



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

JUN 24 2008

REPLY TO THE ATTENTION OF:

SC-6J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Boar's Head Provisions Company
Kimberly Wise
Environmental Manager
2230 Wyatts Mill Road
Jarratt, Virginia 23867

RE: Complaint and Expedited Settlement Agreement
ESA Docket No. RMP-08-ESA-008
Docket No. **CAA-05-2008-0023** *BD#* 2750803A021

Dear Ms. Wise:

Enclosed please find a copy of the fully executed Expedited RMP Settlement Agreement (ESA). The ESA is binding on EPA and Respondent. EPA will take no further action against Respondent for the violations cited in the ESA. The ESA requires no further action on your part.

Please feel free to contact Monika Chrzaszcz at (312) 886-0181, or Chrzaszcz.monika@epa.gov, if you have any questions regarding the enclosed document or if you have any other question about the program. Thank you for your assistance in resolving this matter.

Sincerely yours,

Mark J. Horwitz, Chief
Chemical Emergency
Preparedness & Prevention Section

Enclosure(s)



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

EXPEDITED SETTLEMENT AGREEMENT (ESA)

REPLY TO THE ATTENTION OF:

DOCKET NO: RMP-08-ESA-008

This ESA is issued to: Boar's Head Provisions Company

At: 284 Roost Ave., Holland, Michigan 49424

for violating Section 112(r)(7) of the Clean Air Act.

CAA-05-2008-0023

BD#: 2750803A021

This Expedited Settlement Agreement (ESA) is being entered into by the United States Environmental Protection Agency (EPA), Region 5, by its duly delegated official, the Director, Superfund Division, and by Respondent pursuant to Section 113(a)(3) and (d) of the Clean Air Act, 42 U.S.C. § 7413(a)(3) and (d), and by 40 C.F.R. § 22.13(b). On November 13, 2007, EPA obtained the concurrence of the U.S. Department of Justice, pursuant to Section 113(d)(1) of the Act, 42 U.S.C. §7413(d)(1), to pursue this administrative enforcement action.

ALLEGED VIOLATIONS

On October 3, 2007 an authorized representative of the EPA conducted a compliance inspection of the subject facility (Respondent) to determine compliance with the Risk Management Plan (RMP) regulations promulgated at 40 C.F.R. Part 68 under Section 112(r) of the Act. EPA found that the Respondent had violated regulations implementing Section 112(r) of the Act by failing to comply with the regulations as noted on the attached RISK MANAGEMENT PLAN INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET (FORM), which is hereby incorporated by reference.

SETTLEMENT

In consideration of Respondent's size of business, its full compliance history, its good faith effort to comply, and other factors as justice may require, and upon consideration of the entire record the parties enter into the ESA in order to settle the violations, described in the attached FORM for the total penalty amount of **\$3,150.00**

This settlement is subject to the following terms and conditions:

The Respondent by signing below waives any objections that it may have regarding jurisdiction, neither admits nor denies the specific factual allegations contained in herein and in the FORM, and consents to the assessment of the penalty as stated above. Respondent waives its rights to a hearing afforded by Section 113(d)(2)(A) of the Act, 42 U.S.C §7413(d)(2)(A), and to appeal this ESA. Each party to this action shall bear its own costs and fees, if any. Respondent also certifies, subject to civil and criminal penalties for making a false submission to the United States Government, that the Respondent has corrected the violations listed in the attached FORM and has sent a cashier's check or certified check (payable to the "Treasurer, United States of America") in the amount of **\$3,150.00** in payment of the full penalty amount to the following address:

US Environmental Protection Agency
Fines and Penalties
Cincinnati Finance Center
PO Box 979077
St. Louis, MO 63197-9000

The DOCKET NUMBER OF THIS ESA **must be included on the check.** (The DOCKET NUMBER is located at the top left corner of this ESA.)

This original ESA and a copy of the check must be sent by certified mail to:

Monika Chrzaszcz
Chemical Emergency
Preparedness and Prevention Section (SC-6J)
U.S. Environmental Protection Agency
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

Upon Respondent's submission of the signed original ESA, EPA will take no further civil action against Respondent for the alleged violations of the Act referenced in the FORM. EPA does not waive any other enforcement action for any other violations of the Clean Air Act or any other statute.

If the signed original ESA with an attached copy of the check is not returned to the EPA Region 5 office at the above address in correct form by the Respondent within 45 days of the date of Respondent's receipt of it (90 days if an extension is granted), the proposed ESA is withdrawn, without prejudice to EPA's ability to file an enforcement action for the violations identified herein and in the FORM.

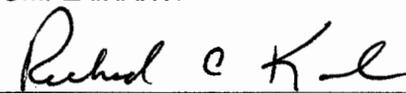
This ESA is binding on the parties signing below.

This ESA is effective upon filing with the Regional Hearing Clerk.

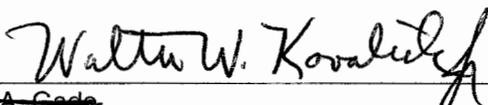
FOR RESPONDENT:

Signature:  Date: 5-14-08
Name (print): John T. Campbell
Title (print): Director Environmental Health & Safety
Boar's Head Provisions Company

FOR COMPLAINANT:

 Date: 6-18-08
Richard C. Karl, Director
Superfund Division

I hereby ratify the ESA and incorporate it herein by reference. It is so ORDERED.

