDEM’s Solid Waste Regulations, including all of the General Operating Standards set forth in 250-RICR-140-05-1.9. These General Operating Standards apply to all Solid Waste Management Facilities, which include medical waste facilities like MedRecycler’s. See 250-RICR-140-05-1.9(B). RIDEM is well aware of this regulation. Its Notice of Intent to Approve explicitly states that this proposed medical waste treatment facility “shall” operate in
“strict compliance with the Rhode Island Medical Waste Regulations, and RIDEM’s Solid Waste Regulations.” Inexplicably, RIDEM stated this obligation and then failed to apply it during its review of the Application.

One of these critical General Operating Standards requires the MedRecycler incinerator to have a buffer zone between it and other facilities. Specifically, this standard states that any proposed facility “shall be required to maintain a buffer zone area that serves to mitigate nuisance impacts such as dust, litter, odor, and noise from the facility to human activities.” See 250-RICR-14005-1.9(P) (emphasis added). This is a common sense requirement; health and safety requirements require buffering of incinerators; these are not doctors’ offices -- they are dirty and dangerous facilities that burn or consume waste at extraordinary high temperatures.

The term “shall” in regulatory language means that RIDEM has no discretion to dismiss this buffer zone requirement. Specifically, this operating standard states that “the buffer zone must be an area of undeveloped vegetated land retained in its natural undisturbed condition, or created to resemble a naturally occurring vegetated area, or approved equal, that is not used for any facility operations.” Id. (emphasis added).

Incredibly, MedRecycler’s Application does not even address this basic threshold buffer requirement. In fact, nowhere in the Application is this standard even referenced, let alone discussed. MedRecycler ignored it. The word “buffer” is not even used in the Application. MedRecycler not only is not establishing a buffer zone, it is not even proposing to do so.

Even more remarkably, RIDEM’s NOI also fails to even discuss the buffer requirement. It is disturbing that an applicant would even file an application that ignores this basic requirement. It is even more troubling that the agency charged with administering the program and protecting the public became complicit in that dereliction. Fortunately, RIDEM has this opportunity to correct its oversight.

Attachment A are photos of MedRecycler’s proposed location inside the same building where M-F is located. As plainly shown, there is no “buffer zone” between the two locations, or any other of the tenant locations in this building. There will be no vegetation, or land in an undisturbed condition separating M-F’s office and warehouse from this high temperature waste processor. In place of a buffer, there will be a half-inch wallboard that a child could break through with a toy, with M-F and its employees and customers on the other side.

The Application does not and cannot meet the applicable solid waste operating standards requirement for a buffer zone.

The law requires this substantial, vegetated natural buffer for a reason -- to protect these Rhode Island citizens. RIDEM’s duty and obligation is to apply these regulations to proposed waste facilities to protect its citizens. Instead, RIDEM went ahead and
“conditionally” approved this operation without even addressing this critical requirement for a solid waste incinerator.

In short, the law requires any solid waste facility and particularly this medical waste incinerator to establish an adequate buffer. RIDEM has no discretion to waive this requirement. And the Application fails to meet it. RIDEM must follow and enforce these statutory and regulatory requirements and deny the Application.
MedRecycler Did Not Obtain the Required Approval from the State Planning Council

RIDEM’s Notice of Intent to Approve also fails to address the important siting provision under the Solid Waste statute, R.I.G.L. § 23-18.9-9(a)(1), requiring that the applicant “shall also submit simultaneously with the application a certificate of approval of the proposed site issued by the state planning council.”

This is a critical, threshold siting requirement – and it places responsibility with the State Planning Council (“SPC”). Without this required certification, RIDEM cannot review or process an application for an incinerator. RIDEM does not site incinerators, the SPC does. So that step must necessarily precede RIDEM action.

MedRecycler literally skipped this threshold requirement – there is no SPC certification. As a result, there has been no action by the state agency specifically designated to consider the lunacy of siting a hazardous waste incinerator in a multi-tenant building with no buffer and in close proximity to two day care centers, a residential neighborhood, and a college dormitory. MedRecycler recklessly skipped this crucial siting assessment. RIDEM cannot approve this license when this mandatory requirement has not been met.

RIDEM is powerless to waive or modify this requirement. In fact, this statute precludes RIDEM from even processing this Application unless the Applicant submits this Certificate of Approval. This Solid Waste statute states, in pertinent part, that the SPC “shall” only provide this approval “after great weight has been afforded to the detrimental impact that the placement of such a facility shall have on its surrounding communities and only after evaluation of alternative sites and assessment of comparative environmental impact at the sites in accordance with law and state planning council rules…. ” R.I.G.L. § 23-18.9-9(a)(1). The statute also provides that SPC “shall not issue its certificate prior to the publication of public notice and the expiration of the public comment period regarding the proposed site.” R.I.G.L. § 23-18.9-9(a)(1).

As detailed in the public comments submitted by the Town of East Greenwich and NEIT, the only action taken by the SPC regarding this facility is expressed in a December 6, 2019 correspondence from the SPC Secretary to the Managing Director of Financial Services at the Economic Development Corporation. In this correspondence, the SPC said the Project conforms to the State Guide Plan. That is not the certificate required by the Solid Waste statute. And obviously, the SPC has not yet noticed or received public comment or placed great weight on the impact the incinerator will have on the surrounding tenants and communities.

SPC made no determination about siting this incinerator. RIDEM cannot process this Application or even consider its approval before and unless MedRecycler fulfills this threshold requirement.

As explained in the Town of East Greenwich’s public comments, RIDEM’s rationalization that this SPC requirement does not apply to this medical waste facility, but only to “landfills,” is indefensible under the law. It is the kind of nonsense we might expect to hear from a desperate businessman trying to foist a troubled project funded by State bonds. It suggests this state
agency charged with protecting the public welfare is openly shirking its statutory responsibility. RIDEM needs to immediately correct its mistake.

SPC has a siting obligation, and RIDEM must require the Applicant to go back to square one and meet its siting obligation before the SPC. The Applicant did not submit this required Certificate. RIDEM must deny this license.

**MedRecycler Did Not Obtain the Required Written Approval from RIDEM for its Proposed Alternative Technology**

MedRecycler is planning to use pyrolysis, what RIDEM’s regulations call an “alternative technology,” to treat and destroy the medical waste. For applicants who are not choosing to use one of the proven listed technologies, RIDEM’s Medical Waste Regulation requires such applicants to prove the “alternative technology” through “thorough tests,” and obtain RIDEM’s prior written approval. See 250-RICR-140-15-1.15(F)(4) & (5).

Specifically, RIDEM is prohibited from approving an alternative technology, “unless and until” such technologies are proven, on the basis of thorough tests, that it can reliably meet the five specific criteria set forth below:

1. Completely and reliably inactivate *Geobacillus stearothermophilus* spores or *Bacillus atrophaeus* spores at a 4 Log10 reduction or greater; and,

2. Completely and reliably inactivate vegetative bacteria, fungi, viruses, parasites, and mycobacteria at a 6 Log10 reduction or greater [this requirement is applicable to technologies not based on thermal and chemical treatment]; and,

3. Be protective with respect to total impact on the environment; and,

4. Ensure the health, safety and welfare of both facility employees and the general public; and,

5. Ensure that the total weight and/or volume of the end product of the alternative technology does not exceed the total weight and/or volume of the regulated medical waste prior to treatment and/or destruction. Testing must also demonstrate that inactivation is uniformly and within containers reasonably likely to be treated in the system.”

Incredibly, RIDEM’s Notice of Intent to Approve does not contain any such written approval of this alternative technology. Instead, RIDEM issued a “conditional approval” and cited to a whole host of requirements and submittals, such as testing protocols, and “emissions and safety protocols” that RIDEM says the Applicant must submit before RIDEM can evaluate and approve this “alternative technology.” But RIDEM has it backwards: it cannot issue a license “unless and until” MedRecycler proves its technology and meets all of the requirements. RIDEM cannot license the facility and then see if it works.

No facility in the United States is currently using this technology to destroy medical waste and generate energy. And this Applicant is not Waste Management, Inc. or a large, sophisticated
waste or energy company with dozens of scientists and engineers working in labs across the country. This proposed “alternative” technology comes from an organization with no track record, no depth, no experience, no bench, and no credibility.

This makes the requirement to prove the technology before an applicant can obtain a license even more critical. But RIDEM’s Notice of Intent to Approve explicitly states that Applicant has not yet demonstrated two of the above five criteria required to approve the technology. The regulations do not allow for the Applicant to meet some of these five criteria. The language of the regulation is clear. The alternative technology cannot be approved “unless and until” the alternative technology is proven to meet all five criteria with “thorough tests.”

RIDEM ignores the plain absolute language of its own regulations, and rushes to issue what it labels a “conditional” approval, a procedure that RIDEM has invented out of whole cloth, and which is not provided for in the regulations, to allow the Applicant a chance to see if the alternative technology works after the Applicant builds the Project and begins to run it. This is a breathtaking callous action by an agency tasked with protecting the citizens of Rhode Island. And it’s ever more outrageous when one of the criteria the Applicant did not establish is whether the technology is safe in a multi-tenant building.

It is undisputed that the Applicant has not proved the technology, and undisputed that no one else is employing this technology in the United States for this purpose. It is also undisputed that the Application must be denied because it fails to satisfy the prerequisite that its proposed alternative technology meet these standards.

**MedRecycler Did Not Obtain the Required Certificate of Final Determination From West Warwick that the Site Conforms With Local Land Use Laws**

The Solid Waste statute, R.I.G.L. § 23-18.9-9(a)(1), also requires the Applicant to “submit to the director simultaneously with the application a certificate of final determination from the municipality in which it is proposed to site the facility that the site conforms with all applicable local land use and control ordinances.” R.I.G.L. § 23-18.9-9(a)(1). MedRecycler did not do this -- it did not submit this required certificate with its Application. That is because MedRecycler could not submit this certificate: West Warwick never issued any such certificate.

As the Town of East Greenwich explains in its public comments, this prerequisite applies to medical waste management facilities like MedRecycler’s, despite RIDEM’s view that this requirement only applies to “landfills.” The Town of East Greenwich’s public comments persuasively describe how RIDEM’s position is unsupported by both the statutory language and applicable case law. In addition, the Town’s public comments explain how West Warwick cannot issue this “final determination” under R.I.G.L. § 23-18.9-9(a)(1) until MedRecycler has both an approved Preliminary Plan and Final Plan. And RIDEM cannot consider approving MedRecycler’s Application until it submits this final determination.1

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1 See Town of East Greenwich’s March 12, 2021, comments, pages 3 to 7. M-F also incorporates by reference the Town of East Greenwich’s public comments relating to two other
RIDEM cannot even process, never mind approve, this Application until the Town approves the Project. Medical Waste Treatment Facilities must comply with specific facility operating standards, and obtain certain prior approvals, before DEM can even consider issuing a license. MedRecycler did not and cannot meet those conditions precedent here.

**Conclusion**

RIDEM should not have issued the Notice of Intent to Approve. Indeed, RIDEM should not even have reviewed the Application because MedRecycler failed to satisfy the three separate threshold requirements that must precede any regulatory review by RIDEM: (1) MedRecycler failed to obtain and submit a siting certificate from the SPC; (2) MedRecycler failed to obtain and submit the required certificate of final determination from West Warwick that the Site conforms with local land use laws; and (3) MedRecycler failed to prove that its unproven and untested technology can reliably meet the five specific criteria set forth in the solid waste regulations. Based on the Application and the undisputed facts, RIDEM has no authority under the Solid Waste statute and the solid waste and medical waste regulations, to issue, approve, or even conditionally approve the MedRecycler license.

Further, it is undisputed that MedRecycler failed to even address, let alone meet, the required buffer zone requirement of RIDEM’s own solid waste regulations. Med Recycler did not even address the buffer requirement in its Application. It is inconceivable that the State could license an incinerator to operate with no buffer at all in a multi-tenant building separated by no more than a piece of wallboard from innocent employees, including many of the seventy M-F employees, doing their job.

For these reasons, advancing this Application any further would be reckless, illegal, and breathtakingly indifferent to the health and welfare of the neighbors and the community. M-F, and all of the other residents, businesses and individuals, must conduct their affairs in accordance with the laws and regulations of Rhode Island. RIDEM must hold itself and this Applicant to the same standard and deny the MedRecycler Application.

**ATTACHMENT A**

provisions of the Solid Waste statute, R.I.G.L. § 23-18.9-8(a)(1), relating to standards applicable to the impact on the placement of the proposed facility to the surrounding communities, and R.I.G.L. § 23-18.9-9(a)(2)(ii), relating to the requirement that “all supporting documentation” be included in the proposed Application for public comment.
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
- See XIX Odor Issues
Hello,

I am writing to express my opposition to the incinerator. I believe that it will pose dangers to the air quality and thus have a negative effect on those living in the area.

Patricia Kelley
40 Ivy Garden Way
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
See I. Issues Related to the Department’s Role in the Permitting Process
Mr. Dennen,

I think the waste technology proposed by MedRecycler-RI Inc. or something similar is needed in Rhode Island as long as it is safe. The Johnston landfill will close sometime in the 2030s, and after it closes Rhode Island will need an economical method to dispose of all the solid waste. I hope Rhode Island DEM can determine if the emissions from the pyrolysis process or from burning the synthetic gas are safe. I would hope that there would be no dioxins, furans, or other cancer causing chemicals in the emissions. As long as the emissions are safe, MedRecycler-RI could be a small scale test of future waste disposal in Rhode Island.

Sincerely,
John Costa

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Good morning,
I am writing to express vehement opposition to the proposed MedRecycler.

Personally, I am not interested in the changes to traffic flow, added traffic, or smells that it will inflict on my town. Environmentally, I have a lot of concerns about the process and the proposal. Waste pyrolysis generates the same pollutants—like nitrogen oxides, sulfur dioxides, heavy metals, and persistent organic pollutants—and poses the same risks as traditional waste incineration. Burning syngas derived from plastics and other medical waste releases carbon dioxide along with high concentrations of dangerous toxics like lead, mercury, and dioxins. MedRecycler’s plan to “convert” medical waste to fuel will require a significant amount of external energy—high-heat technologies like pyrolysis generally use between 5 and 87 times as much energy as can be obtained from burning the resulting syngas. To provide this external energy, MedRecycler plans to burn fracked gas to heat its pyrolysis chamber.

Additionally, the MedRecycler does not meet Rhode Island Regulatory Standards for its medical waste treatment permit application to be granted, MedRecycler must demonstrate that its proposal will comply with Rhode Island medical waste regulations and solid waste regulations. There are several standards in those regulations with which MedRecycler will be unable to comply. These standards include, but are not limited to:

- Medical waste regulations section 1.15(F): MedRecycler must prove, “on the basis of thorough tests,” that its technology is “protective with respect to total impact on the environment” and that it ensures “the health, safety and welfare of both facility employees and the general public.” MedRecycler’s technology has never been used on medical waste and MedRecycler cannot prove that it is adequately protective.
- Solid waste regulations section 1.9(M): MedRecycler’s facility must be “designed, operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility.” Given the risks of burning medical waste, the untested nature of MedRecycler’s technology, and the close proximity of businesses and residents.

I urge you to vote against this measure and to protect Rhode Island’s air and water. Do not make us guinea pigs for an unproven process.

Rachel Busch LMHC ATR
Licensed Mental Health Counselor,
Mediator, Parenting Coordinator, Evaluator

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Rachel McCaughey, 19 old oak dr, Warwick RI
rbmccaughey@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Dear Ms. Li,

I would like to express my concerns in writing regarding the proposed Medrecycler, Inc. medical waste incineration site in West Warwick, RI on the East Greenwich line.

These types of facilities should not be allowed to establish themselves in or near residential communities.

The industrial park that Medrecycler is being proposed for is very much so residential despite the information being circulated by the developer.

I respectfully request that the RIDEM deny the request by Medrecycler, Inc. to establish a business like this in West Warwick, as well as all of Rhode Island.

This energy has been consistently found to not be a clean energy source.

The developer claims it is clean, but this technology has been criticized as being inefficient, because it takes so much energy to superheat the waste.

But even more critically, it’s unsafe and uncertain and should not be introduced anywhere in Rhode Island.

Pyrolysis is used to burn other types of waste in other locations in the US, but medical waste would be a new use and one that should not be tested on any Rhode Island residence and specifically, at the proposed site in such close proximity to residential neighborhoods.

Deliveries will not be inspected daily at this facility, with medical waste bags going directly into the incinerator unopened.

Thus, there is no way for the community to know what is being sent and incinerated there in order to ensure it’s not radioactive or otherwise harmful.

This is not the kind of development Rhode Island needs, and the people of West Warwick and East Greenwich specifically, are not interested in being guinea pigs for this technology.

Please do not approve this facility in our towns. I thank you for your attention to this matter and look forward to discussing it further at the Open Comments meeting on March 15th, 2021.
Sincerely,

Rachel-Lyn Longo
106 Middle Road

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
From: Raymond Riccio
kasjus23@verizon.net

[EXTERNAL] : medical waste burning

Centralize it with that dump heap up in Johnston.
Sent from my iPhone
Raymond

DEPARTMENT RESPONSE:
• No response needed
I am a Rhode Island resident. I hold a PhD in medical and environmental sociology from Brown University, where from 2002-2008 I studied, among other issues, the legacy of plastics production, including its increasing use in medicine and its subsequent role in medical waste.

I now write for the public about the history and legacy of plastics and pollution associated with their production and discard. I also serve on the Board of Directors of The Science and Environmental Health Network, a national think tank that (1) provides scientific and legal guidance to communities and decision-makers, and (2) helps translate the Precautionary Principle into environmental and public health policy. I write this letter on my own behalf and in opposition to the medical waste-to-energy (pyrolysis) plant proposed by MedRecycler for W. Warwick. And while I am not an expert on incineration or the so-called “advanced recycling” technologies, medical waste and its relationship to plastics is an issue I have spent considerable time studying, which is what I’d like to share with you today.

Medical waste is a global, multidimensional and growing problem, and its mismanagement is a recognized threat to the communities on the receiving end of its wastes, particularly in the Global South.[i] But it is a problem that requires systems thinking and coordination between health systems and governments at all levels of jurisdiction—not piecemeal and unproven technological quick-fixes that can generate further and even more complicated public health risks down the line.

When one looks at the composition of medical waste, surprisingly, only a small percentage is bio-hazardous or pharmacological, thus requiring specialized handling. The bulk of medical waste (some 75-85%, [noharm-global.org] according to the global coalition, Health Care Without Harm) resembles municipal waste—with one critical difference, which poses a significant challenge for pyrolysis technologies and will be discussed below.

Medical waste is generated in the course of medicine’s provision, but also in its administration (which yields waste that resembles office waste and includes paper). It also stems from health systems’ cafeterias, which produce a mixture of plastics and food waste. But most troubling is that at least 25% of medical waste is plastics [nationalgeographic.com], according to estimates from Practice Greenhealth and the Healthcare Plastics Recycling Council. However, this is likely an underestimate. In a recent audit of an urban Level I Trauma Center’s Emergency Department, 65% of the wastes were plastic, suggesting wide variation in the composition of the wastes the proposed pyrolysis facility might be handling at any given time.[ii]
Further: here’s the major distinction between plastics in municipal and medical waste and why it matters for pyrolysis. Medical waste contains a far higher concentration of PVC (polyvinyl chloride) plastics than municipal waste—perhaps as much as twice the amount. And PVC plastics contain 50+% chlorine, which will inevitably form hydrochloric acid (HCl), potentially in substantial amounts, at conditions fairly typical for pyrolysis units (i.e., low oxygen environments with temperatures ranging between 300-600 degrees Celsius).

Hydrochloric acid is very corrosive and must be dealt with or could damage the innards of the pyrolysis facility. In fact, corrosion resulting from hydrochloric acid has been a major reason why earlier pyrolysis facilities failed. Even in technical reviews that are otherwise supportive of pyrolysis in plastics waste management suggest there must be a special exception made for PVC, concluding: the “pyrolysis process is not advisable for PVC” as a result of HCl production. To what extent has the complexities of HCl factored into the decision-making process to date?

***

Waste management proposals that rely on “conversion technologies” such as pyrolysis, gasification, chemical recycling, or so-called “advanced recycling” technologies are on the rise once again and yet still remain unproven technologies, particularly for complex medical waste. Pyrolysis and similar technologies are a response to the increasing realization of conventional incineration’s dangers, recycling’s failures (including within health systems), and challenges to disposable plastics’ future growth by policies proposed, pending, or coming into force at the city, state, national and even intergovernmental levels.

This retreat from single-use plastics, it should be mentioned, is even happening within healthcare, where sterilization and reuse is once again [practicegreenhealth.org] being implemented. Total disposability within medicine is but a few decades old, an early response to HIV/AIDS. Now that more is understood about its transmission, thoughtful reuse of many kinds of medical supplies — following standards for proper sterilization — is being pursued both despite and because of the pandemic. Remember how significant disposable PPE shortages were in mid-2020.

From an energy perspective: waste-to-energy projects are themselves energy and carbon-intensive, and from what I’ve read, an inefficient, even costly way to produce energy. Significant inputs are required upfront for pre-sorting, pre-heating, heating and then to operate systems that clean or “scrub” syngas of its significant, often shifting in the amount and composition of contamination. In fact this latter stage, “the cleaning of contaminants and impurities from the syngas produced via conversion technologies is often cost-prohibitive,” notes Nate Seltenrich in Environmental Health Perspectives. This leaves me to conclude there are better ways for Rhode Island to source truly renewable
energy that actually meets State goals for climate targets (reductions in climate-relevant gas emissions) and air quality standards.

PVC aside, plastics are a diverse category of materials. The vast majority used today are manufactured from hydrocarbon feedstocks sourced from either natural gas liquids (like ethane or propane) or crude oil/naphtha. And, of course, plastics aren’t just plastics alone, but complex mixtures of petrochemical, heavy metals and organo-metal additives: flame retardants, plasticizers, stabilizers, antimicrobial agents, heavy metals, and also “non-intentionally added substances” inadvertently mixed in during processing. All of the above enter the pyrolysis chamber, combine and recombine, and then the complex mixture can exit via char, or later in the process, as the material moves through subsequent phases, as effluent or emissions, whether from the system itself, or if delayed, from whatever facility burns the combustible gas produced via pyrolysis.

As you well know, pyrolysis uses heat or thermal energy to physically and chemically degrade waste (ideally under oxygen-controlled conditions to prevent combustion and oxidation, though the WHO suggests this is an ideal and not always obtainable.) There are notable differences between how these systems work on paper, especially when engineers evaluate operations under “steady state” and ideal conditions, versus how they actually operate on the ground and under real-world, that is, changing conditions. Further, emission by-products and contaminated ash/waste are not negligible and in fact still pose concerns, especially under variable operating conditions and most especially in the event of a fire or accident.

What is the plan to monitor this facility? Its variable emissions? Whether its managing its own HCl production? To assess the shifting composition of its syngas and oils to ensure sufficiently “scrubbed” prior to combustion? And at this time, does the State have the budget and capacity to carry out this critical enforcement work?

Moreover, according to recent fiscal analyses, such facilities haven’t proven profitable or fiscally viable over the long run. For example, I read that GAIA explored $2 billion in investments in similar gasification and pyrolysis waste-to-energy projects (where solid waste was to be converted into synthetic gas or oils for later combustion.) Among these, technical and financial failures were numerous. The report concluded that: “technical and economic challenges for gasification projects include failing to meet projected energy generation, revenue generation, and emission targets.” These case studies, for me, raised questions about whether the State will require the operator to carry sufficient bonds to cover costs associated with the potential for future technical problems (bear in the mind the problems posed by hydrochloric acid production), accidents, disasters, which could lead to or happen separately from possible financial failure, all of which could leave the State fiscally responsible for a complex remediation. End of the pipe, technological solutions can’t remedy the problem of escalating plastics production and plastics’ rising use within medicine. It is a diversion from the deeper
conversation that the public is having about disposable plastics and the ties between plastics production (and discard management) to climate. Plastics continued growth, combined with the prospect of their incineration or conversion to fuels, could well undermine positive shifts in the energy and transit sectors and eats up a notable portion of the remaining carbon budget. But this conversation, as I mentioned, is occurring within medicine and has been since the early 1990s, with the formation of the global coalition, Health Care Without Harm.

Having learned from the EPA that medical waste incinerators were a leading point source for dioxins, furans and mercury releases, members within the medical community felt this was a direct violation of their Hippocratic Oath: to first do no harm. Since then, Health Care Without Harm has studied medical waste for a quarter century, and there are proven systemic solutions that don’t involve pyrolysis. The most effective, and the safest, are located upstream, at the level of hospital purchasing and procurement: what is called source reduction. And on this, there is ample guidance for health systems, from the World Health Organization, the United Nations Environment Programme, as well as from Health Care Without Harm.

It may seem that plastics’ use is a unilateral necessity within medicine, especially during a pandemic. And in specific instances, yes, plastics are critical in the manufacture of certain medical equipment and devices. But according to professionals associated with groups like Health Care Without Harm, plastics’ encroachment within medicine far exceeds medically necessary uses. And addressing plastics’ profusion—including its incursion into food service provision, for example—has been the work of Health Care Without Harm and its global allies, such as [Practice Greenhealth](http://practicegreenhealth.org). Together, these groups have developed new programs, for example, for reusable isolation gowns and other medical equipment where disposables have eclipsed sterilizable alternatives. Other programs work to eliminate PVC and phthalates from medical supplies altogether. [noharm-uscanada.org]

In addition to waste-aware procurement, resource recovery, recycling and waste segregation are also necessary to keep the remaining plastics from entering into incineration or conversion/"advanced recycling" systems where they can contribute to emissions troubling to both the climate and human health (including chlorinated hydrocarbons such as chlorobenzene, and precursors for polychlorinated dioxins and furans). Instead, Health Care Without Harm also identifies safer non-burn technologies like biodigestion or autoclave sterilization, which can effectively disinfect medical waste, all while contributing far lower carbon dioxide emissions. These are operated locally, and as batches are required, and therefore are more functional in the event of a disaster or other climate-related interruption. [noharm-global.org] since they aren’t required to be operated continually in order to minimize pollution releases. To facilitate medical systems and states making decisions about medical waste management, Health Care Without Harm and its allies in the Global Green and Healthy Hospitals network has
created a database of waste treatment technologies and case studies, which can be found here, in case helpful to your department: http://medwastetech.info/

I emphasize upstream solutions because these are critical to dealing with the equity and justice issues medical waste imposes across its lifecycle—from the upstream emissions associated with plastics’ extraction and production, to the toxics associated with its downstream landfilling or “techno-management” (as described here), to the front line impacts of the associated climate crisis.

The goal of Rhode Island, and of the region, should be to uphold the public’s health, to mitigate against the worst of the climate crisis and to work with systems, including the health system, at source and waste reduction. A medical waste-to-energy facility, whether in W. Warwick or elsewhere, runs counter to those mandates and, at best, poses the kind of “false solution” that instead imposes problems of its own.

Thank you for your time. And for your careful consideration of these matters during this permitting process.

Sincerely,

Rebecca Altman, PhD
Providence, Rhode Island


Rebecca Gasior Altman, PhD
Writer | Environmental Sociologist
The Song of Styrene: An Intimate History of Plastics forthcoming from Scribner Books
www.rebecca-altman.com [rebecca-altman.com]

Board of Directors
Science and Environmental Health Network
www.sehn.org [sehn.org]

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department's Role in the Permitting Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
See XII. Department Staffing Issues
Hello,

I am a resident off Signal Ridge in East Greenwich and I want to make my concerns known regarding the proposed MedRecyler facility on Division Road. Despite what the owner is stating, this technology is not widely used nor accepted anywhere in the United States. The thought of waste that has potential contaminants like COVID-19, chemo drugs and others is deeply concerning to me. What happens if something goes wrong and dangerous toxins and waste are released? Who is going to make sure our community is safe? That area would be deemed a hazardous waste site with repercussions to the surrounding businesses and residents. This is not the place to test this technology and will not going to produce the energy or the jobs claimed by the business owner. The risk is so great, I urge you to reject this license request.

Thank you,

Renee Seger

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
Good morning - Just to let you know MOnarch Waste Technologies which was cited as a comparable for MedRecycler was not approved by the EPA for pyrolysis in February 2020: https://www.federalregister.gov/documents/2020/02/25/2020-03754/applicability-determination-index-data-system-posting-epa-formal-responses-to-inquiries-concerning [federalregister.gov]

Thank you
Renu Englehart
Abstract for [1800041]

Q: Does EPA approve the request for an alternative monitoring plan (AMP) for the Monarch Waste Technologies, LLC (MWT) Pyromed Pyrolysis System to be operated at the Nambe Pueblo near Santa Fe, New Mexico as a hospital/medical/infectious waste incinerator (HMIWI) under NSPS Ec?

A: No. EPA determines that the petition does not provide specific information about the control equipment installed, nor does it provide sufficient other required information for a petition under 40 CFR 60.56c(j). Due to this lack of information, EPA cannot evaluate the AMP request. EPA previously provided information and guidance to the company related to implementation requirements under NSPS Ec after an on-site meeting and tour of the facility. However, the AMP petition submitted did not incorporate EPA's information. EPA's response outlines the areas of the petition that are in conflict with federal rule interpretations and requirements.
Abstract for [1900012]

Q: Does EPA approve the request for an alternative monitoring plan with site-specific operating parameters for the Monarch Waste Technologies, LLC (MWT) Pyromed Pyrolysis System to be operated at the Nambe Pueblo near Santa Fe, New Mexico as a hospital/medical/infectious waste incinerator (HMIWI) under NSPS Ec?

A: Based on technical review of the information submitted, EPA conditionally approves the interim operating parameters but does not approve the proposed testing plan. EPA approves the daily loading rate of sorbent and the pressure drop across the ceramic filters. MWT must also monitor both the inlet and outlet temperatures of gases routed to and exiting the pollution control system because vent gas temperature may be an indicator of potential dioxin formation. To obtain approval of an initial performance testing plan, MWT must further develop a performance test plan that aligns with requirements of 40 CFR 60.8 and 40 CFR 60.56c and submit the plan for EPA to review and approve.

DEPARTMENT RESPONSE:
• See XI. Monarch Pyrolysis Facility in New Mexico
I asked for an opinion from the AG's office regarding the March 15th Formal Public Comment Hearing. I believe that you are holding a formal hearing in which case this must be noticed on the RI Secretary of State's website with an agenda and minutes. The AG staff attorney was not aware of any public hearing noticed in the way that RIDEM has in this case (Notice of Formal Public Comment) unless this is the rules and regs of RIDEM. If this is the case, can you point me in the direction of where I might find it?

Thank you

Renu Englehart
2005 Division Rd
East Greenwich RI 02818
Town Council

-------- Forwarded message --------
From: Open Government <opengovernment@riag.ri.gov>
Date: Thu, Mar 11, 2021 at 9:09 AM
To: Renu E <renuenglehart@gmail.com>

Good morning,

Without receiving a formal complaint and conducting an investigation, including receiving a response from the public body, this Office is not able to opine on whether a particular meeting implicates the Open Meetings Act (“OMA”) or whether particular conduct violates the OMA. However, I am happy to provide some general information regarding these topics.

Generally speaking, the OMA is implicated whenever a quorum of a public body convenes for a “meeting.” See R.I. Gen. Laws § 42-46-3; Fischer v. Zoning Board for the Town of Charlestown, 723 A.2d 294 (R.I. 1999). For purposes of the OMA, a “meeting” is defined as “the convening of a public body to discuss and/or act upon a matter over which the public body has supervision, control, jurisdiction, or advisory power.” R.I. Gen. Laws § 42-46-2(1); see also Zarella, et al. v. East Greenwich Town Planning Board, OM 03-02. A “quorum” is defined as “a simple majority of the membership of a public body.” R.I. Gen. Laws § 42-46-2(4).
The OMA generally requires that every meeting of all public bodies “shall be open to the public.” R.I. Gen. Laws § 42-46-3. This Office has previously repeatedly stated that the OMA “does not require a public body to provide unlimited seating.” Brunetti, et al. v. Town of Johnston, OM 17-19 (attached). This Office cannot express an opinion about whether the particular facts you allege in this case would or would not violate the OMA or the Governor’s Executive Order without conducting an investigation pursuant to a formal complaint- which I do not construe you as making at this time, though you are free to do so if you think a meeting violates the OMA.

I hope this background information is helpful.
Kate Sadeck

Katherine Connolly Sadeck
Special Assistant Attorney General
Chief, Open Government Unit
The State of Rhode Island | Office of the Attorney General
150 South Main Street | Providence, RI – 02903
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<http://www.riag.ri.gov/>

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From: Renu E <renuenglehart@gmail.com <mailto:renuenglehart@gmail.com> >
Sent: Wednesday, March 10, 2021 7:51 PM
To: Open Government <opengovernment@riag.ri.gov <mailto:opengovernment@riag.ri.gov> >
: RIDEM - Office of Land Revitalization and Sustainable Management

[External email: Use caution with links and attachments]

Good evening -
I am attaching for you a notice of Public Comment for an application hearing March 15th at 4 pm via Zoom. I am trying to figure out if this is an actual Public Hearing that should be noticed on the RI Secretary of State website or if the Notice of Public Comment is different from a Public Hearing. RIDEM says that they will only be taking public comments at this point and that no new information will be announced during this meeting.

http://dem.ri.gov/programs/benviron/waste/pn/pn-medrecycler.pdf [linkprotect.cudasvc.com]
<https://urldefense.com/v3/__https://linkprotect.cudasvc.com/url?a=http*3a*2f*2fdem.ri.gov*2fprograms*2fbenviron*2f>
VIA EMAIL ONLY
June 30, 2017
0M 17-19
Mr. David Brunetti
RE: Brunetti et al. v. Town of Johnston

Dear Mr. Brunetti and additional Complainants:
The investigation into your Open Meetings Act ("OMA") complaint against the Town of Johnston ("Town") is complete. Along with twenty-two (22) other complainants, you filed the instant OMA Complaint regarding the Town Council's meeting on January 10, 2017. 11 Because all twenty-three complaints raise similar legal and factual issues regarding three alleged OMA violations, we address all the complaints in this finding. 12 While some complainants may raise unique facts — and we will supplement those facts below as necessary — the relevant facts are nearly identical and undisputed.

We accordingly proceed to examine all three issues raised in the twenty-three complaints — (1) the alleged defect in the notice for the meeting, (2) the alleged insufficient venue, and (3) the alleged rolling quorum held outside the public purview — seriatim. In doing so, we note that while most complaints raise only one or two of the above issues — and while we question whether some complainants are aggrieved within the meaning of R.I. Gen. Laws 42-46-8 — collectively the complaints raise all three of these issues.
At the outset, we note that in examining whether a violation of the OMA has occurred, we are mindful that our mandate is not to substitute this Department's independent judgment concerning whether an infraction has occurred, but instead, to interpret and enforce the OMA as the General Assembly has written the law and as the Rhode Island Supreme Court has interpreted its

11 Your Complaint was the first received by the Department after the January 10, 2017 Town Council meeting, and for this reason, we list you as the "lead" complainant. We mean no disrespect to any of the other twenty-two complainants and each of their individual complaints, supporting materials, and where applicable rebuttals, have been reviewed by this Department. As noted, supra, this finding addresses all complainants. See Addendum A for a complete list of the complaints addressed by this finding.

12 We note that all complainants raised one or more of these three issues.
provisions. Furthermore, our statutory mandate is limited to determining whether the Town violated the OMA. See R.I. Gen. Laws 42-46-8. In other words, we do not write on a blank slate.

1. Notice of the January 10, 2017 Meeting

Four complainants allege that the supplemental notice of the January 10, 2017 meeting was insufficient in violation of R.I. Gen. Laws 42-46-6(b). As complainant Mr. Steven Ahlquist noted, in pertinent part:

"[I]t was impossible to know what the meeting was about in a timely fashion, giving me no time to arrange suitable coverage of the meeting, which is the whole point of the Open Meetings Act, which is to inform the public in a timely way. Searches for key words such as 'Clear River' 'Invenergy' and the like revealed nothing until the amended notice went out, giving me much less than the required three days notice [sic]."

The agenda for the January 10, 2017 meeting was posted on January 6, 2017. The agenda stated, in relevant part:

"Resolution 2017-5: A resolution ratifying and authorizing the Mayor to enter into a Water Supply and Economic Development Agreement between the Town and Clean River Energy, LLC[]." (Emphasis added).

