CAA 112(r) INSPECTION REPORT

Name: Simmons Animal Nutrition, Inc.	
Address: 832 E 3rd Street Milan, MO 63556	**Date of Inspection**: July 9-11, 2024
County: Sullivan	**Case No**: 24MO0709
Phone: (660) 265-3564	**RMP No**: 1000 0008 6514
High Risk: No	**FRS No**: 110000442361
CAA Title V: No	**Program Level**: Program 3
Mailing Address: 832 E 3rd Street Milan, MO 63556	
Process: 311615 Poultry Processing	

SUMMARY OF OBSERVATIONS

A review of the Simmons Animal Nutrition, Inc. (Simmons) documents and facility revealed the following deficiencies:

1. **Simmons failed to have information documenting the materials of construction of the hoses on the plate freezers as required by 40 CFR 68.65(d)(1)(i).**
2. **Simmons failed to have updated P&IDs after updating tags on process equipment as required by 40 CFR 68.65(d)(1)(ii).**
3. **Simmons failed to have current documentation on relief system design basis as required by 40 CFR 68.65(d)(1)(iv).**
4. **Simmons failed to replace SRVs/PRVs at the interval required by RAGAGEP as required by 40 CFR 68.65(d)(2).**
5. **Simmons failed to resolve PHA recommendations in a timely manner as required by 40 CFR 68.67(e).**
6. **Simmons failed to include the factors that contributed to the incident in all reports as required by 40 CFR 68.81(d)(4).**
7. **Simmons failed to include all recommendations resulting from the investigation in all reports as required by 40 CFR 68.81(d)(5).**
8. **Simmons failed to include procedures for the use of emergency response equipment and for its inspection, testing, and maintenance as required by 40 CFR 68.95(a)(2).**
9. **Simmons failed to include procedures to update the emergency response plan in the emergency response program as required by 40 CFR 68.95(a)(4).**
10. **Simmons failed to have documentation of tabletop exercises as required by 40 CFR 68.96(b)(3).**
11. **Simmons failed to update emergency contact information within 30 days of the change as required by 40 CFR 68.195(b).**

12. **Simmons failed to ensure that machine room door labeling, pipe supports, and pipe condition (surface corrosion) conformed to RAGAGEP as required by 40 CFR 68.65(d)(2).**
13. **Simmons failed to complete an MOC before the start of their equipment relabeling process as required by 40 CFR 68.75(b).** (This finding was identified post inspection)
14. **Simmons failed to include the presence of commercial or industrial buildings within the distance to endpoint of the alternative release scenario in their RMP as required by 40 CFR 68.30(b) and 40 CFR 68.165(b)(12).** (This finding was identified post inspection)
15. **Simmons failed to document names or positions of those responsible for the development, implementation, and integration of RMP elements and to define lines of authority as required by 40 CFR 68.15(c). (**This finding was identified post inspection**)**
16. **Simmons failed to have tight fitting doors to the machine room and to ensure that evaporators were protected against impact and to prevent excessive ice buildup per RAGAGEP as required by 40 CFR 68.65(d)(2).** (This finding was identified post inspection)
17. **Simmons failed to certify compliance with subpart D at least every 3 years, to document the findings of the audit, responses to findings and corrections of deficiencies, and to retain the two most recent compliance audit reports as required by 40 CFR 68.79(a & c-e).** (This finding was identified post inspection)
18. **Simmons failed to document each inspection and test that has been performed on process equipment as required by 40 CFR 68.73(d)(4).** (This finding was identified post inspection)
19. **Simmons failed to document the ventilation system design as required by 40 CFR 68.65(d)(1)(v).** (This finding was identified post inspection)

INTRODUCTION

I, Christina Gallick, a Compliance Inspector with the U.S. Environmental Protection Agency (EPA), Region VII, accompanied by Lorenzo Sena with the EPA, and Bridget Bass with the Missouri Department of Natural Resources inspected Simmons Animal Nutrition located in Milan, Missouri on July 9-11, 2024. Bridgett Bass was only present on July 9, 2024.

I called Martin Sievers, Senior Director of Operations, on July 5, 2024, at 9:45 am to arrange the inspection and left a voicemail explaining that EPA planned a CAA 112(r)(7) and EPCRA non-313 inspection at their facility on July 9 and that I would follow up with an email. I then called Casey England, Maintenance Manager, at 9:50 am and left a voicemail with the same information I had explained to Mr. Sievers. I sent an email to Martin Sievers and Casey England on July 5, 2024, explaining that EPA Region 7 planned an inspection with the purpose of determining compliance with the Emergency Planning and Community Right-to-Know Act (EPCRA) of 1986, and the Clean Air Act (CAA) of 1990 Section 112(r) at Simmons Animal Nutrition, Inc. I stated that we planned to arrive at the facility on July 9 at 8 am and anticipated that the inspection would take three days. I explained we would conduct a tour of the facility and take photos and ask for copies of certain documents. I explained that they had the right to claim information as confidential business information and provided a link to an EPA webpage explaining CBI. I

provided a list of documents and types of documents that I would be interested in reviewing, including a list of incident investigation reports I wanted to review. I asked about facility specific PPE requirements. I asked that employees be notified of the inspection and informed they are allowed to participate. Simmons was selected for inspection because of multiple NRC release reports at the facility that appeared to be related to mechanical integrity issues. The facility is an anhydrous ammonia refrigeration facility that is part of the FY24-FY27 Chemical Accident Risk Reduction National Enforcement and Compliance Initiative.

I received a response from Martin Sievers explaining PPE requirements. On the afternoon of July 5, 2024, I received an email response from Karl Kumli, outside counsel hired by Simmons. He stated that he was working to assist Simmons with the OSHA PSM inspection that was ongoing at the Milan facility. He asked if we could coordinate our visit with OSHA to ensure an efficient use of time and resources. He stated they were discussing with OSHA setting aside time the week of July 15, 2024. After receiving this email, I consulted with Dave Hensley, the supervisor of the Chemical Accident Prevention Section, and EPA Region VII Office of Regional Counsel. Dave Hensley and I had met with OSHA representatives previously about the PSM inspection at Simmons' Milan, MO facility and both thought OSHA stated they were conducting managerial interviews the week of July 8th. Pushing back the date of the inspection would have delayed the EPA's inspection by a month. We sent the notification as courtesy. The inspection would go ahead as planned. OSHA was at the Simmons facility at the same time as EPA but conducted their inspection in a different room.

We conducted the inspection to determine if the facility complies with Section 112(r) of the Clean Air Act (CAA), as amended in 1990. The inspection also included reporting provisions of the Emergency Planning and Community Right to Know Act (EPCRA) and the release reporting provisions of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA).

EPA's regulations describing how these laws are to be implemented are found in the Code of Federal Regulations, Title 40, Part 68 (CAA), 355, 370, and 372 (EPCRA). The law and the implementing regulations 40 CFR 68, Chemical Accident Prevention Program (CAPP) require that the facilities must submit a complete Risk Management Plan (RMP) to the EPA for those regulated chemicals they process in amounts above the applicable threshold quantities after June 21, 1999, and to implement the program described in the RMP.