 Date: 6/18/08
~~Mary A. Gade~~
Regional Administrator Bharat Mathur, Acting
Regional Administrator

CAA-05-2008-0023

RECEIVED
REGIONAL HEARING CLERK
US EPA REGION V
2008 JUN 24 AM 11:10

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

Program Level 3 Process Checklist

CAA-05-2008-0023

Facility Name: Boars Head Provisions Company, 284 Roost Ave., Holland, Michigan 49424

Date RMP submitted: <u>4/13/00 - Initial</u>		Date process(es) came online: <u>1999</u>
Section A-Management [68.15]		
Management system developed and implemented as provided in 40 CFR 68.15? Comments:		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> N/A
Has the owner or operator:		
1. Developed a management system to oversee the implementation of the risk management program elements? [68.15(a)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
2. Assigned a qualified person or position that has the overall responsibility for the development, implementation, and integration of the risk management program elements? [68.15(b)] <i>Herb Frohlich has been assigned overall responsibility for the development, implementation, and integration of the risk management program elements.</i>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Documented other persons responsible for implementing individual requirements of the risk management program and defined the lines of authority through an organization chart or similar document? [68.15(c)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Section B: Hazard Assessment [68.20-68.42]		
Hazard assessment conducted and documented as provided in 40 CFR 68.20-68.42? Comments:		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> N/A
Hazard Assessment: Offsite consequence analysis parameters [68.22]		
1. Used the following endpoints for offsite consequence analysis for a worst-case scenario: [68.22(a)] <input checked="" type="checkbox"/> a. For toxics: the endpoints provided in Appendix A of 40 CFR Part 68? [68.22(a)(1)] <input type="checkbox"/> b. For flammables: an explosion resulting in an overpressure of 1 psi? [68.22(a)(2)(i)] or <input type="checkbox"/> c. For flammables: a fire resulting in a radiant heat/exposure of 5 kw/m ² for 40 seconds? [68.22(a)(2)(ii)] or <input type="checkbox"/> d. For flammables: a concentration resulting in a lower flammability limit, as provided in NFPA documents or other generally recognized sources? [68.22(a)(2)(iii)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
2. Used the following endpoints for offsite consequence analysis for an alternative release scenario: [68.22(a)] <input checked="" type="checkbox"/> a. For toxics: the endpoints provided in Appendix A of 40 CFR Part 68? [68.22(a)(1)] <input type="checkbox"/> b. For flammables: an explosion resulting in an overpressure of 1 psi? [68.22(a)(2)(i)] <input type="checkbox"/> c. For flammables: a fire resulting in a radiant heat/exposure of 5 kw/m ² for 40 seconds? [68.22(a)(2)(ii)] <input type="checkbox"/> d. For flammables: a concentration resulting in a lower flammability limit, as provided in NFPA documents or other generally recognized sources? [68.22(a)(2)(iii)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Used appropriate wind speeds and stability classes for the release analysis? [68.22(b)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Used appropriate ambient temperature and humidity values for the release analysis? [68.22(c)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
5. Used appropriate values for the height of the release for the release analysis? [68.22(d)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
6. Used appropriate surface roughness values for the release analysis? [68.22(e)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
7. Do tables and models, used for dispersion analysis of toxic substances, appropriately account for dense or neutrally buoyant gases? [68.22(f)]		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

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8. Were liquids, other than gases liquefied by refrigeration only, considered to be released at the highest daily maximum temperature, based on data for the previous three years appropriate for a stationary source, or at process temperature, whichever is higher? [68.22(g)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Hazard Assessment: Worst-case release scenario analysis [68.25]	
9. Analyzed and reported in the RMP one worst-case release scenario estimated to create the greatest distance to an endpoint resulting from an accidental release of a regulated toxic substance from covered processes under worst-case conditions? [68.25(a)(2)(i)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
10. Analyzed and reported in the RMP one worst-case release scenario estimated to create the greatest distance to an endpoint resulting from an accidental release of a regulated flammable substance from covered processes under worst-case conditions? [68.25(a)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
11. Analyzed and reported in the RMP additional worst-case release scenarios for a hazard class if the a worst-case release from another covered process at the stationary source potentially affects public receptors different from those potentially affected by the worst-case release scenario developed under 68.25(a)(2)(i) or 68.25(a)(2)(ii)? [68.25(a)(2)(iii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
12. Has the owner or operator determined the worst-case release quantity to be the greater of the following: [68.25(b)] <input checked="" type="checkbox"/> a. If released from a vessel, the greatest amount held in a single vessel, taking into account administrative controls that limit the maximum quantity? [68.25(b)(1)] <input type="checkbox"/> b. If released from a pipe, the greatest amount held in the pipe, taking into account administrative controls that limit the maximum quantity? [68.25(b)(2)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13a. Has the owner or operator for <u>toxic substances</u> that are <u>normally gases at ambient temperature and handled as a gas or liquid under pressure</u> :	
13.a.(1) Assumed the whole quantity in the vessel or pipe would be released as a gas over 10 minutes? [68.25(c)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13.a.(2) Assumed the release rate to be the total quantity divided by 10, if there are no passive mitigation systems in place? [68.25(c)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
13.b. Has the owner or operator for <u>toxic gases</u> handled as <u>refrigerated liquids at ambient pressure</u> :	
13.b.(1) Assumed the substance would be released as a gas in 10 minutes, if not contained by passive mitigation systems or if the contained pool would have a depth of 1 cm or less? [68.25(c)(2)(i)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.b.(2) [Optional for owner / operator] Assumed the quantity in the vessel or pipe would be spilled instantaneously to form a liquid pool, if the released substance would be contained by passive mitigation systems in a pool with a depth greater than 1 cm? [68.25(c)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.b.(3) Calculated the volatilization rate at the boiling point of the substance and at the conditions specified in 68.25(d)? [68.25(c)(2)(ii)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c. Has the owner or operator for <u>toxic substances</u> that are <u>normally liquids at ambient temperature</u> :	
13.c.(1) Assumed the quantity in the vessel or pipe would be spilled instantaneously to form a liquid pool? [68.25(d)(1)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(2) Determined the surface area of the pool by assuming that the liquid spreads to 1 cm deep, if there is no passive mitigation system in place that would serve to contain the spill and limit the surface area, or if passive mitigation is in place, the surface area of the contained liquid shall be used to calculate the volatilization rate? [68.25(d)(1)(i)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(3) Taken into account the actual surface characteristics, if the release would occur onto a	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