A second agenda for the January 10, 2017 meeting was posted at 9:24 AM on January 9, 2017. This agenda stated, in pertinent part:

"Resolution 2017-5: A resolution ratifying and authorizing the Mayor to enter into a Water Supply and Economic Development Agreement between the Town and Clear River Energy, LLC (The sole purpose of this correction is to correct a typographical error in the original posting; correction to change the word 'Clean' to 'Clear[]')" (Emphasis added). 13

Complainants allege that this error, though consisting of one letter, had a significant effect on their ability to be notified of the meeting. Several complainants maintain that they use Google Alerts to track certain keywords and that, accordingly, the term "Clean River Energy, LLC" never set off alerts for "Clear River Energy, LLC." Accordingly, these complainants contend that they did not receive notice of the meeting until the second agenda was posted on January 9, 2017, less than forty-eight (48) hours before the January 10, 2017 meeting. 14 Seg R.I. Gen. Laws 42-46-6(b).

Before we can reach the merits of this allegation we must, as a threshold matter, determine whether any of these four complainants have standing to bring their complaints.

13 These agendas are available at http://sos.ri.gov/openmeetings/?page=meeting&id=209753.
14 Several complainants also assert that the notice was not posted on the Town's website or its calendar. The OMA, however, contains no requirement to post notice on a Town's website or its calendar, and therefore, these allegations do not violate the OMA.
The OMA provides that "[a]ny citizen or entity of the state who is aggrieved as a result of violations of the provisions of this chapter may file a complaint with the attorney general." R.I. Gen. Laws 42-46-8(a). In Graziano v. Rhode Island State Lottery Commission, 810 A.2d 215 (R.I. 2002), the Rhode Island Supreme Court examined the "aggrieved" provision of the OMA. There, an OMA lawsuit was filed concerning notice for the Lottery Commission's March 25, 1996 meeting wherein its Director, John Hawkins, was terminated. At the Lottery Commission's March 25, 1996 meeting, Mr. Hawkins, as well as his attorney, Ms. Graziano, were both present. Finding that the Lottery Commission's notice was deficient, the trial justice determined that the Lottery Commission violated the OMA and an appeal ensued.

On appeal, the Rhode Island Supreme Court found that it was unnecessary to address the merits of the OMA lawsuit because "the plaintiffs Graziano and Hawkins have no standing to raise this issue" since "both plaintiffs were present at the meeting and therefore were not aggrieved by any defect in the notice." Id. at 221. The Court continued that it:

"has held on numerous occasions that actual appearance before a tribunal constitutes a waiver of the right of such person to object to a real or perceived defect in the notice of the meeting. * * * It is not unreasonable to require that the person who raises the issue of the defect in notices be in some way disadvantaged or aggrieved by such defect. While attendance at the meeting would not prevent a showing of grievance or disadvantage, such as lack of preparation or ability to respond to the issue, no such contention has been set forth in the case at bar. The burden of demonstrating such a grievance is upon the party who seeks to establish standing to object to the notice." Id. at 221—22.

Here, pursuant to R.I. Gen. Laws 42-46-8(a), and the standard established in Graziano, the complainants must demonstrate that they were "in some way disadvantaged or aggrieved by such defect" in the notice. at 221. Importantly, the test is not whether the public is aggrieved, but whether the complainant, as an individual, is aggrieved. Sgg Riggs v. East Bay Energy Consortium, PR 13-25, 0M 13-30.

Having examined this issue closely, we conclude that no complainant has satisfied the Graziano burden and we find that the specific facts presented indicate that no one is aggrieved by the alleged defect in the notice. We note that two of the four complainants who raised this issue Ms. Jean Lynch and Sister Mary Pendergast — admit that they attended the meeting. See Block v. Board of Elections, 0M 13-25 (noting that the facts demonstrated "a situation no different than Graziano, i.e., a person who complains about the sufficiency of notice, but nonetheless attends the meeting and provides no evidence of any particular detriment or injury."). While the Supreme Court made clear that attendance does not, by itself, prohibit a person from showing they were aggrieved by the lack of notice, no such showing has been demonstrated in this case. Although it is unclear if the other two complainants — Mr. Justin Boyan and Mr. Steven Ahlquist — attended the meeting, at the very least, neither complainant contends that they missed the meeting because of the late notice. See Clark v. West Glocester Fire District, 0M 14-40 (finding no standing where
"[w]e have been presented no evidence concerning whether [the Complainant] attended the meetings in question, sought to attend the meetings in question, or did not attend the meetings in question because of the allegedly deficient notice."). Indeed, these two complainants brought this issue to this Department's attention before the January 10, 2017 meeting, thus indicating that both complainants had notice of the intended subject-matter, albeit perhaps on less than forty-eight (48) hours notice. Upon this Department raising the aggrieved issue with Mr. Ahlquist, who is one of the two complainants who wrote to this Department before the meeting occurred, Mr. Ahlquist advised that the late notice afforded him "no time to arrange suitable coverage of the meeting[.]") Respectfully, this assertion, by itself, is insufficient to show that Mr. Ahlquist was specifically disadvantaged. Our conclusion — that the Graziano standard requires more than a conclusory statement — is in accordance with Graziano and our previous findings. See Graziano, 810 A.2d at 222 ("The burden of demonstrating such a grievance is upon the party who seeks to establish standing to object to the notice."); see also Plunkett v. Westerly School Committee, 0M 17-18 ("This failure to sufficiently articulate how the alleged deficient posting disadvantaged you individually is fatal to your claim."). Based on the totality of the circumstances, we find that no complainant is aggrieved by the alleged defect in the notice. In other words, no complainant has identified any evidence to suggest that they did not attend the January 10, 2017 meeting because of an insufficient or untimely posted agenda, or that they were otherwise aggrieved within the meaning of R.I. Gen. Laws 42-46-8(a). Accordingly, no complainant has standing to bring these allegations. Our conclusion is compelled by the specific facts and our precedent. We find no violations.

2. Venue

Twenty complainants allege that the venue chosen for the January 10th meeting was improper, both in that they were unable to attend the meeting because of the size of the venue and that the Town failed to respond to what the complainants describe as reasonable requests to change the venue. Sister Mary Pendergast's complaint is illustrative and provides, in relevant part:

"I arrived at 6:10 pm for a 7:00 meeting. The fire marshall told me that the room was already filled to capacity and that I could not enter. The room was indeed filled to capacity with union members in every seat! I asked the fire marshall to get a change of venue because a large crowd was gathering in the hallway. He did not know that it was common practice to accommodate people who want to participate, even if it is just to observe proceedings. He said he asked somebody and there would be no change of venue and that he 'didn't make the rules.'"

I [] contend that a public meeting should be held in a space that can accommodate the public. *** I believe Johnston violated the OMA by not accommodating the people that showed up for that meeting, by offering preferential seating to those that they wanted in that room."

The Town submitted three affidavits in response to these allegations. Town Clerk Vincent P. Baccari, Jr., provided the following information in his affidavit, in pertinent part:

"I l. I entered the room at the Johnston Municipal Court in which the meeting was being held at approximately 6:10 p.m. on the evening of January 10, 2017 in order to prepare for the meeting, which was scheduled to be called to order at 7:00 p.m.

Upon my arrival, I noticed that the gallery was almost, if not completely full; however, I do not recall seeing individuals gathering outside of the meeting room in the hallway.
While I do recall seeing a few Town officials and/or employees preparing for the meeting, the majority of individuals seated in the gallery were not known to me.

At some time after my arrival, the meeting room did reach its capacity and the overflow of members of the public congregated in the hallway immediately outside of the meeting room.

17. Seating in the meeting room is available to members of the public on a first come, first served basis, and no preference is given to any particular groups or individuals, including residents and non-residents of the Town.

25. I personally did not receive a request to change the venue prior to the meeting; nor was I aware of any such request being made to the administration for the Town of Johnston prior to the meeting. Rather, I only became aware of a request to change the venue when I heard individuals chanting 'Change the venue' in the hallway at the beginning of the meeting.

28. *** Clear River Energy, LLC's deadline for securing a water supplier was set to expire on January 11, 2017, and therefore, postponing the meeting to secure a larger venue would have very likely foreclosed the opportunity for the Town of Johnston to secure such an agreement."

Fire Chief Timothy P. McLaughlin stated in his affidavit, in relevant part:

"5. In accordance with the State Fire Safety Code, the maximum capacity for the meeting room at the Johnston Municipal Court is eighty-seven (87) occupants.

11. Upon completing the task of counting the number of persons in the meeting room, I confirmed that the room was at capacity, and thus I did not allow anyone else to enter the room[.]

***

12. Seating in the meeting room is available to members of the public on a first come, first served basis, and no preference is given to any particular groups or individuals, including resident and non-residents of the Town.

*** [I]n recognition of the fact that the matter on the Town Council's agenda was of importance to those assembled in the hallway, I allowed them to remain in the hallway as long as they remained close to the walls and kept the middle of the hallway clear.

18. Approximately fifteen (15) to twenty (20) individuals remained in the hallway throughout the duration of the meeting."

Police Chief Richard S. Tamburini generally corroborated these facts in his submitted affidavit.

We note as a preliminary matter that although some complainants may not have standing to bring these allegations, numerous complainants alleged they were denied entry to the January 10, 2017 meeting and, accordingly, are aggrieved pursuant to R.I. Gen. Laws 42-46-8(a) and the standard established in Graziano. We therefore proceed to address the merits of these allegations.

The OMA provides that is "essential to the maintenance of a democratic society that public business be performed in an open and public manner and that the citizens be advised of and aware of the performance of public officials and the deliberations and decisions that go into the making of public policy." R.I. Gen. Laws 42-46-1. Additionally, the OMA requires that "[e]very meeting of all public bodies shall be open to the public unless closed pursuant to 42-46-4 and 42-46-5." R.I. Gen. Laws 42-46-3.
While several complainants assert that the OMA requires that every interested person be able to attend and witness a public body's open meeting, the OMA does not support such a conclusion. This Department has previously observed that the OMA "does not require a public body to provide unlimited seating." Sgg In re Town of West Warwick, ADV 0M 99-02; seg also Daniels v. Warwick Long Term Facilities Planning Committee, 0M 14-02. Specifically, in In re Town of West Warwick, this Department issued an advisory opinion to the Town of West Warwick in anticipation of a meeting that was expected to exceed capacity, concluding that the OMA did not require the termination of the meeting if attendance exceeded the legal limit of 700 people. In Daniels, we similarly found that the OMA did not require the public body at issue to move its meeting to provide more seating where attendance exceeded the room's capacity of 52.

Although the facts and travel of the instant matter differ from our previous findings, the central conclusion that the OMA "does not require a public body to provide unlimited seating" applies with equal force in this case. Respectfully, we have been directed to no provision within the OMA, nor have we found one, that requires unlimited seating to public. Notwithstanding, in the appropriate case we could envision a situation where the OMA is violated where available seating is so sparse as to effectively eliminate the public's attendance, but, considering the instant facts, we conclude this is not that case.

Here, we note that the maximum room occupancy was eighty-seven, a number large enough to provide for considerable public attendance and larger than the capacity at issue in Daniels. We are also advised that the location of this meeting was at the location where Town Council meetings are typically held. Additionally, we note that approximately twenty people remained in the hallway, permitted to do so by the fire marshall. Although not seated in the room itself, depending on one's location in the hallway, those in the hallway could conceivably still observe the meeting's proceedings. See Sister Pendergast rebuttal, 23 ("Some people in the hallway might be able to hear[.]"). Such accommodation belies any contention that the Town sought to eliminate the public's attendance.

Furthermore, we observe that the affidavits submitted by the Town reveal no evidence of preferential treatment with respect to seating, no evidence that the Town knew the attendance would exceed the meeting space until about an hour before the meeting was scheduled to begin, and no evidence that moving the meeting to a larger space was feasible or possible. Indeed, we note the Town's undisputed insistence that it could not postpone the meeting due to the time sensitive nature of the business to be discussed. While some suggestion was made by various complainants that the Town could have moved its meeting to a different location but still held its meeting on January 10, 2017, the Town decided against this course for concern that such action would have violated the OMA. See R.I. Gen. Laws 42-46-6(b)(requiring public notice to be

15 Numerous complaints allege that union workers were provided preferential treatment and/or advanced notice of this meeting. Respectfully, there is simply no evidence to support that the Town provided this preferential treatment and/or advanced notice. While the union members may have organized and there is evidence that many union workers were at the meeting location and occupying seats at least one hour before the meeting as best as we can tell this organization occurred at the union level and not the Town level.
posted 48 hours before the meeting and to include, inter alia, the "place of the meeting"). Because the Town did not post its meeting for one location, yet convene its meeting at a different location, we need not evaluate whether such action would have violated the OMA. The evidence establishes, however, that this concern — and perhaps others — was part of the Town's decision making process not to relocate the January 10, 2017 meeting. On these facts, we cannot conclude that such a determination violated the OMA.

As further support for this conclusion, we recognize that our nation's courtrooms are open to the public. Despite this principle, courts routinely impose capacity limitations and other restrictions far more restrictive than those imposed by the Town in this case. Although stated in the context of a criminal defendant's right to a public trial, the following excerpt from United States Supreme Court Justice Harlan provides insight into the principle at issue in this case:

"[o]bviously the public trial guarantee is not violated if an individual member of the public cannot gain admittance to a courtroom because there are no available seats. The guarantee will already have been met, for the 'public' will be present in the form of those persons who did gain admission. Even the actual presence of the public is not guaranteed. A public trial implies only that the court must be open to those who wish to come, sit in the available seats, conduct themselves with decorum, and observe the trial process." 


"As a courtroom can only seat a finite number of the public, [subject to the above caveat], the Open Meetings Act similarly does not expressly impose a requirement of unlimited seating." In re Town of West Warwick, ADV 0M 99-02.

This is not to say we are unsympathetic towards those who were unable to be seated at the public meeting. In fact, our review of the video recording finds senior citizens standing in the hallways while able-bodied and young men sit in limited seats, some of whom were laughing (and arguably taunting) those who stood in the hallway. We understand the frustration of those who not only could not enter the meeting room but also were subjected to such conduct. However, our opprobrium of this conduct does not supplant our sole role to interpret and enforce the OMA as the General Assembly has written the law and how it has been interpreted. Applying this standard, we simply find nothing in the OMA that required the Town to move its January 10, 2017 meeting beyond its scheduled location under these circumstances. Our precedent and the language of the OMA compel this conclusion. Accordingly, we find no violations.\[16\]

16 Some complainants reference In re: Town of Glocester, ADV 0M 99-03 in support of their positions. Respectfully, we do not find In re: Town of Glocester to be applicable here. There, we were asked to opine on the application of the OMA to situations involving a gathering of Glocester Town Council members that did constitute a quorum. With no quorum present, we found that no "meeting" would occur and, accordingly, that the OMA was not implicated. As it is undisputed that a quorum of the Johnston Town Council was present for the January 10, 2017 meeting, we find In re: Town of Glocester to be of little utility here.
3. Rolling Quorum

Six complainants allege that a series of meetings prior to the January 10, 2017 meeting between the Town Mayor and various Town Council members constituted a "rolling" or "walking" quorum and violated the OMA. Ms. Jean Lynch's complaint is illustrative, stating, in relevant part:

"With regard to the 'rolling quorum' violation, in an article published by the Johnston Sunrise [a local newspaper] on January 11, 2027 [sic], Mayor Polisena was quoted as follows: 'I met with the council one on one, which is perfectly legal. I obviously showed them what the offer was and told them what the offer was,' he said. 'They were obviously on board; it's money that comes to the town for doing absolutely nothing but selling water.' []

The Mayor's consecutive one-on-one meeting[s] with members of the council, which he claims were 'perfectly legal' I have been told were in fact a violation of the 'rolling meeting' or 'walking meeting' quorum prohibition. These actions constituted a meeting. No notice was provided for such a meeting."

The Town submitted affidavits from the five Town Council members and the Mayor. In his affidavit, Mayor Joseph M. Polisena states, in pertinent part:

"2. On Wednesday, January 4, 2017, at approximately 10:00 a.m., I participated in a telephone conference with the President of the Johnston Town Council, Anthony Verardo with regard to the terms of the proposed Water Supply and Economic Development Agreement between the Town of Johnston and Clear River Energy, LLC (hereinafter the 'Proposed Agreement'). Also present at Johnston Town Hall during this telephone conference were my Chief of Staff, Douglas Jeffrey; the Town Solicitor, William J. Conley, Jr.; and Town Council Member Robert V. Russo.

During the conversation, I explained the terms of the Proposed Agreement to Council President Verardo and Councilperson Russo.

No other members of the Johnston Town Council were present at and/or participated in the telephone conference.

None of the participants in the conversation discussed the thoughts, actions, opinions, or the like of any other members of the Town Council.

The purpose of this conversation was to provide the two (2) council members with the essential terms of the Proposed Agreement so that they would have the opportunity to process the proposal in advance of the Johnston Town Council meeting and be able to make an informed decision at the meeting.

At the conclusion of the meeting, Solicitor Conley reminded President Verardo and Councilperson Russo that they were not to discuss the Proposed Agreement or any other such matters with other members of the Town Council, as to do so would constitute a violation of the Open Meetings Act.

Also on Wednesday, January 4, 2017, at approximately 12:00 p.m., I met with Town Councilperson Richard DelFino, Ill at Johnston Town Hall for the purpose of explaining the relevant terms of the Proposed Agreement to him. ***
At some point after the meeting began, then Town Councilperson-elect Robert Civetti joined the meeting.

I explained the terms of the Proposed Agreement to Councilperson DelFino and then Councilperson-elect Civetti.

No other members of the Johnston Town Council were present at and/or participated in the meeting.

None of the attendees at the January 4, 2017 meeting discussed the thoughts, actions, opinion, or the like of any other members of the Town Council.

At some time in the week prior to the January 10, 2017, during a chance meeting at Johnston Town Hall with David Santilli, the Vice President of the Town Council, I explained the terms of the Proposed Agreement to him.

No other members of the Johnston Town Council were present at and/or participated in this chance meeting with Vice President Santilli.

We did not discuss the thoughts, actions, opinions, or the like of any other members of the Town Council related to the Proposed Agreement.

25. At no time did I act as a conduit between Town Council Members; rather I merely presented the terms of the Proposed Agreement to the Councilors at the respective meetings so that they could make thoughtful, informed votes at the scheduled Town Council meeting."

All five Town Council members referenced in the Mayor's affidavit filed their own individual affidavits that corroborate the relevant details.

The OMA requires that "[e]very meeting of all public bodies shall be open to the public unless closed pursuant to 42-46-4 and 42-46-5." R.I. Gen. Laws 42-46-3. Consistent with this Department's previous findings and with applicable case law, the OMA is implicated whenever a quorum of a public body meets. See R.I. Gen. Laws 42-46-3; Fischer v. Zoning Board for the Town of Charlestown, 723 A.2d 294 (R.I. 1999). For purposes of the OMA, a "meeting" is defined as "the convening of a public body to discuss and/or act upon a matter over which the public body has supervision, control, jurisdiction, or advisory power." R.I. Gen. Laws 42-46-2(a); see also Zarella et al. v. East Greenwich Town Planning Board, 0M 03-02. A "quorum" is defined as "a simple majority of the membership of a public body." R.I. Gen. Laws 42-46-2(d).

Although the above definitions are seemingly straightforward, it is noteworthy that a quorum may be created, and a meeting "convened," by unconventional means. In particular, this Department has previously recognized the "rolling" or "walking" quorum, where a majority of the members of a public body attain a quorum by a series of one-on-one conversations or interactions. See In Re: South Kingstown School Committee Electronic Mail Policy, ADV 0M 04-01 (series of email communications among a quorum of a Committee would satisfy the
quorum requirement and implicate the OMA); In Re: Pawtucket City Council, ADV 0M 05-01 (warning against the “walking quorum,” where public business is conducted in a series of individual encounters that may not constitute a quorum, but which collectively do so); D'Andrea v. Newport School Committee, 0M 98-11 (violation of the OMA when Committee members used head signals to vote on a matter); International Brotherhood of Police Officers v. Barrington Town Council, OM 96-01 (OMA prohibited communication by fax to obtain the endorsement of Council members of a newspaper editorial); Dempsey v. Rhode Island Ethics Commission, OM 94-14 (“[d]espite the caller's best intentions, a phone call may result in a substantive discussion which should be conducted in the public forum”). Importantly, our findings have centered on the nexus between these one-on-one conversations and whether they serve as a chain of communication sufficient to constitute a collective discussion. See Guarino, et al. v. Rhode Island Atomic Energy Commission, OM 14-07 ("[i]f a quorum of members of a public body creates a chain of communication and responses, through any electronic media, about any matter over which a public body has supervision, jurisdiction, control or advisory power, other than to schedule a meeting, the OMA may be violated. Moreover, our previous findings have left open the possibility that a non-public body individual could serve as a conduit between public body members if they supplied the missing link connecting collective discussion between and among public body members.

Here, based on our prior findings and the undisputed facts, we find no violation. As an initial matter, we note that the Mayor is not a "public body" under the OMA and therefore is not subject to the OMA's requirements. See R.I. Gen. Laws 42-46-2(3). Any suggestion that the Mayor violated the OMA must fail as a matter of law.

The Town provides uncontroverted evidence in affidavit form that the Mayor had three separate communications with various Town Council members. None of these three separate communications individually contained a quorum of the Town Council. While the absence of a quorum during one meeting does not preclude a "rolling" or "walking" quorum as discussed above, according to the affidavits produced by the Town, "none of the participants in the respective conversation[s with the Mayor] discussed the thoughts, actions, opinions, or the like of any other members of the Town Council." And the affiants specifically note that after their respective meetings with the Mayor there was no communication between or among other Town Council members on this issue. Based on these particular undisputed facts, we find no evidence that the Mayor served as a conduit that connected the three communications with Town Council members and therefore find no evidence of any nexus between the communications. See 17, OM 14-07. Therefore, we cannot find that a collective discussion between or among Town

17 As an additional matter, we note that the Mayor actually signed the Proposed Agreement on January 6, 2017, prior to the January 10, 2017 meeting. Pursuant to Article IV, 4-6(6) of the Town's Charter, this signing was not final until the Town Council approved the Proposed Agreement on January 10, 2017. The necessity of the Town Council's approval of the Mayor's signature weighs against the contention by several complainants that the Proposed Agreement was authorized before the January 10, 2017 meeting. A representative of the Town Council signed the Proposed Agreement on January 10, 2017, as authorized by the Town Council.
Council members occurred and, accordingly, do not find a rolling or walking quorum. Without a quorum, the OMA is not implicated and, as such, we find no violations. See R.I. Gen. Laws 42-46-3.

One final matter warrants mention. Some complaints noted that the January 10, 2017 meeting did not provide for public comment. The OMA, however, is silent on the issue of the public's right to speak publicly at meetings. See R.I. Gen. Laws 42-46-6(d)("Nothing contained in this chapter requires any public body to hold an open forum session, to entertain or respond to any topic nor does it prohibit any public body from limiting comment on any topic at such an open forum session."). Accordingly, since the OMA does not address whether the public has the right to speak during a public comment portion of an open meeting, nor does the OMA address whether a public body must receive public comment, respectfully we are constrained to find no violation. See Vargas v. Providence School Board, 0M 02-12, PR 02-06; Gorman v. Tiogue Fire District Council, 0M 97-23.

In sum, we find no violations. We note that it is apparent by the sheer number and content of the complaints that there is at least some public dissatisfaction with the process that led to the January 10, 2017 meeting. However, our acknowledgment of the negative public response that this meeting engendered is not tantamount to a finding of a violation of the OMA. As described supra, nothing in the submitted uncontroverted evidence substantiates a violation of the OMA, which is all we have jurisdiction to determine. While some may view this finding as a victory — while others may view this finding as defeat — as always, the final determination will be cast by the voters of Johnston. Our sole area of review is the OMA, and on this matter, we find no violation.

Although the Attorney General will not file suit in this matter, nothing within the OMA prohibits an individual or entity from obtaining legal counsel for the purpose of instituting injunctive or declaratory relief in Superior Court. See R.I. Gen. Laws 42-46-8(c). We are closing this file as of the date of this correspondence.

We thank you for your interest in keeping government open and accountable to the public.

Very truly yours,

Sean Lyness
Special Assistant Attorney General
SL/kr
Cc: William Conley, Esquire
ADDENDUM
LIST OF COMPLAINANTS ADDRESSSED BY THIS FINDING
David Brunetti
Jean Lynch
Mary Pendergast
Justin Boyan
Steven Ahlquist
Alan Cohen
Lauren and Kevin Cleary
Lynn Clark
Cheryl Casserly
Kimberly Branchaud
Jessica Stensrud
Irene Peloquin
Rhoda-Ann Northrup
Lauren Niedel
Garrett Mancieri
Thomas Kimberley
Douglas Jobling
Justin Hartshom
Richard Dionne
Nick Katkevick
Kerri Fagan
Mike Scurka
Cynthia Crook-Pick

DEPARTMENT RESPONSE:
- See X. Adequacy of Public Notice
- See IX. Limitations on Attendees at Public Hearing
Good afternoon - My name is Renu Englehart, I am the town councilor from the town of East Greenwich and I am also a neighbor of this project on Division Rd. Thank you to RIDEM for holding this meeting. I know that there are quite a few people who wish to speak so I will be brief. I hope that RIDEM is keeping note of who is speaking and where they live, either in state or out. I am giving comment in opposition to the permit for MedRecycler.

For the record to correct some misconceptions, this is only the 2nd formal hearing that has taken place regarding MedRecycler. The meeting on May 6th 2019 at the West Warwick Planning Board is the 1st formal hearing and this one - January RIDEM meeting was informational only. The building is in West Warwick but everything else about this affects other towns. The access points to this project off of exit 7 on Rt 95 (Coventry/West Greenwich) or Exit 8 on Rt 95 (Warwick) or Exit 6 off of Rt 4 (East Greenwich) (see images below). These access points were at the last comprehensive RIDOT study considered amongst the highest accident rates in RI due to their congestion. While these are state roads, the state does not respond in case of accident or other emergency, local agencies respond, such as the WW police and fire department, the EG police and fire department, the Warwick police and fire department and so on.

I would like to point out that even the driveway to this property is in East Greenwich. The only way to access this property is to pass EG residences and commercial areas or WG residences or commercial etc. and residences are
directly across from this property - not hundreds of feet away.

From the access point at the driveway going west on Division, the residences in East Greenwich are served by well water. The building that MedR is leasing literally sits on a pond and wetlands served by Fry Brook, something that is not noted in any of the corresponding documents from MedR or RIDEM. At 70 tons of medical waste per day, that is far more waste than this area has ever seen and could affect the only drinking water for several towns.

There are no mixed waste medical pyrolysis plants anywhere in the US at this time. During January hearing Mr. Dennen admitted that they were new to technology and they did not have enough information regarding it. He also admitted as far as compliance with state and local regulations go, RIDEM was going to allow MedR to self police due to the lack of personnel. And yet even on the letter of notice of intent to approve, DEM has many questions that still need to be answered by the company and so far we have not been able to find out if those were answered. The comparison plants cited in the application process such as Monarch Waste (which was closed by the EPA) (https://www.federalregister.gov/documents/2020/02/25/2020-03754/applicability-determination-index-data-system-posting-epa-formal-responses-to-inquiries-concerning - search Nambe) or an unnamed plant in Southern California (none of which match could truly be found) or even their int’l comps several of which are still being built, do not lend an air of credibility.

Mixed waste in regards to pyrolysis is not something that appears to be fiscally and financially viable at this time something that both the EPA

I do not believe that this plant is suited to this area which is highly congested and almost entirely residential on that street. I would like to close by pointing out that this building and area in WW has been zoned commercial for some time and the town of EG has never to my knowledge ever objected, this is the 1st time and should show the seriousness of which we take this project. Looking at the amount of participants who are present and also those who still cannot attend - it appears that residents are taking this very seriously. I urge DEM to deny this permit.

Thank you
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XI. Monarch Pyrolysis Facility in New Mexico
- See XII. Department Staffing Issues
From: (Address)
Rep. Caldwell, rep-caldwell@rilegislature.gov
[EXTERNAL] : Written Testimony in Opposition to MedRecycler
Dear Ms. Li,

Please find attached a letter signed by myself and members of the RI House of Representatives in opposition to MedRecycler’s permit application to DEM. Please let me know if you have any questions regarding this letter and thank you for your work on this matter of great public importance.

Best,

Justine

401-212-7320
April 13, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
Attention: Yan Li 235 Promenade Street Providence, RI 02908

Dear Ms. Li:

We are writing to express our strong opposition to the proposed MedRecycler medical waste pyrolysis facility in West Warwick. The undersigned members of the General Assembly urge RIDEM to deny MedRecycler's application for a medical waste treatment facility license.

The proposed MedRecycler facility, like all high-heat waste processing, poses significant risks to the health and well-being of Rhode Islanders and our environment. MedRecycler has not tested its technology on medical waste, it cannot demonstrate that its technology will adequately protect human health or the environment, and it is proposing to operate this facility far too close to neighboring businesses, a daycare center, schools, and nearby West Warwick and East Greenwich residents.

Rhode Island has moved away from burning plastics and medical waste. The MedRecycler proposal threatens to reverse that trend and bring a potential environmental disaster to our doorsteps. Our constituents, and residents across Rhode Island, are rightfully worried about the prospect of burning waste anywhere in Rhode Island.

We are concerned that MedRecycler's application does not include any test results or other information that proves that its medical waste processing and pyrolysis technologies will be safe for the environment, MedRecycler's employees, or members of the public. MedRecycler has never used its pyrolysis technology on medical waste, and that there are no other facilities in the U.S. using pyrolysis to treat medical waste. We are further concerned that MedRecycler wants to operate this facility right next to neighboring businesses, schools, and homes without any meaningful buffer to protect neighbors from noise, odors, or pollution. Employees of other businesses at 1600 Division Road, children at the Playground Prep daycare center, students at New England
Institute of Technology, and nearby residents in West Warwick and East Greenwich should not be guinea pigs for an untested and poorly thought out facility.

Because MedRecycler’s equipment has not been adequately tested, there are too many unknowns for this proposed facility. We do not know what it will do to the air we breathe. We do not know what kind of toxics will be in the ash and char generated by the proposed facility. We do not know if neighbors and the environment will be protected in the event of an accident or a malfunction. And we do not know where the medical waste will be coming from, or what will be in the waste.

We do know, however, that other facilities that use high-heat technologies like pyrolysis to burn waste emit dangerous pollutants and negatively impact communities. Whether it is pyrolysis, gasification, or some other technology, high-heat waste processing means burning waste. Burning waste is not green and it does not generate renewable energy. All incineration, gasification, and pyrolysis facilities damage the climate by emitting carbon dioxide and other greenhouse gases. Any facility that burns waste will also generate toxic pollutants like lead, mercury, dioxins, furans, nitrogen oxides, and sulfur dioxides.

On Saturday, April 10, 2021, Governor McKee signed the Act on Climate into law, making further progress toward environmental leadership and a sustainable future. Our environment is vital to our people, our state’s appeal, and our economy. And our constituents want jobs that do not put their health or the health of their neighbors at risk from toxic pollution. Burning waste does create green jobs or grow the green economy. Rather than burning waste, we must focus on technologies that are renewable, environmentally friendly, and create safe jobs.

Neither the proposed MedRecycler facility nor any other proposal to burn waste in Rhode Island will make our state a better place. Rhode Island should not be a destination for high-heat waste processing facilities. Instead, we need to take care of our environment and make Rhode Island a safer and cleaner place to live.

We urge you to deny MedRecycler’s application for a medical waste treatment facility license, and to protect Rhode Islanders and our environment from dangerous, unproven, and toxic attempts to burn waste in Rhode Island.

Sincerely,

Justine A. Caldwell
R I State Representative District 30
cc: Janet Coit
Terrence Gray
Mark Dennen

Representative Justine A. Caldwell
District 30 — East Greenwich
Chairwoman Patricia A. Serpa  
District 27 — West Warwick, Warwick, Coventry

Representative Lauren Carson  
District 75 - Newport

Representative Terri-Denise Criend  
District 72 — Portsmouth, Middletown

Representative Susan R. Donovan District 69 — Bristol, Portsmouth

Representative Brandon C. Potter  
District 16 - Cranston

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIV. Issues Related to Disposal of Ash
- See XVI. Buffer Zone
- See XIX Odor Issues
Dear colleagues,

I listened to the hearing on Rep. Caldwell's high heat waste facility bill and read all the testimony. Virtually no one testified in favor. To me, this kind of facility seems inappropriate in general, and especially in a densely populated area.

I support the attached letter and would have signed it in person had the opportunity arisen.

thanks for all you do.

with regards,

June Speakman
Representative
District 68

DEPARTMENT RESPONSE:
  • See response to Representative Caldwell’s letter above.
Dear Ms. Li,

Attached my letter in opposition to MedRecycler’s permit application before DEM. I appreciate you all taking the time to consider my comments,

Best,
Justine
I'm Justine Caldwell, the State Representative for Rhode Island House District 30, which encompasses all of East Greenwich and part of West Greenwich.

I'm am in opposition to the medical waste license application before DEM for MedRecycler. Over the past few months, I have heard countless reasons why this application shouldn't be approved, from attorneys, doctors, scientists, environmental advocates - but, more importantly, from constituents. I represent the town of East Greenwich - and because this facility is technically in West Warwick, our neighbors, businesses, children, and schools have had no formal say or vote in this approval process.

As a Rep, when I knock on doors or residents reach out to me, I hear from a wide range of people with different opinions on many issues. But on the issue of MedRecycler, there has been no difference of opinion. So many constituents have reached out to me and, regardless of political leanings, regardless in differences of opinions on any other issue, they are united in their extreme opposition to this facility being built in our backyard - or anywhere here in our state. So today I'm representing my town, from the folks who made it on this call to the countless residents who called and emailed asking me to advocate for them on this issue - I'm representing their position and their position has become my own position as well. It's part of my job to vote on issues where I can't always be an expert - rather I have to gather information from experts, ask the right questions, hear from the community, and come to my decision, and that is exactly what I've done in regards to MedRecycler. It is my hope that DEM, after a similar decision-making process, will come to the same conclusion I have regarding this project.

Under RI law, DEM must promulgate standards giving great weight to the detriment of the community as it relates to the placement of such a facility and the impact it will have on the surrounding communities - here, most notably East Greenwich and West Warwick. It is my understanding that DEM has not promulgated these standards as of yet; but if the voices of all the people concerned about this project are indeed given great weight, it's hard to imagine the applicant can meet this burden of overcoming the detriment to our communities.

Further, in Rhode Island, we are moving away from the process of burning medical waste. One question I hear from constituents over and over again is - why would we bring in out-of-state medical waste - to the tune 10 truckloads a day - to bum here in Rhode Island - behind a day care center - when our own state is working to become safer and more renewable? I stand with my constituents as totally appalled by that idea. It is not progress, it is a step backwards.

Pyrolysis is an untested technology. As it stands, the only way we will know if MedRecycler lives up to its claims is to approve their license and hope for the best. One of the most shocking things brought to my attention regarding the oddities in MedRecycler's process is that they haven't agreed to spot check their boxes of waste coming into the facility to be burned - meaning, there is no way to truly know what is inside them. Just earlier this week, we saw a fire in the scrap yard
on Allens Avenue in Providence - now imagine that same accident in a residential neighborhood - near a school and a day care - with unchecked medical waste - who knows what would be floating through our air, into our homes, and for how long. That is unacceptable to me and my community.

Thank you to DEM for considering my testimony; once again, I would strongly urge the denial of this application based on my testimony and the wealth of testimony you will hear from experts and residents this evening.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
I am a resident of Blueberry Hill in East Greenwich and I want to make my concerns known regarding the proposed MedRecyler facility on Division Road. Despite what the owner is stating, this technology is not widely used nor accepted anywhere in the United States. The thought of waste that has potential contaminants like COVID-19, chemo drugs and others is deeply concerning to me. What happens if something goes wrong and dangerous toxins and waste are released? Who is going to make sure our community is safe? That area would be deemed a hazardous waste site with repercussions to the surrounding businesses and residents. This is not the place to test this technology and will not going to produce the energy or the jobs claimed by the business owner. The risk is so great, I urge you to reject this license request.

Please let me know if you have any questions regarding my concern.

Sincerely,

Rian D. Seger

Rian Seger
Vice President and General Manager
Medication Delivery Solutions - US Region

1 Becton Drive, Franklin Lakes, NJ 07417
t: 201-847-5805 l c: 401-234-6183
e-mail: rian.seger@bd.com
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Speaking for the entire community of Taylor Pointe Condominiums - as an Association Board Member, please be on record as understanding we object to this facility being allowed to open where it is on Division Street in West Warwick / East Greenwich.

This is a bedroom community first and while industry has existed here for some time, nothing approaching the potential to do harm has ever been allowed here thus far.

To process medical waste in an area of homes (across the street and in adjacent neighborhoods), a daycare facility (next door) and a college is nothing short of ludicrous when we have industrial facilities like Quonset that could handle this kind of industry without compromising peoples homes.

Please reject this permit immediately and do not let this continue in a long drawn out process that will meet with the amount of public outcry the press will feed on - already building, that makes our state look foolish for considering things like this without the research and backup necessary to insure the safety of it’s residents.