The finalized non-CBI inspection report will be transmitted via e-mail to the individuals requested during the closing conference. The finalized CBI inspection report and CBI photolog (CBI Appendix 2) will be securely emailed to one individual selected by Simmons. A copy of the non-CBI inspection report, CBI inspection report, documents obtained, photographs taken during the inspection, checklists and completed forms will be maintained in the EPA facility file.

HISTORY OF BUSINESS

Simmons Animal Nutrition, Inc. located in Milan, Missouri brings in chilled meat, grinds the meat into a semiliquid uniform mix, and fills plate freezers with this mixture. The facility uses an anhydrous ammonia refrigeration system to freeze their product which is used to make pet

food. The facility has another ammonia system with rotators that they added in 2021 to make another product. This part of the process was not operating while we were onsite. The oldest part of the Simmons building is over 100 years old. Additions were made to the building until the 1990s. Conagra replaced a lot of equipment in the 1990s and it is believed that there is no ammonia refrigeration equipment over 100 years old left. The facility staff knew Conagra previously owned the facility and then ownership passed between a small business to Pet Poultry who Simmons acquired the facility from in late 2018. According to the RMP other owners were Premier Foods, Inc. and Milan Processing. The facility is run 24/7 on 12-hour shifts by four different crews. The facility has about 150 to 160 employees. Milan, Missouri is located in Sullivan County and has a population of 1,819 according to the 2020 census.

PERSONS INTERVIEWED AND INDIVIDUAL RESPONSIBILITIES

Martin Sievers	Senior Director of Operations
Eddie Collins	Corporate Manager of Loss Prevention
Matt Jackson	Senior Regional Safety Manager
Dale Kinnard	Safety Manager
Casey England	Maintenance Manager
Rick Hellinga	Director Safety
Nelson Jackson	Legal Council
Karl Kumli	Outside Council

OPENING CONFERENCE

Lorenzo Sena and I arrived at the facility at 8:00 am on July 9, 2024. We signed into the visitor's check-in sheet after reading through the facility guidelines. We arrived in the conference room for the inspection at 8:10 am. Bridgett Bass arrived at the facility at 7:45 am. In the conference room I introduced myself and explained that I am an inspector in training and that I would be leading this inspection to get my credentials. I showed my PIV card to the individuals in the conference room. Lorenzo introduced himself as an inspector and showed his credentials to everyone in the room. I then showed the facility personnel the notice of inspection form and explained that the form stated the inspection would cover CAA 112(r) and EPCRA. I explained that we would focus on the chemical inventory and release reporting provisions of EPCRA. I signed the form and Martin Sievers signed the form on behalf of Simmons. I passed around a sign in sheet for the opening conference and asked a Simmons employee to write down the individuals who were remotely attending the meeting (Appendix 1).

I explained that Simmons has the ability to claim confidential business information. Counsel representation explained Simmons planned to claim all material taken by EPA as CBI. I provided the first two pages of the CBI form for the attorneys to review. I then explained that CAA 112(r)(L)(6) requires that employee representatives are notified of the inspection. Simmons does not have a union. During the opening conference I was asked by an online participant why the facility was selected for an inspection. I explained that Simmons was selected for inspection because of multiple NRC release reports at the facility that appeared to be related to mechanical integrity issues and because the facility is part of the FY24-FY27 Chemical Accident Risk Reduction National Enforcement and Compliance Initiative. I was also asked why it had to

be this week that we did the inspection. I explained that we couldn't change the week because of scheduling conflicts and that OSHA stated they would also be coming the week of July 8th when we coordinated with them. I was also asked why Missouri DNR was a part of the inspection and I explained that we notify states when an inspection is occuring. Missouri has been interested in sending inspectors with EPA because they are pursuing delegation for RMP.

I explained that after the inspection I would write my observations in a report that the facility would receive via email and explained that it would not be from my email address. We discussed the inspection schedule. I stated I wanted to review the incident reports I requested in my email first and complete the field tour in the afternoon. The morning worked better for Simmons to do a field tour, so we scheduled the tour for Wednesday morning.

After the opening conference we requested documents. The Simmons counsel wanted to review and bates stamp documents before we received them. We discussed how I would receive the documents. I explained that EPA did not consider email a secure way to transmit CBI, so we set up a secure file transfer system. It took the counsel a long time to review material before sending it to us, so we decided to do the field tour Tuesday morning.

FIELD TOUR

We began the field tour around 9:45 am on July 9, 2024. All photos I took during each day of the tour were claimed as CBI. The photolog is CBI and is not a part of this report but is stored in EPA's CBI inspection file. We first entered the freezer where the March 18, 2024, incident occurred. We observed the evaporator with a broken unit and a fan blade that was still embedded in the ceiling (CBI photo 2, IMG_0011.jpg). This freezer is currently not operating. The steel structure appeared to be protective of the evaporator to prevent forklift collisions.

We then entered the plate freezer room where the February 23, 2023, incident occurred. The room had 16 plate freezers. At the time Simmons employees thought the plate freezer had 64 or 66 hoses. They later confirmed that the plate freezers had 66 hoses. When product is frozen, the unit goes through hot gas defrost and then the product is removed.

We then visited another freezer. The floor was covered in ice, and we were unable to enter the room because ice cleats or crampons were required PPE we did not have. I saw ice and frost covering the evaporators (CBI photo 6, IMG_0015.jpg).

We observed the lead acid battery charging location (CBI photo 7, IMG_0016.jpg). Lead acid batteries were not in the Tier II. Next to the battery charging area was a chemical storage room with controlled access via a key. We observed caustic soaps that were used for cleaning. The storage capacity of caustic soaps appeared to be less than 10,000 pounds.

We then entered the machine or engine room. The entrance to the machine room had a NFPA diamond, emergency contact information, and authorized personnel label. The doors do not seal closed (CBI photo 8, IMG_0017.jpg). Next to the door was an alarm for ammonia and a safety shower and eyewash (CBI photo 9, IMG_0018.jpg). I observed oil pots with deadman valves (CBI photo 10, IMG_0019.jpg). I observed the legible nameplate of an ammonia pressure vessel (CBI photo 11, IMG_0020.jpg). The compressors throughout the machine room were different models (CBI photos 14-16, IMG_0023.jpg- IMG_0025.jpg). The machine room was

partially separated into two parts by a wall. Some pipes and conduit ran through holes made at the top of the dividing wall. The safety release or pressure relief valves that I observed on compressors were recently changed (CBI photo 12, IMG_0021.jpg). The safety shower and eye wash was located in the half of the machine room closer to the principal machine room door (CBI photo 13, IMG_0022.jpg). Lorenzo and I looked around the machine room and could not locate the ammonia sensors. The facility stated they were in the middle of each section of the machine room on the ceiling (CBI photos 17-18, IMG_0026.jpg-IMG_0027.jpg). We left the machine room and saw an emergency ventilation switch, a tamper resistant emergency stop button, and a visual and audio ammonia alarm (CBI photo 19, IMG_0028.jpg). The machine room door had authorized personnel only labels, a NFPA diamond, and information about emergency contacts (CBI photo 20, IMG_0029.jpg).

