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PUBLIC AWARENESS PROGRAM FIELD AUDIT

Audit Date:5/16/2017	Name of Operator: Solvay Chemicals, Inc.			
H.Q. Address	Company Official: Pascal Mansy			
3333 Richmond Ave.	Title: Engineering/Maintenance Manager			
Houston, TX 77098	Phone number: 360-577-7800			
	Fax Number:			
Inspection Team:	Operator Personnel in Interview: (Name & Phone Number)			
1. Scott Anderson	1. Pascal Mansy 360-577-7800			
2. Lex Vinsel	2.			
3.	3.			

Instructions: Check (or mark) the appropriate box: "Yes," "No" or "N/A." If further comments are necessary, check (or mark) the comment box and write the comment in the "comments" section below the questions and/or attach a comments sheet when necessary. **These questions are to be verified in the field. Certain questions will have corresponding Desk Audit questions on a separate audit form.**

			Yes	No	N/A	Comment
1.	1. 1162 Section 2: Management Commitment					
	(Must be verified in field if no PHYSICAL copy included in plan)					
	a. Does the statement include the name and title of the appropri		X			
		person(s) with authority to authorize funding)?				
	b. Does the statement include the signature of the appropriate authority		X			
		with authority to authorize funding)?				
	c. Are copies of approved city ordinances, etc., included where applicable				X	
	***No ordina	T				
2.		1162 Section 4: Message Content				
		(These are required in written plan. They will need				
		verification in field) ***See PA Program in O&M attachment K***				
Affec	ted Public:	a. pipeline purpose and reliability	X			
Inclu	ding	b. hazards & prevention measures undertaken	X			
custo		[192.616(d)(2)]				
	sidents living	c. leak recognition and response [192.616(d)(3 &4)]	X			
along the pipeline route						
Toute	•	d. damage prevention awareness	X			
		e. how and where to get more information	X			
		f. One-call requirements [192.616(d)(1)]	X			
		g. Emergency communications [192.616(d)(5)]	X			
Eme	rgency	a. pipeline purpose and reliability	X			
Offic	•	b. hazards & prevention measures undertaken	X			
		[192.616(d)(2)]				
		c. leak recognition and response [192.616(d)(3 &4)]	X			
		d. emergency preparedness and response	X			
		e. how and where to get more information	X			
		f. emergency communications [192.616(d)(5)]	X			
		g. One-call requirements [192.616(d)(1)]	X			
Com	ments:					

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		Yes	No	N/A	Com-ment
2. (Continued)	1162 Section 4: Message Content	X			
	(These are required in written plan. They will need				
	verification in field) ***See PA Program in O&M				
	attachment K***				
Local Public	a. pipeline purpose and reliability	X			
Officials	b. hazards & prevention measures undertaken	X			
	[192.616(d)(2)]				
	c. leak recognition and response [192.616(d)(3 &4)]	X			
	d. emergency preparedness and response	X			
	e. right-of-way encroachments	X			
	f. how and where to get more information	X			
	g. emergency communications [192.616(d)(5)]	X			
	h. construction/maintenance activities	X			
	i. One-call requirements [192.616(d)(1)]	X			
Excavators/	a. pipeline purpose and reliability	X			
Contractors	b. hazards & prevention measures undertaken [192.616(d)(2)]	X			
	c. leak recognition and response [192.616(d)(3 &4)]	X			
	d. damage prevention awareness	X			
	e. pipeline location information	X			
	f. how and where to get more information	X			
	g. One-call requirements [192.616(d)(1)]	X			
	h. emergency communications [192.616(d)(5)]	X			
3. 1162 Sec	tion 4 (4.4.1): PRIORITY MESSAGE	X			
	ould be written in plan and verified in Field) Does the				
	ntify the message for Emergency and Public Officials as				
	eople first and then property as the TOP priority message?				

3.	1162 Section 4 (4.4.1): PRIORITY MESSAGE (Message should be written in plan and verified in Field) Does the program identify the message for Emergency and Public Officials as protecting people first and then property as the TOP priority message?	X		
Con	nments:			