Thank you -

Richard C. Jackson
60 Cricket Circle
Taylor Pointe Condominiums
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Good Afternoon Mr Dennen,

I wanted to forward along my strong opposition to the Medrecycler Medical Waste facility. I hope it's clear from the public hearing, comments and signage around RI that the public is against the development of this project due to the many unknowns it poses to the public, businesses and environment.

This facility has so many unknowns, unproven technology and a huge risk potential to be in a location next to a school, day care and neighborhoods. If there is a place for this technology, it is not in such a high-risk area.

I hope we can count on you and DEM to reject this facility from getting any approvals to operate in RI.

Thank you,
Rick Marshall
170 Stone Ridge Dr
East Greenwich, RI
02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Ms. Li,

I oppose MedRecycler's application for a medical waste treatment facility license. To my knowledge, MedRecycler has not provided test results or any other evidence indicating that using pyrolysis to process medical waste is safe for the public or the environment. I also understand that there are no other facilities in the United States that use pyrolysis to process medical waste. As a result, I believe it would be a mistake to authorize such a facility in Rhode Island.

Sincerely,
Robert Weinschenk

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Hello

I am writing to request that you DO NOT approve the medical waste facility on Division Road. The traffic in this area is really bad. Once New England Tech is back it will be so much worse. The positive of this project do NOT outweigh the negatives.

If you would like to discuss further I can be reached at: 345-1662.

Thank you
Robbyn Liesching

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
Dear Yan Li, DEM representative:

I am writing to protest this plan to build this facility for several important reasons:

* The plan has not been thoroughly considered and proven safe to county residents.
* Burning medical waste creates dangerous fumes. This is not a solution. Importantly, **there is no plan for or guarantee that there will be zero emissions of ANY toxic substance even if it is sterile.** Sterility does NOT mean non-toxic or zero carbon emissions.

* The amount of waste is not well defined - different quantities show up differently in various information sources. There are **NO infrastructure plans** to accommodate the much increased traffic of heavy equipment (wear and tear and congestion), hauling waste to the site.

* The company’s financial status and prior management is questionable, to say the least, and no county - or the state as a whole - should be investing taxpayer dollars in partnership with such a business. Not only risking financial loss, but dangerous outcome to RI citizens. **We are not a hazardous waste site for New York or New Jersey.** Why not put this site in the states that are generating the waste?

Please do not advance this project. It is dangerous to Rhode Islanders!

Robert Greene, MD, PhD
105 Fowler St.
North Kingstown, RI

**UT Southwestern**
Medical Center
The future of medicine, today.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
From: Robin B <rkbgreen@yahoo.com>
Date: January 26, 2021 at 12:52:21 PM EST
To: Me <Rkbgreen@yahoo.com>
Subject: Med Recycler proposal in West Warwick on East Greenwich line

?Dear State leaders and RIDEM,

I am a lifelong resident of RI and 3 year resident of East Greenwich. I wholeheartedly think RI is a diamond in the rough and needs to attract smart businesses to our lovely state. I for one do not think Med Recycler fits that category. Please stop RI from being a dumping ground for corruption and a haven for the last resort companies. This sounds like a pollution and traffic nightmare for our communities. Yes it is in West Warwick; however, it abuts a daycare as well as quite a few affluent neighborhoods. I won’t stay here if this goes through. I work from home but I am employed In Massachusetts. My tax $ stay in RI. My neighborhood is Stoneridge right next to Signal Ridge. Doctors, attorneys, educators, business people, high level coaches all live here along with hundreds of children. I am willing to start a grass roots opposition to this proposal. Please help me and the neighbors you profess to represent stop this project. Johnston opposed this project, Skékarchi is quoted in the article I read as supporting the project. Who is being paid from this project? (Not the people of RI.) We need to vet this project more diligently but in the mean time I am going to ask all my neighbors to join me in opposing. Please help us! I think we are missing our focus here with everyone being absorbed in the Covid crisis.

Thank you for listening. Please reach out to help me with preventing this mistake from passing the next hurdle.

Sincerely,
Robin Babcock
(401)487-0209
95 Fernwood Dr
East Greenwich RI 02818

Sent from my iPhone
DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
Good Morning,

I have written once before early in this process to voice my concern in regards to this facility being pushed forward. I have in recent months done quite a bit of research into the pyrolysis technology as well as the competencies of the CEO and majority stock holder of Medrecycler and Sun Power. I still oppose this project but now more vehemently.

I have attended all available zoom meetings available to me, I have listened and dug into this project and can say without a doubt, this final permit from DEM should be denied.

If the amount of public outcry isn’t enough of a deterrent, then the facts should help our elected officials and appointed public servants to err on the side of caution and deny this permit.

I find the inconsistencies of the project to be most telling of the faults in this application.

Historically waste to energy proposals have been vehemently opposed by the environmental community, why is this one even still being considered by RIDEM?

Buzzwords such as green, and clean are being tossed out by Nicholas Campanella, but he is not being tasked to prove his statements of green and clean.

Although this facility exists in West Warwick which is deemed industrial zone, it abuts East Greenwich residentially zoned areas. This site is predominantly light industrial which doesn’t seem to require a buffer zone; however, has a site plan been done to determine how a waste facility would affect a residential area with no buffer?

The list of potential emissions that have appeared in the filing don’t appear safe.
I see many avenues this facility could go sideways and cause great harm to many local communities.

I spoke in general terms on the House Committee meeting to present a bill to oppose high heat facilities in RI, but I will be a bit more frank here.

Our local representatives have listened and acted on our opposition to this technology and the dangers it could pose.

There is no precedence for these pyrolysis systems being used for medical waste and the experts have testified that the known harmful toxins are enough to deny this permit. What about the unknown toxins?
The responsibility of approving this site is massive. The owner of this proposed facility is neither experienced nor qualified in the science of waste not to mention medical waste. DEM as acknowledged during our public forum stated there will be little oversight on the testing procedures due to budget and personnel shortages.

Will consistent honest testing be performed? Where will the responsibility land when there is an accident or disaster? (In the initial approval be DEM, it states that DEM will be notified 24-48 hours). What about the homes around this site? That time is too great.

RI is our home, we pay taxes, have raised our children, support our parents, work and live in our communities, enjoy our natural beauty all while trusting that our government agencies are protecting our health, water and air.

This project is presented by a less than stellar out of state opportunist. (I have read news articles that show a ‘businessman who jumps from opportunity to opportunity to make a buck and take advantage of bond incentives and pandemic opportunities). This project is presented under the guise of being green. How can anyone say that? No fully vetted testing has been done to preclude toxins being emitted into our air and water. Do we want to take a chance with our futures? Or should we err on the side of caution?

This company according to SEC filings is insolvent at the moment. They will have no resources to clean our air and water if there is a spill or accident. Does DEM (or shall I say residents) take on that responsibility?

Has the EPA weighed in on this project for air quality? Is it even green? How much energy do they need to run the process as it relates to the output? Why are we allowing out of state medical waste to be brought into RI, municipal household waste is not allowed.

I have zero comfort on this facility. I have too many objections and red flags to write them here. Please deny this permit. I only see negatives with this facility and hope that your findings are the same.

Thank you for your time,

Robin K Babcock
95 Fernwood Dr
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VI. Bond Funding and Project Financing Issues
• See XII. Department Staffing Issues
It is disgusting that residents of this area and adjacent areas even need to state the obvious on this. The facility is directly across from a daycare center and outdoor playground. It also sits across from a campus of higher education and several, highly populated residential neighborhoods. Even considering putting this company and its processes anywhere near residential or school areas is appalling. STAY OUT OF RHODE ISLAND! WE ARE NOT YOUR DUMPING GROUND! OUR CHILDREN ARE NOT YOUR SCIENCE EXPERIMENTS!

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and
  • MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Robyn Cavanagh,
37 Candy Apple Lane,
SaunderstownRI
robynbcavanagh@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Robyn DiRaffaele
17 Kimberly Avenue,
Coventry, RI
robyn.diraffaele@mfathletic.com

From: (Name) From: (Address)
Robyn robyn.diraffaele@mfathletic.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

As it was said by many people at the Zoom meeting, this facility DOES NOT BELONG in our State nor does it belong in a residential area! I am employed at M-F Athletic, which is at the same address. This location is by far an Industrial Park as Mr. Campanella is trying to pitch to the public! Some of my coworkers will be working on the other side of the walls separating the 2 businesses. This WILL NOT be healthy for anyone near this proposed site, never mind under the same roof! I would like to ask Mr. Campanella if he feels this is such a safe and great process, why is he not putting in his own State? Please, Please consider the Residents in this area as well as our Beautiful Little State! WE DO NOT WANT OR NEED THIS TOXCICITY IN THE OCEAN STATE!

Thank you,
Robyn D.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Dear Mr. Li,

My name is Roger Richards Jr. and I am resident of West Warwick RI and live a round two miles away from the site of the Med Recycler facility. I have lived at this current location for the last eight years as it is a real nice family area that is free of health hazards.

I am sending you this email as I am opposed to Med Recycler being awarded the DEM permit to operate this facility. A couple of reasons that I am opposed to this are my wife is a three-year breast cancer survivor and she needs to be around clean healthy air. The other reason is I am a US Air Force Veteran that has served in various bases around the world and have been informed that some of the areas may have exposed me to various toxins that could impact my health. The location of this facility is too close to several neighborhoods, childcare and schools. The town of WW should have never let it get this far. I really would not like to see this area be the scene of the next Erin Brocovich.

I am asking that you deny Med Recycler the DEM permit for myself and the rest of the residents in the Kent County health and safety.

Thank you,

Roger Richards Jr.
1 Cross Bow Lane
W. Warwick, RI 02893

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Dear Mr. Li,

Stop!

If New Jersey rejected this Medical Waste proposal (based, to some degree, on the background of the petitioner), why would RI DEM entertain it?

If a powerful member of the RI House of Representatives was not pushing this project, would you still feel obligated to move it forward?

Think about it.

What is bad for New Jersey is bad for RI residents, Yan.

RIDEM and other officials should absorb the following information in any analysis or deliberations and I wait to hear from you.

Tom Romeo
36 Pine Grove Lane
West Greenwich, RI 02817

Holdings of Sun Pacific is described below from the United States Securities and Exchange Commission report @
https://www.sec.gov/Archives/edgar/data/1343465/000149315219004904/form10-k.htm
[sec.gov]
(underlines are mine)

Sun Pacific Holdings ....Currently, the Company has been and is insolvent......*We are unable to attract additional management personnel and members to our Board of Directors. ... Our director and officer, Nicholas Campanella will control and make corporate decisions ... We currently lease 2,510 square feet at 215 Gordons Corner Road, Manalapan, NJ, 07726 ... We have never paid dividends on our Common Stock and intend to continue this policy for the foreseeable future. ...The Company has an accumulated deficit of $6,649,017 as of December 31, 2018. The Company’s continuation as a going concern is dependent on its ability to generate sufficient cash flows from operations to meet its obligations, which it has not been able to accomplish to date, and/or obtain additional financing from its stockholders and/or other third parties. ...As of December 31, 2018, we had approximately 10 full-time employees*

It just keeps getting worse! I can't look at anything else.
I did send this email to yan.li@dem.ri.gov

Department of Environmental Management
attention Ms. Yan Li; email:
I am writing to you out of a concern for the environment and the residents of the State of Rhode Island. Mr Nicholas Campanella who has no previous experience in pyrolysis and his unethical R I individuals/entities are attempting to ram this toxic operation upon Rhode Islanders!

These are my reasons for my objection to MedRecycler which is the subsidiary of New Jersey-based Sun Pacific.

Holdings of Sun Pacific is described below from the United States Securities and Exchange Commission report @ https://www.sec.gov/Archives/edgar/data/1343465/000149315219004904/form10-k.htm [sec.gov]
(underlines are mine)

Sun Pacific Holdings ....Currently, the Company has been and is insolvent......We are unable to attract additional management personnel and members to our Board of Directors. ... Our director and officer, Nicholas Campanella will control and make corporate decisions ... We currently lease 2,510 square feet at 215 Gordons Corner Road, Manalapan, NJ, 07726 ... We have never paid dividends on our Common Stock and intend to continue this policy for the foreseeable future. ...The Company has an accumulated deficit of $6,649,017 as of December 31, 2018. The Company’s continuation as a going concern is dependent on its ability to generate sufficient cash flows from operations to meet its obligations, which it has not been able to accomplish to date, and/or obtain additional financing from its stockholders and/or other third parties. ...As of December 31, 2018, we had approximately 10 full-time employees

Despite knowing this some R I individuals have chosen to support this knowing that MedRecycler-RI wants us Rhode islanders to assume responsibility for a $17.2 million bond. Documents [ecori.org] received from records requests reveal that Rhode Island Commerce takes ownership of the MedRecycler-RI facility and equipment if the bonds default.://www.ecori.org/composting/2021/2/28/px6rp9yomqfyz2tdhtshv720ca6dn1 [ecori.org]

-The MedRecycler-RI plant will be accepting up to 70 tons of medical waste per day from across New England and New York. https://www.ecori.org/composting/2021/2/28/px6rp9yomqfyz2tdhtshv720ca6dn1 [ecori.org]

-“This isn’t the clean energy its developer claims it is. This technology is criticized as being inefficient, because it takes so much energy to superheat the waste. But even more critically, it’s unsafe." according to Sen. Bridget Valverde https://eastgreenwichnews.com/caldwell-valverde-oppose-proposed-medical-waste-facility/ [eastgreenwichnews.com]

-A well-researched article at https://www.ecori.org/composting/2021/2/16/opposition-growing-against-medical-waste-facility [ecori.org] reads, in part:
"The Conservation Law Foundation (CLF) has noted [clf.org] that emissions from pyrolysis contain cancer-causing compounds. The ash consists of dioxins, mercury, and heavy metals — pollutants that can make their way into waterways and drinking water supplies. The applications submitted to DEM says the facility will emit or have as byproducts carbon dioxide, carbon monoxide, silicon dioxide, magnesium oxide, iron oxide, sodium chloride, and sodium sulfide"

Additional information is available as you research this proposal.
cc. Daniel J. McKee, Governor, State of Rhode Island

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Hey Mark,

Hope this material below can be added to the March 15th hearing.

Hard to believe, in spite of a powerful politician’s connection to the the N.J. firm, that this project would be approved by RIDEM.

An untested system, sketchy developers (check SEC material) and particulate poison distributed in the air all Rhode Islanders will breathe, is outrageous.

Time for some real leadership and dismissal of "connections" that benefit a few.

Thanks.

Tom Romeo
36 Pine Grove Lane
West Greenwich, RI 02817
4017419893

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Mr. Dennen,

For the Record and without fear of any public official, elected or otherwise:

I would ask that the RI Executive Branch (Governor McKee, RI DEM and RI Health Department) provide scientific assurances to all RI residents on public health and safety of this incinerator and state their public position.

In my opinion, we should demand that all public officials approach these complicated issues with maximal objectivity.

If it is true that Rhode Island House Speaker, K. Joseph Shekarchi is attached, in any way, to this project and given Legislative history, one might be fearful in official decision making.

However, the interests of a few should never outweigh the benefit of many.

Because MedRecycler will, likely, affect the air in much of our state, hopefully, all actions on this New Jersey proposal will be approached with all Rhode Islander's interests in the forefront.

At any temperature, most residents, if surveyed, would not want animal bodies and unknown chemicals, by the ton from New England, burned in "Little Rhody".

Respectfully submitted,

Thomas Romeo
36 Pine Grove Lane
West Greenwich, RI 02817

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Rosa Anderson
rosaegri@gmail.com

I would like to add my name to the list that are opposed to the medrecyler plant that is being proposed for west Warwick/east greenwich area: I strongly feel that type of business does not belong in this area.

Thank you for your time
Rosa Anderson

Sent from my iPad

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Good morning,

I am writing to provide my opposition to the medical waste facility being proposed in West Warwick.

I have been watching this debate for a few months online and, seeing that the two sides are saying very different things, I decided to keep an open mind. After doing my own research and thoroughly hearing the arguments on both sides, I have concluded that this facility is not worth the potential risk.

From what I understand, the upside is that West Warwick gets some jobs (30 permanent) and some tax revenue. I do not see the “green energy” upside to the supporter’s argument, as lugging in medical waste from other New England states does not sound very “green” for Rhode Island.

The breadth of the downside appears unknown at this point, though there are certainly some solid, tangible reasons why this permit should be denied and zero good reasons why it should be allowed. Any potential benefits simply do not outweigh the risk, as the safety of the technology for this use cannot be guaranteed. I am stunned by lawmaker’s hesitancy at this point to just say “no” for this reason alone. Why would you risk the health and safety of Rhode Islanders for 30 jobs? The money generated in tax revenue will not cover any potential lawsuits and/or medical bills should anyone be harmed by this action. I cannot understand how this is being approved in an industrial complex, where people work in the same building; next to a daycare, across the street from a university and golf club. My heart breaks for these people, as each day they’ll go to work wondering “what is the quality of the air I’m breathing?” I guarantee that daycare will go out of business – what parent would dare send their child there? I also guarantee that complex will be empty but for the MedRecycler in a year, as many companies will wonder: why take the risk? We won’t know, until this technology is proven to be safe, that any illnesses are NOT caused by the actions of this recycling business. I see a future where every New England Tech student, golfer, daycare employee, etc. who develops cancer or asthma in the future will hire a lawyer to examine whether MedRecycler was the root cause. I hope they add the Town of West Warwick and the State of Rhode Island to those lawsuits for being so reckless, allowing this to exist without being 100% certain that it’s safe. They can’t say this now, and nothing short of 100% is good enough when you’re talking health and safety issues.

This project is short-sighted. At best, it provides a few jobs while potentially harming other small businesses and creating anxiety in the community about a future unknown. At worst, it could do serious physical damage to Rhode Island residents. There are so many places in this country, even in this state, where land is aplenty and there are no residences or businesses for miles. Why not start there? Why put something so risky in the heart of a commercial, residential and industrial complex. I remain
confused at lawmaker’s hesitancy to just say “no.” it seems like the only logical response.

Thank you for reading.
Rosemarie

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
To whom it may concern

I'd like to voice my opposition to the medical waste incinerator slated for West Warwick RI. Pathogens in our air have potential to cause health concerns among our communities. I am also concerned about emissions and having an untested method used in incinerating such pathogens. Pathogens do not belong in a residential community.

Thank you

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Ryan ryanabedi@protonmail.com
[EXTERNAL] : MedRecycler Public Comment Submission
Please see attached.

-Ryan Abedi, 650 East Greenwich Ave, 5-407, West Warwick
April 14, 2021

VIA EMAIL (Yan.Li@dem.ri.gov)
Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street, Providence, RI 02908
Attention: Yan Li

RE: OPPOSITION TO MEDRECYCLER'S APPLICATION — PUBLIC HEARING
COMMENT

Dear Mr. Li:

MedRecycler-RI ("MedRecycler") is a New Jersey recommendation medical waste disposal company headed by CEO Nicholas Campanella ("Campanella") that is endeavoring to operate from a proposed location of 1600 Division Rd, West Warwick, Rhode Island. This location is surrounded by a local Playground Prep school, as well as New England Institute for Technology. MedRecycler plans to utilize a method called Pyrolysis at their facility. The term "Pyrolysis" comes from the Greek-derived elements, pyro "fire" and lysis "separating" thus meaning to separate via fire. Pyrolysis produces the same chemicals and byproducts as incineration or burning of waste. All facilities and all businesses are expected to adhere to regulations placed forth by the Federal and local governments to operate, however, the "MedRecycler" systems and technology has never been utilized for medical waste; therefore, MedRecycler cannot adequately prove they can adhere to these guidelines. Because of uncertainty and lack of previous applicability of Pyrolysis to medical waste, Rhode Island would be a proverbial guinea pig for this operation. Careful consideration of every granular detail is essential for a decision of this caliber to ensure both the safety of the citizens as well as the ethical history of the company involved.

Importantly, MedRecycler has the burden to prove its technology is safe and will not pollute our air and water. Aside from blanket statements unsupported by fact or science, MedRecycler has not carried its burden and, therefore, its application must be denied.

The RI DEM should deny the application for the following reasons

For the potentially devastating effects it will have on the environment, surrounding families, and workers of the facility.

Noise pollution and toxic by-product pollution.

Without a scintilla of scientific evidence to back it up, MedRecycler claims it is a clean process despite marked outcry from the scientific community to the contrary.

MedRecycler cannot adequately prove its technology is compliant with federal and state regulations.
Medical waste regulations sections 1.15(F)
ARGUMENT

1. RIGHTS AND SAFETY OF ABUTTERS, LOCAL BUSINESSES AND RESIDENTS COMPEL DENIAL

All residents of Rhode Island, and not just specifically Warwick, should be concerned and involved in this decision. Pyrolysis is known to produce chemical compounds called dioxins, which are extremely dangerous to the community because of their slow rate of dissipation as well as their known carcinogenic effects. Dioxins are part of the "dirty dozen", a group of chemicals known as persistent organic pollutants (POPs). Other known effects dioxins have on the body are infertility, birth defects, and endocrine damage. Dioxins are not the only dangerous compounds being produced; lead, mercury, sulfur-dioxide, and nitrogen oxides will also be emitted into the environment due to this process. The real threat these compounds pose to Rhode Islanders have already been evaluated on the international level. In 2004, over 180 Countries entered the "Stockholm Convention", thereby pledging to protect human health and environment from highly dangerous chemicals, including P.O.P's and dioxins". Similarly, the "Basel Convention" of 1989 specifically aimed at proper hazardous waste and its disposal in order to minimize the release of hazardous emissions "nt. Neither of these treaties incineration or Pyrolysis as a plausible waste alternative.

Residents have already begun to recognize the threats posed by dioxins and POPs. Fifty-three Citizens spoke out against MedRecycler at the 3-hour March 15, 2021 public hearing, most notably local Doctors, Attorneys, and the Vice-President of the East Greenwich town council. Michael Donegan expressed his legitimate concerns, stating "We're going to have trucks driving through our neighborhoods with body parts, viruses, and pathogens. And we are going to have the risk that these viruses and pathogens will be released through accident, through improper operation of the facility, [or through] poor design. This is unproven technology. And it is also important to note that the applicant has absolutely zero experience running any medical waste facility, let alone this particular type of equipment, which is experimental. It is so experimental that it's not actually in operation anywhere in the U.S. used on medical waste." Donegan further accused MedRecycler-RI CEO Nicholas Campanella of searching the country to find the one state agency, DEM, that would allow this type of facility.

11. PYROLYSIS IS JUST ANOTHER WORD FOR INCINERATION

Pyrolysis in the processes of using heat to burn a product without the presence of oxygen, producing hydrocarbons and syngas or toxic and environmentally damaging pollutants to then burn to operate generators, eventually emitting the toxic by-product back into the annosphere.

Toxic by-products, such as dioxins, furans, lead and other chemicals, directly jeopardize the wellbeing and peace of the community. According to the MedRecycler's DEM applications they plan on reaching temperatures of 800-900F with their Pyrolysis systems, however in other statements they have reported systems reaching temperatures
as high as 1400F with a clear discrepancy of over 500F\textsuperscript{V}. This is problematic because dioxins form when plastics are heated at temperatures under 1200C; these dioxins and POPs are critically dangerous to the community and surrounding elementary school located less than a half a mile away\textsuperscript{V}.

Incineration is an exothermic process that involves the mass burning of a material with the heat typically being applied to thermal energy (steam powered or generating electricity). In comparison, pyrolysis advocates claim it is an endothermic process because it absorbs heat to produce a combustible "syngas", but the component ignored in this circumstance is that the "syngas" will also be burned by on-site generators, producing toxic ash and releasing pollutants into the atmosphere.

According to the World Health Organization, burning medical waste is the second largest source of dioxin emissions\textsuperscript{u}. The World Health Organization continues to discourage the burning of any medical waste for any reason because of the potential chemicals and impact on the environment.

**111. THE FACILITY WILL PRODUCE NOISE PRODUCED FROM GENERATORS AND ToxLe EMISSIONS**

Although MedRecycler has made claims that his company's methods are "clean", the scientific community found that they produce similar levels of the same chemicals that incineration does: high levels of heat, resulting in toxic and environmentally dangerous ash and char, creating syngas, which is burned by generators, thereby producing dioxins and furans, C02, NOX, and SO2, mercury and leads. Producing and extracting toxic syngas from this process is only the first step, the facility then plans to burn the syngas in its generators for power, all while producing chemical emissions.

There is also the issue of the continuous generator usage emitting roughly 85 consistent decibels of noise from the property, this is equivalent to a leaf blower going off at all hours of the day and night. This can have a massive impact in the community, from Autism sensory issues to animal migration. Children with Autism can be highly susceptible to sounds and frequencies, 85 decibels is more than enough to trigger some children. With a school within a mile of the proposed location, this would be sending a severely negative message to parents and the community regarding its standards. The noise is also enough to affect various ecosystems and biomes. Noise can dissuade certain animals from living there, this can change the predatory cycle within that ecosystem. With new animals consuming different vegetation in these old ecosystems, it changes the biome overall. This effect is most obviously seen with overhunting of wolves in the Yellowstone, the impact had to that ecosystem and Biome changes, such as rivers moving, beaver and other wildlife population changes, vegetation changes and droughts.

**IV. MEDRECYCLER IS UNABLE TO COMPLY WITH PRE-EXISTING REGULATIONS**

According to medical waste regulations section 1.15(f), MedRecycler must prove "based on thorough tests" that its technology is "protective with respect to total impact on the
environment" and it ensures "the health, safety, and welfare of both facility employees and the general public". MedRecycler technology has never been used on medical waste, therefore MedRecycler cannot prove that it is adequately protective.

Solid waste regulation section 1.9(M) states that the MedRecycler facility must be "designed operated and maintained in such a manner as to protect the health and safety of users of the facility and personnel associated with the operation of the facility, and persons in close proximity to the facility." Given the risks of burning medical waste, the untested nature of MedRecycler technology, and the proximity of businesses and residents, MedRecycler cannot demonstrate it will be able to comply with this standard.

MedRecycler has not provided a scintilla of evidence to meet its burden of proving safety. Because neither of these two legal regulations can be met or demonstrated, and the overall uncertainty and these devastating toxins being released into the air and exposed to the population, this facility should not be allowed. Aside from these two regulations, there are UN regulations in place that demand specific and proper action to protect people and the environment from harmful pollutants such as dioxins and POPs (Basel Convention 1989 & Stockholm Convention 2004).

V. FLAWS IN SCIENTIFIC LAWS OF THERMODYNAMICS PROVE MEDRECYCLER IS NOT PROVIDING A RENEWABLE ENERGY SOURCE

The second law of thermodynamics states that the "disorder" in the universe always increases. As the Disorder in the Universe increases, the energy is transformed into less usable forms. Thus, the efficiency of any process will always be less than 100%.* A troubling (and clearly false) claim made by MedRecycler is that its system is "renewable/sustainable" suggesting that syngas produced from burning waste operates at 100% efficiency, which directly contradicts the laws of thermodynamics. The modern idea of pyrolysis is to burn plastics and other refuse into a gas or oil (in this case "syngas") that can be used as a "fuel" (in this case for on-site generators). This gas must be combusted to be utilized, thus releasing the same amount of chemicals into the atmosphere than if the plastics had been combusted directly, making it a simple steppingstone of fossil fuels and the initial combustion. This has been backed up with scientific testing as well. "In one study the concept was described as 'high efficiency', but results showed that the system operated with negative efficiencies, using between 5 and 87 times more energy than could be obtainable from the pyrolysis products." Such a process simply cannot operate at 100% efficiency.

Conclusion

MedRecycler cannot meet its burden to prove the safeness of its business operations and technology. Rhode Island cares about its community, the youth, and the quality of life that Warwick has to offer. With hypersensitive situations and clear negative effects on the community, we need action against this cause. Our future relies on the healthy and successful upbringing of our children; by placing a carcinogenic pollutant facility, a
different message is being sent. For all the reasons set forth herein, MedRecycler’s application should be denied.

I look forward to your response.

Very Truly Yours,

Ryan Abedi


DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : Medical waste facility
SallyAnne Lund <salundmd@gmail.com>

Dear Yan Li:

I am writing to express my grave concerns about the proposed medical waste disposal facility on Division Street. Because this technology has only been tested in a limited way in one site, it would be unconscionable to place a large capacity facility in an populated area that exposes Rhode Island people to the absolutely unknown health effects of the pyrolysis of medical waste. The proposed site is immediately surrounded by residential neighborhoods, schools, restaurants and offices filled with vulnerable human beings who are trusting that the Rhode Island DEM will protect their health, their breathable air, and their quality of life. I entreat the Department to block this horrific proposition.

Sincerely,
SallyAnne Lund, MD

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
From: Sandra Mathieu
srmmathieu@gmail.com

[EXTERNAL]: Medical Waste recycling

I am a resident of East Greenwich very close to the proposed medical waste facility. I am opposed to the facility for many reasons. I do not feel we have covered the safety of the recycling with the pollutants which are a result of this process. I do not know how this would be passed by DEM with the concern of environmental safety which I assume is upmost of DEM. I worry about the safety of many trucks exiting 95 from many area. With the question of many trucks a day, I really cannot think this is only RI medical trash which is going to the proposed facility. There is too many PEOPLE at risk, babies, children, students, adults, teens and elderly ie People. The water resource near the proposed plant may become contaminated in ways we are now not aware. Please do not let this happen. I am opposed. Sandra Mathieu RN, BC FNP

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
Good afternoon,

This message is to respectfully ask that the medical waste facility slated to be built on the east Greenwich West Warwick line be canceled. I have strong concerns with the welfare of my family living in such a close proximity. Thank you for your time.

Respectfully submitted,
Nicholas Sangster

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
Dear DEM Members,

As I enjoyed this beautiful Saturday in my neighborhood, walking my dog and seeing so many children playing outside, I couldn't help but think about what a day like this may look like, feel like, and smell like, in the not-so-distant future, if the proposed medical waste site is permitted to open.

This is not just a case of, 'not in my backyard.' This type of facility, that proposes using pyrolysis, should not be permitted in anyone's backyard. It should be considered in a fully industrial area only, with no other businesses for miles and miles, let alone homes, condos, dorms, colleges, hotels, restaurants, and a daycare literally steps away.

How could this even have gotten to this point? It's unconscionable. And the thing is, everybody know this, even the people who are claiming this is 'green' and promotes jobs. Those claims are being made without any modicum of conscience. This business will benefit very few, but clearly those very few will benefit tremendously, and that will be to the absolute detriment of so many.

I can't even begin to calculate the cost of all the lawsuits that would follow the opening of this business. How can that be worth it to the town of West Warwick and the state of Rhode Island? How have we gotten to the point where doing the right thing has become so controversial? The citizens of Rhode Island deserve so much more, than to be the guinea pigs in an experiment that ultimately could inextricably impact their health and well-being.

Clearly medical waste needs to be burned. But the business owners who are taking on this important process need to do their part, and find remote areas in this vast country of ours that do not directly put in jeopardy the health of millions, simply based on location.

Rhode Island DEM, you need to do the right conscionable thing here.

A very concerned citizen of Rhode Island,

Sara Foley

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:
• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Sara Foley,
70 Watch Hill Drive,
East GreenwichRI
sara.foley@gmail.com

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
I strongly believe DEM should deny the permit application for MedRecycler. MedRecycler does not have a demonstrated experience with the proposed technology. Pyrolysis is not a technology used anywhere in the United States. It would be irresponsible to implement this proposed waste facility in a densely populated area. Rhode Island is a small state and DEM should protect not only Rhode Islanders but the local environment. The effects of this facility are expected by medical professionals and environmental specialists to be extremely hazardous. This is not the time or place for such a facility.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council. Sara Hanson, 459 East Greenwich Ave, West WarwickRI sarahanson401@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
I am writing to oppose the placement of this plant at the Division Road site in West Warwick, RI, just a few short miles from the home of my ex husband and where our children visit and play. While I understand the need to dispose of medical waste, and I support green energy options, this option is too risky and too potentially fraught with risk of harm to the community to place it in such a dense area. I strongly disagree with the idea of putting it in this area.

Sarah Petrides

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Hello,

Attached is my letter in opposition to the MedRecycler facility being considered for 1600 Division Rd. in West Warwick. Thank you for taking the time to read and consider my comments.

Sincerely,

Sarah H. Turshen
Resident of East Greenwich, RI
March 19, 2021

To Whom it May Concern,

I am the mother of three small children, and have been a resident of East Greenwich, RI for the past 9 years. Our home is located just over two miles from the proposed medical waste facility at 1600 Division Road in West Warwick. As I have started to educate myself about MedRecycler, I am quite frankly appalled that plans to even consider this facility have progressed this far. I would like to take a moment to express some of my concerns.

First and foremost, I am greatly concerned from a health and safety perspective. Medrecyler plans to use a technology to disintegrate medical waste at high temperatures that is essentially untested. There are currently no other facilities in the United States that use pyrolysis to process medical waste. What this means is that the risks are virtually unknown. Medical waste is made up of about 25% plastic, which when heated or burned, releases hazardous heavy metals like lead and mercury, as well as toxic pollutants such as dioxins into the air. Exposure to these pollutants over time can cause various cancers, liver and endocrine damage, infertility, and birth defects. The MedRecycler facility in West Warwick plans to run 24 hours a day, 7 days a week, and disintegrate 70 tons of waste per day that is trucked in primarily from out of state. As a reference, processing this volume of waste would rival the largest medical waste incinerator in the country, which is located in Baltimore, MD. It simply defies common sense to place a facility that will process this magnitude of medical waste using a virtually untested method, smack in the middle of such a densely populated area. The site of MedRecycler is directly next to a daycare, across the street from a golf course and a restaurant, near two ponds, a college, and surrounded by many neighborhoods and schools in the East Greenwich/West Warwick area. If such a facility is to go anywhere, shouldn’t it be placed in a very remote location away from dense population and important bodies of water until the risks are better understood? Nicholas Campanella, the “businessman” behind MedRecycler, is a resident of New Jersey who was implicated last spring for his involvement in a Covid related mask scam. He assures us that MedRecycler will be a “good and safe neighbor” in spite of the fact that he himself has no clue what the long term effects of this untested technology might be. Why on Earth should we trust him? I, for one, do not feel that my children or any other members of this community should be turned into lab rats.

I also have significant concerns about the environmental implications of having this facility in Rhode Island. As the “Ocean State”, we are literally surrounded by important bodies of water. How can it be guaranteed that pollutants from this facility will not end up in the bay? Between airborne pollutants, the potential for car accidents involving any of the trucks carrying 43 million pounds of hazardous waste through the state each year, and the potential
for human error or malfunctions at the facility, it is naive to think that this facility will be anything other than a danger to the oceans and environment of Rhode Island.

Finally, I have concerns about the impact that MedRecycler will have on our town in general. In addition to the issues mentioned previously, medical waste facilities are known to give off a foul odor and cause discoloration of the air. The town of East Greenwich has an excellent school system, a charming waterfront downtown, and has long been a highly desirable place to live. The presence of a facility such as MedRecycler is likely to make East Greenwich a far less desirable place to live and may have a detrimental effect on home values in the area.

In conclusion, I feel very strongly that MedRecycler should not be allowed to operate a facility at 1600 Division Road in West Warwick, or in fact, anywhere else in Rhode Island. There are far too many known and unknown risks. Why should the people, animals, and environment of Rhode Island be turned into unwilling participants in a scientific experiment while the pockets of a New Jersey businessman get fatter? As the DEM website states, “Our mission put simply is to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family”. I implore the DEM to abide by its own mission statement and deny any permits to MedRecycler. Thank you for your consideration.

Sincerely,
Sarah H. Turshen

https://docs.google.com/document/d/1wchaTW1uUuJ4gVOtx1YX-ECxeQ0770EPd8mS0B5uwJc/edit?usp=sharing [docs.google.com]

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
As a resident of East Greenwich and as a health care professional in this community, I ask you to please deny the permit application of Med Recycler. As a surgical PA who disposes of all kinds of human waste, fluids, and contaminated plastic medical devices into biohazard bags daily, I am disgusted and horrified to imagine these materials being incinerated in our back yard. There would need to be an immense amount of safety data on the pyrolysis of medical waste before I would feel comfortable having this anywhere near the places where people live and work. Being located right off highway 95 may be convenient for Med Recycler, but it places a massive waste incinerator in a densely populated area with zero buffer. This is not green technology and it is not wanted here. This is not the type of business we want to attract to Rhode Island.

Thank you for your consideration,

Beth Sawyer Creeden, MSPAS, PA-C

IMPORTANT NOTICE: This email and any files transmitted with it are confidential and intended solely for the use of the individual(s) or entity to whom they are addressed. If you have received this email in error, please forward the email to the sender and then delete it completely from your computer.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Scott Hinrichs, Scott.hinrichs@crl.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Pyrolysis using medical waste is untested therefore it would be negligent on your part to approve this permit. Would you approve it if you or any of your family members lived or worked in close proximity to the facility? Of course you wouldn’t because you know it would not be safe. The ONLY decision should be to deny this permit. It is way too risky to our environment and to the people of Rhode Island.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Scott Hinrichs,
240 Watch Hl,
East GreenwichRI
scott.hinrichs@crl.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
As an East Greenwich resident, I am writing to express my strong opposition to the MedRecycler-RI, Inc. medical waste treatment facility that is proposed for West Warwick.