We then observed a portion of the system that was not currently operating but, had ammonia in the pipes. The facility made recent drain upgrades in this area. The heat exchangers will be used to make a chilled product (CBI photo 21, IMG_0030.jpg). In the tour we also walked through a chiller where we observed some evaporators. They did not appear to have protection from forklifts.

We went onto the roof of the facility which required a key for access. I observed a windsock on the top of the facility (CBI photo 22, IMG_0031.jpg). The roof had many stairs for pipe crossings. Ammonia piping next to an evaporative condenser was vibrating and the pipe support next to the elbow in the piping was not in contact with the pipe (CBI photo 23, IMG_0032.jpg). It was a long walk to the receiver that included multiple ship ladders. I observed the king valve of the receiver (CBI photo 25, IMG_0034.jpg). I asked if the facility had a king solenoid valve since the walk to the receiver was so long. The employees were uncertain, but later it was determined that the facility does have a king solenoid valve.

I noticed a pipe covered in algae behind the receiver and asked if it was in operation (CBI photo 26, IMG_0035.jpg). The employees were uncertain but, thought it might not be since the labeling wasn't updated. We observed the exhaust fans of the machine room.

Throughout the tour on the roof, I noted pipes with chipping and peeling paint and small rust spots (CBI photo 29, IMG_0038.jpg). I noted the labeling was installed on painted pipes in a manner to reduce the risk of corrosion under the label (CBI photo 29, IMG_0038.jpg). I then noticed the same algae covered pipe an employee previously thought was out of service did have an updated label in a different section of the pipe and was in service (CBI photo 31, IMG_0040.jpg). I continued to observe signs that insulation was or could be exposed to water such as bubbling insulation, mold on exposed insulation, and ice on exposed piping touching insulation. Sections of insulation that appeared to be older were not always covered at ends (CBI photos 32 - 35, IMG_0041.jpg- IMG_0044.jpg). I observed pitting corrosion on a section of pipe that also had expose insulation (CBI photos 33-35, IMG_0042.jpg- IMG_0044.jpg). Piping insulation was not always covered in middle sections of the pipe (CBI photo 36, IMG_0045.jpg). We concluded our field tour at 11:15 am.

We completed a second facility tour on July 10, 2024. We obtain ice cleats from the facility to enter the two operating freezers. I noticed that the electrical conduit for an ammonia alarm was not connected in one freezer (CBI photo 40, IMG_0049.jpg). Pallet stacks reduced our

ability to see the evaporators in the other freezer (CBI photo 41, IMG_0050.jpg). While walking, we observed that the facility changed the NFPA diamonds on the machine room and labeled the ammonia alarms. I took a photo of the unguarded evaporators in the cooler and was told that they do not stack product in that room (CBI photo 42, IMG_0051.jpg). I also observed the contents of the hazmat trailer.

On July 11, 2024, we returned to the machine room. I took photos of compressors to compare the labeling to the P&IDs (CBI photos 43-48, IMG_0052.jpg- IMG_0057.jpg).

EPCRA TIER II

During the field tour we went into the chemical storage area and saw intermediate bulk containers that contained caustic soaps. There appeared to be less than 10,000 pounds of caustic soap storage capacity. The facility explained that since they are pet food grade, they do not need acids to sterilize equipment. We also saw their lead acid battery charging area. We asked if the sulfuric acid in the batteries was considered for the Tier II. The facility reached out to their environmental people who reached out to the manufacturers to find out how much sulfuric acid was in each battery. The facility did not have an answer when we left the facility.

On July 18, 2024, I received a lead acid battery inventory from Simmons that calculated lead amounts in batteries that was claimed as CBI (CBI Appendix 3). Lead is not an Extremely Hazardous Substance (EHS) under EPCRA and does not need to be aggregated according to the preamble to the final rule at 55 FR 30632. I again asked the facility to provide the amount of sulfuric acid in each battery on July 19, 2024. At the time of this report, we have not received the calculation.

In reviewing SDS for lead acid battery brands at Simmons, these batteries likely contain 5 – 30% sulfuric acid. Sulfuric acid is an EHS listed in appendix A to 40 CFR Part 355 with a threshold planning quantity of 1,000 pounds. 40 CFR 370.10(a)(1) states "A hazardous chemical that is an Extremely Hazardous Substance (EHS) is present at your facility at any one time in an amount equal to or greater than 500 pounds (227 kg—approximately 55 gallons) or the Threshold Planning Quantity (TPQ), whichever is lower. EHSs and their TPQs are listed in Appendices A and B of 40 CFR part 355." A facility must submit SDS and Tier II to the SERC, LEPC, and local responders when they have at least 500 pounds of sulfuric acid. It is likely that Simmons has exceeded the 500-pound threshold for Sulfuric acid reporting for EPCRA 311 and 312 as described in 40 CFR Part 370. At the time of the inspection report, Simmons has not provided information about the amount of sulfuric acid stored at the Milan, Missouri facility.

HAZARD ASSESSMENT

Lorenzo reviewed documentation supporting the worst-case and alternative release scenario releases during the inspection. He requested a copy of the document but did not receive it by the time we left the facility. On July 18, 2024, Simmons provided documentation for their offsite consequence analysis and claimed it as CBI (CBI Appendix 4). According to their RMP, Simmons used RMP*Comp to determine distance to endpoint. I mapped their alternative release scenario in Marplot and noted that MFA Agri Services was in the alternative release scenario distance to endpoint but was not identified as a public receptor for the alternative

case scenario in the RMP. 40 CFR 68.30(b) states, "...The presence of institutions (schools, hospitals, prisons), parks and recreational areas, and major commercial, office, and industrial buildings shall be noted in the RMP." After the inspection I identified the following finding:

14. **Simmons failed to include the presence of commercial or industrial buildings within the distance to endpoint of the alternative release scenario in their RMP as required by 40 CFR 68.30(b) and 40 CFR 68.165(b)(12).**

PROCESS SAFETY INFORMATION (PSI)

I asked what recognized and generally accepted engineering practices Simmons followed. Mr. Collins stated that they followed the locally amended International Fire Code 2022 and Uniform Mechanical Code 2021, National Fire Protection Association 70 2023 National Electrical Code, American Society of Mechanical Engineers Boiler and Pressure Vessel Code 2023, ASME B&PVC VIII Division 1 2023, International Institute of All-Natural Refrigeration 2-2021 amendment A Standard for Design of Safe Closed-Circuit Ammonia Refrigeration Systems, and IIAR 9-2020 Minimum System Safety Requirements for Existing Closed-Circuit Ammonia Refrigeration Systems. He stated that the facility has completed an IIAR 9-2020 audit.