Program Level 3 Process Checklist

Facility Name: Boars Head Provisions Company, 284 Roost Ave., Holland, Michigan 49424

surface that is not paved or smooth? [68.25(d)(1)(ii)]	
13.c.(4) Determined the volatilization rate by accounting for the highest daily maximum temperature in the past three years, the temperature of the substance in the vessel, and the concentration of the substance if the liquid spilled is a mixture or solution? [68.25(d)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(5) Determined the rate of release to air from the volatilization rate of the liquid pool? [68.25(d)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.c.(6) Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners upon request? [68.25(d)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d. Has the owner or operator for <u>flammables</u> :	
13.d.(1) Assumed the quantity in a vessel(s) of flammable gas held as a gas or liquid under pressure or refrigerated gas released to an undiked area vaporizes resulting in a vapor cloud explosion? [68.25(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d.(2) For refrigerated gas released to a contained area or liquids released below their atmospheric boiling point, assumed the quantity volatilized in 10 minutes results in a vapor cloud? [68.25(f)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
13.d.(3) Assumed a yield factor of 10% of the available energy is released in the explosion for determining the distance to the explosion endpoint, if the model used is based on TNT-equivalent methods? [68.25(e)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
14. Used the parameters defined in 68.22 to determine distance to the endpoints? [68.25(g)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
15. Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners upon request? [68.25(g)] a. What modeling technique did the owner or operator use? [68.25(g)] <i>Look up tables were used.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
16. Ensured that the passive mitigation system, if considered, is capable of withstanding the release event triggering the scenario and will still function as intended? [68.25(h)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
17. Considered also the following factors in selecting the worst-case release scenarios: [68.25(i)] <input type="checkbox"/> a. Smaller quantities handled at higher process temperature or pressure? [68.25(i)(1)] <input type="checkbox"/> b. Proximity to the boundary of the stationary source? [68.25(i)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Hazard Assessment: Alternative release scenario analysis [68.28]	
18. Identified and analyzed at least one alternative release scenario for each regulated toxic substance held in a covered process(es) and at least one alternative release scenario to represent all flammable substances held in covered processes? [68.28(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
19. Selected a scenario: [68.28(b)] <input checked="" type="checkbox"/> a. That is more likely to occur than the worst-case release scenario under 68.25? [68.28(b)(1)(i)] <input type="checkbox"/> b. That will reach an endpoint off-site, unless no such scenario exists? [68.28(b)(1)(ii)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

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20. Considered release scenarios which included, but are not limited to, the following: [68.28(b)(2)] <input type="checkbox"/> a. Transfer hose releases due to splits or sudden hose uncoupling? [68.28(b)(2)(i)] <input type="checkbox"/> b. Process piping releases from failures at flanges , joints, welds, valves and valve seals, and drains or bleeds? [68.28(b)(2)(ii)] <input type="checkbox"/> c. Process vessel or pump releases due to cracks, seal failure, or drain, bleed, or plug failure? [68.28(b)(2)(iii)] <input checked="" type="checkbox"/> d. Vessel overfilling and spill, or overpressurization and venting through relief valves or rupture disks? [68.28(b)(2)(iv)] <input type="checkbox"/> e. Shipping container mishandling and breakage or puncturing leading to a spill? [68.28(b)(2)(v)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
21. Used the parameters defined in 68.22 to determine distance to the endpoints? [68.28(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
22. Determined the rate of release to air by using the methodology in the RMP Offsite Consequence Analysis Guidance, any other publicly available techniques that account for the modeling conditions and are recognized by industry as applicable as part of current practices, or proprietary models that account for the modeling conditions may be used provided the owner or operator allows the implementing agency access to the model and describes model features and differences from publicly available models to local emergency planners upon request? [68.28(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
23. Ensured that the passive and active mitigation systems, if considered, are capable of withstanding the release event triggering the scenario and will be functional? [68.28(d)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
24. Considered the following factors in selecting the alternative release scenarios: [68.28(e)] <input type="checkbox"/> a. The five-year accident history provided in 68.42? [68.28(e)(1)] <input type="checkbox"/> b. Failure scenarios identified under 68.67? [68.28(e)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Hazard Assessment: Defining off-site impacts–Population [68.30]	
25. Estimated population that would be included in the distance to the endpoint in the RMP based on a circle with the point of release at the center? [68.30(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
26. Identified the presence of institutions, parks and recreational areas, major commercial, office, and industrial buildings in the RMP? [68.30(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
27. Used most recent Census data, or other updated information to estimate the population? [68.30(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
28. Estimated the population to two significant digits? [68.30(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Hazard Assessment: Defining off-site impacts–Environment [68.33]	
29. Identified environmental receptors that would be included in the distance to the endpoint based on a circle with the point of release at the center? [68.33(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
30. Relied on information provided on local U.S.G.S. maps, or on any data source containing U.S.G.S. data to identify environmental receptors? [Source may have used LandView to obtain information] [68.33(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Hazard Assessment: Review and update [68.36]	
31. Reviewed and updated the off-site consequence analyses at least once every five years? [68.36(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
32. Completed a revised analysis and submit a revised RMP within six months of a change in processes, quantities stored or handled, or any other aspect that might reasonably be expected on increase or decrease the distance to the endpoint by a factor of two or more? [68.36(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Hazard Assessment: Documentation [68.39]	
Has the owner/operator maintained the following records:	
33. For worst-case scenarios: a description of the vessel or pipeline and substance selected,	

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Program Level 3 Process Checklist

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assumptions and parameters used, the rationale for selection, and anticipated effect of the administrative controls and passive mitigation on the release quantity and rate? [68.39(a)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
34. For alternative release scenarios: a description of the scenarios identified, assumptions and parameters used, the rationale for the selection of specific scenarios, and anticipated effect of the administrative controls and mitigation on the release quantity and rate? [68.39(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
35. Documentation of estimated quantity released, release rate, and duration of release? [68.39(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
36. Methodology used to determine distance to endpoints? [68.39(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
37. Data used to estimate population and environmental receptors potentially affected? [68.39(e)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A

Hazard Assessment: Five-year accident history [68.42]

38. Has the owner or operator included all accidental releases from covered processes that resulted in deaths, injuries, or significant property damage on site, or known offsite deaths, injuries, evacuations, sheltering in place, property damage, or environmental damage? [68.42(a)] <i>According to the owner or operator, the facility has not had any accidents in the past five years.</i>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
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39. Has the owner or operator reported the following information for each accidental release: [68.42(b)] <input type="checkbox"/> a. Date, time, and approximate duration of the release? [68.42(b)(1)] <input type="checkbox"/> b. Chemical(s) released? [68.42(b)(2)] <input checked="" type="checkbox"/> c. Estimated quantity released in pounds and percentage weight in a mixture (toxics)? [68.42(b)(3)] <input type="checkbox"/> d. NAICS code for the process? [68.42(b)(4)] <input type="checkbox"/> e. The type of release event and its source? [68.42(b)(5)] <input type="checkbox"/> f. Weather conditions (if known)? [68.42(b)(6)] <input type="checkbox"/> g. On-site impacts? [68.42(b)(7)] <input type="checkbox"/> h.. Known offsite impacts? [68.42(b)(8)] <input type="checkbox"/> i. Initiating event and contributing factors (if known)? [68.42(b)(9)] <input type="checkbox"/> j. Whether offsite responders were notified (if known)? [68.42(b)(10)] <input type="checkbox"/> k. Operational or process changes that resulted from investigation of the release? [68.42(b)(11)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
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Section C: Prevention Program