There is no financial gain it could bring that would be worth making our community - especially our children - guinea pigs for an untested technology that could cause horrific harm.

Please do the right thing for Rhode Island and deny the medical waste license for the MedRecycler-RI, Inc. medical waste treatment facility.

Sincerely,
Scott Stroud

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
From: (Name) From: (Address)
Sen. Burke, sen-burke@rilegislature.gov

[EXTERNAL] : MediRecycle plant

Hello,

I am the Senator from District 9 in West Warwick and the people in my district do not want this plant.

I strongly believe that this project is not in the best interests of the Towns of East Greenwich and West Warwick. Further, that Mr. Zielinski spoke for the Town when he did not have authority to do so. This is grounds for a suit alleging malfeasance on the part of the Town Manager, and by extension, the Town Council.

This plant that you are considering issuing permits for to burn medical waste on technology that is not TESTED!!!

I can see no reason how you can authorize permits to a facility that is not even running and say this plant is safe and good for the environment.

There is no test data for this type of plant burning medical waste.

**The people of Rhode Island should not be a test site.**

If this facility is allowed to open you will be creating a future hazardous waste site.

There are no plants of this type in the United States, and the one city in MedRecycler's paperwork closed because it was not profitable. The track record for this type of plant is not good.

For the plant to be successful it must run 24/7 and will inordinately increase the tractor trailer traffic at the intersection of Division Road and South County Trail, the office park, NEIT Campus area and the East Greenwich residential area.

If you decide to grant the license, I implore you that there be a guaranteed remediation plan in place (in the form of an insurance policy) and that any license be contingent on that policy remaining in effect in perpetuity.

I urge you do act responsibly and deny any permits for this plant in West Warwick.

Sincerely,
Senator John P Burke
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Hello,

Please find attached my written comments regarding the MedRecycler-RI license application.

Thank you,

Bridget Valverde
April 14, 2021

Yan Li
RI Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management 235 Promenade St
Providence, RI 02908

Dear Ms. Li,

Please accept this letter as my comment on the application by MedRecycler-RI, Inc., to operate a medical waste treatment facility at 1600 Division Rd, West Warwick, RI. I offer my comments in my capacity as Rhode Island State Senator representing my constituents in the abutting town of East Greenwich.

Over the past few months, I have received dozens of emails and phone calls from residents of East Greenwich who are deeply concerned at the prospect of this facility opening up just over the town line in West Warwick. And I share their concerns. I am hearing from parents that they don’t want a medical waste treatment plant right next to their child’s daycare. I am hearing from nearby residents that they are concerned about harmful greenhouse gas emissions and the proximity to wetlands, lowered property values, and increased traffic congestion from trucks delivering the waste. And I am hearing from doctors and business owners that they are concerned about the risks of accidents associated with the transport and treatment of medical waste containing pathogens and chemicals. As an abutting community, my constituents have no authority over West Warwick and will not share in any tax revenue generated, but seeing as this facility is to be located literally feet from the East Greenwich line, they will bear much of the risk.
The out-of-state developers pushing for this facility want us to believe that there are no risks. They want us to believe that pyrolysis is the answer to our trash woes. But the truth is their plan is to set up shop in a populated area, truck in medical waste from all over New England and superheat it, producing toxic tar and ash and potentially emitting harmful compounds like dioxins into the environment. This technology has not been adequately tested on mixed materials and there is no comparable facility operating in the United States. It’s bad enough to want to bring an untested medical waste treatment facility to our state, but to put it in a populated area is outrageous. Rhode Islanders are not interested in being the guinea pigs for this kind of technology.

My constituents in East Greenwich are also rightfully concerned about the lack of certain information being provided in the application. For example, the submission of a plan detailing the critical safety protocols that will be undertaken by the applicant is incorrectly being required by RIDEM only after the license has been granted. That order of operations means the public will be denied the chance to review and comment on those plans before this facility gets the go-ahead from RIDEM. To grant this facility a license to operate without a fully vetted safety plan is irresponsible and may also be a violation of the Administrative Procedures Act.

In addition to the many health and environmental concerns associated with this project, I believe that it is inappropriate for RIDEM to even consider MedRecycler-RI, Inc.’s application for a waste permit at this time. The application process thus far has been inconsistent with Rhode Island General Law. RIGL clearly states that before RIDEM may consider an application for a solid waste license, the host community, in this case West Warwick, must issue a final plan determination. The applicant must also receive a certificate of approval from the State Planning Council for the siting of the facility. Neither of those things have happened yet.

I ask you to seriously consider the impacts on the health, safety and welfare of surrounding residents and businesses when it comes to siting a medical waste treatment facility in a densely populated area and directly adjacent to other businesses. Let’s be transparent in the licensing process and follow the procedures outlined in our state law. This untested technology being brought in by an out-of-state developer to treat medical waste that will not all even originate in Rhode Island is, simply put, a bad idea, and I urge you to deny this application.

Thank you for taking the time to review my comments. Sincerely,

Bridget Valverde Senator, District 35

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Good afternoon, Mr. Dennen:

Please consider this email to include my comments for the hearing scheduled for this coming Monday on the proposed medical waste site in West Warwick.

I understand that we must have a way to handle medical waste. With respect to the proposed facility:

1) The health risk from unplanned release of toxic chemicals into a residential area is too great. In 1998, a major pyrolysis gas leak at a facility in Germany caused evacuation of the neighborhood. In 2012, a gas explosion at a Russian sludge pyrolysis plant killed 8 people and injured several others. The technology isn’t mature and there are numerous different processes involved that use multiple pieces of equipment. It’s prone to automatic shutdowns and breakdowns where toxins (dioxin and furans) can be released.

2) The net environmental effect is negative. Fossil fuel derived energy must be put into the pyrolysis process and the output is syngas which is burned with net negative environmental effects. It is not a “green” solution.

I understand that there is no perfect solution to handling medical waste, plastic waste and municipal solid waste but situating this facility in a residential area is too dangerous and fraught with more risk than is acceptable. Please deny.

Seth Feder MD

Sent from my iPad

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
From: Shanna Wells
67 Shady Hill Drive
West Warwick, RI 02893
401.484.1650
shannawells1@gmail.com
Pronouns: She/Her/Hers

Hi, My name is Shanna Wells, and I am a resident of West Warwick, who lives two-and-a-half miles away from the proposed site. I’m here to say I DO NOT want the proposed MedRecycler treatment facility here in my town, or indeed, anywhere in Rhode Island.

Pyrolysis is not ordinarily used for medical waste, and there is no scientific data on its ecological impact.

I think it unconscionable that an untried, untested process would be approved, turning the residents of West Warwick and East Greenwich into lab rats for the financial benefit of an out-of-state vendor. It also makes me question the DEM’s motivation, since their job is to protect and steward the land in a responsible, ecologically safe manner.

If you don’t know the long-term impact this facility will have on the environment and the humans who live adjacent to it, then the answer should always be “No.”

Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Sharon Garland
garland49@gmail.com

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Please deny this permit - the science behind it is yet to be proven.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

- MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

- MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

- MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

- MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Sharon Garland,
20 Cedar Ridge Lane,
West Greenwich RI
sgarland49@gmail.com

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Yan Li,

It has been brought to my attention that Med Recycler has a location at 1600 Division Road West Warwick.

I am a resident in West Warwick and live on Achave some questions regarding your company:
1) What exactly is 'PYROLYSIS''
2) What is the WASTE that will be delivered by four full truckloads or eight trucks in in total as stated in your flyer (HOW LARGE ARE THESE TRUCKS)
3) If not dangerous why is it delivered in SEALED CONTAINER
4) You mentioned waste will not be burned or incinerate - rather, it is evaporated INTO THE AIR?
5) How is this converted in an environmentally friendly manner into Renewable Energy?

I urgently await your response, as I understand there is a Zoom meeting on Monday March 15th at 4:00 pm.

Regards,
Sharon L Lombardo
401-451-7499
slombardo1051@hotmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• The commenter is mistaken in that the Department has never claimed either that unsealed containers of medical waste have “no risk” nor that medical waste “evaporates”. Neither claim has any basis in science.
• See also the Department’s fact sheet regarding the definition of pyrolysis.
Good Evening Yan,

After reading the information on MedRecyler website, I find it to be misleading on many accounts. It is a concept that has not been proven anywhere in the United States. Mr. Campanella contradicts himself each time he opens his mouth.

I did attend the zoom meeting on March 15th. It was very informative and educational on how dangerous this Pyrolysis system is to the environment and human beings. At the zoom meeting I did not hear any positive feedback from Medical Doctors, Environmentalist, concerned citizens of West Warwick, East Greenwich, or cancer patients. The people in the building at 1600 Division Rd were not even aware of what was going on until I hand carried flyers to them. There is supposed to be a 200' barrier in every direction for a facility of this kind.

I am asking that is project be rejected for the Health of all Rhode Islanders! As a taxpayer of West Warwick, a parent, wife, friend to many I do not want it! It is an unproven and unsafe process. Dollars $ and new jobs should be the final decision maker for this issue.

Regards,
Sharon L. Lombardo

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VI. Buffer Zone
I am writing to you out of a concern for the environment and the residents of the State of Rhode Island. Mr Nicholas Campanella who has no previous experience in pyrolysis and his unethical RI individuals/entities are attempting to ram this toxic operation upon Rhode Islanders!

These are my reasons for my objection to MedRecycler which is the subsidiary of New Jersey-based Sun Pacific.

Holdings of Sun Pacific is described below from the United States Securities and Exchange Commission report @ https://www.sec.gov/Archives/edgar/data/1343465/000149315219004904/form10-k.htm [sec.gov]

Sun Pacific Holdings ....Currently, the Company has been and is insolvent......We are unable to attract additional management personnel and members to our Board of Directors. ... Our director and officer, Nicholas Campanella will control and make corporate decisions ... We currently lease 2,510 square feet at 215 Gordons Corner Road, Manalapan, NJ, 07726 ... We have never paid dividends on our Common Stock and intend to continue this policy for the foreseeable future. ...The Company has an accumulated deficit of $6,649,017 as of December 31, 2018. The Company’s continuation as a going concern is dependent on its ability to generate sufficient cash flows from operations to meet its obligations, which it has not been able to accomplish to date, and/or obtain additional financing from its stockholders and/or other third parties. ...As of December 31, 2018, we had approximately 10 full-time employees

Despite knowing this some RI individuals have chosen to support this knowing that MedRecycler-RI wants us Rhode islanders to assume responsibility for a $17.2 million bond.

Documents [ecori.org] received from records requests reveal that Rhode Island Commerce takes ownership of the MedRecycler-RI facility and equipment if the bonds default.
The MedRecycler-RI plant will be accepting up to 70 tons of medical waste per day from across New England and New York. [ecori.org]

-“This isn’t the clean energy its developer claims it is. This technology is criticized as being inefficient, because it takes so much energy to superheat the waste. But even more critically, it’s unsafe.” according to Sen. Bridget Valverde [eastgreenwichnews.com]

-A well researched article at [ecori.org] reads, in part: "The Conservation Law Foundation (CLF) has noted [clf.org] that emissions from pyrolysis contain cancer-causing compounds. The ash consists of dioxins, mercury, and heavy metals — pollutants that can make their way into waterways and drinking water supplies. The applications submitted to DEM says the facility will emit or have as byproducts carbon dioxide, carbon monoxide, silicon dioxide, magnesium oxide, iron oxide, sodium chloride, and sodium sulfide)"

Very concerned,
Sharon & Tom Romeo
36 Pine Grove Lane
West Greenwich RI 02817

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VI. Bond Funding and Project Financing Issues
From: (Name)  From: (Address)
Sharon Siedliski  siedliski@cox.net

[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

As was stated by numerous residents, business owners and other very concerned Rhode And residents of East Greenwich, North Kingstown, Coventry, and West Warwick, this facility does not belong in West Warwick. Of the many reasons, one stuck out to me. The lack of an appropriate buffer zone between MedRecycler and it's occupants in the same building should be reason enough to deny the permit.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Sharon Siedliski,
28 Great Rd,
East Greenwich RI
siedliski@cox.net

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: Sharon Williams  
sharonhwilliams6@gmail.com

[EXTERNAL] : Medrecycler

Please stop the permission for Medrecycler to burn unknown and unmonitored material in Warwick.

I live in East Greenwich and this is a densely populated area. My daughter and granddaughters, I (with lung issues) and my neighbors should not be subjected to unknown contaminates in the air we breath.

This out-of-state company (and no company) should not be allowed to use an untested methodology to pollute our air!

With thanks for your help,

Sharon Williams
25 Locust Drive
East Greenwich, RI 02818
508 523-1906

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Unfortunately, I was unable to attend the Zoom meeting concerning the proposed Medrecycle plant off of Division Rd. on the West Warwick-East Greenwich line. Campanella has sold the state and the town of West Warwick a bill of goods.

What he has proposed is the tip of the ice berg as to what will ultimately become an environmental and economic nightmare for the surrounding towns and neighborhoods. He has no true data on the environmental impact of such waste processing. His ultimate goal is to expand the plants volume, again without due diligence as to the environmental and economic impact to the surrounding towns and neighborhoods. His goals as well as those who approved this ill-advised plant obviously are financial and without concerned about the true impact this plant will have in its proposed site. DEM is charged with the protection and management of the RI environment. They need to do their job and put an end to this proposed plant.

Sincerely,

S. Migliori
Sent from my iPhone

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Spitzer, Jill  Jill.Spitzer@dell.com

[EXTERNAL] : MedRecycler

Hello,

I am reaching out to you in regards to the proposed MedRecycler facility off Division Road. Although zoned industrial, my neighborhood is less than a mile down the road and will be directly impacted by this facility. The pyrolysis process is untested and the idea of implementing this so close to a child care facility, New England Tech, a restaurant and large neighborhoods is irresponsible. I urge you to reject this facility and keep us safe. There is absolutely no way to determine the local impact of this. Who will bear the burden if this plant fails, emits odors or dioxins, or impacts water supplies? I wouldn’t want that to happen on my watch.

Thank you,

Jill Spitzer

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIX Odor Issues
From: (Name) From: (Address)
Spitzer, Jill Jill.Spitzer@dell.com

[EXTERNAL] : MedRecycler

Hello,

I am a resident off Signal Ridge in East Greenwich and I want to make my concerns known regarding the proposed MedRecyler facility on Division Road. Despite what the owner is stating, this technology is not widely used nor accepted anywhere in the United States. The thought of waste that has potential contaminants like COVID-19, chemo drugs and others is deeply concerning to me. What happens if something goes wrong and dangerous toxins and waste are released?

Who is going to make sure our community is safe? That area would be deemed a hazardous waste site with repercussions to the surrounding businesses and residents. This is not the place to test this technology and will not going to produce the energy or the jobs claimed by the business owner. The risk is so great, I urge you to reject this license request.

Thank you,
Jill Spitzer
Advisor, Sales Operations
Dell EMC

mobile 617-515-8021

Jill.Spitzer@Dell.com <mailto:Jill.Spitzer@Dell.com>

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
Stephanie  steph_eina@yahoo.com

[EXTERNAL] : MedRecycler

Hello, I’m writing in support of the MedRecycler facility in W. Warwick. I have researched the pyrolysis they’re using and with assurances from the company and DEM that it will be regulated, I think it will be a good addition in terms of revenue, job creation, and a backup energy source. Thank you.

Stephanie

Sent from my iPhone

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
Dear Ms. Li:

We are writing to voice our strong opposition to the MedRecycle-RI facility and to urge DEM to reject the permit for operation. The RI Department of Environmental Management’s responsibility is to protect Rhode Island’s environment as stated in its mission, “The Rhode Island Department of Environmental Management (DEM) serves as the chief steward of the state’s natural resources – from beautiful Narragansett Bay to our local waters and green spaces to the air we breathe. Our mission put simply is to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family.”

Our opposition and significant concern is for Rhode Island’s environment and the health of all Rhode Islanders. Our family fully supports green energy initiatives for Rhode Island that do not pollute our air by creating toxic emissions.

MedRecycle-RI, a medical waste pyrolysis facility, is simply not a green energy facility. Pyrolysis is an inefficient energy as it consumes more energy to burn the waste, requiring electricity and gas to run the facility 24 hours a day. Furthermore, green energy does not emit hazardous dioxins into our air. This is not the type of development that we want in Rhode Island. Pyrolysis of medical waste is not clean energy. In fact, this facility will emit 20,000 tons of carbon dioxide into a residential community of schools, homes, businesses, and restaurants. Why would RI host a facility that will receive and burn medical waste from across New England and New York, a facility that will process 70-140 tons of hazardous medical waste per day and emit 20,000 tons of carbon dioxide into our air? DEM should not allow a facility to operate in RI that will use largely unproven technology, putting our air and health at risk. While pyrolysis is not a new technology, using it to burn medical waste is virtually untested in our country and in the world. The technology, developed by Technotherm, Inc of South Africa, has only three devices in operation for waste-to-energy in the world, none of which process medical waste. Other pyrolysis facilities cannot be used as a basis for testing because they process a single type of waste. Medical waste contains materials including plastics, metals, hazardous chemicals, blood pathogens, human tissue, and animal tissue. Since pyrolysis has never been used to burn medical waste, the risk is unknown and, therefore, is an unacceptable risk for Rhode Islanders.
According to the Conservation Law Foundation, medical waste is approximately twenty-five percent plastic along with other hazardous materials. “The Conservation Law Foundation has noted that emissions from pyrolysis contain cancer-causing compounds. The ash consists of dioxins, mercury, and heavy metals — pollutants that can make their way into waterways and drinking water supplies. The applications submitted to DEM say the facility will emit or have as byproducts carbon dioxide, carbon monoxide, silicon dioxide, magnesium oxide, iron oxide, sodium chloride, and sodium sulfide”, according to ecoNews RI. Rhode Island made a sound decision to terminate its practice of burning medical waste two decades ago. Why allow the resumption of this toxic process?

According to the Environmental Protection Agency, burning medical waste is the second largest source of dioxin emissions in our country. In fact, The World Health Organization discourages the burning of medical waste due to the toxic process of burning plastic.

Furthermore, it is highly concerning that there is no process for notifying the community and DEM if harmful emissions are released into the air. The permit does not require a limitation of dioxin emissions nor continuous monitoring of emissions, both of which are crucially important to protect our community and our environment. DEM itself reported that notices of dangerous emissions to the public would be voluntary by MedRecycle-RI and that due to understaffing at DEM, inspections would be inconsistent. It is extremely concerning and unacceptable that our community’s health and our environment would be at the discretion of MedRecycle-RI to voluntarily report hazardous emissions.

We urge the Rhode Island Department of Environmental Management to reject MedRecycle-RI’s permit application in order to protect the health of Rhode Islanders and our environment.

Sincerely,
Kevan McAleer and Stephanie Egan

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste
- See XII. Department Staffing Issues
- See XVI. Buffer Zone

From: (Name) From: (Address)Stephanie Egan stephegan7@gmail.com [EXTERNAL] : Deny MedRecycler’s medical waste treatment application

Hello,
My family and I are strongly opposed to the MedRecycler facility due to the fact that medical waste pyrolysis currently does not exist in our country, or in the world, and therefore, has not been proven to be safe. The site is located in a community of daycares, neighborhoods, local businesses, and a local technical institute for higher education. As the steward of Rhode Island’s environment, Rhode Island Department of Environmental Management must protect our land, air, and water from this untested, unregulated medical waste treatment facility. We must ask ourselves, “Why doesn’t medical waste pyrolysis exist anywhere in the world?” We urge you to deny the permit requested by MedRecycler.

Thank you,
Stephanie Egan

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Stephanie Egan,
1607 Middle Rd.,
East GreenwichRI
stephegan7@gmail.com

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

As a local resident, my wife and I believe that the RI DEM should deny MedRecycler's application for a medical waste treatment permit. It is clear from the information shared to date that the permit would not be in the best interest of Rhode Islanders and cannot be approved safely. The facility does not comply with Rhode Island's medical waste regulations, solid waste regulations or the laws governing solid waste license applications as it is not based on a proven technology, the state does not have an appropriate standard on which to monitor and regulate the activity, it will endanger the lives of people living, working and going to school in the area, it will not have an appropriate buffer zone particularly with the day care center nearby, and the application does not have all required approvals in hand. Approving this application is not in the best interest of Rhode Islanders and area residents and businesses and it would be a great danger to such individuals for the application to be approved. I live in close proximity to the proposed area and approval of the application will also have a negative impact on our family's health and well being, as well as property values. Please deny this application.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby day care center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Stephen MacIntosh,
335 Moosehorn Road,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
To Whom It May Concern:

My name is Stephen Stamp and I live at 51 Silverwood Lane, West Warwick. I live about 1 ¼ miles from the proposed site of the Medrecycler location. I am in opposition of DEM granting any licenses to operate at 1600 Division St. Mr. Campanella stated he would have to construct a building at the Quonset Business Park to locate there, so I guess cost was an issue and less about being a good neighbor. After reading and listening to some of the questions asked by concerned parties, I also have a few concerns. There seems to be few answers on the byproducts left over by this process and the accepted limits of any toxins. I understand this being a new process for medical waste disposal there may be a lack of information available. This is why this should not be tested so close to a residential area.

My understanding is that the ash and tar byproducts may be sent to a landfill or mixed with concrete or asphalt. What toxins are in these byproducts and the permissible limits if any? If unable to be sent to a landfill or mixed with asphalt or concrete then where does it go? My understanding from the explanation Richard Bingham gave regarding the byproducts coming from the Dryer and suctioned to the Regenerative Oxidizer will be vented to the outside. What will this exhaust contain for byproducts and permissible limits? Also, what is in the syngas being produced, is it toxic. After burning this fuel what are the byproducts and permissible limits. How can DEM oversee this process or due any testing if it’s not known what to test for?

I am sure Mr. Campanella feels this process is safe and will do his best to ensure its safe operation. There are unanswered answers on the byproducts of this process. They are dealing with biological waste that could cause health issues if not handled properly. He is relying that the proper material was put in the boxes and sealed properly, that the transport company handles the waste properly, not to damage the sealed waste and that the trucks are watertight not to leak water and mix with ground water while sitting on the property. That his workforce is trained and equipment working safety. Everything has to go right, keeping in mind this is biological waste.

I am sure you are aware of toxic sites in Rhode Island and throughout the country that are a result of the coal gasification process. Tidewater site, Allen’s Ave and the purple soil problem in Tiverton, all a result from this process. While I am sure the Medrecycler process differs, some similarities exist. Coal gasification heated to make manufactured gas (syngas) resulting in toxic byproducts and still causing problems today. Another problem that arose from this process was a green substance in the natural gas lines, referred to as “Green Dust” (Cyanides, Cadmium, Chromium and other toxins). Information on the Green Dust and its origin is to the best of my knowledge since little information was provided from management.
Working for a gas utility from 1979 thru the mid 1990’s we encountered this Green Dust in many different circumstances and at times blowing in our face. We were never advised to use gloves, dust mask or any type of protection and not told of its toxicity. It wasn’t until management sent defective gas controls back to the manufacturer and it was determined that the problem wasn’t defective gas controls but as a result of the Green Dust and that it was toxic. Gas utilities are highly regulated and monitored businesses. The State and Federal agency’s that should have been aware of this problem knew nothing about it. When it comes to testing and oversite of the Medrecycler process, I have no trust it will be transparent. Until it’s proven to be safe, this process should not be tested anywhere in Rhode Island.

Stephen Stamp (401-965-1718)

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XIV. Issues Related to Disposal of Ash
- See V. Issues Related to Storage of Waste
Medical Waste Facility

Dear Ms. Li [ms.li] and Mr. Dennen

I am writing to you as Executive Director of the East Greenwich Chamber of Commerce on behalf of many in our membership including members of our Board of Directors. Their concerns are many as the site borders East Greenwich.

This encompasses East Greenwich’s roads, businesses, and residential areas.

Although I personally cannot speak on the zoom call today due to a prior commitment, I would like to communicate that our members have voiced concerns about potential health, safety, and other risks that this proposed facility would pose to our residents, children, students and workers. We believe much more thought and vetting needs to take place and that would include consideration for the properties in East Greenwich and West Warwick that are near the proposed facility.

On behalf of many members of the East Greenwich Chamber of Commerce, we ask that due consideration be given to East Greenwich’s concerns as well as those of West Warwick.

Sincerely,

Stephen M. Lombardi
Executive Director
East Greenwich Chamber of Commerce

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Sue Cruise  suelucruise@gmail.com

[EXTERNAL] : Extremely Concerned neighbor

Hello Yan Li,

I am writing to you as a very concerned neighbor of the possibility that MedRecycler may be allowed to operate so close to our home of 23 years in Signal Ridge, East Greenwich. This is a neighborhood and home to many old as well as young families.

Mr. Campanella frequently changed the information he provided us during the info zoom meeting. He started by saying only 4 trucks but then slipped in quietly 8 trucks per day seemingly in hopes no one would notice. Who knows how many trucks will drive down Division Road 24 hrs per day?

As this process is completely new and unexplored, how are we to be assured that there will not be any leakage problems?

What about how they will store waste or new energy properly? How will we know the system is vented safely and not being allowing to escape into our air or water?

Please DO NOT let this be another Flint, Michigan or Hinkley, CA situation. Please do not wait for people to get sick or die of cancer before this is shut down.

For the sake of the hundreds who have lived in this area happily, peacefully and safely, please stop this project from happening and harming us all.

We are begging for you to find a more suitable location for MedRecycler. One that is not 100 feet from a daycare and residential homes.

In sincere hopes that you listen to us all!
Sue Cruise

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit:
• See V. Issues Related to Storage of Waste
• See *VII. Transportation of Waste Through the Community*
From: Sunny W
From: swonger7@gmail.com

[EXTERNAL] : Medrecycler project

Hello

Please let the Medrecycler project proceed. It will add much needed jobs and taxes to the local economy. In addition it is better for the environment. Thank you.

DEPARTMENT RESPONSE:

- **See I. Issues Related to the Department’s Role in the Permitting Process**
I live a couple of miles from the proposed Medrecycler-RI installation. My son is a student at nearby NE Tech. I am very concerned about the installation of a facility like this in this location. It is close to a child-care center, a college campus, shopping, and many residential areas. From my reading I have learned that this technology has very little track record with medical waste. This is NOT an industrial area, and a facility like this does NOT belong here. I am opposed to this installation, and will be doing whatever I can to stop it.

Sincerely,

Susan Jacobi-Johnson
Warwick RI

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)
Susan Johnson susecv@gmail.com

[EXTERNAL] : Medrecycler

Hello -

As a resident of Cowesett (Warwick), I am extremely opposed to this project. Absolutely the wrong location for it. I am also deeply concerned that it is untested technology, run by a company with NO experience handling medical waste; and that there seem to be serious irregularities in the application process. Everything about this is sending up red flags.

Also, I am writing to let you know that my husband and I attempted to attend last night's Zoom meeting and were unable to because it was at capacity. We have read EcoRI's summary of the event. The more I read, the more I am convinced that this is a dangerous project. I am doing everything I can to spread the word to other RI residents. The problems with this project are a statewide issue, not a "NIMBY" East Greenwich issue.

Susan E. Jacobi-Johnson
Warwick, RI

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : Deny MedRecycler’s medical waste treatment application

I’m an EG resident and do not want this facility in our town. We have no idea what the long term effects of this technology will do to our air, environment and residents that live in RI. This decision effects all Rhode Islanders. Please do not approve. My teenager also works in the plaza at Daves and spends hours outside! He will be breathing in who knows what if this facility gets approved.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Susan Meacham,
165 Deerfield Drive,
East Greenwich RI
susan.meacham@cox.net

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Susan Newkirk  

sanewkirk@gmail.com

[EXTERNAL] : Medical Waste Incinerator-NO

I’m writing to register my opposition to the proposed medical waste project. Our Rhode Island political process has overlooked the good of its people all too often. Please do not let it happen again by allowing such a facility to operate here.

Common sense and common good must prevail this time.

Sincerely
Susan Newkirk
1710 Nooseneck Hill Rd, Coventry, RI 02816
--

Susan

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
I am writing this email as a resident of East Greenwich and with parents in West Warwick. Medrecycler is petitioning for approval to put a facility on Division Road. My family is strongly opposed to this approval. The environmental and health issues associated with such a facility are detrimental to the communities at large. The “proprietary” technology has never been tested on medical waste. There are not nearly enough details or supporting documentation to show that what Medrecycler is trying to do is environmentally safe or doesn’t pose a risk to the residents surrounding the facility. What research does suggest is that this medical waste recycling is neither green nor safe. Testing this technology in a highly populated area is negligent.

70 tons of medical waste a day, 24 hours a day, odorous gases to be released in the air, this poses a huge risk in a highly populated and trafficked area. Who suffers from the toxicity? The land and residents of Kent County. And what happens if there is an accident? Especially in the middle of the night. How will that risk be mitigated? Is the DEM prepared to handle the fallout of such a disaster that effects an entire county and beyond. Similar plants have produced more odorous gases and processed less than Medrecycle is proposing (Monarch Waste-
https://losalamosreporter.com/2019/12/08/nambe-tribal-member-raises-concerns-about-monarchs-medical-waste-facility [losalamosreporter.com]). Again, allowing this company to process such medical waste in this way, in this area is a negligent decision.

Finally, Medrecycle has yet to produce any documentation that actually supports their claims or would assure the State that what they are proposing is safe and safe in a residential area. In fact, all reports on the company and its representatives lead to false information and very questionable characters. (https://www.nytimes.com/2020/05/26/nyregion/coronavirus-fraud-masks-new-york.html [nytimes.com], https://www.ecori.org/composting/2021/2/28/px6rp9yomqfvdz2tdhtshv720ca6dn1 [ecori.org]) This is unacceptable.

In closing, implementing a nascent technology in immediate proximity to neighborhoods, schools, hotels and businesses is reckless. The DEM has a responsibility to protect the interests of the citizens and residents fo Rhode Island. We would be grateful if you could act accordingly.

Sincerely,

Susan Riley, JD

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XI. Monarch Pyrolysis Facility in New Mexico
• See XIX Odor Issues
From the bottom of my heart, please hear the citizens of West Warwick, Warwick, Coventry, East Greenwich and even me, from North Kingstown, regarding our refusal to accept the Med-recycler plant at 1600 Division Road. I had the privilege of attending, via Zoom, the online meeting a couple of weeks ago and thank you for the time to speak. For so many reasons, we cannot allow such a plant to be in Rhode Island. Of course, I'm protective of our own neighborhoods.....but let's face it; All towns in Rhode Island comprise one neighborhood.

I know you've read all and heard all from my neighbors. I don't need to get in to the scientific rhetoric of reports that say this type of trash disposal is unacceptable. I just want and need to reaffirm to you that, in my opinion, as the Mother of a young adult who pays good money to attend the New England Institute of Technology, as the wife of a United States Navy Veteran, who now works for Verizon in the area of 1600 Division Road, as a citizen of Rhode Island, as a taxpayer, as a person who drives along I-95, who shops at the intersection of Route 2 and Division Road, as a conscientious human being, I DO NOT WANT A MEDICAL RECYCLING PLANT anywhere in Rhode Island, poisoning the air, polluting the streams, adding to traffic (which will additionally poison our air and pollute our streams.) We do not want more out of state trucks dropping off waste in our beautiful state. We owe Mr. Campanella nothing, but you and we owe the residents of Rhode Island the respect and accountability of excellent decision-making.

Rhode Island's Department of Environmental Management holds a sacred responsibility to us and to our beautiful environment. So many people are looking to DEM to uphold the needs of our people and our state and to guard against such contamination that a medical recycling plant would yield.

I can be reached at (401) 378-6462 if any further advocacy by me would be needed. Thank you for considering my thoughts on this matter.

Sincerely,
Susie Leahy
8245 Post Road
North Kingstown, Rhode Island 02852

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XVII. Out of State Waste
March 14, 2021

Yan Li, P.E.
Rhode Island Department of Environmental Management
Office of Land Revitalization and Sustainable Material Management
235 Promenade St
Providence, RI 02908

Dear Engineer Li,

My name is Trung Doan, DDS and I am a resident of Warwick, RI who lives near the proposed site for MedRecycler Facility (1600 Division Street). I have been a resident of Rhode Island for close to 20 years. As an immigrant, after many years of hard work, I have been able to purchase my first home in 2019 in Warwick. I chose Warwick due to its sense of community, beauty, friendly neighbors, safety, and the wonderful services it provide. This is my first home and most likely will be my last home. I love living in Warwick, and in Rhode Island.

When I heard about the proposed site for MedRecycler, I did some research and realized that the process of pyrolysis is new and untested, with a lot of potential health issues from the chemicals/toxins/waste released into the air and environment. The proposed site at 1600 Division Street is very near to residential areas, community centers, shopping centers, schools, many small local businesses, child care facilities, and wildlife. It will also bring in a lot of traffic to the area, causing a lot of pollution, congestion, and noise to the towns of West Warwick, Warwick, East Greenwich, and neighboring communities. Most of all, I am worried about the health concerns from the byproducts produced by MedRecycler and how it will affect the health of the residents of surrounding towns and the State of Rhode Island. As a healthcare provider, I am familiar with the medical and bio waste that is produced, including the chemicals that are used in medical procedures, and how it can affect our health and the environment if disposed of properly.

I ask you to please take this into consideration in your review, and put the welfare and health of our residents as the first priority in your decision. I do not believe that MedRecycler will benefit the citizens of Rhode Island, and can cause long lasting health issues now and in the future. Hopefully, with more research, we can find another option.

I thank you very much for your time and consideration, and wishing you well and good health.

With much respect,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Ms. Li, Mr. Dennen, and Ms. Coit,

My name is Trung Doan, DDS and I am a resident of Warwick, RI. I am writing to ask you to please do not approve Med Recycler's request to build a facility in West Warwick.

I moved to Rhode Island 24 years ago after graduating from dental school, and before that, I knew nothing about Rhode Island. I have since fallen in love with this state, and in 2019, I bought my very first home...in Warwick. The fell in love with RI for its beauty, sense of community, people, services, nature and coastlines, and even its politics. We are a small state, but that's what make it so special, because wherever you go in RI, you'll always feel like you're home.

When I heard about the proposed plans for Med Recycler, I was concerned, and very nervous. So nervous that I didn't even want to drive down Division Road to see where the site is. Now that I have seen it, I am more fearful and worried. It is right next to local wetlands/pond, right behind a daycare center, across from the East Greenwich Country Club, very near to schools, homes and neighborhoods, shopping centers, and other local communities. This will post a serious environmental problem, and more importantly, a very high health risk to the residents of West Warwick, East Greenwich, surrounding towns and cities, and to the rest of Rhode Island. The proposed Med Recycler plant will bring in a lot of traffic and medical waste from other states, polluting our communities and putting the health and welfare of our citizens at risk. The proposed process to manage this medical waste (pyrolysis) is new and untested, and it is something that we do not need in our community. Rhode Island is OUR HOME, and we should protect it, and not be the "waste management capital" for other states.

While I am not a scientist, I am a healthcare provider. I see more and more people of all ages living with respiratory issues. These problems are intensified by air pollutants and toxins. Med Recycler will contribute to this problem, which will affect the health and quality of life for us now and future generations. In addition, since the start of the Covid 19 pandemic, we have seen an exponential growth in the amount of medical waste that is being produced, and it is a trend that will continue for many decades to come. We have to ask ourselves, do we want to be the state that is responsible for all of this waste? Who will this benefit? Why are we putting our beautiful Rhode Island and its citizens at risk for one company?

I was able to attend both the meeting that was held by DEM (March 15, 2021), and the Legislative hearing at the State Capital on April 8 for the High Heat Bill #5923. From what I witnessed, everyone who testified at these meeting (with exception for the two people from Med Recycler), were unanimous in support of denying a permit to Med Recycler, and in support of Bill 5923, and not allowing any High Heat facilities to come to Rhode Island. So I respectfully ask all of you, to please do not approve Med Recycler's
request to build a facility in West Warwick, nor anywhere in the state of Rhode Island. 
YOU ARE OUR VOICE when it comes to issues like this. Please protect our beautiful 
state, its residents, OUR HOME.

Thank you for your time, and wishing you good health.