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		Yes	No	N/A	Com- ment
4.	1162 Section 5: Delivery Method				ment
Affected Public:	(From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.***				
LDC Customers	Bill Stuffer – required minimum			X	
Baseline	Public service announcements			X	
	2. Paid Advertising			X	
	3. Other:			X	
Supplemental	1. Public service announcements			X	
	2. Paid advertising			X	
	3. Targeted distribution of print material			X	
	4. Newspaper and magazine advertisements			X	
	5. Community events			X	
	6. Community newsletters			X	
	7. Other:			X	
Emergency Officials:	(From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.***				
Baseline:	1. Print Materials	X			
	2. Group Meetings***Plant manager attends group meetings***	X			
	3. Other			X	
Supplemental:	1. Telephone calls			X	
	2. Personal contact***FD occasionally visits***	X			
	3. Videos and/or CDs			X	
	4. Other:			X	
Local Public Officials:	(From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.***				
Baseline:	Targeted distribution of printed materials	X			
	2 Other			X	
Supplemental:	2. Other 1. Group meetings			X	
Supplemental:	1. Group meetings			X	
Supplemental:	Group meetings Telephone calls	X			
Supplemental:	Group meetings Telephone calls Personal contact***FD occasionally visits***	X		X	
	Group meetings Telephone calls Personal contact***FD occasionally visits*** Other	X		X	
Excavators/ Contractors	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.***			X	
Excavators/	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach	X		X X	
Excavators/ Contractors	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings			X X X	
Excavators/ Contractors Baseline:	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings 3. Other			X X X	
Excavators/ Contractors	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings 3. Other 1. Personal contact			X X X	
Excavators/ Contractors Baseline:	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings 3. Other 1. Personal contact 2. Videos and/or CDs			X X X X X X	
Excavators/ Contractors Baseline:	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings 3. Other 1. Personal contact 2. Videos and/or CDs 3. Open houses	X		X X X	
Excavators/ Contractors Baseline:	1. Group meetings 2. Telephone calls 3. Personal contact***FD occasionally visits*** 4. Other (From written plan – Does operator provide applicable documentation?) ***See PA Program in O&M attachment K.*** 1. Once-Call center outreach 2. Group meetings 3. Other 1. Personal contact 2. Videos and/or CDs			X X X X X X	

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						res	NO	N/A	ment
5.		1162 Section 5: Delivery	Fregi	uencie	S				
		(These are required in the written							
		Program in O&M attachment K.*							
	cted Public:								
LDC	C Customers?	Does documentation show at least tv	vice per	year?				X	
	dents along the LDC	Does documentation show at least or	nce per y	ear?				X	
syste	em?								
Eme	ergency Officials	Does documentation show at least or		ear? ***	Proof	X			
		of delivery receipt from 2013-2017	***						
Loca	al Public Officials	Does documentation show at least or			ears?	X			
		***Proof of delivery receipt from 2							
	avators/	Does documentation show at least or	nce per y	ear?				X	
Con	tractors								
6.	1162 Section 6	: Supplemental messages:	•					X	
		der whether supplemental messages		occory fo	r				
		es and explain why or why not? (Th							
		ere applicable) ***See PA Program i							
	K.***	re applicable) ****See PA Program i	II O&M	attaciiii	ш				
		ples below that apply:					1		
	Large excavator p					1			
	Non-resident business owners (i.e., just workers occupy buildings(s) - owner								
	that receives bill is in another location and/or state and tenant farmers)								
	3. Farming activities								
	4. Railroads								
	5. Other								
-									
7.		: Program Implementation					,		
	Is there documentation	on verifying the program has been imp	lemente	d?					
8.	1162 Section 7	: Recordkeeping	LDC Public	Emer. Ofls	Pub. Ofls	Excav		N/A	Com-
		in O&M attachment K.***	Public	Olis	Olis	Contra	ictor		ment
		Document the following: (Write "Y"							
	T	ander each applicable stakeholder audience)	X	1 37	1 37			1	1
	a. Lists, Records and audiences?	other documentation of stakeholder	X	X	X				
	b. Copies of all mate	rials used?	X	X	X				
		nts for mailings, advertisements,	X	X	X				
		penditures indicating the program	11	11	1.				
		**proof of delivery receipt 2013-							
	2017***	proof of denvery receipt 2013-							
	d. Records of effecti	veness assessments?	X	X	X				
		l assessments and/or audits?	X	X	X			1	1
		back received and collected from		1	11			X	
		e to the program? ***No						1.	
	feedback***								
	g. Records of follow	-up actions and expected						X	
	results***No follow-								
	h. Have records been	n maintained for five (5) years?						X	

Page 5 of 6 Updated 6/1/07 ***Program had been implemented since 2013, no records prior to 2013*** **Comments:** Yes No N/A Comment 9. 1162 Section 8: ANNUAL REVIEW (This is required in the written plan – needs field documentation.) ***See PA Program in O&M attachment K. Form HSE 3915-F*** a. Does the annual audit ensure the Plan meets the minimum requirements X of the regulation? b. Does the annual audit ensure all actions called for in the Plan have been X carried out as specified in the Plan? c. Are records of the annual audit maintained by the Program X Administrator? 10. 1162 Section 8: Evaluation Results Has the operator issued the results of the evaluation (review), shared it with X upper management and sought internal feedback? 11. 1162 Section 8: Continuous Improvement **Conducted:** a. Has the operator modified its program based on its evaluation? ***No X modifications*** b. Are these changes documented? X c. Have these changes been implemented? X COMMENTS: 12. 1162 Section 8: Effectiveness Assessment (This is required upon design or re-design of materials and/or messages) a. Pre-tested Materials: ***No pre-tested material*** b. Date Pre-test conducted: X 13. 1162 Section 8: Effectiveness Assessment (Required to be done no more than FOUR years apart) a. Last Survey of Targeted Audiences::

b. Date of last effectiveness assessment:

c. Has the operator documented the results of evaluating the program for effectiveness? ***reviewed form HSE 3915-F from 2013-2017***

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	Explain:	
Comm	ents:	