Implemented the Program 3 prevention requirements as provided in 40 CFR 68.65 - 68.87? Comments:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> N/A
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Prevention Program- Process Safety information [68.65]

1. Has the owner or operator compiled written process safety information, which includes information pertaining to the hazards of the regulated substances used or produced by the process, information pertaining to the technology of the process, and information pertaining to the equipment in the process, before conducting any process hazard-analysis required by the rule? [68.65(a)] Does the process safety information contain the following for hazards of the substances: [68.65(b)] <input checked="" type="checkbox"/> a. Toxicity information? [68.65(b)(1)] <input checked="" type="checkbox"/> b. Permissible exposure limits? [68.65(b)(2)] <input checked="" type="checkbox"/> c. Physical data? [68.65(b)(3)] <input checked="" type="checkbox"/> d. Reactivity data? [68.65(b)(4)] <input checked="" type="checkbox"/> e. Corrosivity data? [68.65(b)(5)] <input checked="" type="checkbox"/> f. Thermal and chemical stability data? [68.65(b)(6)] <input checked="" type="checkbox"/> g. Hazardous effects of inadvertent mixing of materials that could foreseeably occur? [68.65(b)(7)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
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RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

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Facility Name: Boars Head Provisions Company, 284 Roost Ave., Holland, Michigan 49424

<p>LaRoche Industries Inc. dated 10.11.1998, MSDS in Right to Know Stations, Medical Office, Managers Offices. Trained on MSDS.</p>	
<p>2. Has the owner documented information pertaining to technology of the process? <input checked="" type="checkbox"/> A block flow diagram or simplified process flow diagram? [68.65(c)(1)(i)] BFD-1, December 3, 2006. <input checked="" type="checkbox"/> Process chemistry? [68.65(c)(1)(ii)] Mentioned in PHA, not applicable. <input checked="" type="checkbox"/> Maximum intended inventory? [68.65(c)(1)(iii)] <input checked="" type="checkbox"/> Safe upper and lower limits for such items as temperatures, pressures, flows, or compositions? [68.65(c)(1)(iv)] Have set temps specified for each piece of equipment, also specified in procedures. <input checked="" type="checkbox"/> An evaluation of the consequences of deviation? [68.65(c)(1)(iv)] Evaluation made in 2006 PHA. <input type="checkbox"/> Does the process safety information contain the following for the equipment in the process: [68.65(d)(1)] <input checked="" type="checkbox"/> Materials of construction? 68.65(d)(1)(i)] <input checked="" type="checkbox"/> Piping and instrumentation diagrams [68.65(d)(1)(ii)] <input checked="" type="checkbox"/> Electrical classification? [68.65(d)(1)(iii)] <input checked="" type="checkbox"/> Relief system design and design basis? [68.65(d)(1)(iv)] <input checked="" type="checkbox"/> Ventilation system design? [68.65(d)(1)(v)] <input checked="" type="checkbox"/> Design codes and standards employed? [68.65(d)(1)(vi)] <input checked="" type="checkbox"/> Material and energy balances for processes built after June 21, 1999? [68.65(d)(1)(vii)] <input type="checkbox"/> Safety systems? [68.65(d)(1)(viii)] Did not review.</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>3. Has the owner or operator documented that equipment complies with recognized and generally accepted good engineering practices? [68.65(d)(2)]</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>4. Has the owner or operator determined and documented that existing equipment, designed and constructed in accordance with codes, standards, or practices that are no longer in general use, is designed, maintained, inspected, tested, and operating in a safe manner? [68.65(d)(3)]</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>Prevention Program- Process Hazard Analysis [68.67]</p>	
<p>5. Has the owner or operator performed an initial process hazard analysis (PHA), and has this analysis identified, evaluated, and controlled the hazards involved in the process? [68.67(a)] A PHA was conducted in 3/2000. A subsequent PHA was conducted on 12/15/2006, which addressed compressors, condensers, purger, pressure vessels, evaporator/chillers, piping and valves, pumps, instrumentation, startup of system, shutdown, emergency situations, system charging, system pump out, human factors, facility siting, and several other miscellaneous areas of the covered process. The initial PHA should have been conducted prior to the initial charge of the system, September 1999.</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>6. Has the owner or operator determined and documented the priority order for conducting PHAs, and was it based on an appropriate rationale? [68.67(a)]</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>7. Has the owner used one or more of the following technologies to conduct process PHA: [68.67(b)] <input type="checkbox"/> What-if? [68.67(b)(1)] <input type="checkbox"/> Checklist? [68.67(b)(2)] <input checked="" type="checkbox"/> What-if/Checklist? [68.67(b)(3)] <input type="checkbox"/> Hazard and Operability Study (HAZOP) [68.67(b)(4)] <input type="checkbox"/> Failure Mode and Effects Analysis (FMEA) [68.67(b)(5)] <input type="checkbox"/> Fault Tree Analysis? [68.67(b)(6)]</p>	<p align="center"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>