Sincerely,
Trung Doan, DDS
420 Sleepy Hollow Farm Rd
Warwick, RI 02886
(401) 529-9566

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the 
  Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and 
  the Minor Source Air Permit
• See XVI. Buffer Zone
We live in Westwood Farms and we vehemently oppose this company getting a license and setting up shop here. Our children play here and we pay an absorbent amount of taxes to live here. Please let us know what else we can do to oppose this. Thank you

***During this unprecedented time we are not in the office all days. Please feel free to contact me on my cell at 401-640-1640

Please Check Out Our New Animated Video !!
https://player.vimeo.com/video/178264318

Vin Lamoriello
President

“Be kind to all you meet, for each of us carries a burden that others can’t see…Don’t look down on someone, unless you are helping them up.”

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Dear Mark,

I have recently learned about the company Solar Pacific attempting to put a medical waste plant in West Warwick. I am an East Greenwich resident residing in Signal Ridge, and I must say that I am quite infuriated about this matter. I ask myself, how I have not learned of this sooner? Thankfully social media and the uproar of East Greenwich residents in a group I belong to are bringing awareness to this major concern quite recently. I do also ask, why has this not been brought into a greater light, so that people who just so happen to not be part of this group may know about it and speak their concern?

As a Registered Nurse this matter deeply concerns me from a medical perspective and from my heart as a mother. I just can not bring myself to believe that DEM could possibly approve of this medical waste facility to be put next to residential areas, a daycare, a golf course, New England Tech school, and just be put in our state as an untested technology.

West Warwick residents are not affected by this, we high tax paying East Greenwich residents who reside in the surrounding area are the ones who are going to be affected by this. Of course West Warwick can think this would be a good and safe idea, the West Warwick people do not reside in the area. That area may be considered "industrial" but it does not make it acceptable to put that site to use for experimental medical waste disposal, this UNTESTED experimental technology does not belong near our neighborhood. Which also only results in our home value decline.

These are my major concerns:

70 tons of waste will be burned per day - how could this not emit in the air? New Mexico has a similar facility and there are complaints that people can smell it in the air. What if there is a smell?

There is not another pyrolysis facility in the country. Mark you stated yourself, “I don’t know of any pyrolysis system like this, that is what makes this challenging. So if we can’t test this system how do we know that is 100% safe? If there is no other facility like this, how do we know it does not emit toxins? Or if it has any harmful effects to surrounding areas? Why would we be choosing RI, such a densely populated state to be the guinea pigs?

They state they will test waste for radioactive content. What if something is missed? If it is not a harmful process, and not being emitted into the air, why would radioactive material be an issue? Significant amount of plastic will be processed. Conservation Law Foundation noted “emissions for pyrolysis contain cancer causing compounds.”

Increased traffic with delivering this waste per day adding to pollution of air. What about the water supply? How can we be certain that this can not go into our water?

I bought my dream home in a dream neighborhood in June 2019. (This information was NEVER disclosed to me by the realtor. ) We brought our son, who was 2 at the time to his forever home.
Shortly after in February 2020 our second child, our daughter was brought home. We moved to East Greenwich to give our children a beautiful, and safe town to live. We sacrificed the high taxes to one day give our children an exceptional school system. Never in a million years did I think my children would be growing up down the street from a medical waste plant. A plant that would be burning materials such as anatomical waste, contaminated carcasses, human blood, PPE equipment used in isolation rooms containing E.coli, MRSA, COVID, HIV, the list goes on. No one truly knows how this system works or its effects on the environment and its result on human life. I brought my children to this neighborhood to give them a beautiful place to live, not to be exposed to this experimental project.

I would like to have you stop and think. Would you want your children or grandchildren playing outside with a facility such as this basically in their backyard? Or bathing and cooking with water that you pray is not contaminated?

I beg of you to please not pass this facility to operate this technology.

Sincerely,
Tara Buontempo
Signal Ridge Resident

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XIII. Concerns Regarding Radioactive Waste
• See XVI. Buffer Zone
I am writing to express my concern over the placement of a medical waste recycling facility in West Warwick, RI, across the street from my residential neighborhood. My concern is that this project has been rushed through the environmental permitting process without adequate research on the potential environmental impacts to the residential community and the adjacent Day Care facility.

It is my hope that the DEM has studied all potential air, stormwater, and waste management exposure pathways of this project before permits are issued for this facility. These studies must be done before permits are issued.

I would like to know what aspects of this facility have been evaluated to date and what are the processed environmental controls for any potential impacts.

It is my understanding that the proposed recycling technology has not been used for medical waste applications in the past; and therefore, it has not been proven that this technology is safe for the general public. Although this facility is in an area zoned as industrial, there is an adjacent Day Care Facility and New England Tech and several residential neighborhoods are located across the street. It does not appear that the project conforms to the requirements of Medical waste regulations section 1.15(F) and Solid waste regulations section 1.9(M) of the RI Regulatory Standards.

I have also heard that similar technologies used in other parts of the county have generated horrible smells and have emitted lot of CO2 gases.

Our entire neighborhood is extremely concerned. I have young children and I don’t want them exposed to toxins.

Please help us!

Theresa Butziger, LPG
Environmental Consultant

65 Fernwood Dr., E. Greenwich, RI 02818
O 862-432-0774
E TButziger@gmail.com <mailto:TButziger@gmail.com>
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
DENY MEDRECYSER’S MEDICAL WASTE TREATMENT APPLICATION

For all the reasons listed below and more, please deny the permit and stop MedRecycler from burning any medical waste anywhere in the State of Rhode Island. Since our state is such a small state, there is NO area that would be acceptable to build and/or operate such a facility. It would be extremely hazardous to the environment in general, to wildlife, to the waterways and the marine life contained therein, to clean air, and to the general public throughout the state. Further, the pollution resulting from such a facility could travel to all states bordering Rhode Island, further harming the environment on land, in water, in air, harm an array of wildlife, and all citizens in general.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: Thomas Rockett <trockett@uri.edu>
Subject: [EXTERNAL] : Medical waste facility

Could you please pass this message on to director Coit. The planned facility is a bad idea and I hope you deny a license. As a materials scientist, I have studied pyrolysis for many years and there are so many questions regarding the safety of an industrial process that are unanswered, in my opinion, it would be unwise and potentially dangerous to license this operation.

Respectfully,

Thomas J Rockett, PhD
Professor emeritus
Vice Provost for research, URI (ret)

--

Thomas J. Rockett, Ph.D.
Vice Provost Emeritus
University of Rhode Island
trockett@uri.edu
{H} 401-884-8098
(C) 401-368-1178

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department's Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
DENY MEDRECYCLER’S MEDICAL WASTE TREATMENT APPLICATION

The technology is unproven and potentially harmful to people and the environment. The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Tom Flynn, 72 Ladderlook Rd, Warwick RI flynnt01@cox.net

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Dear Yan Li:

We are writing to oppose the Medrecycler medical waste facility in West Warwick, and ask your office to add this email to the public comments for this matter.

As residents of East Greenwich, we are in solidarity with our neighbors who display anti-medical waste facility signs on their lawns. The burning of medical waste will disperse pollutants into the air and they will, by virtue of the location of our neighborhood in relation to the proposed site where the burning will occur (i.e., southeast of 1600 Division Road), be blown by the prevailing winds directly into and over our neighborhood.

The Medrecycler company is not a good fit for Rhode Island; allowing the company to set up shop in our state invites much risk and, as far as we can tell, no benefit.

Thank you for this opportunity to share our concerns.

Respectfully,

Tom and Susan O'Gorman
162 Maplewood Drive
East Greenwich, RI 02818

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
[EXTERNAL] : Fwd: No approval for MedRecycler. Is DEM willing to risk RI as the source of the next pandemic?
I ask that you not approve MedRecycler for RI

Tom Watts

[EXTERNAL] : Reject Recycler proposal
I ask that you deny the above proposal for RI

Tom Watts

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
From: (Name) From: (Address)
tomhutchinson1   tomhutchinson1@cox.net

[EXTERNAL]: March 15, 2021 MedRecyler hearing Zoom session
Dear DEM,

The purpose of this message is to file a complaint that I was unable to join the Zoom call that was held in March. I have become aware that many others who wished to participate were also unable to join the hearing and therefore I conclude that the agency did not have sufficient public participation and input on this very serious issue.

As a 15 -year resident in Rhode Island (returning in 2006 after living here 1976-1981), I am quite surprised to learn that a permitting process of such a questionable technology has been proceeding. From what I have learned, the pyrolysis technology application being proposed has never been demonstrated as being effective when used with medical waste.

The adjacent organizations- a child care facility, restaurant, hotel, manufacturing plant, college campus, and other businesses within the same structural building as where this proposal is located, not to mention the many residences, all raise numerous questions regarding potential harmful exposure to byproducts which will be created.

I understand the proponent’s argument that they chose this location as being close to I95, but with all of the many concerns being raised here, I suggest that if DEM still feels that they wish to gamble on an un-proven technology in our state, that a more rural location be considered along other exits towards the Connecticut state line where there is much less population and business density.

Ideally I do not support permitting of this technology at all.

Thank you for your consideration,

Thomas Hutchinson
East Greenwich

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
Pass the link on to others, this project would be a terrible thing for our area's what I wrote in comment section, feel free to use it or use your own.

To place a project with an unproven process of incinerating medical waste in the middle of a densely populated area and have residents become test subjects is morally corrupt. This proposal should be denied and the health of Rhode Island and its residents prioritized.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Traci Fleury,
35 Highview drive,
West Warwick RI
tfleury727@gmail.com
DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: (Name) From: (Address)
Tracie tracieckos@hotmail.com
[EXTERNAL] : Opposition to Proposed Medical Waste Management Facility License for MedRecycler
April 7, 2021

Department of Environmental Management
Office of Land Revitalization and Sustainable Materials Management
235 Promenade Street
Providence, RI 02908

Attention: Yan Li and Mark Dennen
Email: yan.li@dem.ri.gov mark.dennen@dem.ri.gov

Re: Deny the proposed Medical Waste Management Facility License for MedRecycler-RI, Inc. at 1600 Division Road, West Warwick, Rhode Island

Dear Ms. Li and Mr. Dennen,

By now you have received many types of correspondence that have outlined why the license application submitted by MedRecycler should be denied. I would refer you to the following Letter (copied here in part) dated March 12, 2021 signed by Andy Teitz and Peter Skwirz as counsel for the Town of East Greenwich and the New England Institute of Technology. I am fully supportive of their legal reasoning and the ultimate outcome to deny the license.

For your ease of reference, I provide the summary of their position as detailed in their Letter below (emphasis mine):

However, even assuming that RIDEM and/or MRI agree to these conditions and they become part of the License, it is clear that the application submitted by MRI should not go to hearing and cannot be approved at this time. Below, the Town and NEIT will outline five points where the application is either premature or incomplete and where proceeding would deny the public the right to evaluate and participate in MRI’s application. These five points are, in short:

1. MRI must, under RIGL 23-18.9-9(a)(1), receive a “final determination” from West Warwick regarding compliance with “local land use and control ordinances” before RIDEM can even consider this application. MRI has not received such a “final determination.”
2. MRI must, under RIGL 23-18.9-9(a)(1), receive a “certificate of approval” from the State Planning Council for this site before RIDEM can even consider this application. The State Planning Council has not approved this site.

3. RIDEM has an obligation under RIGL 23-18.9-8(a)(1) to promulgate “standards affording great weight to the detrimental impact that the placement of such a facility shall have on its surrounding communities.” RIDEM, however, has not promulgated any such standards through notice and comment rulemaking, and there is nothing in the administrative record of this application that addresses how the placement or siting of this Facility would impact the surrounding community. RIDEM cannot approve this Facility until it has enacted the required standards and given the siting concerns of the surrounding community great weight in accordance with those standards.

4. Under RIGL 23-18.9-9(a)(2)(ii), “all supporting documentation” must be included with the draft License for public comment. This draft License, however, does not provide critical supporting documentation but, instead, calls for this documentation to be provided only after RIDEM approval, when the public will have no chance to comment or challenge the information put forth by the applicant at the hearing.

5. MRI has not complied with its conditional approval of pyrolysis as an “alternative technology” under 250-RICR-140-15-1.15(F)(4) & (5). Alternative technology approval is a critical feature of RIDEM regulation to protect the public from the potential ill effects of untried methods of medical waste disposal. MRI must be held to strict compliance with the requirements of this conditional approval.

In addition, the Conservation Law Foundation has also researched and made public the following information:

The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;
• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Clearly the above relays what the experts in this area have research and concluded. From the various communications and meetings provided by the DEM and others, it appears that the DEM may not have the expertise to evaluate this application. We cannot be subject to a situation where we will try untested technology and see what happens. I am all for experimentation and new technology, however these experiments must be conducted so as to introduce the least amount of risk to people and property. It makes common sense that this experimental medical waste facility should not be placed in an area where people are in close proximity, especially children, regardless of the zoning in place.

Undoubtedly, we as a society need to find new and innovative ways to deal with our various types of waste. However, creating another or a larger problem disposing of such waste is not the answer. Exposing people to this experimental technology is not the answer. I previously worked as a hazardous waste production chemist in Rhode Island. Even with the best plans and technology in place, things happen – and this is not the place to test out emergency mitigation techniques if there is any type of exposure.

I trust that the DEM will review all the information provided by the experts in the field and the concerned taxpayers and residence of Rhode Island and conclude that the proposed Medical Waste Management Facility License for MedRecycler-RI, Inc. at 1600 Division Road, West Warwick, Rhode Island should be denied.

Respectfully,
/s/ Tracie Kosakowski
Tracie Kosakowski

Sent from Mail [go.microsoft.com] for Windows 10

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
• See I. Issues Related to the Department’s Role in the Permitting Process: B. Issues Related to Municipal Approvals including Zoning, Noise and Traffic
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XVI. Buffer Zone
Good afternoon, as a resident of East Greenwich and also an employee of M-F Athletic (located at 1600) I wanted to reach out and voice my concerns about the MedRecycler company trying to begin operation at 1600 Division Road.

As you are well aware, this technology is not tested or proven to be safe for use with medical waste. Until documentation can be provided to the contrary I just don’t understand how you could possibly approve this application.

I’ve decided not to list all of my specific concerns in this email, as I’m sure at this point you’ve heard them all and it would just be redundant (if you want specifics I am happy to send them, please just let me know)

I will end with this – the DEM website states your mission is “to protect, restore, and promote our environment to ensure Rhode Island remains a wonderful place to live, visit, and raise a family.” I hope after reviewing all the information in regards to this application; mainly the potential toxicity and the inconsistencies on behalf of Campanella, you come to the decision that MedRecycler is completely at odds with your mission and therefore it’s impossible that this application be approved.

Thank you all for your time, stay well. Tracy Snizek

Tracy

Tracy Snizek
M-F Athletic & Perform Better
800-556-7464 x123
Fax 866-295-8252

Check out our current website specials at
EVERYTHING TRACK AND FIELD
[everythingtrackandfield.com] and PERFORM BETTER [performbetter.com]

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Dear Sir,

The DEM cannot control and regulate this proposed plant. It has toxic medical waste and is in no way a "green technology" The now concentrated waste will have to go somewhere and it is not safe to have all this medical waste trucked to RI, not to mention spill off and worker exposure.

Please rethink this plan.

Sincerely,

Therese Woodford RN

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
Trevor reachtrevor@hotmail.com

[EXTERNAL]: strongly opposed to the proposed MedWaste facility in West Warwick

Hello Janet, Mark & Yan

We are East Greenwich residents (Ann Drive) and strongly opposed to the proposed MedWaste facility in West Warwick.

This facility would be located close to our house, and with 3 small children who are constantly outside - this is the last kind of business we would want in the area, especially due to its unproven and untested nature. If it is such a safe facility, then why isn't the parent company building it in their own backyard in NJ?

On top of that, the proposed site is directly next to a day care center and across the street from a college. This proposed waste facility could potentially expose many young children and young adults to pollutants, as well as creating additional traffic and emissions from the tractor trailer trucks dropping off the medical waste.

I wanted to voice my strongest opposition to this project and I hope you will deny their required DEM permits and stop this in its tracks. The community would be extremely grateful-

Concerned neighbors and parents,
Trevor & Cristina McCormick

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XVI. Buffer Zone
Dear Mr. Li,

I am a high school student, and I live very close to where this will be built. I do not want it near my home. Up to 70 tons of waste will be processed, and all that smoke from the pyrolysis process will emanate lots of pollution. The particle pollution that this will emit has many terrible side effects, including: bronchitis, asthma, lung disease, and heart disease.

As you can imagine, I do not want to get any of these. Furthermore, it is unclear where the wastewater will end up, and, in cases like this, it has a bad habit of ending up in our oceans. Please don't build this.

Sincerely,

Julia Martins

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Thank you for taking the time to read these comments. I have been an East Greenwich resident for twenty-seven years, and raised two children here. In all that time, I have never felt so threatened by a project as I feel now. I was horrified to learn of the Department of Environmental Management’s formal intent to issue a license to Medrecycler-RI Inc. To read about CEO Nicholas Campanella’s description of the facility to the DEM in January, the process is supposedly not only “green” but nothing short of magical. He claims that medical waste is “not burned or incinerated, it’s just converted through a process we have here.” He claims this alchemy produces no pollution, just a nice byproduct we can sell to asphalt makers.

I took a drive over to the site, a few minutes from my house in East Greenwich, and I could not believe its proximity to the college and the residential living and shopping areas. This is an unproven technology imported from South Africa that is being used in only 4 spots in the world, and none of them for the purpose of medical waste. There are no experts, not for the technology or the way its pollution is controlled, because it’s never been done before. The DEM’s own Mark Denning noted that this was why it is “a challenge for a supervising environmental scientist.” He admitted that DEM inspections would be sporadic at best, and that it would be up to Medrecycler to make notification of any issues. So not just untested, and unproven, but also unmonitored.

Sun Pacific Holdings Corp., Medrecycler’s parent company, is not in great financial shape; can they really be relied upon for this?

According to the Conservative Law Foundation, there is not a lot of difference between pyrolysis and incineration when it comes to air pollution. Since medical waste is typically comprised 25% or more of plastics, we can expect not only carbon dioxide, nitrogen dioxide and sulfur dioxide, but also mercury, lead, furans and dioxins, the latter being concentrated in the products that will be used as fuel for the generators and released into the air as they are burned. These pollutants and carcinogens will be spewed out next door to a college campus, daycares, restaurants, stores and theaters, residential areas and wetlands.

This is not the “strictly green and clean” miracle Mr. Campanella would have us believe it is. It is not the resultant pollution from four cars as claimed. He even finally admitted that there would be odors emitted both from the facility and the trucks bringing in the tons of medical waste daily and those storing it on site. (Do we even need to mention those trucks, full of contaminants and uninspected pre-packaged medical waste from all over New York and New England sitting on the lot? How will we really know exactly what we are pyrolyzing? We are trusting our communities’ health to a mistake-free honor system being adhered to by out-of-state facilities.)
The entrance of this facility into our communities was largely back-door. There were no meetings for the public until it was an almost done deal, there was no voting. There seems to be a great deal of money involved, but it is not the residents of West Warwick or East Greenwich who had any say in whether or not this company would be allowed into their community. Despite the issues and lack of transparency, the media has not really dug into the story but has spent a great deal of time and energy on much lesser things. People in my community are very upset—some have hired lawyers, others are looking into their own investigators. The lack of transparency is alarming.

How on earth did little, densely populated Rhode Island end up as the test site for such a potentially devastating project? How is it possible that the DEM could allow smelly, polluting, unproven and untested technology to be installed in such a populated area? Especially when the communities involved are so against it? Why would you put a medical garbage dump for New York and all of New England in our little state—so close to where we live and shop and go to school?

I acknowledge that landfills are a problem and there may be a place for this technology—when it can be located away from people and the wetlands they depend upon, when it can be fully tested and developed and put into the right place with all questions answered, an emergency plan in place and the knowledge of how to set and maintain the air scrubbers so that they really do capture more of the dangerous chemicals that come from pyrolyzing such a diverse waste mass. When residents can rely on more than just unenforceable promises of self-testing and being a “good neighbor.”

This is not the time or the place, and no amount of magical thinking can make it so.

Mr. Campanella asserts that the technology has been around for thirty years; perhaps it has, but in all that time no one has chosen to use it to this purpose, and it seems this has more to do with the inefficiency of the technology and the difficulties of pollution control than with the cost of the equipment.

The Speaker of the House, Joe Shekarchi, once represented Medrecycler and is pushing for it to go through. I’m sure his influence is far-reaching. CEO Campanella keeps repeating the litany of “green and clean” without the history, statistics or expertise to back it up. There’s a bottom line here: It hasn’t been done before and we don’t want to be the test site.

The DEM is our last guardian—please, please make the decision that protects our children and our communities. This is a terrible location for this kind of plant. We don’t want this. Please say no.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VI. Bond Funding and Project Financing Issues
• See X. Adequacy of Public Notice
• See XII. Department Staffing Issues
• See XIX Odor Issues
From: Valerie Tokarz <valtokarz@tokarzderm.com>

Subject: [EXTERNAL] : Concern for a proposed medical waste facility near East Greenwich from a resident, business owner and physician

Dear Mr. Hellested,

With the Department of Environmental Management playing a role in the decision for a proposed medical waste facility to be built near the town of East Greenwich, I wanted to share my concern about the very little data thus far.

The vague description of how the “MedRecycler” company plans to use an experimental form of waste breakdown called “Pyrolysis” raises many questions about the safety of such a concept. It seems strange for a process touted as extremely beneficial as an energy source to have such little usage across the United States. Reading various materials published in the press, I haven’t been able to find substantial evidence to make me believe this concept is truly beneficial without causing significant hazardous output. I don’t find data that this has been tested in more remotes sites within the United States either. In my opinion it’s a poor choice to decide as their groundbreaking location to be in such close proximity to residential and business areas. I’m also concerned that airborne illnesses (contained on syringes and other contaminated biohazards) could be aerosolized using this concept of high heat breakdown. Have they been able to study the long and short term effects on air or water quality for such a facility in the United Sates? The proposed Medical Waste facility by “MedRecycler” appears to use claims of being “energy efficient and safe” based on very little data.

Please do not allow this proposal to pass as it must require more long term data in less populated areas in order to be deemed safe to our community. Thank you very much for your time and consideration.

Kind Regards,

Valerie Tokarz, DO, FAAD
Board Certified Dermatologist
President, Tokarz Laser and Aesthetic Dermatology, Inc.
valtokarz@tokarzderm.com
http://www.tokarzderm.com [tokarzderm.com]

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
DENY MEDRECYCLER’S MEDICAL WASTE TREATMENT APPLICATION

This technology is not sufficiently tested and this location is not viable due to the immediate proximity of homes, a child care facility, and wetlands. The area will suffer from the added traffic, especially given the transport of dangerous and potentially lethal medical waste.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

Vinny Gebhart,  
21 Silent Drive,  
Warwick RI  
vinny@gebhartforwarwick.com

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
• See XVI. Buffer Zone
From: Vyra Imondi  vyra.imondi77@gmail.com

[EXTERNAL] : Medical Waste

What in heavens name is going on? Are there no brains involved? Only money? Who gets rich? Tell the people the rest of the story, that is, if you are on the side of what is ethical!

Get our Congressmen involved. They have proven that they are reliable.

Get major media involved! NOW!

Vyra Imondi

Sent from my iPad

DEPARTMENT RESPONSE:
• No response needed.
Dear Mr/Ms. Li and Mr. Dennen,

I'm writing to express my concerns, my frustrations, my fears, and the many unanswered questions I have regarding the proposed medical recycling facility in the City of West Warwick.

I live in Kent County, on the Warwick/East Greenwich line, about a mile or so from the proposed facility. My concerns are not only for myself but for ALL the citizens and communities in Kent County and throughout the entire State of Rhode Island. We are a small state and a facility such as this, with a magnitude of processing 70 tons of medical waste per day, 24/7, effects ALL of us, not just one community.

These are my concerns and they warrant immediate consideration regarding the proposed implementation of this facility:

The pyrolysis process is common in the chemical industry to produce fossil-fuel byproducts BUT there are few examples of its commercial use to process waste. There are 3 plants in South Africa but there are none in the United States! And for the "commercial" sector it is not a proven one in the United States!

Truckloads upon truckloads containing medical waste will be stored onsite for up to two weeks. What does that even mean??? Contaminates being spread? Radioactive contaminates? Air pollutants? Offensive odors being emitted day and night, 24/7? What will the proper protocols be to even oversee such contagions and offenses?

In May 2019, Sun Pacific Holding Corp.'s PR firm released a statement that a 10-year lease with a 10-year option was identified, negotiated and executed on an approximately 48,000 square foot facility for the medical waste to energy project at 1600 Division Road in West Warwick.

WHY was a lease already a done deal? Unless the "fix was in" to approve the medical waste facility?

WHY would the City of WW approve to commence office buildout in the medical waste to energy facility without any public hearing?

WHY would we allow the little State of Rhode Island to be the guinea pig that tests this untested technology?

WHY would we allow this next to a child daycare center?

WHY would we allow this next to a university, a neighborhood, a golf course?
I have read that pyrolysis is common in the "chemical" industry, BUT there have been no studies that show this is proven in the "commercial" sector.

The med recycler company touts the pyrolysis process with an outcome of strictly green and clean. WHERE is the due diligence that studied pyrolysis in the commercial sector and in a heavily populated environment?

HOW do we even know that what they are doing will not allow cancer causing emissions into the environment? The Conservation Law Foundation noted in their findings that emission from pyrolysis contain cancer-causing compounds. That ash consists of dioxins, mercury, and heavy metals - pollutants that can make their way into waterways and drinking water supplies.

I have not seen any due diligence studies. Which leads me to believe that this is untested technology - so WHY would this facility even be a consideration?

Lack of transparency - only until recently has this facility received press coverage, which is all due in part to the concerned citizens who are speaking out against it. But prior to that, it's been crickets. Which leads me to wonder... WHY? WHY has there not been more open discussions about this facility between the city council and the taxpayers, i.e. homeowners and business owners? And one cannot claim it's due to Covid because we are living in an age where Zoom meetings are the common way to communicate. So, again I ask the question, WHY? In my mind it seems odd and devious, and to me the answer is it was deliberate, and it was intended to keep people in the dark and to push through a back-door deal.

WHAT if something goes wrong at the site and it needs major remediation? The Town of West Warwick SHOULD require a cleanup bond by a notable company with high ratings to GUARANTEE that if the company goes out of business, the site can be remediated. Has that even been brought up for discussion?

WHAT if something does go wrong? How does the Town of West Warwick know that Sun Pacific Holding Corp. will carry enough insurance to cover the expense for a proper and a safe clean-up? And what does that even mean? The facility is next to East Greenwich and Coventry. But we do not live in a bubble. This is a small state with small boundaries and we have a highly dense population of people vs. landmass. How do you put a price tag on lives? Once the cat is out of the bag, i.e. emissions are let loose into the environment, how does that even get cleaned up? How does that cover the cost of loved ones being harmed? We can look at examples like 9/11 and the pollution that went into the air, and what happened there. I think we know the answer to that question and those brave first responders paid a very heavy price, with their lives.

I understand that we as a society need to do a better job at handling the waste that we as humans create. However, I do not support the way in which this technology will be used nor do I believe it is proven to work in the commercial sector. I am fearful that if this facility does go in and something goes wrong, it will be too late. The damage and
devastation which is an unknown "X" factor will be done, and the ramifications may last for years, or even decades. We must work on better ways to manage the waste, not just look at this current proposal as a quick fix and a quick way to bring in tax dollars. We know as Rhode Islanders that this state does have its financial hardships. But the good news is that Rhode Island is due to receive a huge infusion of federal funding from the recently approved American Rescue Plan Act. I think we should look to those dollars to help our state create better ways to handle medical waste and NOT from unproven companies with no track record. That is not using common sense and is leaving the door wide open for creating havoc and devastation to people, to animals, and to the environment.

We should stay away from making rash decisions and from allowing this type of facility to be pushed through for approval. I do not know Mr. Campanella but from what I've read, he is a New Jersey businessman and a developer with a business degree from the New York Institute of Technology... he's not a scientist or an engineer. This does not sit well with me, nor does it give me the confidence or give him the credibility that a project such as this should require. Sun Pacific Holding Corp., the company where Mr. Campanella is Chairman/CEO/CFO, operates as a holding company. "The Company, through its subsidiaries, manufactures, designs, and installs solar panels and lighting products, such as LED trash bins and bus shelters, as well as electrical enclosures, lamps, ballasts, wallpacks, metal halide, induction, and solar collectors. Sun Pacific Holding markets its products worldwide." I do not see anything that shows his company does anything relative to or engages in the process of pyrolysis. Again, I see no convincing resume that he or his team are experts in the field with the pyrolysis process. However, I do see on Yahoo!Finance that his shareholders are chatting about the proposed MedRecycler facility going into Rhode Island. AND their shareholders are encouraged by someone who goes by WhoaNikky to send in their support of the project to Yan Li -- "Don’t forget to send in your support for the MedRecycling project after meeting on 3/15." [finance.yahoo.com]

And this person on Yahoo!Finance goes by ConsiderationOne5181 -- and they wrote to Yan Li and posted on the Yahoo board:

"Just submitted my comment and received a reply immediately."
Thank you for your comment. It will be included in the administrative record and all substantive comments will be reviewed and receive a written response.
Sincerely,

Yan
Yan Li, P.E.
Principal Engineer
RIDEM/OLRSMM
235 Promenade Street
Providence, RI 02908

And this person said they would write to you, or already has. Their Yahoo!Finance name on the chat board is Fantastic-Neck-3049 "I will submit my comment this week. I live in MA, but I guess it doesn't matter. I definitely think we need one of these in our state."

These people are not residents of Rhode Island, they are Sun Pacific shareholders who could care less about the ramifications of this facility, they only care about the money they think they will make if the project is approved. As a taxpaying resident of the State of Rhode Island and someone who lives near the proposed site, I find the cheap encouragement of sending in support disturbing, shallow, underhanded, without merit, and their submissions shouldn't even be a consideration, they should be tossed out! Shouldn't the only submissions be from those who actually live in the state?

AND it again begs the question as to WHY? WHY are we even considering bringing this treatment center into our state? This does not seem like a trusting scenario between Mr. Campanella, the citizens, and the local and state lawmakers. It only creates division and distrust. And I think we can all agree that we have had enough of that throughout the country. So let's back up. Let's work towards building back that trust between citizens and community leaders and making our communities better instead of driving more of a wedge of distrust, suspicion and doubt.

Which leads me to my last question.... What in the heck is going on here? Is this all about tax dollars for the City of West Warwick and for the State? I think we're better than that. I hope we're better than that.

I wholeheartedly and emphatically request that RI DEM will do the right thing for Rhode Island and DENY the medical waste license for the MedRecycler-RI, Inc. medical waste treatment facility.

Sincerely,
Wendy Greene

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Project Financing Issues
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See X. Adequacy of Public Notice
• See XVI. Buffer Zone
• See XIX Odor Issues
Janet, Yan, and Mark,

As a follow-up to my previous email, I have additional questions and concerns for you to consider.

Have you received any emergency/disaster recovery plans from Medrecycler other than the fact that they will notify RIDEM within 24 hours of an incident?

When would the local police / fire departments be notified of an emergency? And will those responders be from West Warwick, East Greenwich?

And what is the plan to notify the surrounding neighborhoods and businesses? How do you know how far the contaminants will travel?

Will those plans include notifying all communities throughout the entire state, and surrounding states?

What measures would be needed to contain the waste and ensure no environmental / health impact?

As I am sure you are aware, there was a pyrolysis facility in Santa Fe, NM which has been shut down. There is feedback from someone familiar with that facility and the Monarch system who noted that when equipment needed repairing, the waste would still keep coming in and it would be stored onsite creating an odor. If Medrecyler’s plant needed to be shut down for repair, would the waste be stored on site?

How long is the contingency plan for that type of scenario? This is not a stand alone building and there is NO buffer zone to the business next door.

If you allow this disastrous facility to be approved, this will be a nightmare for the entire state. Do the right thing and DENY this company a permit.

Sincerely,
Wendy Greene
Sent from my iPhone

DEPARTMENT RESPONSE:

• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See XI. Monarch Pyrolysis Facility in New Mexico
On Mar 25, 2021, at 3:06 PM, Wendy G. <wendy6nyc@hotmail.com> wrote:

Dear Ms. Coit,

It would be an understatement to say that I am dismayed and angry that the DEM is considering giving out a permit to Medrecycler-RI to operate a harmful operation. I am holding out hope that your department will make the right call and DENY the permit. There is overwhelming evidence that this facility is not "green", it is anything but, it is toxic. And Mr. Campanella is no scientist, engineer, or environmentalist. He is a businessman who is solely looking out for himself and his minions, aka his shareholders.

For your consideration and records, I am forwarding to you a recent email I sent to Yan Li and Mark Dennen - please see below.

Please do the right thing for the community and for the State of Rhode Island. Say NO to this permit.

Sincerely,
Wendy Greene

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
The facility is owned by someone with zero experience as an engineer, environmentalist, or scientist. Mr. Campanella’s only priority is to make money for his shareholders, he has no conscience about the risk this facility has on the community, and the pyrolysis technology has not been vetted to be “green” or environmentally friendly, as Mr. Campanella would like all to believe. West Warwick is more concerned about taking in desperate tax dollars than the welfare of the community.

Rhode Island is due to receive lots of federal money from the American Rescue Plan Act. So rather than jump into a potentially hazardous decision because the city and state need money, let’s look towards better solutions with the federal funds that are coming to the state. To allow this business to go in is irresponsible, disastrous, and arrogant. DO NOT APPROVE MedRecycler’s license to do business. And if something catastrophic happens at that facility and those contaminants are emitted into the air and water, DEM should be and will be held responsible and accountable.

The Rhode Island Department of Environmental Management should deny MedRecycler’s application for a medical waste treatment permit. The company’s application and its proposed pyrolysis facility do not comply with Rhode Island medical waste regulations (250-RICR-140-15-1), Rhode Island solid waste regulations (250-RICR-140-05-1), or Rhode Island law governing solid waste facility license applications (R.I.G.L. 23-18.9-9), because:

• MedRecycler has never used this pyrolysis technology on medical waste and has not proven, “on the basis of thorough tests,” that it is protective of the environment or that it will ensure the health, safety, and welfare of facility employees and the public;

• MedRecycler’s pyrolysis process is untested on medical waste and the company therefore cannot prove that the facility will be designed, operated, and maintained in a manner that will protect the health and safety of personnel and people in close proximity;

• MedRecycler plans to construct and operate its pyrolysis facility in a multi-tenant building without a “buffer zone” between MedRecycler and neighboring tenants or between MedRecycler and a nearby daycare center; and

• MedRecycler has not included a final determination from West Warwick that this proposed facility complies with land use and control ordinances or a “certificate of approval” from the State Planning Council.

WENDY GREENE,
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit See experimental nature of the process
- See XVI. Buffer Zone
To Whom It May Concern,

My name is Zachary Yip and I am a Rhode Island resident. I do not support the Med-Recycler plant. I have no trust in Sun Pacific Holdings (SPC) vague promises. This entire process relies on the New Jersey based company to clean up the char that comes from pyrolysis. The long term effects of pyrolysis on the environment are still being studied.

The world is at a turning point in environmental science and management. Countries, organizations, and individuals who previously were against even the discussion of climate change are now welcoming the data. Please be on the right side of the new movements and deny this Med-Recycling plant from polluting Rhode Island.

Thank you for your time,

Zachary Yip

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
SECTION III: ORAL COMMENTS RECEIVED RELATIVE DURING PUBLIC COMMENT HEARING REGARDING MEDRECYCLER-RI INC
Public Hearing Date: March 15, 2021

The Department’s responses appear in red. The following are responses to comments received. In many cases, the same issues appear in multiple comments, to that extent, links are provided to those issue related responses. In some cases, unique comments are also addressed in the response.

Only the questions asked are presented here, the complete transcript can be found at: http://www.dem.ri.gov/programs/wastemanagement/facilities/medrecycler.php

The responses below are to substantive issues raised in the comments. Substantive issues are those within the scope of the Department’s review. This include environmental effects, human health risks and requirements of law and regulation.