During the inspection I requested to review the technical specifications for the hoses on the plate freezer. Mr. England stated that he would reach out to the manufacturer for the information. He was able to determine the part number of the hose. I was not provided the technical specifications of the plate freezer hoses before I left the facility. I requested a copy of the technical specifications of the plate freezer hoses before I left the facility. I again asked for the documents in my July 19, 2024, email. At the time of writing this report I was not provided a copy of the specifications. 40 CFR 68.65(d)(1)(i) requires that the owner or operator maintains information pertaining to the materials of construction of equipment in the process. I identified the following finding:

1. **Simmons failed to have information documenting the materials of construction of the hoses on the plate freezers as required by 40 CFR 68.65(d)(1)(i).**

I noted that some of the equipment labels in the photos I took during the July 9, 2024, field tour did not appear to match the P&IDs (CBI Appendix 5). Both the photos and P&IDs were claimed as CBI. I went to the machine room to take more photos of equipment ID labels on July 11, 2024. I took photos of the compressor and labels that were easily visible at eye level. In reviewing the photos, I confirmed that labeling on equipment does not match the P&IDs. 40 CFR 68.65(d)(1)(ii) requires that the owner or operator maintains up to date P&IDs. I identified the following finding:

2. **Simmons failed to have updated P&IDs after updating tags on process equipment as required by 40 CFR 68.65(d)(1)(ii).**

Simmons stated they were going to ask their contractor for redlined P&IDs reflecting the changed equipment labels. I requested a copy of the redlined P&ID during the inspection. I did not receive a copy before I left the facility. I again asked for the documents in my July 19, 2024,

email. At the time of writing this report I still have not received a copy of a redlined P&ID reflecting the updated labels.

During the facility walk through we noticed that the reciprocating compressor in the machine room had a drain that didn't have a self-closing valve (CBI photo 16). We asked for documentation about the reciprocating compressor and the drain. I again asked for the documents in my July 19, 2024, email. At the time of writing the report, we have not received this information.

During the inspection I asked to review documentation on the relief system design and design basis. Mr. Collins showed me documentation of the relief system design basis from 2021. The documentation stated that the relief system was not in full compliance with IIAR 2. After the inspection on July 19, 2024, I requested a copy of the document I reviewed during the inspection. At the time of this report, we have not received the documents. 40 CFR 68.65(d)(1)(iv) requires that the owner or operator maintains current information on the relief system design and design basis. The January 9, 2023, incident investigation report states that the relief system was updated in May 2022. Simmons employees also stated the relief system had recently been update. I identified the following finding:

3. **Simmons failed to have current documentation on relief system design basis as required by 40 CFR 68.65(d)(1)(iv).**

Lorenzo reviewed a spreadsheet of pressure relief valve replacement and installation dates during the inspection and requested a copy. This document was not received when we left the facility. I reiterated this request on July 19, 2024. At the time of writing the report this document was still not received. The document indicated that many PRVs had not been replaced for over five years. Simmons staff was also did not know how many PRVs were in the facility. 40 CFR 68.65(d)(2) states, "The owner or operator shall ensure and document that the process is designed and maintained in compliance with recognized and generally accepted good engineering practices." ANSI/IIAR 6-2019 section 13.1 states, "ITM tasks shall be performed on overpressure protection devices at the indicated frequencies set forth in Table 13.1 or per manufacturers' instructions, unless a different frequency is justified in accordance with Section 5.2.1." Table 13.1 states that PRVs should be replaced five years from installation date or when lifted. I identified the following finding:

4. **Simmons failed to replace SRVs/PRVs at the interval required by RAGAGEP as required by 40 CFR 68.65(d)(2).**

During the facility tour I noticed that the NFPA diamonds on the doors to the machine room were not 3-3-0 (CBI photos 8 & 20). IIAR 9-2020 section 7.2.9.1.1 states, "Buildings and facilities with refrigeration systems shall be provided with placards in accordance with NFPA 704." IIAR 9-2020 Appendix D.7.1 states, "warning for indoor ammonia refrigeration equipment: **3-3-0** This is for equipment located indoors and includes all entrances to the machinery room." I noted this as an area of concern at the end of the day on July 9, 2024, to Simmons. At the start of the next day, I was shown images of 3-3-0 NFPA diamonds on the machine room doors. I

asked for a copy of these pictures. I again asked for the documents in my July 19, 2024, email. At the time of writing the report I have not received copies.

While on the roof during the facility tour, I noted that a pipe support was not attached to the pipe (CBI photo 23). IIAR 9-2020 section 7.2.7.1 states "General. Piping, tubing, and equipment shall be supported to prevent excessive vibration and movement." At the start of the next day, I was shown an image of the pipe support with rubber strips added so that the pipe support was in contact with the piping. I asked for a copy of the picture. I again asked for the documents in my July 19, 2024, email. At the time of writing the report I have not received a copy.

Also, while on the roof during the facility tour, I observed exposed insulation, evidence of water in insulation, ice up against exposed insulation, paint chips exposing corrosion, and pitting corrosion next to exposed insulation (CBI photos 26, 29, 31-37). ANSI/IIAR 9-2020 section 5.1 states, "all equipment and system components shall be inspected, tested, and maintained in accordance with ANSI/IIAR 6-2019." IIAR 6-2019 Table 11.1 inspection items (a), (b), (c), and (j) call for regular inspections of piping for pitting or surface damage, moisture incursion, degradation of protective coating, and insulation protective jacketing. IIAR 6-2020 section 11.1.1 requires testing of wall thickness where pitting, surface damage, general corrosion, or a combination occur. Based on these observations during the field tour, I identified the following finding:

12. Simmons failed to ensure that machine room door labeling, pipe supports, and pipe condition (surface corrosion) conformed to RAGAGEP as required by 40 CFR 68.65(d)(2).

During the inspection Simmons provided copies of block flow diagrams and a SDS for ammonia and claimed them as CBI (CBI Appendix 6 & 7). Lorenzo observed safe upper and lower operating limits on the SOPs. I also reviewed maximum intended inventories from two different years. The 2021 maximum intended inventory was less than the 2022 calculation. Simmons staff felt that the 2022 calculation was not accurate because it was completed after ammonia was added to the system and not enough time was given for it to settle in. Simmons regularly adds ammonia to their system, adding ammonia in 2019, 2020, 2021, 2022, and 2024. I verbally requested copies of the 2021 and 2022 maximum intended inventory calculation during the inspection. I did not receive a copy of the calculations before I left the facility. I left the documents off my email of requested documents to Mr. Kumli by error.

During the first facility tour I noted that the doors at one of the entrances to the machine room did not seal completely (CBI photo 8). I could see a light through the crack in the door. ANSI/IIAR 9-2020 section 7.3.2.1 states, "Separation and Fire Protection. The machinery room shall be separated from the remainder of the building by tight-fitting construction. Doors shall comply with Section 7.3.9.2." ANSI/IIAR 9-2020 section 7.3.9.2 states, "Machinery room doors shall be self-closing and tight fitting."