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<input type="checkbox"/> An appropriate equivalent methodology? [68.67(b)(7)]	
8. Did the PHA address: <input checked="" type="checkbox"/> The hazards of the process? [68.67(c)(1)] <input checked="" type="checkbox"/> Identification of any incident which had a likely potential for catastrophic consequences? [68.67(c)(2)] <input checked="" type="checkbox"/> Engineering and administrative controls applicable to hazards and interrelationships?[68.67(c)(3)] <input checked="" type="checkbox"/> Consequences of failure of engineering and administrative controls? [68.67(c)(4)] <input checked="" type="checkbox"/> Stationary source siting? [68.67(c)(5)] <input checked="" type="checkbox"/> Human factors? [68.67(c)(6)] <input checked="" type="checkbox"/> An evaluation of a range of the possible safety and health effects of failure of controls? [68.67(c)(7)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
9. Was the PHA performed by a team with expertise in engineering and process operations and did the team include appropriate personnel? [68.67(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
10. Has the owner or operator established a system to promptly address the team's findings and recommendations; assured that the recommendations are resolved in a timely manner and documented; documented what actions are to be taken; completed actions as soon as possible; developed a written schedule of when these actions are to be completed; and communicated the actions to operating, maintenance, and other employees whose work assignments are in the process and who may be affected by the recommendations? [68.67(e)] <i>Findings and recommendations identified in the 2006 PHA were scheduled to be completed based on priorities. The priorities were assigned completion dates as to when findings and recommendations must be addressed by. Those recommendations made in the 2006 PHA were assigned a Priority level "C", which had a completion date of March 31, 2007. Both items identified were completed on 2/14/2007. The owner or operator must make sure that they identify who the recommendations are assigned to as per the PHA procedure and the PHA Action Log. The owner or operator must make sure that any PHA's conducted must follow PHA procedures identified and must address the regulation regarding PHA's.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
11. Has the PHA been updated and revalidated by a team every five years after the completion of the initial PHA to assure that the PHA is consistent with the current process? [68.67(f)] <i>A subsequent PHA was conducted on 12/15/2006. PHA's must be completed at least every five years.</i>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A
12. Has the owner or operator retained PHAs and updates or revalidations for each process covered, as well as the resolution of recommendations for the life of the process? [68.67(g)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Prevention Program- Operating procedures [68.69]	
13. Has the owner or operator developed and implemented written operating procedures that provides instructions or steps for conducting activities associated with each covered process consistent with the safety information? [68.69(a)] <i>At the time of the inspection, several operating procedures were reviewed. The facility has comprehensive operating procedures. The following procedures were reviewed: Critical Safety Devices (Safety override permit), ammonia system entry guidelines, confined space, relief valve repair or replacement, repair of sight glass, emergency release of ammonia (fire), ammonia pump out, charging of system with ammonia (specifically who is responsible for shutting what down and conducting what activities, operation of ammonia compressors, operation of ammonia condensers, thermosyphon pilot receiver, operating of oil pots, high pressure receiver operation, suction trap operation, ammonia recirculator and pumps, liquid transfer drum. The owner or operator must make sure that procedures are followed and applicable paperwork and procedures are completed fully. Operating procedures are written to follow what the facility is actually doing and should reflect that, including any documentation that must be completed in conjunction with following operating procedures.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
14. Do the procedures address the following: [68.69(a)] <input checked="" type="checkbox"/> Steps for each operating phase: [68.69(a)(1)]	

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<input checked="" type="checkbox"/> Initial Startup? [68.69(a)(1)(i)] <input checked="" type="checkbox"/> Normal operations? [68.69(a)(1)(ii)] <input checked="" type="checkbox"/> Temporary operations? [68.69(a)(1)(iii)] <input checked="" type="checkbox"/> Emergency shutdown including the conditions under which emergency shutdown is required, and the assignment of shutdown responsibility to qualified operators to ensure that emergency shutdown is executed in a safe and timely manner? [68.69(a)(1)(iv)] <input checked="" type="checkbox"/> Emergency operations? [68.69(a)(1)(v)] The owner or operator must make sure that the emergency operation procedures clearly identify that compressor shutoff is via a computer. <input checked="" type="checkbox"/> Normal shutdown? [68.68(a)(1)(vi)] <input checked="" type="checkbox"/> Startup following a turnaround, or after emergency shutdown? [68.69(a)(1)(vii)] <input checked="" type="checkbox"/> Operating limits: [68.68(a)(2)] <input checked="" type="checkbox"/> Consequences of deviations [68.69(a)(2)(i)] <input checked="" type="checkbox"/> Steps required to correct or avoid deviation? [68.69(a)(2)(ii)] <input checked="" type="checkbox"/> Safety and health considerations: [68.69(a)(3)] <input checked="" type="checkbox"/> Properties of, and physical hazards presented by, the chemicals used in the process [68.69(a)(3)(i)] <input checked="" type="checkbox"/> Precautions necessary to prevent exposure, including engineering controls, administrative controls, and personal protective equipment? [68.69(a)(3)(ii)] <input checked="" type="checkbox"/> Control measures to be taken if physical contact or airborne exposure occurs? [68.69(a)(3)(iii)] <input checked="" type="checkbox"/> Quality control for raw materials and control of hazardous chemical inventory levels? [68.69(a)(3)(iv)] <input checked="" type="checkbox"/> Any special or unique hazards? [68.69(a)(3)(v)] <input checked="" type="checkbox"/> Safety systems and their functions? [68.69(a)(4)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
15. Are operating procedures readily accessible to employees who are involved in a process? [68.69(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
16. Has the owner or operator certified annually that the operating procedures are current and accurate and that procedures have been reviewed as often as necessary? [68.69(c)] Operating procedures have not been certified annually. According to the owner or operator, the facility plans on reviewing Operating Procedures annually.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A
17. Has the owner or operator developed and implemented safe work practices to provide for the control of hazards during specific operations, such as lockout/tagout? [68.69(d)] Lockout/ Tagout procedures are followed, #600.16, Rev. 2006, specific to each piece of equipment.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Prevention Program - Training [68.71]	
18. Has each employee involved in operating a process, and each employee before being involved in operating a newly assigned process, been initially trained in an overview of the process and in the operating procedures? [68.71(a)(1)] Every employee has to compete orientation training. After orientation training is completed, a checklist is completed and signed off verifying that employees have been trained accordingly. Orientation training includes MSDS, Process systems, right to know, lockout, departmental training, evacuation, and PPE. Orientation training does include interpreters and translators for those whose primary language something other than English. Karl Vogts who according to documents completed orientation training on 7/22/2003, did not have the orientation checklist available at the time of the inspection. Employees involved in the ammonia process have a min. three month training period with senior employees. Senior employees and supervisors then determine whether or not employees can work and operate the system accordingly on their own. According to the owner or operator, all ammonia systems employees must speak and write in English. There have been two new employees in the past four years that have responsibility for the ammonia system. These employees are Jose Diaz and Saul Coronado. At the time of the inspection, orientation training checklists for both employees could not be located. Documentation did show that Saul Coronado did complete training on 9/22/2003. If procedures call for checklists to be completed to	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A