As a wise use of limited resources, the Department in this case, as in other cases, does not respond to non-substantive comments. Non-substantive comments are things such as personal opinions or if the permit should or should not be approved. Also considered non-substantive are speculations, good or bad, as to the character or motives of any parties involved in the process including the applicant, the Towns involved, commenters, public employees or public officials.
PUBLIC COMMENTERS

Representative Caldwell
Senator Valverde
Mark Schwager President EG Town Council
Renu Englehart, EG Town Council
Peter Skwirz, Assistant Solicitor Town of EG
Mike Donegan VP EG Town Council
John D'Amico, Councilman
Jay Messier, West Warwick Councilman
Kevin Budris, Conservation Law Foundation
Jim Mallowney
Marisa Kambour
Joe Walsh
Donna Sullivan
Rick Carlone, GZA
Hina Khan, M.D.
Frank Lombardo
Marisa Desautel, Esq
Nick Campanella, MedRecycler, RI
Carey Jeffrey
Jerry Petros, Esq., M-F Athletic
Miguel Figueroa
Sharon Williams
Brian Cunningham
Nancy Nordquist
Bret Jedele, Esq
Tom Romeo
Greg Gerritt
Denise Lopez
Katie Silberman
Christine Berger
Shanna Wells
Lily Scott
Claudia Iannotti
Linda Grenier
Wendy Greene
Nicole Armstrong
Andrew Kaplan
Melissa Chernick
Caryn Corenthal, EG Town Council
Catherine Webb-Lynch
Pamela Powers
Lynn Dressler
Tom Oates
Jim Cunningham
David Revens, Esq
Eduardo Figueroa
Roger Richards
Helene Tay
Patricia Taylor
Susie Leahy
Rusty
Jay Ferguson
Amy
Derek
Representative Serpa
Philip Parsons
Mary Madden
Commenter: Justine Caldwell

Question/Comment:

So today I'm representing my town, from the folks who have made it on to this call, to the countless residents who have called and e-mailed me asking me to advocate for them on this issue. I'm representing their position, and their position has become my own position as well. It's a part of my job to vote on issues where I can't always be an expert; rather, I have to gather information from experts, ask the right questions, hear from the community and come to my decision, and that is exactly what I have done in regard to MedRecycler. It is my hope that DEM, after a similar decision-making process, will come to the same conclusion that I have regarding this project. Under Rhode Island law, DEM must promulgate standards, giving greater weight to the detriment of the community as it relates to the placement of such a facility and the impact it will have on its surrounding communities, here most notably East Greenwich and West Warwick. It is my understanding that DEM has not promulgated these standards as of yet. But if the voice of all the people concerned about this project are indeed given great weight, it's hard to imagine the applicants can meet this burden of overcoming the detriment to our community. Further, in Rhode Island we are moving away from the process of burning medical waste. One question I hear from constituents over and over again is why would we bring in out-of-state medical waste, to the tune of ten truckloads a day, to burn here in Rhode Island, behind a daycare center, when our own state is working to become safer and more renewable? I stand with my constituents as totally appalled by that idea. It is not progress. It is a set backwards. Pyrolysis is an untested technology. As it stands, the only way we will know if MedRecycler lives up to its claims is to approve their license and hope for the best. One of the most shocking things brought to my attention regarding the oddities of MedRecycler's process, that they haven't agreed to spot check their boxes of waste coming into the facility to be burned. Meaning there is no way to truly know what is inside them. Just earlier this week we all saw the fire in the scrapyard on Allen’s Avenue in Providence. Now, imagine that same accident in a residential neighborhood, near a school and a daycare, with unchecked medical waste, who knows what would be floating through our air, into our homes and for how long? That is unacceptable to me and it is unacceptable to my community. So thank you to DEM for listening to my testimony. My written comments will be forthcoming after this hearing. And once again, I would strongly urge the denial of this application based on my testimony and the wealth of testimony you will hear tonight from experts and residents. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Senator Valverde

Comment/Question:

Thank you for taking my comments today on the application by MedRecycler to operate a medical waste treatment facility at 1600 Division Road in West Warwick. I am offering my comments today in my capacity as Rhode Island State Senator representing my constituents in the abutting Town of East Greenwich. So just like Representative Caldwell, I, too, have received dozens of e-mails and phone calls over the past few months from residents of East Greenwich who are deeply concerned at the prospect of this facility opening up just over the town-line in West Warwick, and I share their concerns. I am hearing from parents that they don't want a medical waste treatment plant right next to their child's day dare. I'm hearing from abutting residents that they are concerned about the harmful greenhouse gas emissions and the proximity to wetlands, lowered property values, increased traffic congestion. I am hearing from doctors and others that they are concerned about the risks of accidents associated with the transport and treatment of medical waste containing pathogens. As an abutting community, my constituents have no authority over West Warwick, but seeing as this facility is to be located literally feet from the East Greenwich line, they will bear much of the risk. The out-of-state developers pushing for this facility want us to believe that there are no risks. They want us to believe that pyrolysis is the answer to our trash woes, but the truth is their plan is to set up shop in a populated area, truck in medical waste from all over New England, and super heat it, producing toxic tar and ash and potentially emitting harmful compounds like dioxins into the environment. This technology has not been adequately tested on mixed materials as proposed by MedRecycler and there is no comparable facility operating in the United States. It's bad enough to want to bring an untested medical waste treatment facility to our state, but to put it in a populated area is outrageous. Rhode Islanders are not interested in being guinea pigs for this kind of technology. My constituents in East Greenwich are also rightfully concerned about the lack of certain information being provided in the application. For example, the submission of a plan detailing the critical safety protocols that will be undertaken by MedRecycler is incorrectly being required by RIDEM only after the license has been granted. That order of operation means the public will be denied the chance to review and comment on those plans before this facility gets the go ahead from the Department of Environmental Management. To grant this facility and license to operate without a fully vetted safety plan is irresponsible and it may also be a violation of the Administrative Procedures Act. In addition to the many health and environmental concerns associated with this project, I believe that it is inappropriate for RIDEM to even consider MedRecycler -- MedRecycler's application for a waste permit at this time. The application process thus far has been inconsistent with Rhode Island General Law. Rhode Island General Law clearly states that before RIDEM may consider an application for a solid waste license, the host community, in this case West Warwick, must issue a final plan determination. The applicant must also receive a certificate of approval from the State Planning Council for the siting of the facility. Neither of those things have happened yet. So I ask you to seriously consider the impacts on the health, safety and welfare of surrounding residents and businesses when it comes to siting a medical waste
treatment facility in a densely populated area and directly adjacent to other places. Let's be transparent in the licensing process and follow the procedures outlined in our state law. This untested technology being brought in by an out-of-state developer to treat medical waste that will not even all originate in Rhode Island is simply put, "a bad idea." And I urge you to deny this application. So thank you for hearing my comments today. And I will also be submitting these comments in writing later today. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See XIV. Issues Related to Disposal of Ash
- See XVI. Buffer Zone
Commenter: Mark Schwager

Comment/Question:

My name is Mark Schwager, and I'm president of the East Greenwich Town Council. Our council has been aware of the MedRecycler project since its initial appearance before the West Warwick Planning Board back in May of 2019. The MedRecycler project in West Warwick abuts our community, and from the beginning we've had concerns about the health, safety and environmental impacts of this project on our town. Early on, East Greenwich engaged a consultant's service of GZA, experts in environmental and geotechnical engineering, and we asked our town solicitor to review the permit and records of the process from MedRecycler. As we have learned more about this project, our concerns about potential adverse impact on our community continues to grow. We have submitted in writing to DEM as part of this public comment process an extensive list of materials not included in this draft application, which should be supplied before this application is in order for public review. These materials include emergency response and evacuation plans, spill control plans, contingencies for unexpected facility shutdown, facility safety testing plans, bonding for facility decommissioning, and a host of other concerns. Without this additional information, this application is incomplete. It is premature for DEM to grant a solid waste permit to MRI before these materials have been added to this application and brought before the public for review and comment. Without this action many substantive issues related to operations, health and safety will be entirely removed from public scrutiny. The public has a clear interest in reviewing, evaluating and challenging any such protocols submitted by MedRecycler. In addition, a number of other requirements for license approval are still missing. These include a letter of approval from the State Planning Council, determination from the West Warwick Planning Board that the project has received final board approval. We also are waiting for DEM's demonstration under Rhode Island General Law 23-18 that it has independently fulfilled its obligation to afford great weight to the potential detrimental impact that the placement of MRI's proposed facility would have on the surrounded community, and to consider site placement in making its decision on this license. We are also waiting for MedRecycler to comply with its conditional approval of pyrolysis as an alternative technology for disposal of regulated medical waste. MedRecycler is supposed to be submitting its testing protocols to ensure bacterial, fungal and viruses are destroyed prior to starting its operation. The Town of East Greenwich submits that the appropriate course of action now is either for MedRecycler to withdraw its application or for DEM to deny the application without prejudice so that MRI may reapply if and when these issues are fully addressed. Thank you for your attention.

Commenter also submitted his remarks in writing below:

From: (Name) From: (Address)  
Mark Schwager mark.schwager@gmail.com 

[EXTERNAL]: Comments on MedRecycler Applicationmark.schwager@gmail.com  
has attached the following document:
To: RIDEM  
Re: MedRecycler Medical Waste Disposal Permit  
From: Mark Schwager, President, East Greenwich Town Council  

The EGTC has been aware of the MedRecycler Project since its initial appearance before the WW Planning board in May of 2019. The MedRecycler project in WW abuts our community and from the beginning we have had concerns about the health, safety and environmental impacts of this project on our town. Early on, East Greenwich engaged the consulting services of GZA, experts in environmental and geotechnical engineering, and asked our town solicitor to review the permitting and regulatory process related to MedRecycler.

As we learn more about this project our concerns about the potential adverse impact on our community have continued to grow. We have submitted in writing to DEM, as part of this public comment process, an extensive list of materials not included in this draft application, which should be supplied before this application is in order for public review. These materials include emergency response and evacuation plans, spill control plans, contingencies for unexpected facility shutdown, facility safety testing plans, bonding for facility decommissioning and a host of other concerns. Without this additional information the application is incomplete. It is premature for DEM to grant a solid waste permit to MRI before these materials have been added to this application, and brought before the public for review and comment. Without this action many substantive issues relating to operations, health and safety will be entirely removed from public scrutiny. The public has a clear interest in reviewing, evaluating and challenging any such protocols submitted by MRI.

In addition a number of other requirements for license approval are still missing. These include:

=Letter of approval from the State Planning Council  
=Determination from the WW Planning Board that the project has received final Board approval.  
=DEM’s demonstration that under RIGL 23-18.9, that it has independently fulfilled its obligation to afford “great weight” to the potential detrimental impact that the placement of MRI’s proposed facility would have on the surrounding community and to consider site placement in making its decision on this license.

=MedRecycler’s compliance with its conditional approval of pyrolysis as an “alternative Technology” for disposal of regulated medical waste, by submitting
its testing protocols to ensure bacteria, fungi and viruses are destroyed, prior to starting its operations.

The Town of East Greenwich submits that the appropriate course of action now is either for MRI to withdraw its application or for DEM to deny the application without prejudice, so that MRI may reapply if and when these issues are fully addressed.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Renu Englehart

Comment/Question:

My name is Renu Englehart. I am the town councilor for the Town of East Greenwich, I'm also a neighbor of this project on Division Road. I'd like to thank DEM for holding this meeting. And I'd like to also acknowledge that there's so many people who wished to attend, but aren't able to due to the limits on the size. I also am asking that DEM keeps note of who is speaking and where they live, whether they are in-state or out of state, and I would like to register my comment in opposition to the permit for MedRecycler. For the record, to correct some misconception, this is only the second formal hearing that has taken place regarding MedRecycler. The meeting on May 6, 2019 at the West Warwick Planning Board, the January meeting for DEM was informational only. So this will only be the second one. The building in West Warwick -- the building is in West Warwick, but everything else about this building affects other towns. The access points to this project are off Exit 7 off Route 95, which is Coventry/West Warwick, or Exit 8 off of Route 95, which is Warwick, or Exit 6, which is off Route 4, which is East Greenwich. These access points were at the last comprehensive service RIDOT study considered to be among the highest accident rates in Rhode Island -- excuse me -- due to their congestion. While these are state roads, the state does not respond in case of an accident or other emergency. Local agencies respond, such as the West Warwick Police and Fire Department, the East Greenwich Police and Fire Department, and the Warwick Fire and Police Department, and so. I would like to point out that even the driveway of this property is in East Greenwich. The only way to access this property is to pass by East Greenwich residents or commercial areas or West Greenwich residents or commercial areas. And residences are across the road from this property and not hundreds of feet away. From the access point of this driveway going west on Division, the residents in East Greenwich are served by well water. The building that MedRecycler is leasing literally sits on a pond and wetland served by Fry Brook, something that is not noted in any of the corresponding documents from MedRecycler or DEM. At 70 tons of medical waste per day, that is far more waste in this area that has ever been seen before and could affect the only drinking water for several towns. At this time I can find no other mixed waste medical pyrolysis plans anywhere in the United States. During the January meeting, Mr. Dennen admitted they were new to the technology, they did not have enough information regarding it. He also admitted, as far as compliance goes with state and local regulations, DEM was going to allow MedRecycler to self-police at a certain point, due to lack of personnel. Yet even on the letter of notice of intent to approve, DEM has many questions that still need to be answered by this company, and so far we have not been able to find out if they have been answered. The comparison plans cited in the application process, such as Monarch Waste, which was closed by the EPA, or an unnamed plant in Southern California, none of which a match could truly be found, or even our international plants, several which are still being built do not lend an air of credibility. Mixed waste in regards to pyrolysis is not something that appears physically or financially viable at this time, something that both the EPA noted on February 17 of 2021 during their PITT Findings on Pfas Construction or -- (technical difficulties) and
the Department of Energy entitled Waste Energy from (technical difficulties). This building in West Warwick has been zoned for a long time and the Town of East Greenwich, to my knowledge, has never objected. This would be the first time and should show the seriousness of which we take this project. Looking at the amount of participants who are present and also those who still cannot attend and are waiting to be admitted, it appears the residents are taking this very seriously. I urge DEM to deny this permit. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See IX. Limitations on Attendees at Public Hearing
- See XI. Monarch Pyrolysis Facility in New Mexico
- See XII. Department Staffing Issues
Commenter: Peter Skwirz

Comment/Question:

Peter Skwirz, assistant solicitor for the Town of East Greenwich. Our office reviewed this application with GZA Geo-environmental Engineering. East Greenwich's interest is prompted by the siting of the project. While the proposed facility is in an industrial zone in West Warwick, it is directly across the street from a residential zone in East Greenwich. The General Assembly created a mechanism for addressing this type of interlocal planning concern. Unfortunately, that mechanism has not been followed in this case. As stated in RIDEM's Notice of Intent to approve the license, review is governed by Title 23 Chapter 18.9 Section 9 of the Rhode Island General Laws. The first part of that statute, subsection (a)(1) lists a number of items that an applicant for a solid waste management facility must submit with its application to RIDEM. That part of the statute says, quote, The applicant shall also submit simultaneously with the application a certificate of approval of the proposed site issued by the State Planning Council, end quote. The State Planning Council, quote, Shall only approve a site after great weight has been afforded for the detrimental impact that the placement of such a facility shall have on its surrounding communities and only after evaluation of alternative sites, end quote. Also by statute the State Planning Council, quote, Shall not issue its certificate prior to publication of public notice and the expiration of the public comment period regarding the proposed site, end quote. We confirm that an e-mail from Meredith Brady, the secretary of the State Planning Council, that the State Planning Council never approved this site and was never asked to approve this site. It did issue an internal letter to the Rhode Island Industrial Facilities Corporation on state guide plan consistency, but that letter wasn't issued after a public notice and comment process, and Miss Brady stated unequivocally that that letter was not approval for the site. Therefore, under the statute RIDEM should not be considering this application. Prior to the hearing today, they brought this to the attention of RIDEM and MedRecycler. We were told that even though we all agree the statute governs MedRecycler's application process, that the language I just quoted only applies to landfills. I'd encourage anyone attending to read the section of the statute I quoted and you won't see the word "landfill" anywhere. What makes that interpretation particularly strange, if you go to the next two statutes in that chapter, Rhode Island General Laws 23-18.9-9.1, and Rhode Island General Laws 23-18.9-9.2, those statutes do place additional requirements on landfills and those statutes use the word "landfill" repeatedly. So the General Assembly knew how to say a landfill, when it wanted to say a landfill. The General Assembly didn't say that State Planning Council approval is limited to landfills. The executive branch of the government doesn't get to rewrite the statute that the General Assembly wrote. In Civics 101, the legislature writes the law and the executive branch carries it out. The public, justly, has significant siting concerns regarding this proposal. It doesn't engender public confidence in the review process or in the government generally, if the reviewing agency is willing to tie itself in knots to avoid the review that the people's elected representative in the General Assembly require. The jettisoning of State Planning Council site approval is just one in a number of ways that the review of this proposal has been unusual. We explain in further detail in our written comments we have submitted, which are on the Town website, but this issue,
in particular, is illustrated of the fast-track results-oriented process that MedRecycler has received up to this point. I would request that -- the Town would request that RIDEM proceed no further with its review until all of the concerns outlined in our comments are addressed with the statutorily-remanded review process.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See III. Plans Not Submitted for Public Review
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
Commenter: Mike Donegan

Question/Comment:

Good afternoon, and thank you for the opportunity to speak on this important matter. I am the Vice President of the East Greenwich Town Council. You have heard from our president and Council Englehart about this, and our attorneys. I'd like to note that we hired Goldberg (inaudible) and Associates to issue our written comment, in conjunction with New England Institute of Technology, which as you probably know, houses a very large number of students directly across the street. They have a grave concern here and have joined us in the submission that we provided. Our residents have a lot of concern to the council with this project. We're going to have, you know, trucks driving through our neighborhoods with body parts, viruses and pathogens, and we're going to have the risk that these viruses and pathogens will be released through accident, through improper operation of the facility, poor design. This is unproven technology. And it's also important to note that the applicant has absolutely zero-demonstrated experience running any medical waste facility, let alone this particular type of equipment, which is experimental. It is so experimental that it's not actually in operation anywhere in the US used on medical waste. I don't know if they searched the country to find the one state agency that would allow their residents to become the guinea pig for this kind of an operation, but they landed here, and that's what's happening. It's not a listed technology and so the director of DEM is required to make an initial determination this is an alternative technology, which is supposed to -- according to the director's letter, they're going to do in two steps. There is no two step process in the law. That determination is a threshold determination. It's not the determination made after you allow them to build it and then we see if it works. You could obviously pilot test, like we do with other equipment, and that simply isn't the way that the DEM has elected to go with this. In addition, it violates all the statutory and regulatory opportunities for public participation, because if indeed a threshold determination were made, the public could appeal it, participate, et cetera. The way it's currently constituted, if it's a conditional approval, and then only subsequent to the issuance of the permit, the applicant submits testing information and protocols, the public has no further role at that point. And how would we ever know about the determination that the director is making, whether it's sound and meets the requirements of an approvable alternative technology? And I believe that violates the Administrative Procedures Act, and the director must make that determination now. There are conditions listed in the NOI that are post-issuance. One is the surrogate virus testing protocol. There's no reason the applicant couldn't have submitted that protocol in advance of this public hearing, so that the public could vet it. The way it's currently constituted, both that protocol and the West Warwick Fire District Contingency Plans are mere submissions that only the DEM sees, not the public. Since the surrogate testing protocol is critical to determine whether the pathogens escape or whether they're totally destroyed, as required from the air permit, it's critical we know that upfront. And I note that Mark Dennen, at a public information meeting, said that this was -- he could design a protocol that would basically make the equipment pass or fail. And so the public, even if DEM doesn't have that experience, we do. We can hire it, and we should have the opportunity to participate -- excuse me -- I just had -- your timer just
totally -- okay. Here we go. So what we're asking here is that DEM deny the permit without prejudice, to allow the applicant to reapply after the DEM first makes a ruling as to whether or not this is approvable alternative technology, which is required to be done under the Administrative Procedures act. The applicant can resubmit. Alternatively, you can continue it for that purpose. East Greenwich, I would ask, should have an opportunity for our fire department to have a contingency plan review as well. We're first responders who are closer than West Warwick. If you choose to proceed, we ask that you deny the permit because the applicant clearly has not made the demonstrations required as an alternative technology, in that it's protected with respect to total impact on the environment, which is a finding noted as number two in the director's letter. Nor can it ensure that the health, safety and welfare of both facility employees and the general public will be protected. That's condition four that must be found. I submit that the record clearly demonstrates that the applicant has not met these burdens.

DEPARTMENT RESPONSE:
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
- See VII. Transportation of Waste Through the Community
**Commenter:** Councilman John D’Amico

**Comment/Question:**

So, first of all, thank you for allowing me to speak. I am not actually going to speak to DEM, but I do want to just take a minute to point out a couple of things for those who are so concerned as far as our neighbors in East Greenwich, and as well as our citizens. I just want people to know that the Town of West Warwick takes this application very, very seriously. We are watching the process extremely closely. We're trying to learn as much as we possibly can. As you know, this is currently in the hands of our planning board, so if this leaves DEM, it goes back to them. But it's also important to note that as a body the town council appoints the planning board. So, we have to be very careful we don't want to influence you know, it would be very illegally irresponsible and also ethically irresponsible as council to try to impact their decision, but I do want people to know that we are listening, and we are hearing.

**DEPARTMENT RESPONSE:**

- No response needed.
Commenter: Rick Carlone

Comment/Question:

My name is Rick Carlone. I am a Rhode Island registered professional engineer with GZA Geo-environmental. I've been with GZA for approximately two years and I received my bachelor's and master's degree from URI in civil engineering. I am also the president of the Rhode Island Society of Environmental Professionals. Through my work at GZA I have gained significant professional experience with solid waste management facilities. I was engaged by the Town of East Greenwich to review and provide expert opinion on MedRecycler's application. In that review I identified a number of deficiencies which East Greenwich noted in its written comments to RIDEM. I have also submitted detailed comments on the deficiencies of the application and provided proposed conditions that would better protect the public. In reviewing the application there were two things that immediately jumped out at me as the biggest deficiencies in the application. First, the application lacks a detailed explanation of how the day-to-day operations of the facility would work. The application simply details on how facility operations are related to the amount of material that will be processed, stored and received at the facility. The second major issue is that the application does not include sufficient, detailed testing protocols for if this facility is properly doing the job it's supposed to be in destroying and disposing of medical waste and protecting worker and public safety. I can state based on my experience in this field, that it is unusual for an application to be submitted for approval without these details and that it is unusual for the department to issue a draft approval that requires development of many key facility details as conditions. In my professional opinion, the materials fail to meet the regulatory requirements and the application is incomplete. It is important that these missing details be supplied prior to the public-comment process so that the details can be publicly vetted. Accordingly, it is my opinion that this application should not be approved at this time. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Commenter: Hina Khan

Comment/Question:

Thank you. Good afternoon, everyone. My name is Hina Khan, and I'm a physician and a medical oncologist, and I'm also an East Greenwich resident, so I speak not only on behalf of my -- of my fellow residents, but also as an oncologist who's studied and my nature of work is in environmental exposure and the effects of carcinogens that we didn't know of, and some of which we know of now. So I would just like to give a two-second, you know, overview about Rhode Island, right, especially in the past ten years we have done several data analyses based on national registries. There was an initial data analysis from 2002 to 2006, which showed that bladder cancer incidents in the State of Rhode Island have been one of the highest as compared to 37 versus 52 out of a thousand cases seen in Rhode Island. And similarly, over the past five years our (inaudible) looked deeper into the statistics and Rhode Island continues to stand high in incidents of bladder cancer in the country. And while we're working on the research on why this is happening, a major part of this is -- which we already know, is bladder cancer is the textile industry and metal working industry has been implicated in the dye solvents, the metal ducts, and a lot of the carcinogens that are released into the water and air are eventually the cause of it. And not trying to just talk about the medical complications, but also the financial burden of the annual economic burden in the State of Rhode Island to treat bladder cancer is close to 22 million. So it is a pretty significant burden. And then, in addition to that, we also worked on looking at the effect of radon in the instance of lung cancer in the State of Rhode Island, and radon is one of the highest -- Rhode Island is one of the states with the highest levels of radon in the soil. And, again, these are two things that we really didn't know of, and in the past five to ten years we have come to realize that, in fact, these were harmful gases and harmful chemicals that were released, that were actually seeing the effects of them now. So going back to the technology. So MedRecycler, the technology that they claim to use is supposed to be pyrolysis, and all of the literature, if you read up nationally and internationally on the pyrolysis, really a nonmedical waste. And the caveat really for processes this nonmedical waste is that once they produce sin gas -- which Kevin Budris really -- nicely talked about -- once the sin gas is produced, it's really to be scrubbed. So the sin gas scrubber produces this pollutant-free exhaust, which if in the ideal situation when it's really scrubbed well, that happens. However, if you talk about research that has been done in the area, the (inaudible) and several other environmental researchers have claimed that gas (inaudible) technologies are still underdeveloped. So whatever technology MedRecycler claims to use, it's still not been well tested and we don't know. Sin gas contains methane, carbon monoxide, in addition to several other chemicals. And, again, please don't forget, the medical waste -- being a physician, I know that medical waste contains human waste, body fluids, tissue, blood. It contains plastics, which certainly burning will produce, we don't know what all. And then of course infectious waste that was pointed as one of the speakers, culture (inaudible) vaccines, contaminated materials, all of this will go into that and we do not know how and will the technology be able to clean and disinfect. Again, everything ends up in our water and our soils. So not only as a citizen, but as an oncologist who is trying
to work on reducing environmental exposures, I urge the DEM to strongly consider this. And I will be sending my written comments as well.

DEPARTMENT RESPONSE:

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Commenter: Frank Lombardo

Comment/Question:

Thank you for having this meeting this evening. I'd like to read an article that was in the Rhode Island news, dated February 24th, 2020, and I quote, The Conservation Law Foundation has noted that the emissions from the pyrolysis contained cancer-causing compounds. The ash consists of dioxides, mercury and heavy metals. Pollutants that can make their way into the waterways and drinking supplies, end of quote. Kent County has a well that pumps from aquifers that is located in the Mishnock area. It's an aquifer that is underneath Coventry, West Greenwich, underneath the Center of New England, West Warwick, and East Greenwich, and other places. These pumps are located approximately two to three miles south on 95 of the proposed plant. Providence Water has a purification plant approximately ten miles away as the crow flies, with (inaudible) streams and reservoirs nearby. Should any of the pollutants reach Kent County's water aquifers and/or Providence Water system, consequences will be catastrophic on everyone's quality of life. I ask that Rhode Island DEM not make West Warwick and East Greenwich the new Flint, Michigan. The MedRecycler plant should not be built. I ask that Rhode Island DEM deny MedRecycler a license. Thank you.

DEPARTMENT RESPONSE:

• See VIII. Hazardous Waste versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Commenter: Marisa Desautel

Comment/Question:

Good evening. Thank you for hosting this DEM, folks. My name is Marisa Desautel, I am an attorney who was hired very recently to represent a group of residential property owners in East Greenwich. These property owners anticipate being impacted by the proposed siting. Given my recent representation, the only substantive comment I have, after hearing the comments today, is that my client wishes to echo the concerns from the East Greenwich representative that there is no so-called two-step process in the DEM regulations, as outlined by the DEM director. There are serious due-process concerns associated with the process that the director has outlined. And, again, it's not justified by DEM's regulations. My concern is the standard appeal process under the EPA. When does the agency's final decision actually occur for purposes of appeal? Besides those preliminary issues, I thought it appropriate to attend here today so that DEM understood the scope of stakeholder objection and opposition. We will be submitting substantive objections by the April deadline. And thank you for your time.

DEPARTMENT RESPONSE:

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
**Commenter:** Nick Campanella

**Comment/Question:**

I want to thank DEM for the opportunity to engage the community and discuss our proposal. I want to thank Mark Dennen, Yan Li working with us for close to two years now with our process. The benefits of MedRecycler proposal for Rhode Island are significant. We've gone through great lengths to ensure that the facility would be a good neighbor and a safe neighbor. The project is going to support up to a hundred jobs and trades. During construction dozens of permanent jobs, once complete, will generate well over $4 million in tax revenue for the community over the life of our lease. The material process there will generate renewable energy, while extending the life of Rhode Island's central landfill, which is projected to reach capacity in 2030. This is important and why we will be handling materials that all of us generate whenever we go to the doctor or the dentist, when we go to the hospital or the clinic, or even when you take your dog or cat to the vet, all of us generate this material and it's important to have a way to process it without filling up the landfill. Our company will do that while generating clean, renewable energy. Most of the comments I've heard and read don't really question the process, instead they ask whether it is an appropriate place for MedRecycler. Both the towns in West Warwick and East Greenwich have been answering yes for many years. I say that because the location is zoned industrial both by towns -- both towns and set aside for industrial uses for many years. Safety will be our top priority. The lengthy list of conditions in the DEM letter, all of which we have agreed to, means that our operation will be safe. Everyone on the MedRecycler team looks forward to building this project that will create jobs and economic activity, while also producing green that will help move Rhode Island closer to its renewable goals. I'm a businessman, not a politician. So I'm a little out of element when it comes to political controversies like this. However, I'm confident that the facts will show that our proposal is good for Rhode Island and I would invite everyone to get the facts at MedRecycler.com. Just to get to the bottom line, I guarantee that the project is going to be safe, we're going to be a good neighbor and do whatever is required by professionals that are reviewing our process. Thank you.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
Commenter: Carey Jeffrey

Question/Comment:

Hello. My name is Carey Jeffrey and I am an East Greenwich resident and, you know, the thing about Mr. Campanella is he says the same things over and over again. And I'm really dismayed to hear how the DEM is potentially going to approve this -- this license, without even having a safety plan in place. And there's one overriding scientific fact to this, and that is, this process that MedRecycler is proposing has been never been done before and so usually when there's a licensing process going on, you have to practice the process to develop the safety procedures that are needed to it. And so there's multiple levels of safety that are missing from this proposal. And look, the goal -- to reduce waste going into the landfill is commendable, but what they're proposing is setting up a mini landfill in West Warwick, on the East Greenwich line and how can they guarantee that every trailer filled with medical waste isn't going to be dropped off and the waste-concealed containers would crack? Because I can guarantee you that the rats and the other animals would find that crack. Okay? And so -- and there's many other safety issues. But one last point is that MedRecycler's financing is coming from bonds created by the Rhode Island Commerce Department, and this should ring some bells. Granted the structure is different in this case. Does anyone remember how the commerce department gave loans to Curt Schilling to development video games? Had he ever developed video games before? No, but because he was a Boston Red Sox star, well, you know the rest of the story. In MedRecycler's case, instead of Boston Red Sox, substitute the words renewable energy. Only this is much, much worse than a video game. This could sicken and destroy thousands of lives and livelihoods. This is not NIMBY. This is take your idea, test it in a desert with a buffer zone and develop ways to monitor safety transportation, storage and emissions, correct temperature and accident mitigation plans. In the meantime, it is absolutely DEM's responsibility to deny this license. Thank you for your time.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See V. Issues Related to Storage of Waste
- See VI. Bond Funding and Project Financing Issues
- Given the packaging requirements and time frames involved, it has not been our experience that rodents accessing the waste has been a problem at other medical waste facilities.
Commenter: Jerry Petros

Comment/Question:

I represent M-F Athletic company, a family-owned business. M-F's business is literally in the same building as the proposed facility. They will share a wall. M-F employs 70 people at this location. M-F strongly opposes this proposal to site a medical waste processing facility on the other side of a sheet of wallboard from its business with 70 employees. We have reviewed the proposed facility license. It is fundamentally flawed. That license contradicts and ignores numerous solid waste statutory and regulatory requirements for the issue of a license. I will give you four clear-cut examples that compel denial of this application. First, the application neither meets nor even addresses the buffer zone requirement. Under the General Solid Waste Operating Standards, a medical waste treatment facility like this shall be required to maintain a buffer zone. The term "shall" in regulatory language means the applicant must meet this requirement. RIDEM has no discretion to waive it. Specifically, the statute regulations states the buffer zone must be an area of undeveloped vegetative land retained in its natural, undisturbed condition or created to resemble a natural occurring vegetative area. There is no buffer zone. There's a half-inch piece of wallboard that will separate this facility from my client's business and risk the health and welfare of 70 employees. Did the applicant meet this requirement in its application? It didn't meet the requirement. It didn't address the requirement. It didn't discuss the requirement. It ignored the requirement. You won't find the word "buffer" in this application. There's just a sheet of wallboard. And what did DEM say about this blatant failure? Nothing. DEM needs to correct that serious oversight immediately. Second, the applicant did not obtain the required approval from the State Planning Council. Again, the statute says the applicant shall also submit simultaneously with the application a certificate of approval from the State Planning Council. This is a critical citing function mandated by the state statute. DEM is powerless to waive or modify that requirement. What happened here? SPC did not notice, invite or receive public comment on siting or consider alternative sites. SPC did not issue the certificate, the applicant could not and did not submit it. DEM should not have processed this application or even consider it. We shouldn't be here tonight because they haven't met the threshold requirements. Third, the applicant was required to obtain approvals from RIDEM for alternative technology. We've heard about that from five different speakers. I don't want to just repeat it, but let me put it this way: There are five requirements for alternative technology, and DEM cannot process the application unless and until it determines that those requirements are met. It is undisputed that two of those requirements, 40 percent of them, have not yet been met. If I brought home a grade of 60 on a test in high school, I fail. That's this applicant's grade, 60. This application fails. There's no condition of approval. You don't put it up, build it, and see if one of my client's employees is injured or made sick or hurt in some other way. They have to prove it first, that's commonsense and that's DEM's own regulations. Why are you ignoring your own regulations? And, finally, the applicant has to obtain the required certificate for final determination that the site conforms with local land use laws from West Warwick. The solid waste statute again requires this. DEM has no discretion to waive it. The applicant did not do it. It did not submit with its application the required local certificate.
They could not submit it because West Warwick has never issued the certificate because they haven't asked for it. And for that reason, again, we should not be here tonight. There should be no NOI for this application. DEM should not have processed it until these threshold determinations and certificates were either made or submitted, and none of those four have been accomplished at this point in time. Medical waste treatment facilities must comply with the specific facility operating standards. They must comply with the statute that sets up our solid waste program. They must obtain prior approvals before DEM can even review the license. They did not do that. No SPC certificate, no town approval, no approval of a proposed alternative technology and no buffer zone even proposed (inaudible) were approved. For all of those reasons, DEM should deny this application now, they should withdraw the NOI, and it should not restart this until and unless the applicant meets all of these requirements.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review
- See XVI. Buffer Zone
Commenter: Miguel Figueroa

Comment/Question:

I am student here in East Greenwich, Rhode Island. I wanted to comment on the proposed and specific holding incinerator that may or may not be built near the East Greenwich/West Warwick border. The project is the subject of a lot of frustration in my community, and I'm willing to bet my neighbors in West Warwick are experiencing the same thing. It seems that everyone who pays attention to local news is opposed to this building project for their reasons. Now, I'm pretty far left politically, I have found myself on the same side of even the most conservative people in my community and our apparently unanimous opposition to this construction project. But because I am a sunriser, I thought I would take a different approach to this and give my environmental take on why this project should not be approved. First of all, Mr. Campanella, CEO of MedRecycler, RI and some specific holdings, and his attorney, Representative Carcieri, will go on about the green myths of their pyrolysis method, like they did when they first proposed the project in May of 2019. I would like to encourage the DEM to ignore that noise. The incinerator, as I'm sure you are all aware, will produce for the company called synthesis gas, or sin gas. You may know it as biomethane. Its sister fuel natural gas is constructed with the same pyrolysis method as an identical chemical composition. And like natural gas, when you burn biomethane it produces energy at the cost of releasing greenhouse gases that trap heat in our atmosphere and accelerate global warmth. In other words, biomethane is not clean and pyrolysis isn't clean either. Do not let them tell you that is. Now, I will admit, the human organs, animal body parts, and used hospital supplies that Mr. Campanella's subsidiary wants the state's permission to burn are not technically fossiled yet. So biomethane isn't technically considered a fossil fuel yet. You got me. But that doesn't make the process green by any means. Secondly, I know that Representative Carcieri has clarified that the entire incinerator plan will be a closed system and that no gas will escape. In his words, this makes the project green. Now, there's probably a natural gas line explosion on a Native American reservation for every word of the sentence, and I'm sure that all of those fossil fuel companies gave the same kind of assurance to the communities they later poisoned, but I'm not indigenous, so I'm not even going to get into that. Representative Carcieri, DEM members, I don't care what MedRecycler, RI is doing with the biomethane. My main concern is what will happen to the biomethane when MedRecycler, RI harvests it and sells it to energy companies to be burned as a fuel source? And I would like to remind the DEM, and anyone else listening, that these are the same energy companies that have donated more than $12,000 to Representative Carcieri's reelection campaigns, according to follow the money. In fact, Representative Carcieri has made six times more in campaign contributions than the next highest fundraising candidates. Now, the Union of Concerned Scientists published a paper in 2013 that stated that medical recyclers, like the one proposed for West Warwick, would only produce enough energy to cover three percent of California's natural gases, even if they burned all of the state's hospital trash. Assuming Rhode Island and California have at least similar natural gas consumption rates, there is no practical reason to harvest biomethane as a fuel source unless it is making you personally a lot of money. That brings me to my last point, killing the planet is a lucrative industry, but take it from
Chevron, at some point people are going to get frustrated when you dump 600 gallons of oil directly into the San Francisco Bay. Mr. Campanella is currently facing the ire of 1,000 angry suburban (inaudible) and their Tweeter leftist kids, and that's a crowd that tends to be difficult to bargain with. It's easy to fall into this trap of believing that Mr. Campanella and folks like him are evil and don't care about anything other than their bottom line, but I don't think Mr. Campanella is an evil person, (inaudible). He's right, the landfills are gross. He's right that letting our trash gases float away into the atmosphere like some kind of collective fart is a bad way to go about our business. We shouldn't be dumping our garbage and ruining our environment like that. But here is where Mr. Campanella is wrong. The difference isn't between destroying our planet and destroying our planet critically. We don't have to keep destroying our planet. We don't have to keep burning natural materials to create fuel. We don't have to keep burning fossil fuels and pumping the toxins into black and brown communities. We can make ethical and sustainable infrastructure choices. As a sunrise organizer, I spoke with Rhode Islanders, all age, beliefs and backgrounds about the same way that I do now. It's time for a green (inaudible) in our state. Somebody to completely reimagine our infrastructure so this doesn't have to be a problem in the future. Australia, the entire West Coast burned to the ground last year, Texas doesn't have power, Puerto Rico has been dealing with hurricane after hurricane, and Rhode Island could be next in. Things aren't going to get better. If we adopt a new mind-set, we can stop them from getting worse. Thank you.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See XI. Monarch Pyrolysis Facility in New Mexico
**Commenter:** Sharon Williams

**Comment/Question:**

I'm in opposition to the application, and I'm most concerned about the pollution of medical waste, including drugs from unmonitored and uncontrolled materials. I'd like to thank our elected officials and the experts who have spoken here today. I'm 77 years old. I'm worried about my daughter and her family, including her daughters, who live down the street from me in East Greenwich, and I'm also concerned about her in-laws who live on Pine Glen Drive, just down the street, down Route 2 from this new facility. She's about 81 years old, and he's about 88, and he has serious lung conditions. It sounds to me like the marketing materials for this company could be, You want something burned, we'll burn it. And I'm in opposition to that. Thank you.