During the walkthrough I noticed that some of the evaporators in a cooler were not protected from impact by forklifts. I returned on July 10, 2024, to take a photo of the unguarded evaporators (CBI photo 42). I asked the facility if they stack items in that room and they said no.

ANSI/IIAR 9-2020 section 7.2.12.1 states, "Where ammonia-containing equipment is installed in a location subject to physical damage, guarding or barricading shall be provided."

During the first walk through of the facility we were unable to enter the freezer because there was ice on the floor. The facility requires "ice cleats" or "crampons" to be worn on boots to enter the freezers to reduce the risks of falling. On July 10, 2024, we were provided ice cleats to enter the two freezers that were in operation. The evaporators in one freezer were covered in ice and we were unable to tell if ammonia piping had ice due to pallets blocking view and access to the evaporators (CBI photo 39, IMG_0048.jpg). In the other freezer the evaporators appeared to be in a similar condition (CBI photo 41, IMG_0050.jpg). Both freezers had ice on the floor (CBI photos 5-6, 39-41, IMG_0014.jpg - IMG_0015.jpg, IMG_0048.jpg- IMG_0050.jpg). ANSI/IIAR 6-2019 section 5.6.8 states, "Equipment and piping shall be kept free from excessive ice buildup." Appendix A of ANSI/IIAR 6-2019 clarifies that "the owner is permitted to develop and incorporate defrost operational procedures, ice removal procedures using mechanical tools, or both, with determined frequencies to safely remove ice often enough to avoid excess accumulation." Simmons employees explained during the second facility tour that their freezers are defrosted once a year. Even though one freezer was defrosted about a month before the inspection, it had similar ice accumulation as the other freezer which had last been defrosted about a year before our inspection. ANSI/IIAR 6-2019 section states, "Ice accumulation shall not be permitted to deflect or bend pipes, displace components, or negatively impact the system's structural integrity." ANSI/IIAR 6-2019 table 9.1(g) requires that evaporators are inspected for excessive ice buildup.

40 CFR 68.65(d)(2) states, "The owner or operator shall ensure and document that the process is designed and maintained in compliance with recognized and generally accepted good engineering practices." After the inspection I identified the following finding:

16. **Simmons failed to have tight fitting doors to the machine room and to ensure that evaporators were protected against impact and to prevent excessive ice buildup per RAGAGEP as required by 40 CFR 68.65(d)(2).**

During the inspection, Lorenzo asked to review ventilation calculations for the machine room and the electrical classification of the facility. He viewed a copy of the electrical classification, but the facility was not able to produce a ventilation study to review. The facility said they would locate one and Lorenzo requested a copy of it. I again asked for the ventilation calculations and electrical classification in my July 19, 2024, email. At the time of writing the report, we have not received copies of the documents. 40 CFR 68.65(d)(1)(v) requires that owners or operators compile information on the ventilation system design. After the inspection I identified the following finding:

19. **Simmons failed to document the ventilation system design as required by 40 CFR 68.65(d)(1)(v).**

PROCESS HAZARD ANALYSIS (PHA)

I asked to review the facility's two most recent PHAs. On July 9, 2024, the facility provided me a copy of their two most recent PHAs and claimed them as CBI. (CBI Appendix 8). They updated their PHA within 5 years. Simmons had PHAs from previous owners of the facility.

I reviewed the most recent PHA. After my review, I explained potential ways to improve their PHA the next time the facility updated it. I reviewed the recommendations of the most recent PHA. By the PHA policy, one of the recommendations should have been completed, but it was marked as completed in August 2024, a date that had yet to occur. Mr. England stated that the recommendation in question had not been completed yet. Mr. Collins changed the recommendation to incomplete.

On July 19, 2024, I requested a list of the status of all of the 2024 PHA recommendations. At the time of this report, we have not received the document. 40 CFR 68.67(e) requires the owner or operator to assure that the recommendations are resolved in a timely manner and that the resolution is documented. I identified the following finding:

5. **Simmons failed to resolve PHA recommendations in a timely manner as required by 40 CFR 68.67(e).**

STANDARD OPERATING PROCEDURES (SOPs)

Operators have access to a PSM/RMP management software to see procedures and are able to print them off. The software tracks which SOPs need to be certified and who signs them. Experienced operators review the SOPs annually. During the inspection, Simmons provided a list of the certification dates of the SOPs and claimed this as CBI (CBI Appendix 9). I looked through this list and noted that most of the SOPs were certified within a year and a few days. 40 CFR 68.69(c) states, "The owner or operator shall certify annually that these operating procedures are current and accurate." Simmons consistently took slightly more than a year to certify their operating procedures.

Simmons has safe work procedures like lockout/tagout and control over entry to the facility. Lorenzo reviewed several SOPs during the inspection. He requested a copy of SOP 2. We did not receive the document before leaving the facility. I again asked for the documents in my July 19, 2024, email. At the time of this report, we have not received SOP 2.

TRAINING

New employees at Simmons have a three-day orientation. New employees then shadow an experienced employee for at least 2 weeks. Operators receive training at the Garden City Ammonia Program for operator 1 and 2 and the PSM training. Operators receive a yearly PSM refresher with a contractor. Information covered in the monthly PSM meetings is also considered to be a form of training.

During the inspection I asked for training records for an experienced operator and a new operator. I received the documentation which was claimed as CBI (CBI Appendix 10).

MECHANICAL INTEGRITY

I asked about the inspection protocol for the plate freezers. I reviewed a walk-through order for the plate freezer. Simmons was uncertain on how often these occurred, but eventually determined they occur biweekly. Hoses are replaced every 60 months, half of the recommended replacement interval of the manufacturer. Currently there is only a preventative maintenance for one of the plate freezers. Simmons employees are uncertain if this was always the case or if it was overlooked in a software change. We requested a work order for the hoses during the inspection. I again asked for the documents in my July 19, 2024, email. At the time of this report, we have not received the document. During the inspection Lorenzo learned that Simmons uses two different audits to ensure that frequency of inspections and tests of process equipment is sufficient.

Lorenzo requested the mechanical integrity program. I again asked for the documents in my July 19, 2024, email. It was not received at the time of writing this report. Lorenzo asked for Simmons mechanical integrity inspections log. He was provided a spreadsheet that was claimed as CBI and was difficult to read because each row of the spreadsheet was on multiple pages (CBI Appendix 11). Lorenzo discussed this with Simmons personnel, and they were able to convert the spreadsheet to a readable pdf, which he requested. I again asked for the readable pdf in my July 19, 2024, email. At the time of writing the report the readable document has not been received.