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<p><i>accurately document that employees have received orientation training and understand this training, then the owner or operator is responsible for making sure that such documentation is on hand. Operator training was completed for all operators in 2007 and in 2006.</i></p>	
<p>19. Did initial training include emphasis on safety and health hazards, emergency operations including shutdown, and safe work practices applicable to the employee's job tasks? [68.71(a)(1)] <i>The documentation available at the time of the inspection does not detail that initial training includes a review of shutdown procedures.</i></p>	<p align="right"><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>20. In lieu of initial training for those employees already involved in operating a process on June 21, 1999, an owner or operator may certify in writing that the employee has the required knowledge, skills, and abilities to safely carry out the duties and responsibilities as specified in the operating procedures [68.71(a)(2)]</p>	<p align="right"><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A</p>
<p>21. Has refresher training been provided at least every three years, or more often if necessary, to each employee involved in operating a process to assure that the employee understands and adheres to the current operating procedures of the process? [68.71(b)] <i>At the time of the inspection, training records showed that Jose and Saul received training from Garden City Ammonia for Industrial Refrigeration Operator Training on 6/28/2007. In addition, records show that both individuals received Industrial refrigeration training on 8/23/2007. The owner or operator must update their procedural manual to reflect actual procedures the company is following and making sure that employees are trained according to proper procedures and according to the procedures followed at the facility. The owner or operator must also make sure that employees are provided refresher training at least every three years. There is no documentation available that indicates that employees have been trained on operating the process (using the facilities operating procedures) at least every three years.</i></p>	<p align="right"><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>22. Has owner or operator ascertained and documented in record that each employee involved in operating a process has received and understood the training required?] <i>Orientation checklists were not retained for the following employees: Jose, Saul, and Karl.</i></p>	<p align="right"><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>23. Does the prepared record contain the identity of the employee, the date of the training, and the means used to verify that the employee understood the training? [68.71(c)] <i>For that documentation that is available, the above information was indicated.</i></p>	<p align="right"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>Prevention Program - Mechanical Integrity [68.73]</p>	
<p>24. Has the owner or operator established and implemented written procedures to maintain the on-going integrity of the process equipment listed in 68.73(a)? [68.73(b)] <i>The facility uses a computer based system to track mechanical integrity, which they have used for the past four years. The computer based system generated work orders for all preventative maintenance that needs to be done and is distributed to mechanics. Each mechanic is responsible for completing their inspections. At the time of the inspection, the PM summaries for several employees were reviewed. These PM schedules shows that compressors are on a weekly pm, monthly, and annual pm, generators are on a biweekly pm, air handling units are on a monthly pm, HVAC units are on a monthly pm, foaming stations are on a monthly pm, exhaust fans are on a monthly pm, and area rounds are also identified. There is no PM conducted on the HP receiver other than visual inspections. Piping is visually inspected during weekly rounds. Relief valves are replaced by an outside contractor and are scheduled for replacement every five years. Recirculators are inspected daily during rounds. Detectors are inspected every 4 months</i></p>	<p align="right"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>25. Has the owner or operator trained each employee involved in maintaining the on-going integrity of process equipment? [68.73(c)]</p>	<p align="right"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>26. Performed inspections and tests on process equipment? [68.73(d)(1)]</p>	<p align="right"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>

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<p><i>At the time of the inspection, the PM schedules for 6 mechanics for the day of 10/7/2007 were reviewed. Equipment specific documentation was also reviewed.</i></p>	
<p>27. Followed recognized and generally accepted good engineering practices for inspections and testing procedures? [68.73(d)(2)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>28. Ensured the frequency of inspections and tests of process equipment is consistent with applicable manufacturers' recommendations, good engineering practices, and prior operating experience? [68.73(d)(3)]</p> <p><i>During the inspection, documentation completed prior to the computer based system was not really maintained and therefore it was difficult to understand how the facility had been inspecting equipment and at what frequency in the past. The owner or operator must make sure that the HP receiver is adequately inspected internally and that piping is also inspected using thickness testing.</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>29. Documented each inspection and test that had been performed on process equipment, which identifies the date of the inspection or test, the name of the person who performed the inspection or test, the serial number or other identifier of the equipment on which the inspection or test was performed, a description of the inspection or test performed, and the results of the inspection or test? [68.73(d)(4)]</p> <p><i>The monthly PM for Ammonia Compressor, #5 Compressors was due 4/8/2007 and marked as "PM Done". This PM was not dated and was not signed off as being completed. Refrigeration Concepts Inc. completed in December of 2005 the following: replacement of SRV's, all compressor oil separators, all compressor oil cooler safeties, thermosyphon vessel, medium temp. recirculator vessel, liquid receiver vessel, transfer vessel, oil pigs for accumulator and med. Temp. recirculator vessel, accumulator vessel, glycol chiller oil, glycol chiller. In April 2005 relief valves were installed on the new condenser. The owner or operator stated that detectors are inspected every four months, but no documentation is available that documents such inspections and tests are performed. Recommend that such documentation be retained. Also recommend that the owner or operator maintain documentation on all inspections and tests of process equipment.</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>30. Corrected deficiencies in equipment that were outside acceptable limits defined by the process safety information before further use or in a safe and timely manner when necessary means were taken to assure safe operation? [68.73(e)]</p>	<p><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A</p>
<p>31. Assured that equipment as it was fabricated is suitable for the process application for which it will be used in the construction of new plants and equipment? [68.73(f)(1)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>32. Performed appropriate checks and inspections to assure that equipment was installed properly and consistent with design specifications and the manufacturer's instructions? [68.73(f)(2)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>33. Assured that maintenance materials, spare parts and equipment were suitable for the process application for which they would be used? [68.73(f)(3)]</p> <p><i>General equipment filters and other spare parts are available.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>Prevention Program - Management Of Change [68.75]</p>	
<p>34. Has the owner or operator established and implemented written procedures to manage changes to process chemicals, technology, equipment, and procedures, and changes to stationary sources that affect a covered process? [68.75(a)]</p> <p><i>MOC Guidelines (procedure) were reviewed at the time of the inspection. The procedures specify that employees must completed Form MCF-2A and the MOC Form Log for each MOC. The MOC Form was not completed for Compressor #7 installation. The owner or operator must follow their procedures accordingly. In addition, MOC #14 with an initiation date of 9/28/2007, replacement in kind of relief valve</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>