The following email was also received from the commenter

From: (Name) From: (Address)

Sharon Williams  sharonhwilliams6@gmail.com

[EXTERNAL] : Medrecycler

I spoke at the last meeting. This is what I said.

My name is Sharon Williams and I live at 25 Locust Dr. in East Greenwich. I am speaking in opposition to the application
and I’m most concerned about the pollution from medical waste including drugs from unmonitored and uncontrolled materials.

I want to thank the elected representatives and experts who have spoken.

I am 77 and worried about my daughter and her family, including her daughters. I’m also concerned about her in-laws who live in Pine Glen, just down Route 2 from the proposed facility. She is about 81 and he is about 88 with serious lung issues.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See VIII. Hazardous Waste Versus Medical Waste

**DEPARTMENT RESPONSE:**

- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Brian Cunningham

Comment/Question:

I just wanted to formally go on record and posit my opposition to the MedRecycler waste permit application. I have spent three years working as an environmental specialist for Triambridge (phonetic) Environmental, a waste disposal and management company that dealt with several pharmaceutical and industrial waste producers in Rhode Island and across the country. And for two of those years I worked feet on the ground in the actual hospitals, the labs and facilities where this kind of waste is produced. I have personally managed the disposal of several thousands tons of regulated medical waste, and from that experience I can tell you with certainty that it has a very varied composition. Now, MedRecycler would like to paint this picture that this is a green technology and that the implication of pyrolysis, the process used here to treat the waste, is simply a great source of renewable energy. They want it to seem like there's only three main wastes that are being produced from this process: The flammable sin gas, which is used to burn for electricity, the solid ash that will be disposed as a separate waste stream, and flammable tar that is then reused to heat the vitrification system. But in reality it's not that simple. Those are just the tangible waste streams that must be handled by them after doing this heating process. But the off gas from the thermal oxidizer releases gas back to that stack out of the facility, that's going to be releasing numerous chemicals into our atmosphere, and they have scrubbers on it, supposed to be all scrubbed, but there's still an amount of pollution that is escaping into the atmosphere, that includes greenhouse gases like carbon dioxide, a lot of toxic heavy metal and dioxins, and that's just if everything is going as smoothly as it can. And I can say as a prior member of the waste handling community, that things rarely go as smoothly as they can. MedRecycler currently has no formal agreement to spot check their waste. So they aren't even going to be fully aware of the not-yet regulated chemicals that could complicate the equation in these waste streams. MedRecycler wants them to seem like most of the waste that's going to the facility is just plastic gloves and tubing, and that is true, but the reality is you don't need a lot of these hazardous materials, a lot of volume, to have a very negative impact on human health. And when you start cranking out 70 tons of waste a day, the possible risk is elevated astronomically. This is truly anything but a green technology. Rhode Island is trying to move in a more sustainable direction, and I think that this kind of facility is not only a step, the complete opposite direction of that, but one that can seriously endanger those in the residential areas nearby. I'll also be submitting this in a written form, and thank you for your time.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process

• See VIII. Hazardous Waste versus Medical Waste
Commenter: Nancy Nordquist

Comment/Question:

First of all, I thank you very much for this opportunity. I'm a very new resident of East Greenwich. As a matter of fact, I have bought a condo about a mile away from the targeted location and if I had known the facility was coming in and is approved, I really would have had serious considerations about it. The things that I am concerned about relate to the health, safety and welfare of the residents surrounding the location. My concerns are related to the limited use of the pyrolysis for recycling and the lack of testing that has been available for it, especially for medical waste. It's my understanding that this process had been available for many years, and my concern -- or one of the thoughts I have is if it's been available for so many years, then why are there so few facilities that are processing things like the medical waste? And the ones that I'm aware of are really only processing wood and plastics. The other thing that is really a concern to me or another concern to me is the location for this processing. From what I am understanding, it should be really in a buffered zone and not in an industrial park or near a children's daycare center, across from a school where there are many students, around many, many residents and some other companies, and during the wetlands that may be polluted by this.

The other thing that I'm very concerned with is there doesn't seem to be a clear process for handling the residue from the process, and that trucks with pathogens inside are going to be parked in the parking lots. They asked for approval to have, from what I am understanding, trucks be able to park in the parking lot with the materials, the medical waste in the trucks before they can be processed. I am asking for your consideration to please not approve this proposal. And I thank you for the time. I'd also like to thank the representatives that have been speaking here and have done such a good job. Thank you very much.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See XVI. Buffer Zone
- See XIV. Issues Related to Disposal of Ash
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Commenter: Bret Jedele

Comment/Question:

My name is Bret Jedele and I represent Mr. David Straus. He's an East Greenwich resident who resides in a neighborhood close to this proposed facility. After reviewing the applications and the pertinent regulations, my client objects to this application for the following reasons: First, DEM has not satisfied its obligation in reviewing the application. Under state law DEM is obligated to address siting concerns and surrounding community. Rhode Island General Laws 23-18.9 was revised in 2018 to add a higher standard affording great weight to the detrimental impact placed on surrounding communities. Since the 2018 amendment of that statute, DEM has not promulgated standards for A, the placement of these types of facilities; B, when placement causes detrimental impact on the surrounding; or C, standards that recognize and afford great weight to these concerns. And, in fact, the record in this matter is absent consideration of these factors. So my client, along with others, as you have heard today, and will hear as the hearing goes along, submit that this application cannot be considered until DEM has developed these standards and proven that it has considered them.

Second, the applicant must receive, review and approval from the State Planning Council. And here it has not. State law dictates that the SPC can approve a site, again, similar to the last issue, only after affording great weight to the detrimental impact of the surrounding community, and after an evaluation of an alternative site. But the SPC has done neither here. In fact, the SPC has yet to go through a public comment and -- notice and comment process, and as such DEM is precluded from considering this application further until the SPC process is completed. Any decision by DEM in the of that process prejudices my client, the residents of East Greenwich, as well as the residents of West Warwick. Importantly, and related to the SPC process, the applicant must receive approval from the local zoning and planning departments. In fact, the final determination from the municipality that the site conforms with all applicable land use and ordinance requirements is required before DEM can issue a decision on an application case like this. Here the applicant is merely at this starting point of the local permitting process. The applicant has yet to apply for a preliminary plan or final plan approval from the West Warwick Planning Board. So DEM cannot consider granting a license here until a certificate of final determination from the Town of West Warwick is submitted.

Moving on. The documentation necessary to support this application is lacking significantly. The laws and regulations require that all supporting documentation be made available for public comment. The draft DEM conditional license says that certain documentation has yet to be produced and that information includes, for instance, the West Warwick contingency plan, a pre-operating test of the system, and importantly, evidence of financial assurance. So I would submit that since this technology is untested and unproven, financial assurance should be vetted and ensured upfront, and all of those documents that I mentioned are critical to informing the public and satisfying public participation requirements.

And, finally, it's been said up to this point, and I'm sure repeated, that this technology is unproven, the regulations require that DEM review, approve all testing plans and protocols before issuing an approval. And, again, as grounds for the fact that this
technology is proven, the applicant cited to one facility Mexico, the Monarch facility. It's my understanding after looking at the Federal Register that the Monarch facility was recently denied approval by EPA for pyrolysis. So I'd like to wrap this up by saying that there's been talk that the applicant has brought equipment in and started some form of operations. If this is true, this agency's decision should not and cannot be swayed by pleas for tolerance or leniency. The applicant cannot be allowed to profit by impatiently skirting the system. I will be submitting written comments at the end of the public comment period. And, again, thank you for the opportunity to speak.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See I. Issues Related to the Department’s Role in the Permitting Process: A. Statewide Planning Approvals
- See III. Plans Not Submitted for Public Review
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
- See XI. Monarch Pyrolysis Facility in New Mexico
Commenter: Greg Gerritt

Comment/Question:

I live in Providence. I'm going to testify for myself, but I also have been asked to say that the Environment Council of Rhode Island, the coalition of more than 16 environmental groups in the State of Rhode Island has also said we do not think that is a good project and we do not want it. They have most -- you have heard all the reasons for that, so I won't reiterate those. I have some other things to say. This project is not clean energy. It burns natural gas to heat up the chamber in which to melt the plastic that is already burning fossil fuels. Plastics are fossil fuels. Everything that they are making out of plastic, they're making out of oil. And as we go to electric cars, the oil industry has said we are going to flood the world with plastic so that we can keep selling oil. But every bit of oil we take out of the ground contributes to the greenhouse disaster that we are going through, and we should not be either using it to heat plastic or burning plastic. And I understand that they do this, they call it pyrolysis, but, essentially, Rhode Island has banned incineration. And this is just, you know, a slightly different (inaudible) and we do not want this, we will not stand for it. I want everybody to think about Burrillville. The people in Burrillville went through the same thing recently with their proposed power plant. You know, the political insiders all kind of greased it. DEM kind of greased it. And it was really, really obnoxious. Eventually, like you, hundreds and hundreds of people kept coming out and eventually the state got it. It didn't meet our greenhouse gas goals. It's not clean, and the people don't want it.

In Providence right now they're trying to get these things called Green Justice Zones. Essentially it's low income neighborhoods, people of color neighborhoods that are facing real problems from pollution over time for -- continued for years and years it just builds. So they have been objecting, and, you know, so the city is starting to deal with that. And there's a bill at the legislature on Green Justice Zones. And this is exactly the kind of situation that these are called for. It says the people -- if the bill passes, it says the people in the neighborhood have a right to say no. And that is not a conditional right to say no. It is an unconditional right to say no. When -- I've lived in places that people wanted to build nuclear waste dumps, and we stopped them. And this is what's going to happen here because the people have the right to say no. The process, the politics is not right when the people are shut out of this decision. And it's clear that the political power says, we think this is economic development. But it's never good economic development. It doesn't actually advance a sustainable community, a healthy community, a community using resources to do good things in it. It's basically just say, well, we've got to put the trash somewhere so you've been picked. So I think that this is a really bad idea. It's not green, it's not clean. And it's not being run in accordance with the principles of DEM democracy. And when everybody realizes stuff, we are all environmental justice zones and that we all need green environmental justice zones, we will have a state process in which people who would like to speak -- who would like to stop these things get equal footing. You don't give the developer, you know, 15 years head start and we get to come in at the end. It's like, we need to be in from the beginning and they shouldn't be doing anything without full public disclosures and testimony. Thank you
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See X. Adequacy of Public Notice
Commenter: Denise Lopez

Question/Comment:

Good afternoon. My name is Denise Lopez and I'm an East Greenwich resident, but today I come to speak as a representative of Kent County and the voice of those who aren't able to come and speak today.

I have spent the last year following the MedRecycler project and objectively learning more in order to provide facts to the community on what is being proposed. Quite frankly, the more I have learned, the more concerned I have become that the project has gotten this far, for such a congested area in the middle of Kent County.

As stated in a Science Direct article, a pyrolysis plant for self-sustaining energy through waste is thermo-dynamically unproven, practically implausible, and even environmentally unsound. Yet MedRecycler claims their process is safe, even green, but it has never tested the system with medical waste to date, only incineration.

Pyrolysis is not that different from incineration. Both methods use high heat and produce ash, char and air pollutants, including mercury and lead. I have heard from many families impacted by cancer, thanking me for my efforts, as the last thing Rhode Island needs is additional dioxins that will increase our risk statewide. While I could go on for hours, the focus today is on the solid waste permit. So I will concentrate my comments on that.

And I had a few things that have already been stated, in particular, with regards to the alternative technology regulations in Section 1.14. And with DEM stating that the process cannot be proven to date for the environmental impact, as well as health concern, they stated themselves that with respect to three and four, those two items, the Office of Waste Management has remaining concerns that need to be addressed, specifically shredding untreated medical waste may aerosolize pathogens that could negatively impact the health of workers in the community at large. They also go on to say that this technology has not previously been permitted or utilized in Rhode Island. And this is a key piece of information for this location, that I will address later.

Secondly, as stated by the businessowner next door, it's alarming that the number of flags that appear when general oversight of the solid waste regulations. I know this is alternative technology, but when we have our basic solid waste regulations that aren't being followed, that should be a flag. In particular, with regards to Section 1.6 and (d) with odors. You know, odors that they say it's going to smell. We know it's going to smell. They said they're going to be a good neighbor and get rid of the smell. Why try to cover it up? If they're saying that it's going to smell, at least we would know what was going on.

In Section 1.8, the odor control problem, I had a couple of questions to what offsite alternative medical waste facility has been determined for processing boxes with offensive odors. Because they state that some will come in. And then if such facility has
not been identified, how is it permissible to be as stated in the application process immediately onsite?

With regards to -- several -- and then if such in an e-mail. But on Page 47 of the application it states that should radioactive material be detected, the container labeled as radioactive and temporarily placed away from employees, in most cases it will decay to acceptable background limits and may be processed as regular medical waste. So if we don't allow it in a solid waste building, why, you know, are we even considering it for this application?

Basic general operating standards, again safety provisions. The facility should be designed, operated and maintained in such a manner that would protect the health and safety of the facility and personnel associated with the operation. If you don't know something is safe, it should not be tested close to an operating business and residential area. The buffer zone with the 70 employees that are next door, we've already talked about that. And moving -- and also with regards to that, they have a loading dock where trucks come in daily 6:00 to 8:00 a day, so not only employees but they're, you know, they're -- the truckloads that they are receiving daily.

Moving on to general comments about the application of documents submitted by MedRecycler. Again, in the two-five statement they say that they don't have specific details for the test protocols. Therefore, permit conditions have been included to require additional details in the testing protocols, department approval, and oversight prior to testing. That is a flag because if after two years you still don't know how you're going to test this, you know, the public is expected to be the guinea pigs for the environmental impact of the process.

There are some specific discrepancies between the DEM application and approval letter. Why is the DEM's Notice of Intent to approve say that MedRecycler can store medical waste, when the application states that they won't? Why does the DEM Notice of Intent to approve say, you know, that no more than 20 containers of medical waste shall be stored inside and no more than 25 outside? You know, it just goes on. And, again, I'll send some additional ones.

The application is clear as to reference even the original Johnston site. They didn't even have it updated for West Warwick. There's an employee manual and, you know, the one provided is from a company called Environmental Health Concepts. I was just curious how this company represents itself as the employee manual of MedRecycler. Is it a sample of a business they're working with or just one they provide in the absence of not having one themselves?

And they use Monarch Waste facilities as comparison a site. And I did have the opportunity to speak with someone in Sante Fe. And her conversation: Monarch recently moved operations out of my homeland due to restrictions placed on not processing human or non-human body parts last year, and it no longer being financially lucrative. The facility was near a residential area and neighbors said the smell was horrible, and
couldn't even walk their pets outside anymore. I lived far enough away to where it didn't smell. My concerns were around what the EPA deems safe amounts of things like arsenic.

They also didn't do a full environmental impact assessment, so no information on how it would impact groundwater, only air emissions. I would advocate for a full environmental impact assessment. It's completely done over here, no longer in operation, thankfully.

While I think it's important that we find ways to dispose of waste safely, I'm not understanding why these facilities need to be near homes and communities, and near areas that are deemed disposable, largely communities of color and Indian reservations. I don't know what the demographics look like in your area, but in my case it was an environmental racism. And there is a long history of sacrifice zones where nuclear waste was dumped and uranium mining occurred. I'd definitely be concerned with the let's try it and then test it method, end quote.

And going back, in closing, to the DEM alternative knowledge regulations stated above in subsection B, notwithstanding the provisions of 1.59F5A of this part, the director deny any application for just cause within the scope and intent of these regulations. And especially in this age of Covid, consists of a relatively new and unique use of pyrolysis of disposal of medical waste, I question whether or not even the Rhode Island DEM has the ability or expertise to thoroughly and safely evaluate the proposed project. It is certainly new territory for DEM and an alternative use of this technology will set precedence for the state.

This company, and I'm sure many others, will come to Rhode Island, as many are looking for states that offer industrial bond funding for self-identified green initiatives. We are urging DEM to do their job and provide the scrutiny and oversight of this application and protect the ones you serve. Thank you very much, and I hope that you oppose this application.

DEPARTMENT RESPONSE:

- The commenter correctly notes that the application lists the population and service area as that around Johnston instead of East Greenwich. Firstly, given the fact that this is a regional analysis, the distance between the two is very small. More importantly, although this is relevant for a market analysis, such analysis is not relevant to the Department’s role.
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See V. Issues Related to Storage of Waste
- See VII. Transportation of Waste Through the Community
• See IX. Limitations on Attendees at Public Hearing
• See XI. Monarch Pyrolysis Facility in New Mexico
• See XIII. Concerns Regarding Radioactive Waste
• See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
• See XIX Odor Issues
Commenter: Katherine Silberman

Question/Comment:

My name is Katherine Silberman. I'm an East Greenwich resident and I'm the primary author of a letter in opposition to MedRecycler that has currently been signed by 1,484 people, including more in the past two hours, I'd like to say. I don't have time to read the entire letter, but I would like to read excerpts.

But first I would like to say for the record that we're getting many, many, messages from the West Warwick and East Greenwich residents who are trying to sign on to this call, who are not able to due to the 300-person capacity. I personally contacted DEM last week by phone and e-mail to let them know we had over a thousand signatures on the letter, we expected a huge turnout for this call, they needed the capacity to handle that, and they chose not to do that, to have a 300-person capacity. People want to participate who have not been able to, and so I think this is not an authentic or sufficient public participation.

But let me read the letter: As residents of West Warwick, East Greenwich and nearby towns, we are writing to oppose any permits for MedRecycler to build a medical waste pyrolysis facility in West Warwick. I'm going to skip some because we've been through a lot of this. But this pyrolysis is potentially hazardous technology that is inappropriate for a residential neighborhood. The residents of West Warwick and East Greenwich bear all the risks of this dangerous technology for human health and the environment and would have no control or even knowledge of the hazardous waste imported to our towns everyday.

Medical waste is known to contain persistent, bioaccumulative toxics like mercury, harmful plastics and other toxics that cannot be eliminated by pyrolysis. We're concerned about potentially harmful air and water pollution from MedRecycler damaging our health and environment, including substances known to result from pyrolysis, including carbon dioxide, lead, mercury, dioxins, furans, sulphur dioxide, nitrogen oxides, ash, and char. With two daycare centers and residential neighborhoods surrounding the site, we're especially concerned about the health effects of lead and dioxins, as discussed, known to cause cancer, liver and endocrine damage, infertility, birth defects and environmental harm, and the potential for radioactive waste to come to the facility, who are deeply rooted in our hometowns, personally, professionally, financially, and historically. Our voices of opposition should be heard in contrast to the developer who wants to come to Rhode Island from New Jersey with technology from South Africa that is previously untested on medical waste.

We encourage DEM to apply the Precautionary Principle, an established tenent of environmental law to this decision. Since pyrolysis has never been used to treat medical waste, the true risks are currently unknown. The residents of West Warwick and East Greenwich do not consent to our children, our families and our neighborhoods being used as guinea pigs for an untested technology which could cause unknown harm. What happens if there's a malfunction, an accident, a fire or unpredictably harmful emissions
from this plant? How do you undo that harm? The answer is: It is impossible. Therefore, DEM should err on the side of caution to protect human health and the environment.

The fact is, there's nothing green or recycled about MedRecycler. Pyrolysis is barely distinguishable from a medical waste incinerator with a greenwashed name. Medical waste incinerators are notoriously toxic, polluting facilities that are inconsistent with residential communities.

The definition of regulated medical waste includes: Human blood, body parts, and live vaccines, among many other biohazards. Especially now, in the age of super-infectious Covid-19, these are not appropriate materials to import to this site. We are concerned about machine malfunctions, accidents, spills, fires, toxic emissions, worker safety, first responder safety, environmental harm, air, water, wildlife, and ecosystems, and the health of all the people who live and work near or to the site.

We want to stress that our opposition to this facility does not rest in the "not in my backyard" theory of local protectionism. Rather, this facility does not belong in anyone's backyard. Our state, nation and world are experiencing a climate crisis. It's long past time to reject the polluting technologies of past and look to a truer greener future for us all.

Rhode Islanders are justifiably proud of our beautiful coastal environment, and in this small state we care deeply about the well-being of our neighbors. Therefore, we ask DEM to prioritize the health and environment of Rhode Island families over the process of this speculative developer and deny any permits for MedRecycler. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See IX. Limitations on Attendees at Public Hearing
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See X. Adequacy of Public Notice
- See III. Plans Not Submitted for Public Review: Contingency Plans
**Commenter:** Christine Berger

**Question/Comment:**

Good evening. I'm Christine Berger, a resident of Rhode Island. I oppose any permit to build a medical waste pyrolysis facility in Rhode Island.

These facilities are designed specifically for their feedstock and to generate specific products. But what exactly is in these sealed containers that will be brought in by the truckload? And please imagine, envision in your mind what 70 tons a day looks like. They will then be shredded and heated on-site. Pyrolysis plants that are not properly designed for their feedstock are harmful to the environment.

Rhode Islanders will have no control or even knowledge of what the hazardous waste imported into our towns every day will be. And why should Rhode Island be a test site for such a potentially dangerous, polluting, untested experimental technology?

The applicants have thus far been unable to prove that treating medical waste through pyrolysis is safe for human health and for the environment (inaudible). I am concerned about the emissions that will leach into the surface water, into the water table or bioaccumulate into our plants and our animals.

Please think of the dangers posed to those who live, work and go to school in the properties immediately abutting the facility we are discussing. We do not want this in Rhode Island. I respectfully request DEM to not grant the solid waste permit. Thank you.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
- See VIII. Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Commenter: Shanna Wells

Question/Comment:

Hi. My name is Shanna Wells, and I'm a resident of West Warwick who lives two-and-a-half miles away from the proposed site. I'm here to say I do not want the proposed MedRecycler treatment facility here in my town or, indeed, anywhere in Rhode Island.

Pyrolysis is not ordinarily used for medical waste and there is no scientific data on a technological impact. I think it unconscionable that an untried, untested process would be approved, turning the residents of West Warwick and East Greenwich into lab rats for the financial benefit of an out-of-state vendor.

It also makes me question the DEM's motivation, since their job is to protect and steward the land in a responsible, ecologically safe manner. If you don't know the long-term impact this facility will have on the environment and the humans who live adjacent to it, then the answer should always be no. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Commenter: Lily Scott

Question/Comment:

Hi. My name is Lily Scott. I'm an EG resident, I'm a mom of two kids in the community, and I'm also a former educator in the State of New York City. I have a master's degree in early childhood education, specialty in learning disabilities.

I taught in a high-needs, hard-to-staff area of New York City called the South Bronx for several years, and I can attest to you the real true ramifications of both working in and watching children grow up in an environment with medical waste incinerators.

I personally have never been so ill. The true effects of the air quality pollution are 100 percent real. No matter how much of a standard is in place within the governing bodies of the area, it doesn't matter if a medical incinerator or a pyrolysis factory is working towards and meeting the expectations of any governing body. Everyone will be ill; that is the case.

I worked in a school with over 800 children, and the rate of asthma in that school topped 90 percent. It is a real and present danger. That is not an exaggeration. That is a reality. And there is a hundred percent zero ways to get around that. The only way that we extricate ourselves from that type of harm to our community, our children, our seniors, everyone who lives here is for DEM to throw this out. There's absolutely no other conversation to be had.

And that is my comment. I will also put it in writing, and do anything else to make this go away, and get out of our state.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
**Commenter:** Claudia Iannotti

**Question/Comment:**

I don't want to repeat -- a lot of what has been said also encompasses the concerns that I have and I don't want to repeat those things, but the one thing I did not hear, and I could have missed it, was right next door to this facility is the daycare and then immediately next door to the daycare is -- there are two ponds there, and that's a bit of a concern for me because what happens in the event, due to human error, and some of this infectious - - or if a hauler has an accident and some of this infectious waste escapes, there are so many airborne infectious diseases, that that's a big concern for me. And other than that, I think everything else I wanted to comment on has already been said, so I'm not going to repeat.

**DEPARTMENT RESPONSE:**

- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII. Hazardous Waste Versus Medical Waste: Groundwater and Surface Water Bodies at Risk
- See VII. Transportation of Waste Through the Community
**Commenter:** Linda Grenier

**Question/Comment:**

I'm Linda Grenier, a Coventry resident, and I would like to make this comment that Rhode Island has only 4,000 hospital beds between hospitals, plus medical offices, nursing homes and other medical facilities. Seventy tons of medical waste per day seems excessive for such a small little state. I'm concerned that MedRecycler will be accepting waste from other states.

Without collected scientific data that might give DEM a green light to approve this facility, I'm asking RIDEM to not allow Rhode Islanders to be guinea pigs for this potentially unsafe project. And thank you.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVII. Out of State Waste
Commenter: Wendy Greene

Question/Comment:

Good afternoon. My name is Wendy Greene, and I am a resident on the Warwick/East Greenwich line, about a mile from the proposed facility, and my concerns are not just for myself but for all the citizens and communities in Kent County and throughout the entire State of Rhode Island.

We're such a small state, and a facility such as this, with the magnitude of, as the last person just mentioned, processing 70 tons of medical waste per day 24/7 effects all of us and not just one community. So I'm very deeply concerned that the pyrolysis process is common in the chemical industry to produce fossil fuel by-product, but there's no examples of commercial use. There are three plants in South Africa, but not in the US. And, again, for the commercial sector, it is not a proven one in the US.

I'm concerned about truckloads upon truckloads containing medical waste that will be stored for up to two weeks. So what does that even mean? Contaminants being spread, radioactive contaminant, air pollutants. I believe Denise mentioned offensive odors. So what are the protocols to even oversee something like that?

The other thing that concerns me is back in May Scientific Holding Corp. has a PR firm and they released a statement that a ten-year lease with a ten-year option was identified and negotiated and executed on the -- at the facility, the 48,000-square foot facility at 1600 Division Road in West Warwick.

So I'm wondering why was a lease already a done deal? And unless, in my view, the fix was in to approve the medical waste facility, I believe that that lease shouldn't have even been implemented at that time. And then why would the City of West Warwick approval to commence an office build-out in the medical waste location without any public hearing? So I have a lot of questions.

Again, I've heard the word guinea pig used. I, too, believe, like, why are we allowing the little State of Rhode Island to be a guinea pig that test -- untested technology? Why allow it next to a child daycare center, a university, a golf course, a neighborhood, waterways?

And what is the due diligence that is going to be done in order to really study this pyrolysis in the commercial sector, and in a heavily populated environment? And how do we even know that what we're -- what they are planning to do won't allow cancer-causing emissions into the environment? I'm concerned about the lack of transparency that has been -- has been sort of swept under the rug until recently. There's only been recent press coverage, which is all due in part to the concerned citizens for speaking out against it.

And I know I'm running out of time, so I'll just end with the fact that I'm concerned about this obviously. The relationship between MedRecycler and the State of Rhode Island and
the concerned citizens doesn't seem to be off to a good start. I think there's a lot of unanswered questions, and I emphatically and wholeheartedly request that Rhode Island DEM do the right thing and deny the medical waste license to MedRecycler. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XIII. Concerns Regarding Radioactive Waste
- See XIX Odor Issues
- See X. Adequacy of Public Notice
Commenter: Nicole Armstrong

Question/Comment:

Hi. Thank you. I really appreciate the opportunity to speak. My name is Nicole Armstrong. I live in East Greenwich. And I really do not want to see Kent County become the next Flint Michigan. Flint public officials had the laudable goal of saving some tax dollars, but it devolved into a public works tragedy, because it was determined -- after irreversible damage to human health had been done, it was determined to be caused not by malice but by faulty assumptions, bad science and a failure to perform due diligence.

In Flint, when local officials and pollmakers switched to a new, what turned out to be, corrosive water supply and then failed to correctly treat it, as you know it created a perfect storm that caused lead to leach from the pipes into folks' homes and created a massive water crisis that tripled the levels of lead in their children's blood. Flint's residents suffered devastating life-long consequences, despite initial claims that it's temporary or we looked into the science and it's safe.

And now here in Rhode Island MedRecycler is trying to serenade us with greenwashed claims and earnest promises that, we want to be good neighbors. It's safe. Trust us. Smack dab in the middle of our state, they hope to pyrolysize medical waste trucked in from all over New England and New York, with little more than earnest promises because the science isn't there. Peer-reviewed studies on pyrolysing medical waste do not exist. There are coincidental adjacent studies and these point to the release of elevated levels of environmentally persistent highly-toxic contaminants.

I don't want Rhode Island's residents to suffer devastating life-long consequences because of faulty assumptions, bad science, and a failure to perform due diligence. This is a Superfund site in the making, and as I see it, the only beneficiaries might be some specific shareholders, and I say may because the SEC filings report that MedRecycler's parent company is, quote, "Has been and is insolvent since inception," end quote. Another quote is, Since our inception we have failed to create cash flows from revenues sufficient to cover basic costs, end quote.

So this company is asking Rhode Island to loan them $7.2 million to create long-term jobs, while they are claiming a deficit of $10.5 million, and they have, quote, "Been unable to meet financial obligations," and I'm quoting from their annual report that, "We have not been able to accomplish to date." So like 38 Studios, this project has all the razzle-dazzle and hip jargon of cutting-edge tech, but I fear that it too will end in bankruptcy, with the added affront of becoming a grotesque environmental injustice against Rhode Island. So I urge all elected officials, policymakers and regulatory entities to please soundly reject this proposal. And I thank you for your time.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See VI. Bond Funding and Project Financing Issues
Commenter: Andrew Caplan

Question/Comment:

Thank you for the opportunity to speak. I would just like to voice my opposition to this project going forward for the following reasons: The approval of this project has not gone through the correct procedures, as was outlined by the previous speakers. What also concerns me is the notion that more trash and potentially more pollution in the area has ever seen could be generated when the system or plant would go online. And I'm very concerned about that.

What also concerns me is that this is an experimental process, and I take exception to that for the following reasons: I work in the medical industry, specifically in the IT portion of it, and when we start deploying any new type of technology application, or whatnot, we take the time to test it out. In other words, go through the beta testing process. In fact, we do an alpha and a beta testing. It does not appear that neither one of those was conducted prior to this proposal, and I have grave concerns about that.

What also I found interesting was that this type of technology is not used anywhere in the United States. So not only are we not alpha and beta testing it, we are basically version 1.0 of this type of system, and any type of system that has a dot zero as part of its versioning is problematic because there's always going to be patches or improvements needing to be done.

The company that is supposed to be running this plant is not experienced in this procedure. So I get the impression that it's the blind leading the blind, to put it bluntly. If anybody was going to do this, I would want some company or outfit that knows what they are doing. It's akin to my replacing a component in a server. I am being tasked to replace it based on the notion that I know what I'm doing. My company would not want me to go in and start opening up a hundred thousand dollar server if I have no idea what I'm doing.

What also has been brought forth is that this has not been shown to be alternative technology. Alternative technology is excellent, especially in today's day and age, but it has to be proven as alternative, and this technology has not. So I have misgivings about that.

What also concerns me is the potential environmental fallout in case of an accident. Now, I cite two other instances of environmental disasters. Granted, different industries but the concept is the same. I remind my colleagues about the Chernobyl disaster, as well as the Fukushima disaster.

Now, granted those two are nuclear industries, this is something else. However, the environmental fallout was the following: For Chernobyl, an entire city, Pripyat, basically became uninhabited. Now, Pripyat is a very -- was a very large city. Roughly akin to the size of West Warwick, if not more.
So if a worst-case scenario occurred, we're talking about, for example, potentially a whole area of Rhode Island becoming now uninhabited. We don't have that type of space. And as far as Fukushima is concerned, we're still experiencing the fallout there.

Now, let's say there is a disaster or an accident of some kind, has there been an evacuation plan thought up and proposed for the necessary removal of people from the immediate area? For example, if you go up to the Seabrook power plant in New Hampshire, basically if there was a meltdown or some other accident there, at least there is some type of plan. We have not been told what this plan is if, God forbid, something was to happen in our area. If we don't have anything like that, or a plan B, then I do not feel confident in this plant being set up in our area. I submit this to you as a concerned citizen of West Warwick. Thank you very much.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See III. Plans Not Submitted for Public Review: Contingency Plans
Commenter: Melissa Chernick

Question/Comment:

Thank you. I'm just echoing what has been stated before that this technology is untested on medical waste. We do not want to be the guinea pig. It's unconscionable to me that we have gotten this far in the process with DEM, with everything that has been neglected, and that's their part as far as the paperwork that they need to turn in, and I just -- it's a little baffling to understand how we're even at this meeting, but we are, so I would like to be heard.

You know, when this process is unknown, I don't see how we can stand to be the guinea pig for it. And this company is unable to prove that treating medical waste with this process is safe. And we have heard from experts who state that this is not safe. So, again, I'm not sure why we're even having this conversation.

And, lastly, we know that there needs to be a buffer zone, and there is none. So stating all of those reasons, that is why I am against this proposal. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See XVI. Buffer Zone
**Commenter:** Caryn Corenthal, EG Town Council

**Question/Comment:**

I have to commend the overwhelmingly eloquent -- number of eloquent speakers that we had, and I will be must less eloquent.

But I wanted to address Mr. Campanella's comment that this is a political controversy. This is not a political controversy. Frankly, there is no controversy. The people of East Greenwich, and we're hearing the number of people in West Greenwich, are opposed to this plant being built here.

The other comment that Mr. Campanella made numerous times was about jobs, and as a council member, and all my council members, we welcome jobs to East Greenwich, but the fact that frankly the job component is irrelevant and should be irrelevant to the DEM process -- permitting process. In addition, the Chamber of Commerce in East Greenwich opposes this plant. So let me just address a couple of things.

Number one, overwhelming number of people said the science is unreliable. It's not a political. They were doctors, they were scientists, they were environmentalists, they were experts. We did not pay them like you obviously, I'm sure, have a paid consultant.

The other concern that DEM should be considering is the environment. My understanding is DEM should be protecting the environment. Clearly there are a lot of concerns about that.

The other question is that DEM should be considering the health and safety of the employees and the residents of the immediate area, East Greenwich and West Warwick and the surrounding area. And, clearly, I don't think that has been answered correctly. And I just also wonder is the company planning to put an enormous amount of funds in a bond or something so that when there is a potential leak, accident, disaster, they will be able to correct the problem, and will they be paying for the East Greenwich Fire Department to train in hazardous waste and have the proper equipment that they will need in the event that there will be -- that there is an accident? So, again, like my other town council, I am opposed to this plant being built. Thank you very much.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VIII. Hazardous Waste Versus Medical Waste
- See III. Plans Not Submitted for Public Review: A. Contingency Plans

**Commenter:** Catherine Webb-Lynch
Question/Comment:

My name is Catherine Lynch. I was recruited to Rhode Island by one of its largest employers. I was enamored with the beautiful waterways, wetlands, forest and oceans. I'm a homeowner very near this proposed site. Why would we want to open up this level of untested technology this close to residential homes, this close to our protected wetland, this close to our ocean and our tourism industry?

A cursory review of research publicly available outlines the risk high heat pyrolysis of medical waste could have. The Journal of Analytical and Applied Pyrolysis in 2020 found that the feedstock, which is waste input, it contains plastic, must be better researched before being included in the pyrolysis process. Outputs of this process could produce C4H4, which has hazard certification and can autodetonate. This means it explodes without air being present. Think about this for just one minute. A citizen -- concerned citizen earlier talked about a plan to evacuate. In an explosion, an evacuation won't matter.