During the inspection I asked to see a copy of the most recent inspection before March 2024 of the evaporator involved in the March 2024 incident. I was not provided a copy by the time that I left the facility. I again asked for the documents in my July 19, 2024, email. At the time of writing this report I still have not received a copy. Simmons did not show us the inspection report for any inspection during the inspection. 40 CFR 68.73(d)(4) states, "The owner or operator shall document each inspection and test that has been performed on process equipment. The documentation shall identify 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." After the inspection, I identified the following finding:

18. Simmons failed to document each inspection and test that has been performed on process equipment as required by 40 CFR 68.73(d)(4).

Lorenzo asked for the ammonia sensor calibration records and for the location of the ammonia sensors during the inspection. I again asked for the documents in my July 19, 2024, email. At the time of this report, we have not received the documents.

MANAGEMENT OF CHANGE (MOC)

I reviewed Simmons MOC policy which was claimed as CBI (CBI Appendix 12).

During the inspection, I asked for and received copies of the three most recent MOCs and a list of all MOCs which were all claimed as CBI (CBI Appendix 12). The MOCs were either in progress or for simple changes. The facility staff explained that the MOC cooler expansion was a

completed MOC for a complex change and I requested the document. I again asked for the documents in my July 19, 2024, email. At the time of this report, I did not receive a copy of the MOC cooler expansion. Because of this, I am unable to determine if the MOCs meet all requirements of 40 CFR 68.75.

During the inspection I learned that Simmons is relabeling their process equipment. The former maintenance manager oversaw the equipment relabeling project. The process to start the project began on June 29, 2023, and money for the project approved on July 14, 2023. When I asked if there was an MOC for this change I was originally told no. I was also told the MOC would be put in after the contractor provided them with new P&IDs. As mentioned in the PSI section, the relabeling process had begun and the equipment labels did not all match the P&IDs. Simmons created a MOC for the relabeling project during the first day of the inspection, July 9, 2024, almost a year after the relabeling project was funded. I asked for a copy of the MOC but did not receive it before I left the facility. I again asked for the documents in my July 19, 2024, email. At the time of this report, I have not received the MOC. 40 CFR 68.75(b) states "the procedures shall assure that the following considerations are addressed prior to any change." Because Simmons relabeled equipment before conducting a MOC I identified the following finding:

13. Simmons failed to complete an MOC before the start of their equipment relabeling process as required by 40 CFR 68.75(b).

PRE-STARTUP SAFETY REVIEW (PSSR)

Simmons provided their PSSR policy during the inspection and claimed it as CBI (CBI Appendix 13). If Simmons adheres to their PSSR policy they would meet the requirements of 40 CFR 68.77. Lorenzo reviewed two PSSRs during the inspection. He requested a copy of the PSSR for the cooler expansion at the inspection. He was told that it was included in the cooler expansion MOC. He reviewed a copy of the PSSR during the inspection, but we did not receive a copy before we left the facility. I again asked for the documents in my July 19, 2024, email. At the time of the report, we did not receive a copy of the cooler expansion MOC and PSSR.

COMPLIANCE AUDIT

Simmons provided the first few pages of their two most recent compliance audits and claimed them as CBI (CBI Appendix 14). Lorenzo requested a copy of a complete audit that included the report and the findings of the audit. Simmons did not provide us with access to a complete audit before we left the facility. On July 18, 2024, Simmons once again provided the introductory pages of the two compliance audits and did not provide the actual audit. In my July 19, 2024 email to Mr. Kumli, I explained that we would like a copy of the 2021 compliance audit with a copy of the actual audit, not just the first few pages. At the time of the report, I did not receive a copy of the compliance audit. 40 CFR 68.79(a & c-e) requires that a facility certifies that they evaluated compliance with subpart D at least every three years, to develop a report of the findings of the audit, to promptly determine and document an appropriate response to the findings and document that deficiencies are corrected and to retain the two

most recent compliance audits. Because Simmons did not provide a copy of a compliance audit, I identified the following finding after the inspection:

17. **Simmons failed to certify compliance with subpart D at least every 3 years, to document the findings of the audit, responses to findings and corrections of deficiencies, and to retain the two most recent compliance audit reports as required by 40 CFR 68.79(a & c-e).**

INCIDENT INVESTIGATION

In the event of an incident, Simmons orders an evacuation, assesses the release, and calls the NRC if deemed necessary. A third-party contractor helps Simmons use a process safety management software to begin investigating the incident and manage documents. Simmons begins the investigations as soon as possible. Simmons plans on retaining the incident investigations for as long as they operate the Milan facility.

I reviewed three incident investigations reports for incidents that had been reported to the NRC in 2023 and 2024 and all reports were claimed as CBI (CBI Appendix 15). One incident investigation report did not include information on factors leading up to the incident. 40 CFR 68.81(d)(4) requires an incident investigation report to include the factors that contributed to an incident. I identified the following finding:

6. Simmons failed to include the factors that contributed to the incident in all reports as required by 40 CFR 68.81(d)(4).

The recommendations of one incident were completed almost three and four months past each due date. The facility had no recommendations in another incident investigation report. I reviewed a MOC for replacing the broken equipment related to the incident, but the MOC was not referenced in the report. Simmons also plans on adding a new requirement to the preventative maintenance for the equipment involved in the incident, but this was not listed as a recommendation. 40 CFR 68.81(d)(5) requires that any recommendations resulting from the investigation are included in the incident investigation report. I identified the following finding:

7. Simmons failed to include all recommendations resulting from the investigation in all reports as required by 40 CFR 68.81(d)(5).

The facility reviews incident investigation reports with their contractors and management. They notify employees if a recommendation will impact them. During the inspection I asked if the facility had an incident investigation policy. I was told that they did. I asked for a copy of the policy. I did not receive it before I left the facility. I included the document as a request in my email to Mr. Kumli on July 19, 2024. At the time of writing the report I have not received the incident investigation policy.

EPCRA RELEASE REPORTING

Simmons reports releases which they believe might be greater than 100 pounds to the NRC as soon as they can. They update the NRC with the actual release amount once it is calculated and

include the release calculation in the incident investigation. I noticed that releases reported to the NRC were also reported to the Missouri SERC.

EMPLOYEE PARTICIPATION

The facility has a written employee participation program that they claimed as CBI (CBI Appendix 16). Refrigeration operators and floor workers are invited to monthly PSM meetings.

HOT WORK PERMIT

I reviewed three recent hot work permits that appeared to meet the requirements of 40 CFR 68.85(b). Simmons has a corporate policy requiring a one-hour continuous fire watch after hot work followed by 15-minute interval checks for the following hour. Any cutting, grinding, and any activities that could create heat require a hot work permit.

CONTRACTORS

Simmons verifies contractors with accounts payable and then goes through their PSM evaluation. Simmons reviews contractor safety logs and certifications and doesn't select contractors with bad safety records. Simmons provides safety and emergency action plan training and requires contractors to follow safety protocol. Contractors uses remote clickers to answer questions during training to show their understanding. Simmons uses a form to evaluate contractor safety. Keys are used to control contractor access to the facility.