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<p><i>on glycol chiller was reviewed. MOC #13 with an initiation date of 4/6/2006 for installation of 1 new ACV air makeup unit, 3 new evaporators was reviewed. The owner or operator must follow MOC procedures accordingly and must complete all forms as identified.</i></p>	
<p>35. Do procedures assure that the following considerations are addressed prior to any change: [68.75(b)]</p> <ul style="list-style-type: none"> <input type="checkbox"/> The technical basis for the proposed change? [68.75(b)(1)] <input type="checkbox"/> Impact of change on safety and health? [68.75(b)(2)] <input type="checkbox"/> Modifications to operating procedures? [68.75(b)(3)] <input type="checkbox"/> Necessary time period for the change? [68.75(b)(4)] <input type="checkbox"/> Authorization requirements for the proposed change? [68.75(b)(5)] <p><i>For those MOC's that were completed, the above information was addressed.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>36. Were employees, involved in operating a process and maintenance, and contract employees, whose job tasks would be affected by a change in the process, informed of, and trained in, the change prior to start-up of the process or affected parts of the process? [68.75(c)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>37. If a change resulted in a change in the process safety information, was such information updated accordingly? [68.75(d)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>38. If a change resulted in a change in the operating procedures or practices, had such procedures or practices been updated accordingly? [68.75(e)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>Prevention Program - Pre-startup Safety Review [68.77]</p>	
<p>39. Did the pre-startup safety review confirm that prior to the introduction of a regulated substance to a process: [68.77(b)]</p> <ul style="list-style-type: none"> <input type="checkbox"/> Construction and equipment was in accordance with design specifications? [68.77(b)(1)] <input type="checkbox"/> Safety, operating, maintenance, and emergency procedures were in place and were adequate? [68.77(b)(2)] <input type="checkbox"/> For new stationary sources, a process hazard analysis had been performed and recommendations had been resolved or implemented before startup? [68.77(b)(3)] <input type="checkbox"/> Modified stationary sources meet the requirements contained in management of change? [68.77(b)(3)] <input type="checkbox"/> Training of each employee involved in operating a process had been completed? [68.77(b)(4)] 	<p><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A</p>
<p>Prevention Program - Compliance audits [68.79]</p>	
<p>1. Has the owner or operator certified that the stationary source has evaluated compliance with the provisions of the prevention program at least every three years to verify that the developed procedures and practices are adequate and being followed? [68.79(a)]</p> <p><i>Compliance audits were completed in 2000, 2006, and 2007. The owner or operator stated that they have an intent letter to complete compliance audits every three years. Compliance audits need to be completed at least every three years.</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>2. Has the audit been conducted by at least one person knowledgeable in the process? [68.79(b)]</p> <p><i>An audit team was created to conduct and complete compliance audits. Recommend that the audit team signs off on documentation as appropriate.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>3. Are the audit findings documented in a report? [68.79(c)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>4. Has the owner or operator promptly determined and documented an appropriate response to each of the findings of the audit and documented that deficiencies had been corrected? [68.79(d)]</p> <p><i>The 2007 audit was completed to address the corrective actions identified during the 2006 audit. According to the owner or operator, corrective actions for pieces of equipment generate work orders that are then documented and put into the preventative maintenance system for tracking. The 2007 audit items have not</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>

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<i>all been completed at the time of the inspection, but due dates dated past the inspection date. 2006 audit items were no completed accordingly. The owner or operator must make sure that all audit items are documented, and findings of are documented so that deficiencies are corrected accordingly.</i>	
5. Has the owner or operator retained the two most recent compliance reports? [68.79(e)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Prevention Program - Incident investigation [68.81]	
1. Has the owner or operator investigated each incident which resulted in, or could reasonably have resulted in a catastrophic release of a regulated substance? [68.81(a)] <i>The following incident investigations were reviewed. 7/15/2006, 5lb. release for half and house, vapor release from PRV because of power failure. Also a 2003 release was reviewed in which an employee ran into an ammonia compressor and less than 3 lbs. of ammonia were released. The owner or operator must make sure that they follow their procedures accordingly for incident investigations and completed the Incident Investigation Log for all incidents.</i>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
2. Were all incident investigations initiated not later than 48 hours following the incident? [68.81(b)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Was an accident investigation team established and did it consist of at least one person knowledgeable in the process involved, including a contract employee if the incident involved work of a contractor, and other persons with appropriate knowledge and experience to thoroughly investigate and analyze the incident? [68.81(c)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Was a report prepared at the conclusion of every investigation?[68.81(d)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
5. Does every report include: [68.81(d)] <input checked="" type="checkbox"/> Date of incident? [68.81(d)(1)] <input checked="" type="checkbox"/> Date investigation began? [68.81(d)(2)] <input checked="" type="checkbox"/> A description of the incident? [68.81(d)(3)] <input checked="" type="checkbox"/> The factors that contributed to the incident? [68.81(d)(4)] <input checked="" type="checkbox"/> Any recommendations resulting from the investigation? [68.81(d)(5)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
6. Has the owner or operator established a system to address and resolve the report findings and recommendations, and are the resolutions and corrective actions documented? [68.81(e)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
7. Was the report reviewed with all affected personnel whose job tasks are relevant to the incident findings including contract employees where applicable? [68.81(f)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
8. Has the owner or operator retained the incident investigation reports for five years? [68.81(g)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Section D - Employee Participation [68.83]	
1. Has the owner or operator developed a written plan of action regarding the implementation of the employee participation required by this section?[68.83(a)] <i>The employee participation program was not reviewed at the time of the inspection.</i>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. Has the owner or operator consulted with employees and their representatives on the conduct and development of process hazards analyses and on the development of the other elements of process safety management in chemical accident prevention provisions? [68.83(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
3. Has the owner or operator provided to employees and their representatives access to process hazards analyses and to all other information required to be developed under the chemical accident prevention rule? [68.83(c)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET

Program Level 3 Process Checklist

Facility Name: Boars Head Provisions Company, 284 Roost Ave., Holland, Michigan 49424