On April 17, in 2013, while I lived in Texas, an ammonia nitrate explosion occurred at the West Fertilizer Company Storage and Distribution Facility in West Texas, 18 miles north of Waco, fifteen people were killed, 160 people were injured, more than 150 million -- sorry -- 150 billion were damaged -- buildings were damaged or destroyed. This explosion was devastating and terrible for the community. This process is different. I fully acknowledge that MedRecycler is not fertilizer, but the repercussion could be very similar and just as devastating. A postmortem of the explosion in West Texas found the facility was pre-approved with agencies not fully understanding what was being stored there, or how to regulate it. I have been to West many times. The bank I worked for had a branch that was destroyed. I saw the devastation that this community had to recover from. There is a very scary parallel here. The research that is publicly available is directly contradictory to safety and any tie to potential green energy and innovation. An expert paid by MedRecycler earlier this evening stated that this is a decision between putting material in a landfill or recycling it. It is not.

The decision, test this where people do not live and do not work. Prove its safety there first. Mark and Yan, this question is for you, would you drop off your child, your niece, your nephew at the daycare facility that shares a parking lot with this proposed location? Would you allow them to play on the playground? Would you allow your teenager to attend college at New England Technology across the street? You have to deny this permit because this technology is completely untested and potentially dangerous.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Pamela Powers

Question/Comment:

Hello. Thank you for the opportunity, Mark and Liz, and my neighbors to allow me to voice my opinion. I'm a fine artist and I absolutely delight in residing in the State of Rhode Island. I find the environment very precious and my neighbors' lives and welfare precious as well.

I am not going to reiterate any of the shortfalls that have already been mentioned so eloquently regarding the licensing approval for not complying with the planning and zoning and environmental concerns.

But I am very much in opposition because there seems to be very little guarantee, besides an assurance by Mr. Campanella, that they will be very much concerned with the health and welfare of Rhode Island residents, especially in the West Warwick area, when they actually haven't even really proven all the dangers involved, due to their lack of science.

I find that without an insurance plan involved we may end up with the same detriment that happened with the company that was Swiss-owned, Ciba-Geigy, that was in New York, where my family has rental property that is difficult to rent because of the proximity to still contaminated land that has been fenced off and is full of litter and clutter still after being closed in 1984, and it took two years for them to actually move out.

So I just want Rhode Island residents to remember our own history with toxic companies. And I don't think that this beautiful state, with the proximity to the ocean, the bays, three important river waterways, can afford to stumble into a chemical disaster that's potential because there's no guarantee and there's no plan financially. And it certainly won't be a financial return to the benefit of the State residents to the degree that it is guaranteed for the benefit of producing jobs and maybe a hundred jobs of builders to the site.

So I find that there's just way too many shortfalls and lack of consideration. So with that, I just want to also add as a professor of glass art, there's a real concern with pyrolysis, and it hasn't been mentioned much, but there is radiation from high-burning processes and that even exists in glass blowing.

And what about the fact that there will be more contaminants and plastics that are mentioned. Plastics being bad enough. Glass takes, degrees to burn and it's going to be residual solid waste in the waste ash that they are proposing if it does contain glass, i.e., needles and things like that.

So given those shortcomings and for the reasons that were stated in the lack to compliance with the licensing on behalf of the DEM's review, I strongly oppose this company moving in. Thank you.
DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See XIII. Concerns Regarding Radioactive Waste
- See XIV. Issues Related to Disposal of Ash
Commenter: Lynn Dressler

Question/Comment:

I have listened for the last few hours. I was particularly interested in Dr. Kahn's comments because I, in fact, am a bladder cancer patient and I am a life-long Rhode Islander and currently reside in East Greenwich.

Rhode Island has the highest cancer rate in the country for bladder, lung, brain, breast, childhood cancers, and thyroid, among many others. I remember Ciba-Geiby, they were the largest polluter of the bay, which took many decades to clean up. So I am not unfamiliar with environmental toxins because bladder cancer is an environmentally-caused cancer.

I would like to ask Mr. Campanella if this is such a great idea and will increase our property values in the entire State of Rhode Island, and will give us so many jobs, and so much more tax revenue, why he isn't putting it in New Jersey, where he can benefit from it because he is a New Jersey resident?

I'm just disgusted that the State continues not protecting this little landmass that we all share for the sake of a few dollars in tax revenue and a few jobs because, you know, when you're dead, the jobs really don't mean anything.

My father died also from bladder cancer. It is not hereditary. It is environmentally caused. And so the fact that he had a job all those years was great, but his job, in fact, caused his bladder cancer because he worked with metal.

We don't know what is going up the chimney when they shoot those 70-plus tons of waste every day. We know it's going to be chemotherapy, it's going to be glass, as the previous lady mentioned. It's going to be plastics, it's going to be all sorts of nasty things that will kill you down the road.

And, again, why are we the guinea pigs? There are 20 -- no. I'm sorry -- 2.5 billion acres of land in the United States. 2.5 billion, almost. Why is our little acreage here in Rhode Island being picked out of those billions of acres for this science experiment, for a few jobs, for a few dollars in extra taxes?

Please, don't insult us. DEM, do your job. Thank you.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
**Commenter:** Tom Oates

**Question/Comment:**

Good afternoon. Mr. Dennen, and ladies and gentlemen, there's a young man I believe that's still in the audience, perspective Eagle Scout, and who did his environmental science merit badge and when he heard about this, and he was on the last Zoom as well, he contacted me, and he has a lot of concerns with this as an environmentalist, and I would have to agree. And I question the environmental stewardship of the State to consider this, and especially the Town of West Warwick.

Currently in West Warwick we have a number of different hotspots. One is the River Point Park recreational area, where we have a dump. We have the Flat Top Park recreational area, where we have another dump. DEM is very well aware of these. And I believe clean-up is in process on one. We also have the 4N properties at 41 and 43 Industrial Lane, that's the property of former Representative Nunes. These properties are all in wetlands. Two of them are on the Pawtuxet River, one just a couple of feet from the Pawtuxet River, which at one point in time was one of the most polluted waterways in New England. Now it's one of the cleanest. But the way things are going, you know, the DEM being on top of this and we want to add another possible major pollutant to our community, that's got to be taken into consideration. And I just wanted to mention that as the concerns of the youth of our communities, especially the Boy Scouts, who are very environmental friendly, always doing clean-up jobs all around the State.

And that's all I have, and I want to thank you for allowing the time to speak.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
Commenter: Jim Cunningham

Question/Comment:

My name is Jim Cunningham, I'm an East Greenwich resident, and coincidentally a cancer survivor.

This whole initiative, this whole project is being sold to us on a -- as a green project. Yet in all the research that I have done, I find no data to support those claims. So if it's not green, well, what are we doing? Let's look at what is being done by the DEM. In the research that is available on this subject and the data that is available, such as newspaper articles, that were done some time ago, what I found was that it seems to have been -- and someone mentioned this earlier -- it seems to have been fast-tracked. There seemed to be some connections here.

The DEM is, and should be, in Rhode Island, very much sacred in the fact that it protects our environment. Environment is in your name. I don't know what has happened with this getting to this point as fast as it has without all of the necessary testing. There are no -- there's no data to suggest that it's green. There's no data that says that it's not dangerous. That has been talked about by multiple speakers previous to me.

I just want to echo the sentiment that some of the speakers have mentioned earlier, DEM, please, be responsible and do your job. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Commenter: David Revens

Question/Comment:

My name is David Revens. I'm here on behalf of Playground Prep Pre-School Childcare Center, which as its name implies, is a preschool that sits to the immediate south of the proposed site.

Like many others, Playground Prep opposes this application, and the reason is simple: The potential harm to the community, and the real risk in relation to that vastly outweighs the potential benefits of the proposed site.

As you have all heard, this process, I'll call it, by which the proposed or by which the applicant proposes to conduct its business simply has not been properly vetted, and to think that this facility could be such a short stroll from our young ones is unfathomable really, and for that reason we oppose the application. Thank you.

DEPARTMENT RESPONSE:
• See I. Issues Related to the Department’s Role in the Permitting Process
Commenter: Eduardo Figueroa

Question/Comment:

Okay. I think it is truly disgraceful that we are giving a business the right to destroy our environment. They tell us it's a cleaner energy, while we all know there's nothing clean about the incineration of human remains. I have seen the location they plan to build it and is next to a daycare center. They have given promises of clean energy and lie about the money they plan to make off of this. If I am correct, this is the same Nick Campanella who was involved in a $45 million mass-priced gouging scheme. And I see no reason why we should trust him with anything, much less our environment. Do not let them pretend like they care about our environment or the people in this town. Nick Campanella upcharged people on what they need to survive and now wants us to forget all that and allow him to build his human waste factory.

Even if everything goes right and we assume there is no issues on-site, they will be burning human remains feet away from a daycare.

I oppose the permit to build here and anywhere else in Rhode Island. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See XVIII. Distinctions within the Category of Human Pathological Wastes
Commenter: Roger Richards

Question/Comment:

I'm a resident of West Warwick, the Greenwood section. I'd like to comment on a couple of things. First off, I am really opposed to this. I am a US war veteran and currently serving in the Rhode Island Air National Guard. I have been deployed over to the Southwest Asia, so I actually know, you know -- I've told I've been near burn pits, so, you know, I also served veterans on the outside of my job. I'm not opposed to jobs, but I'm opposed to these type of jobs you're trying to bring in.

I also am a father -- son of a father. My father was a Viet Nam veteran, who lives also two streets over from me, and is a hundred percent VA disabled due to Agent Orange. Like we're hearing about this company, the government lied to us. It seems like we're getting told lies about this is a great technology.

My wife is also a breast cancer survivor two-and-a-half, three years out. So I heard about cancer, you know, stuffed caused by cancer. I'm definitely opposed, you know, and the fact that we're going to bring in.

The one thing that nobody has mentioned, and I'd like to mention here, and I want to thank the great residents of East Providence for helping out with this, I think about this site -- I think about Erin Brockovich. So everybody just think about that. Erin Brockovich, watch that if you haven't. That's what I think we're in for, another Erin Brockovich if DEM approves this. I hope you guys will, you know, definitely consider not approving this. It should not be approved.

And, lastly, if this does get disapproved, does not go through, everybody needs to watch in the area that the developer or another business might try to bring in the next kind of business in West Warwick, because West Warwick seems to be the dumping ground for all the bad businesses around here. Thank you very much.

DEPARTMENT RESPONSE:
- See I. Issues Related to the Department’s Role in the Permitting Process
**Commenter:** Helene Tay

**Question/Comment:**

Thank you very much, Mark. And thank you for giving me this opportunity. But like everyone else, I don't agree that this plant should go forward. I think DEM should stop processing this application immediately.

My -- I have two big problems with this. One, very little information as to how this plant would be laid out, how it would be ventilated, precisely how the pathogens would be controlled prior to maceration, has been provided to the public. So it leaves the public without cogent questions to ask, and unable to precisely discern the impact to their own health.

Additionally, DEM does not have any regulations that assess pyrolysis systems. The current DEM air pollution control regulations for waste incineration do not apply to the pyrolysis process. DEM engineers have no regulations that they can cite for the approval or disapproval of the MedRecycler plant, and they don't have experience with pyrolysis systems to adequately evaluate MedRecycler's process.

DEM's only choice would be to test while the system is being built, which makes (noise in background) for any harmful solutions that are released during testing. I am not volunteering to be a guinea pig. To me it would mean DEM is not considering my safety.

So it is time for DEM to admit that you don't know what you don't know, and that your ignorance will put citizens in harm's way.

Thank you for the opportunity to express my concerns, and I want to thank East Greenwich residents for being so vocal on this issue.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Patricia Taylor

Question/Comment:

My name is Patricia Taylor. I'm director of the Plastics Waste Reduction Project for EHHI, Environmental & Human Health in Connecticut. The proposed medical waste incinerators you are considering to permit expects to process a significant amount of plastics. EHHI is concerned about the incineration of plastics because of emerging and ongoing science on the health impact of our exposures to plastics and plastic waste.

In addition, fine particle pollution presents an ongoing environmental and climate crisis from local to global communities. We also caution that PFAS, chlorinated chemicals that cause a host of human health harm in very low doses are used to make medical products that include surgical gowns and drapes, implantable and medical devices like vascular grafts, stent grafts, surgical meshes, heart patches, catheter tubes, sterile container filters, needle retrieval systems, tracheostomy, catheter guide wire for laparoscopy and inhaler cannister coating, among other things.

Should you allow this permit, you must protect the health of vulnerable residents who may be exposed to these harmful compounds in air, ash and water pollution created by the facility. If that is your plan, then residents warrant notification in realtime of the air, soil or water in their community that may cause them harm. Please make any air, soil and water quality monitoring test results you require as part of your permitting process to be immediately, easily and continuously available to the public, either in the form of a reverse 911 system or through a health disparities map you produce in coordination with your state health department.

Thank you for your attention, and I'll be submitting this as a written comment as well. I appreciate my ability to participate.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department’s Role in the Permitting Process
• See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
• See III. Plans Not Submitted for Public Review: A. Contingency Plans
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
**Commenter:** Susie Leahy

**Question/Comment:**

Hi, there. Thank you so much for taking my comment. I have a daughter who goes to New England Tech. I live not too far from the area. I'm over there -- it's a stomping ground for everybody in that area when we're doing our shopping, going to visit friends. My heart goes out to the people who have been commenting that -- about their health and their proximity of living right near this facility or want-to-be facility.

DEM has a sacred responsibility to the citizens of Rhode Island, not to a businessman. If the Department of Environmental Management does not include keeping the environment safe, then there needs to be another organization to do that. It's supported by our (inaudible) and to -- and its job is to keep the environment for the people and the animals safe.

If my friend got in trouble the other day for, you know, taking a clam that was an inch too small from, you know, what the limit of clam taking is, and the Department of Environmental Management officer talked to her about that, then certainly the big guns of DEM can argue the point with a businessman from New Jersey about why this isn't for Rhode Island.

I don't want my daughter breathing that in when she goes to school. I don't want the children, who I don't even know at the daycare next door, having to worry about that, their families should not have to worry about this.

I will be putting this in writing. There is far too many people that are concerned about this and it really should not go any step forward. Thank you for letting me comment.

**DEPARTMENT RESPONSE:**

- See *I. Issues Related to the Department’s Role in the Permitting Process*
- See *II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process*
- See *IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit*
**Commenter:** Rusty

**Question/Comment:**

Not much to add. Just from my own house, except for the fact that I work there at that building right next store, with no buffer in between, outside of the thin wall that's there already in place. And the worry of anything that could possibly negatively happen to me healthwise, being so close, if anything happens, like I'm -- I have no choice, I'm either SOL or I can bring something home. I have to worry about bringing something home to my family, and that's not something that I should have to even have on my mind. And not to mention the fact that my son's daycare is right down the street as well, along with the one right outside the building.

Anyway, it's just -- this doesn't make any sense to me that something like this is going to be in a multiple ten-apartment residential area. Makes no sense. That's basically about it.

**DEPARTMENT RESPONSE:**

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Commenter: Jay Ferguson

Question/Comment:

I just want to introduce myself. I'm an East Greenwich resident at Signal Ridge Way across the street, and also a pulmonary physician. I wanted to have a moment to just be able to relay concerns, you know, as a physician, and a pulmonary physician at that, my responsibility is to advocate for the health of everyone that I take care of within the community in which they live. So I am in no way in support of the burning of medical waste within Kent County, or any other community in Rhode Island, or the United States or internationally, in the method that's being proposed.

There's a dichotomy that I don't quite understand how it's being proposed. This is either new technology and unproven or it's old technology and that old technology, which people have mentioned, is available widely, as far as incineration has, like, inexplicably tied to a number of different health adverse effects, specifically respiratory in regards to asthma, lung cancer. And then there's a number of neoplastic processes, lymphoma. And basically every cancer that you can think of there's been ties to proximity to incineration-type facilities.

Now, the problem is that you're not going to be able to have the data to be able to show this in a short period of time. This is things that are going to show up years down the line and they will be Rhode Island residents who are similar to those who have spoken already tonight, who will be diagnosed with lymphomas, bladder cancers, lung cancers, and they will not be able to directly tie their links to this.

However, if we're going to say this is somewhat similar, which I believe it is, to many other propositions that have been done before and rejected by Rhode Island, that this is just an unsafe way to get rid of a -- I think a real problem, in that landfills need to have an alternative. This is not a solution, but I think it is in the best interest of Rhode Island.

There are many communities that have needed to combat incineration near their communities. There is a 20-year-old now named Destiny Watford, in Baltimore, who was just awarded one of the most prestigious international environmental awards that there is to be given, who advocated to stop an incinerator being constructed in her community in Baltimore. The incinerator that had been placed in one of the densely-populated areas in Baltimore has estimated to be responsible for nearly $55 million worth of increased healthcare costs.

And my biggest concern overall is that this is not in the interest of Rhode Island residents and the Department of the Environmental -- sorry -- protection agencies that are at stake need to be a third party. This right now seems to be, if I was to compare it to a medical standpoint, it's like an in-lab, theoretically this could be done in a somewhat clean process. However, it has not had a clinical trial or a human trial. So if it's untested, it is unfit to be unleashed to this scale, to this magnitude, without serious vetting by parties
that do not have the vested interest in the technology, but invested interests in the safety of the community.

I just date back to the 1990's, we already passed legislation in Rhode Island state -- I am quoting Rhode Island law that due to the myriad of over 400 toxic pollutants, including lead, mercury, dioxins and ash gases to be emitted during solid waste incinerators, the known and unknown threats posed by solid waste incineration health, safety of Rhode Islanders, particularly children, along with those of unknown threats, are -- enter the environment, are unacceptable.

Despite the use of state-of-the-art landfill liner systems, leach collecting system plants, both particularly incinerator ash, landfills release toxic leaching into the ground and surface waters, which pose an unacceptable threat to the public, the environment, the state limits ground and surface water resources. The incinerator of solid waste is the most costly method waste disposable known and unknown escalating costs place substantial and unreasonable burdens on the state, municipal budgets and seriously jeopardize the public's interest.

So this is already -- then I know this is unproven, but if we are going back and saying this is somewhat similar to what has happened in other areas of the United States, it has been costly, it has been thought out, and it has been rejected multiple times.

I would strongly encourage that we continue to reject this and do not make a similar mistake as other the areas of the country have unfortunately been done so to not be able to block incinerators such as this. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VIII: Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
Commenter: Amy

Question/Comment:

Thank you for the opportunity to speak. I feel special that I'm speaking towards the end because I was the first person to speak out against this at the West Warwick Town Planning meeting in May of 2019. I had concerns then, many of which have never been answered to this day.

I live across the street from 1600 Division Road where this site is, which is a light industrial area. This one building, it is not an industrial park, as it's made out to be by some people who are trying to sell this as a safe area for this to be built.

I want to point out -- I have kind of rewritten what I wanted to say during this because so many of you have done such a great job voicing concerns about this. The 70 tons of waste that they're proposing is only the first phase of what they would like to do. So the permit that is being questioned is for the 70 tons, but that's the first phase.

I'm very concerned about the fact that inner-state waste is going to be coming up 95 or down 95, whichever way you want to look at it, and it's going to be accepted at this facility, but it is not allowed to come from out of state to go to the landfill because we don't accept out-of-state waste at the landfill. So accepting waste from all over the northeast into Rhode Island for this facility baffles me. I'm not sure how that's -- how that's going to be legal.

When Mr. Campanella spoke earlier, he said that he guaranteed safety of this project. That he guaranteed safety. There is no possible way that you can guarantee safety with an unproven technology. It's never been used for medical waste. Not to mention the fact that accidents happen at facilities managed by human beings. What about fires or spills or a hazard? Something that needs to be cleaned up? The effects of just, you know, our health, which has been talked about repeatedly tonight, the groundwater, the soil, a truck, a vehicle accident. What training are the workers in this facility going to have? What safety checks are being done?

At the last DEM meeting you stated that you were not sure how often testing would happen due to your staffing. You admitted publicly that you weren't sure what the schedule would be for DEM to be there to test and we were to just rely on this facility to test itself.

There's no way to test it safely. It would have to go online first, and whatever DEM uses in those testings -- in the testings would not necessarily be what's coming in. They're going to take in material and they don't even know what's in it. They have admitted they have no idea. Every day they could be burning something different. Every box could contain something different. They keep saying that there's a lot of banned materials that will not be accepted. How will they know? They won't know because they're not looking at those boxes. They're shredding them and then burning them.
I'm really unsure, and I have no scientific background of how you would test something when you have no idea what it's going to accept or what is going to be there. There's no way the statistics stated previously, saying the emissions were going to be this percentage of this and under this percentage of that, how would they know? They could never know because Tuesday could be different than Friday.

Mr. Campanella stresses these jobs and he claims he's going to create these jobs, but at what cost? I am not opposed to any businesses in West Warwick. I own a business in West Warwick. My business is on Main Street in West Warwick. But at what expense? There's no way that 30 jobs, or whatever they're going to tell you that they're creating, is going to have any impact on the tax base in West Warwick. He's quoting that he's going to spend $4 million in taxes over the next ten years. I challenge that, because what is he paying in taxes? He doesn't own that building. He's going to pay West Warwick the same way every other business does based on what they have in his facility, what he owns. I highly doubt that that's going to amount to $400,000 a year.

For those attending this meeting who don't live in Rhode Island, you're solely here because you're an investor, and in my opinion you don't carry any weight. You're using our state to make a personal profit. This is a business that is waiting to open so they can collect their promised bond money on fallacies, and, you know, trying to create this, We're green and clean, with no backing of that whatsoever. It's amazing to see our diverse community come together and voice your concerns against this project.

I encourage you to continue to send letters and all of these things to DEM, anything you stated here tonight. And I appreciate you telling your friends and neighbors. Thank you so much.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See III. Plans Not Submitted for Public Review: B. Biological Testing Protocols
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See VIII: Hazardous Waste Versus Medical Waste: A. Groundwater and Surface Water Bodies at Risk
- See XII: Department Staffing Issues
• See XVII. Out of State Waste
Commenter: Derek

Question/Comment:

I have been sitting here all night listening to this. As far as the incinerator goes, I got my own opinions, I'll keep those to myself as of right now. But the biggest thing that I think we all need to understand and know, is this is going to be through West Warwick, and the West Warwick planner and town officials, they and the DEM finance a lot of what I'm going to talk about.

So there's a playground in town financed by the DEM with a grant, and just so everybody knows, the town planner couldn't successfully put a handicapped playground together. It's actually closed right now until it's put together properly. So I'm a little worried that the planning department will have a lot to do with this type of business being put together in the town. I'm pretty sure a lot of things will get overlooked, probably not intentional, just from not having experience.

There's a planning board and planning -- the town planner itself in town, where there's multiple DEM violations dating back to, the planner still went and ahead and did a subdivision in West Warwick. Never -- didn't know enough to go and look for the DEM, make sure that the land is clear for any DEM violations.

So I just want to bring that to everybody's attention that the Town of West Warwick, in my opinion, is far from experienced enough to put this project together. And as far as the business itself, I'm not completely sold, but I'm going to keep my opinions to myself at this moment. And that's it.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
Commenter: Representative Serpa

Question/Comment:

Okay. I just want to thank you for acknowledging me, and I certainly want to apologize to anyone who thought I wasn't interested or that I wasn't present. I did have someone seat in for me and take some notes, but I had a personal emergency to deal with earlier. I think I've got that squared away as I can. So, I do want to make my apologies and let people know why I wasn't here from the beginning.

So that being said, I certainly don't want to be redundant. I don't want to repeat everything that has likely been said. I've done my own research. I'm trying to understand this process. At the moment I just don't think we're ready for this process. I don't think it belongs in West Warwick. I don't think it belongs in East Greenwich. And, frankly, I don't think it belongs anywhere in Rhode Island. There is just too much potential -- and I'm sure this has all been said, so forgive me for the redundancy. I'm sure this has all been said, but when I think of the damage to a densely packed residential area breathing that air, close to an elementary school, close to a playground, close to the playground at the elementary school, close to a daycare, the dorms at New England Tech, I think of the possible spills on that turn from Route into Division Road. And, frankly, I just don't think the technology is well perfected or perfected to the degree that we should frankly welcome it with open arms.

I know my constituents remain totally opposed to this. I haven't had one person contact me to express that, yes, this is good for our town, good for our economy. So, I'm going to stand firmly opposed. So, Mark, I just wanted to go on record and let everyone know that I am present, and I certainly will review the notes that were taken for me earlier. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
- See III. Plans Not Submitted for Public Review: A. Contingency Plans
Commenter: Councilman Jay Messier

Comment/Question:
Thank you. I really -- there's nothing else for me to say other than what John said, but I just want to clarify that this has never come before the West Warwick Council. I know a lot of people have been messaging me and my fellow council members. I share all your concerns as well, and I'm in this information for the same reason a lot of you, to get some information and if it at any point it comes before us, that we'll cross that bridge, but right now I'm trusting the DEM to make the right decision, whatever that is. Thank you

DEPARTMENT RESPONSE:
• No response needed.
Commenter: Jim Mallowney

Comment/Question:

I'm a chemist on the hazardous waste disposal business for over 30 years. President of a company called Pharma-Cycle, and we collect, contain and destroy cytotoxic chemotherapy drugs contained in human waste. So I gave this presentation at -- to the EPA in 2009, entitled Drugs are Chemicals Too, as a result, almost every medical waste incinerator in the country was (inaudible). MedRecycler's plant is fine for treating biological hazards, but it doesn't work with chemicals. And that's where everybody here is missing the point. Not everybody. What's not taken into consideration is other dangerous medical waste, such as common chemotherapy drugs, control cancer patients, human waste, it comes right out of the stack of this facility. These chemicals are mutagenetic, which means cause birth defects, miscarriages, and many other well-documented horrible, horrible effects. They're also teratogenic, which means it skips a generation before it causes birth defects. What the system does not do is eliminate any of those hazards. So the US regulation covering waste incineration prohibits pharmaceuticals from entering a medical waste incinerator period. It's if you really want to get into the details. These chemicals will end up in our air, in our bay, in our soil, in our drinking water. 2019, United States Pharmacopeia, a regulatory body for the FDA issued regulations to control these chemicals so that there's zero human exposure, even OSHA. Yet we take these chemicals from people and we are going to put them in this incinerator. The body fluids that we're going to put into this incinerator, you don't have to worry about the medical waste part of it, or the pathogens, you're going to have to worry about the chemical waste part of it. It is illegal to even put the wrapper from some of these chemotherapy drugs in the trash. Yet, we pump people full of these drugs, blow up like a balloon and then we send them home to their families. Up to 90 percent of it is excreted in their clothes, their sheets, into families, their homes, their septic systems and wells. And everyone is drinking water. If they're not flushed down the toilet, they're going to be collected and they're going to be sent to this facility where it's going to go straight up in the air. Our company, Pharma-Cycle, is currently working with Avena out in Denmark, and they're collecting the human waste from patients undergoing certain chemotherapy treatments. And we're doing it effectively and safely. The European Union recognizes the dangers of cytotoxic drugs and their excretions. The Rhode Island DEM recognizes the dangers of extremely hazardous wastes and even regulates them. In 2014, the Rhode Island DEM set a new category of hazardous waste called extremely hazardous waste, and its chemotherapy drugs and it includes the excretion of these chemicals. The DEM will say, Well, we can't force people's bodies. Like, these excretions are so deadly, when they hit one of these incinerators they're just going to explode into our air, and they know it. And they can’t regulate our bodies. Tell that to my face mask. Even the Department of Defense shut down their chemical weapon incinerators for the same reasons. We fight chemistry with chemistry. Approval of the MedRecycler plant as written is extremely unsafe and should be denied

DEPARTMENT RESPONSE:

• See VIII. Hazardous Waste Versus Medical Waste
• See I. Issues Related to the Department’s Role in the Permitting Process
• See I. Issues Related to the Department’s Role in the Permitting Process: C. Issues Related to Sewage Discharge
• See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
Commenter: Marisa Kambour

Comments/Questions:

My name is Marisa Kambour and I am commenting as a resident of East Greenwich, a parent, and a concerned local citizen, to oppose any permits for MedRecycler to build a medical waste facility in West Warwick. We're in the midst of a global climate crisis. More than ever the choices we make about our waste, our emission and our resources need to put the health of the planet at the forefront. As the Ocean State, Rhode Island should be positioning itself as a leader in true green technology. MedRecycler is trying to greenwash their operation by using words such as renewable, but there's nothing green or environmentally friendly about their proposal. To begin, they would require a significant amount of external energy sourced from fossil fuels to achieve the high temperatures needed for pyrolysis. Next, they would be generating and burning materials filled with toxins, emitting 20,000 tons of carbon dioxide and other pollutants, the same as those created by waste incineration, every year. What is green or renewable about any of that? Approving this facility would be an embarrassment to our state and our fellow residents. The equivalent is saying that Rhode Island is not taking the threat of climate seriously. Health and safety also need to be prioritized here. MedRecycler's facility simply cannot meet Rhode Island's medical waste regulations, which prior approved that its technology is, I quote, protected with respect to total impact on the environment, as well as ensuring, quote, the health, safety and welfare of both facility employees and the general public. This technology has not been tested on medical waste. Taking large amounts of hazardous material, including up to 25 percent of plastic, and subjecting them to incredibly intense temperatures is not what a logical person could call inherently safe. The long-term risks of human exposure to such processes and toxins are unknown. And even a small accident could have a disastrous impact on the community. If this is the case, how can MedRecycler prove that its proposal is safe for the environment, its employees or the community members? I ask you to please err on the side of caution, instead of choosing to jeopardize our health and safety. This facility does not belong in West Warwick. It does not belong in Rhode Island. And it does not belong anywhere on this planet. It's not worth the harm that it will do or any of the accompanying risks

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See VII. Transportation of Waste Through the Community
- See VIII. Hazardous Waste Versus Medical Waste
Commenter: Joe Walsh

Comment/Question:

My name is Joe Walsh. I want to thank you for the time to allow me to speak. I'm the business manager for IBW Local Union 99. I represent 800 women and men and the actual craftworkers who live and work in all 39 cities and towns in the State of Rhode Island, including West Greenwich and East Greenwich -- West Warwick and East Greenwich. Excuse me. I am not a scientist and I am not qualified as you here tonight are commenting on the environmental impact of this facility. I will only comment that this project will provide great jobs for our membership, while it tackles a complex issue of disposable medical waste. The project will also bring needed tax revenue into the city, while creating renewable energy for an estimated 1,000 homes. I certainly would urge approval of this project when the developer has met the standards required to safely manage this facility. I thank you for your time, and have a good evening.

DEPARTMENT RESPONSE:

• See I. Issues Related to the Department's Role in the Permitting Process
Commenter: Donna Sullivan

Comment/Question:

Hi. My name is Donna Sullivan. I am a mom and a concerned citizen from North Kingstown, and I just wanted to attend this meeting to learn a little bit more about it. I obviously have a lot of concerns, as do many of the people that have already voiced. Within my own neighborhood we've talked a lot about the fact that this project has not gone through some of the proper processes here in the State of Rhode Island, which I just think is shocking. And it just seems like there's so much uncertainty, and it's just a huge risk. So I am asking you to reconsider this until there's more information provided and just, you know, don't risk our kids, and our families, and our future. This seems like something that there's just so many unknowns. So with that, I am just going to say thank you for letting us have this hearing, and thank you for giving me an opportunity to speak.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
Commenter: Kevin Budris

Comment/Question:

My name is Kevin Budris and I work with the Conservation Law Foundation or COF. We are a member supported nonprofit organization that works to protect New England's environment for all people. So I oppose this proposed facility and we urge DEM to deny MedRecycler's medical waste treatment facility license application. The application fails to comply with several key Rhode Island medical waste and solid waste regulations. COF will also be submitting written comments. Before I proceed, I would just urge DEM to listen to the outpouring of concern that you have already heard, and that you're going to continue to hear tonight from members of the West Warwick and East Greenwich communities. There's significant shortcomings in this information and the people in these communities are right to be concerned here. And just to be clear about what's being proposed here, according to MedRecycler's application, the company hopes to take in about 70 tons of medical waste per day, shred this waste, dry it, heat it to more than 1400 degrees Fahrenheit, in the absence of oxygen, which will generate gaseous hydrocarbons or what they're referring to as sin gas, tars, oils and solid waste like ash and char. MedRecycler plans to burn both the sin gas and the tars and oils on-site at 1600 Division Road. So some of the statements that have been made have been no burning will occur at this facility, just aren't true. And also, according to MedRecycler's application, it does not have a disposal plan for the ash and char that are going to be generated at this facility. The documented history of waste gasification pyrolysis suggests that none of this is clean, environmentally friendly or renewable. In particular, waste-derived fuels, like the sin gas that MedRecycler is proposing to create at this site, has significant emissions profiles, that include heavy metals and persistent organic pollutants. Gasification pyrolysis throughout the world have struggled to comply with environmental regulations. And many have closed within several years of coming online, even communities with legacies of pollution and financial failure. Importantly, the equipment at issue here, MedRecycler's equipment has never been used on medical waste. Only one other facility in the country has attempted to pyrolysize medical waste, at a much smaller scale, and that reports that facility, Monarch Waste Technologies in Mexico is now closed. With that background in mind, I'd like to point out just a few regulatory provisions with which the application here does not comply. First, Rhode Island Medical Waste Regulation Sections 1-15 at 4 and at 5, require that when an applicant proposes alternative technology, that DEM shall not approve the technology unless and until such technology is proven on the basis of thorough test to be protective with respect to total impact on the environment and to ensure that health, safety and welfare of the facility employees and the general public. Nowhere does MedRecycler's application layout the results of thorough testing that would prove that this technology, when used on medical waste, is protective of the environment or safe for facility employees or the public. Also, according to Rhode Island's medical waste regulations, medical waste treatment facilities also subject to regulations for solid waste management facilities. Section 1.9P of those regulations requires that all solid waste facilities must maintain a buffer zone around them to mitigate nuisance impacts. A buffer zone needs to be in the area of undeveloped vegetative land that's retained in its natural, undisturbed condition or the equivalent.
There's no such buffer zone around the space that MedRecycler is proposing to build at this site. For these reasons, and for reasons that I'll set out in our written comments, CFO urges DEM to deny its application. Thank you very much.

DEPARTMENT RESPONSE:

- See XIV. Issues Related to Disposal of Ash
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit
- See XI. Monarch Pyrolysis Facility in New Mexico
- See XVI. Buffer Zone
- See III. Plans Not Submitted for Public Review: C. Financial Assurance Documentation
Commenter: Philip Parsons

Question/Comment:

My name is Phil Parsons. I'm vice president and general counsel at New England Institute of Technology. New England Tech's primary concern is for the safety of the students and faculty and the staff. And the things I have heard from everybody tonight, we -- we're right in the same place as the residents are. The proposed MedRecycler plant is less than half a mile from the college's East Greenwich campus. The campus fronts Division Road over which trucks hauling medical waste will be traveling to the facility. And given the potentially deadly consequences of any failure of the process, the unproven nature of the technology, the facility's proximity to the college, the college raises an objection and concern with the issuance of a solid waste management facility and license. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See II. Risk of Pathogens Associated with Regulated Medical Waste and the Innovative/Experimental Nature of the Process
- See VII. Transportation of Waste Through the Community
Commenter: Mary Madden

Question/Comment:

Okay. My comment is very, very short. I'm, my husband is. We live in East Greenwich. We have four grandchildren -- son, daughter-in-law, four grandchildren in East Greenwich, but this is really a question about for everyone. It's not just for us. It's what kind of world do we want to leave our children?

Now, I've been in public education for years. I retired three years ago. Almost of those years -- yes, of those years were in teaching chemistry, and you had a chemist on earlier and he was -- he was accurate in everything he said.

One thing I would just add is this, pyrolysis can split down, can crack down, can break down lots of stuff, but when you get down to it, as this gentleman mentioned, the cancer treatment medications or the arthritis medications or any number of medications, you have what are called organometallics, and when you break them all down, you have heavy metals, and those go somewhere. They cannot be broken down further. They're elements. They are mercury, they're lead, they're arsenic, they're chromium, they're gold. You could just go on and on and on. They cannot be broken down. And they persist in the environment, whether they're airborne or whether they are residue -- particulate residue that gets into the ground. It gets into the human system. We don't want to leave that for our children or our grandchildren. We don't. That's the bottom line.

Thank you very much. It was a wonderful -- people were wonderful in what they presented. Thank you.

DEPARTMENT RESPONSE:

- See I. Issues Related to the Department’s Role in the Permitting Process
- See XIV. Issues Related to Disposal of Ash
- See IV. Issues Related to Air Emissions, Air Pollution Control Regulations and the Minor Source Air Permit