EMERGENCY RESPONSE

Simmons is a responding facility. The facility has air purifying respirators and are fit tested, enabling them to respond to small releases. When ammonia concentrations are high, they have Self-Contained Breathing Apparatus (SCBA) and new level A suits they can wear. The facility typically valves off leaks and allows ammonia to dissipate before approaching the source of the leak. We were told that the Milan fire chief recently visited the facility. Simmons has offered to pay for the fire departments training and fit testing.

During the inspection Simmons explained that Missouri recently decided to merge the Sullivan and Putnam County Local Emergency Planning Committees because the Sullivan County LEPC was inactive. They discussed how it was difficult to coordinate with the LEPC and that they attend the LEPC meetings when they occur. I spoke with Robert Munden, the chairman of the Putnam Sullivan Local Emergency Planning District on July 17, 2024. The district is only two years old and has been unable to write a community emergency response plan due to a lack of funding. He believes that Simmons has submitted their Tier II and EAP to the LEPD. He stated that the LEPD meets annually and is due for a meeting soon. I asked my supervisor if he could provide guidance on potential funding opportunities to the LEPD.

During the inspection I asked if Simmons had documentation indicating that they had coordinated with local first responders. On July 18, 2024, Simmons provided a letter to the city administrator which they claimed as CBI (CBI Appendix 17).

Only July 18, 2024, Simmons provided a training sign-in sheet and hazmat incident commander training summary and claimed both as CBI (CBI Appendix 17). During the inspection I had requested sign-in sheets from coordination activities with first responders. On July 18, 2024, I was provided with the facility's visitor log for the past few years which were claimed as CBI (CBI Appendix 18). Simmons employees stated that it wasn't until May 2024 that their coordination attempts received a response from the Milan Fire Department.

During the inspection I asked to review the facility's emergency action plan and emergency response plan. I viewed copies of the emergency action plan, hazard material response, and ammonia incident response. I requested copies of these three documents but did not receive them before I left the facility. On July 18, 2024, Simmons provided copies of the emergency action plan and hazard material response (CBI Appendix 17). I again asked for the ammonia incident response in my July 19, 2024, email. At the time of this report, we have not received the document.

I asked how the public was notified in the event of an incident. I was told that to notify the public of hazards during an incident, Simmons will call the city administrator who will activate the text system to alert residents. Simmons has an onsite nurse who has a protocol to treat ammonia exposures.

On the second field tour we observed the newly acquired emergency response equipment and discussed the importance of considering temperature when storing equipment to ensure its longevity and protectiveness. The facility was still developing procedures for the use of and inspection, testing, and maintenance of its new emergency response equipment. We saw the written procedures for APR in the computerized maintenance management system, but other equipment such as the level A suits and SCBAs did not have procedure. 40 CFR 68.95(a)(2) requires that the emergency response plan contains "Procedures for the use of emergency response equipment and for its inspection, testing, and maintenance." I identified the following finding:

> **8. Simmons failed to include procedures for the use of emergency response equipment and for its inspection, testing, and maintenance as required by 40 CFR 68.95(a)(2).**

After the inspection on July 18, 2024, Simmons provided an inspection log and inventory of response equipment and claimed it as CBI (CBI Appendix 11).

In reviewing the emergency response plan, I noticed that it did not include written procedures on how to review and update the plan. I asked how the emergency response plan was updated and was told about the revision process verbally. 40 CFR 68.95(4) states, "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. The owner or operator shall review and update the plan as appropriate based on changes at the stationary source or new information obtained from coordination activities, emergency response exercises, incident investigations, or other available information, and ensure that employees are informed of the changes." Because Simmons did not have a written procedure to update the emergency response plan, I identified the following finding:

9. Simmons failed to include procedures to update the emergency response plan in the emergency response program as required by 40 CFR 68.95(a)(4).

Simmons typically runs ammonia emergency response drills in the fall and invite local responders to attend. Based on Mr. Kinnard's explanation of the field exercises, they appear to meet the requirements in 40 CFR 68.96(b)(1)(ii). Mr. Kinnard also stated that Simmons had completed tabletop exercises. I asked to review a copy of the documentation for their most recent tabletop exercise, but Simmons was unable to locate the documentation. I asked for a copy of a tabletop exercise report during the inspection. I again asked for the documents in my July 19, 2024, email. At the time of writing the report, Simmons had not provided documentation. 40 CFR 68.96(b)(3) states, "The owner or operator shall prepare an evaluation report within 90 days of each field and tabletop exercise. The report shall include a description of the exercise scenario, names and organizations of each participant, an evaluation of the exercise results including lessons learned, recommendations for improvement or revisions to the emergency response exercise program and emergency response program, and a schedule to promptly address and resolve recommendations." I identified the following finding:

10. Simmons failed to have documentation of tabletop exercises as required by 40 CFR 68.96(b)(3).

MANAGEMENT SYSTEM

I reviewed Simmons management system. The facility has a chart of who is involved in the program but hasn't documented what parts of the program that person is responsible for. Mr. Collins didn't think that a document outlining lines of authority and who was responsible for each section of the RMP existed. He was able to explain the lines of authority.

The facility does complete a MOC for personnel change, but it only covers employees who work at the location and MOCs do not occur for corporate personnel involved with RMP. 40 CFR 68.15(c) states that "When responsibility for implementing individual requirements of this part is assigned to persons other than the person identified under paragraph (b) of this section, the names or positions of these people shall be documented, and the lines of authority defined through an organization chart or similar document." After the inspection I identified the following finding:

15. Simmons failed to document names or positions of those responsible for the development, implementation, and integration of RMP elements and to define lines of authority as required by 40 CFR 68.15(c).

RISK MANAGEMENT PLAN

I reviewed the facility's most recent RMP. Under Simmons' ownership the RMP had always been updated within five years. I noted that the facility had updated their 24-hour emergency contact several times. I asked when Clint Frossard left Simmons. I was told that he left on November 2, 2023. The 24-hour emergency contact number was updated on May 10, 2024, 6 months later. 40 CFR 68.195(b) states, "Emergency contact information—Beginning June 21, 2004, within one month of any change in the emergency contact information required under §

68.160(b)(6), the owner or operator shall submit a correction of that information." Therefore, I made the following finding:

11. **Simmons failed to update emergency contact information within 30 days of the change as required by 40 CFR 68.195(b).**

CLOSING CONFERENCE

The closing conference began at 1 pm on July 11, 2024. I passed around a sign in sheet and asked Simmons employees to include the individuals online. I briefly went over the inspection and the materials covered. I explained that we had not received all of the documents at the time of the inspection and had already shared a list with Simmons of documents we were waiting on (Appendix 1). Some of the documents needed to be bates stamped and reviewed by the attorney. Simmons could not locate other documents but believed that they could find them. I signed a list containing all of the documents we had received as of July 11, 2024 at 1 pm and Martin Sievers signed it on behalf of Simmons. I then filled out the CBI form. Simmons claimed all documents provided to the EPA and all photos taken by the EPA as CBI. Martin Sievers signed the CBI form (Appendix 1). I explained that my goal was to have a rough draft of the inspection report complete within 30 days and to have the inspection report to the facility in 70 days. I explained any evidence of corrections received would be referenced in the inspection report or stored in the site file for the case officer to review. I asked who in the facility would like a courtesy copy of the report. I explained the email would come from R7-Enforcement-Compliance-Assurance@epa.gov and that I would email them a few days before the report was sent in case the email went to their junk folder. I also explained a copy of the report would be sent to their registered agent. I overviewed EPA's enforcement process with the facility.