Section E - Hot Work Permit [68.85]	
1. Has the owner or operator issued a hot work permit for each hot work operation conducted on or near a covered process? [68.85(a)] <i>At the time of the inspection, the owner or operator stated that hot work permits have not been needed for work completed on the ammonia system to date. The owner or operator does have a policy in place for Hot Work permitting, Policy #600.15, rev date 2-06. The owner or operator must make sure that who ever signs off also dates the permits and keeps them on file for 30 days, in accordance with procedures.</i>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. Does the permit document that the fire prevention and protection requirements in 29CFR 1910.252(a) have been implemented prior to beginning the hot work operations? [68.85(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
3. Does the permit indicate the date(s) authorized for hot work and the object(s) upon which hot work is to be performed? [68.85(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
4. Are the permits being kept on file until completion of the hot work operations? [68.85(b)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Section F - Contractors [68.87]	
1. Has the owner or operator obtained and evaluated information regarding the contract owner or operator's safety performance and programs when selecting a contractor? [68.87(b)(1)] <i>At the time of the inspection, information on contractors and the contractor program were not reviewed.</i>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. Informed contract owner or operator of the known potential fire, explosion, or toxic release hazards related to the contractor's work and the process? [68.87(b)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
3. Explained to the contract owner or operator the applicable provisions of the emergency response or the emergency action program? [68.87(b)(3)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
4. Developed and implemented safe work practices consistent with §68.69(d), to control the entrance, presence, and exit of the contract owner or operator and contract employees in the covered process areas? [68.87(b)(4)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
Section G - Emergency Response [68.90 - 68.95]	
Developed and implemented an emergency response program as provided in 40 CFR 68.90-68.95? <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> N/A Comments: <i>According to the owner or operator, the facility is not currently designated as a first responder. The facility is to contact the Ottawa Co. Hazmat Team in case of releases. The facility did have a HAZMAT team up until about a year ago. They had approximately 12-14 employees on the team, on different shifts. The facility intends to start HAZMAT training again on October 22, 2007 to again rebuild and have its own HAZMAT team. HAZWOPER, 40 hour training is completed for all new employees. In addition, 8 hour refresher is annually. The fire department conducts walkthroughs of the facility and was last at the facility in November of 2006. The facility does have an Integrated Contingency Plan, Policy #100199 dated 7/12/2006 that is followed.</i>	
1. Is the facility designated as a "first responder" in case of an accidental release of regulated substances"	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A
1.a. If the facility is not a first responder:	
1.a.(1) For stationary sources with any regulated substances held in a process above threshold quantities, is the source included in the community emergency response plan developed under 42 U.S.C. 11003? [68.90(b)(1)]	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
1.a.(2) For stationary sources with only regulated flammable substances held in a process above threshold quantities, has the owner or operator coordinated response actions with the local fire department? [68.90(b)(2)]	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

RISK MANAGEMENT PROGRAM INSPECTION FINDINGS, ALLEGED VIOLATIONS AND PROPOSED PENALTY SHEET
Program Level 3 Process Checklist

Facility Name: Boars Head Provisions Company, 284 Roost Ave., Holland, Michigan 49424

<p>1.a.(3) Are appropriate mechanisms in place to notify emergency responders when there is need for a response? [68.90(b)(3)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>2. An emergency response plan which is maintained at the stationary source and contains the following? [68.95(a)(1)]</p> <p><input checked="" type="checkbox"/> a. Procedures for informing the public and local emergency response agencies about accidental releases? [68.95(a)(1)(i)]</p> <p><input checked="" type="checkbox"/> b. Documentation of proper first-aid and emergency medical treatment necessary to treat accidental human exposures? [68.95(a)(1)(ii)]</p> <p><input checked="" type="checkbox"/> c. Procedures and measures for emergency response after an accidental release of a regulated substance? [68.95(a)(1)(iii)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>3. Procedures for the use of emergency response equipment and for its inspection, testing, and maintenance? [68.95(a)(2)]</p> <p><i>HAZMAT SCBA's were tested and certified by Cofessco Fire Protection of Muskegon, MI in 4/2006.</i></p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>4. Training for all employees in relevant procedures? [68.95(a)(3)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>5. Procedures to review and update, as appropriate, the emergency response plan to reflect changes at the stationary source and ensure that employees are informed of changes? [68.95(a)(4)]</p> <p><i>At the time of the inspection, the owner o operator stated that the Environmental Manager will review procedures and update them accordingly. Procedures have not been reviewed accordingly in the past.</i></p>	<p><input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>6. Did the owner or operator use a written plan that complies with other Federal contingency plan regulations or is consistent with the approach in the National Response Team's Integrated Contingency Plan Guidance ("One Plan")? If so, does the plan include the elements provided in paragraph (a) of 68.95, and also complies with paragraph (c) of 68.95? [68.95(b)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>7. Has the emergency response plan been coordinated with the community emergency response plan developed under EPCRA? [68.95(c)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>Section H - Risk Management Plan [68.190 - 68.195]</p>	
<p>1. Has the owner or operator reviewed and updated the RMP and submitted it to EPA [68.190(a)]? Reason for update.</p> <p><input checked="" type="checkbox"/> Five-year update. [68.190(b)(1)]</p> <p><input type="checkbox"/> Within three years of a newly regulated substance listing. [68.190(b)(2)]</p> <p><input type="checkbox"/> At the time a new regulated substance is first present in an already regulated process above threshold quantities. [68.190(b)(3)]</p> <p><input type="checkbox"/> At the time a regulated substance is first present in a new process above threshold quantities. [68.190(b)(4)]</p> <p><input type="checkbox"/> Within six months of a change requiring revised PHA or hazard review. [68.190(b)(5)]</p> <p><input type="checkbox"/> Within six months of a change requiring a revised OCA as provided in 68.36. [68.190(b)(6)]</p> <p><input type="checkbox"/> Within six months of a change that alters the Program level that applies to any covered process. [68.190(b)(7)]</p>	<p><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A</p>
<p>2. If the owner or operator experienced an accidental release that met the five-year accident history reporting criteria (as described at 68.42) subsequent to April 9, 2004, did the owner or operator submit the information required at 68.168, 68.170(j) and 68.175(l) within six months of the release or by the time the RMP was updated as required at 68.190, whichever was earlier. [68.195(a)]</p>	<p><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A</p>
<p>3. If the emergency contact information required at 68.160(b)(6) has changed since June 21, 2004, did the owner or operator submit corrected information within thirty days of the change? [68.195(b)]</p>	<p><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A</p>