I explained that I had a list of preliminary findings, but because I did not have access to all of the documents that I needed certain areas may have findings identified after the inspection. There were also some areas that we had recommendations for Simmons but, did not feel that they met the level to be called a finding. I reviewed the preliminary findings with the facility and Martin Sievers signed the form to acknowledge them (Appendix 1). I reiterated to Simmons that they can provide corrections after the inspection and to use the file share system if something was CBI. Lorenzo and I left the facility at 1:30 pm.

Post Inspection Correspondence

I followed up with Simmons on July 16, 2024, requesting that the requested documents we had yet to receive be uploaded to the file share software. Their attorney responded that he left a voicemail with me. I did not receive a call and confirmed that the phone number on my business card is correct. I was told that they were applying bates numbers to the documents and that they would be uploaded by July 17th at the latest. I received some of the requested document on July 18th, but still had over 20 documents I was waiting on. I confirmed receipt of documents and provided a list of documents that were still outstanding that I asked to receive by close of business on July 26th. Mr. Kumli reached out to me asking to discuss the document request. I was unavailable, so I extended the deadline by a week and provided times I was

available for a call. I received no response. The second deadline to submit documents had passed and I asked for the documents to be submitted so the report could accurately reflect the conditions of the facility. Mr. Kumli responded, and I was able to set up a time to talk with him with Region 7 Office of Regional Counsel on the line as well. I clarified document request with Mr. Kumli during the phone call on August 8, 2024. At the time of writing this report I have received no additional documents since July 18, 2024.

CHRISTINA GALLICK

Digitally signed by CHRISTINA GALLICK
Date: 2024.09.25 09:31:15 -05'00'

Christina Gallick
Compliance Inspector
Chemical Accident Prevention Section
Air Branch
Enforcement & Compliance Assurance Division
Region 7 U.S. Environmental Protection Agency

Hensley, Dave

Digitally signed by Hensley, Dave
Date: 2024.09.25 10:02:08 -05'00'

Dave Hensley
Supervisor
Chemical Accident Prevention Section
Air Branch
Enforcement & Compliance Assurance Division
Region 7 U.S. Environmental Protection Agency

APPENDICES

1 – Inspection Forms
2 – CBI - Photo Log
3 – CBI - EPCRA
4 – CBI - Offsite Consequence Analysis
5 – CBI - Piping and Instrument Diagrams
6 – CBI - Process Safety Information Equipment
7 – CBI - Safety Data Sheet
8 – CBI - Process Hazard Analysis
9 – CBI - Standard Operating Procedures
10 – CBI - Training
11 – CBI - Mechanical Integrity
12 – CBI - Management of Change
13 – CBI -Pre-Startup Safety Review
14 – CBI - Compliance Audit
15 – CBI - Incident Investigation
16 – CBI - Employee Participation
17 – CBI - Emergency Response
18 – CBI - Visitor Sign-in
19 – CBI - Duplicate Files

NOTICE OF PRELIMINARY FINDINGS

FIRM NAME: Simmons Animal Nutrition, Inc. **RMP/TRI NO:** 1000 0008 6514

FIRM ADDRESS: 832 East 3rd Street

Milan, Mo 63556

INSPECTOR: Christina Gallick **DATE:** 7-11-2024

An inspection of the above facility has just been completed. The purpose of the inspection was to determine compliance with the requirements of the Clean Air Act Section 112r and Emergency Planning Community Right-to-Know Act. The following potential violations were identified:

	CITATION	DESCRIPTION
1	40 CFR 68.65(d)(1)(i)	Facility did not have information documenting the ~~construct~~ materials of construction of the hoses on the plate freezers
2	40 CFR 68.65(d)(1)(ii)	Facility did not have updated P&IDs after updating tags on process equipment
3	40 CFR 68.65(d)(1)(iii)	Facility did not have current documentation on relief system design basis
4	40 CFR 68.65(d)(2)	Facility did not replace SRVs/PRVs at the interval required by RAGAGEP.

This Notice is provided to call your attention to those areas of potential noncompliance at the earliest possible time. This Notice does not constitute a Notice of Violation, Order, or Civil Action pursuant to the Emergency Planning Community Right-to-Know Act of 1986 (SARA Title III) or Section 113 of the Clean Air Act (CAA), and may not be a complete listing of all violations which may be identified as a result of this inspection.

You are encouraged to take corrective action to address these preliminary findings. Please submit the actions you take and/or a schedule of the actions to EPA in writing as soon as possible.

Christina Gallick Phone: 913-551-7429

U.S. Environmental Protection Agency
11201 Renner Blvd.
Lenexa, Kansas 66219

Corrective actions you have taken may be considered in any subsequent U.S. EPA enforcement follow-up, to the extent allowed by Agency regulations, guidance, and policies.

The undersigned hereby acknowledges receipt of a copy of this Notice.

PRINTED NAME: Martin Sievers

TITLE: Sr Director of Operations

SIGNATURE: [signature] DATE: 7/11/24

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	CITATION	DESCRIPTION
5	40 CFR 68.67(e)	Facility did not resolve PHA recommendations in a timely manner.
6	40 CFR 68.81(d)(4)	Facility did not include the factors that contributed to the incident in all reports
7	40 CFR 68.81(d)(5)	Facility did not include all recommendations resulting from the investigation in all reports
8	40 CFR 68.95(a)(2)	Facility did not include procedures for the use of emergency response equipment and for its inspection, testing, and maintenance

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	CITATION	DESCRIPTION
9	40 CFR 68.95(a)(4)	Facility did not include procedures to update the emergency response plan in the emergency response program.
10	40 CFR 68.96(b)(3)	Facility did not have documentation of tabletop exercises.
11	40 CFR 68.195(b)	Facility did not update emergency contact information within 30 days of the change.
12	40 CFR 68.65(d)(2)	Facility did not ensure that machine room door labeling, pipe supports, and pipe condition (surface corrosion) conformed to RAGAGEP.

This Notice is provided to call your attention to those areas of potential noncompliance at the earliest possible time. This Notice does not constitute a Notice of Violation, Order, or Civil Action pursuant to the Emergency Planning Community Right-to-Know Act of 1986 (SARA Title III) or Section 113 of the Clean Air Act (CAA), and may not be a complete listing of all violations which may be identified as a result of this inspection.

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