



STATE OF WASHINGTON
DEPARTMENT OF LABOR AND INDUSTRIES
Division of Occupational Safety and Health
PO Box 44600 • Olympia, Washington 98504-4600

March 12, 2024

STEMILT GROWERS LLC
Po Box 2779
Wenatchee, WA 98807

OSHA #: 1701164
Inspection: 317976345
UBI: 602994642
Region: 05-Health
Inspector ID: B7592
Reference: 102417009

Dear Employer:

Enclosed are the results of the safety and health inspection of your workplace. This packet contains:

- **Citation Invoice** – The total assessed penalty is \$76,300.00
- **Citation and Notice of Assessment** – Washington Administrative Code (WAC) Violations.
- **Employer Certification of Abatement instruction and form** - Correct all violations and return written verification or additional penalties may result.
- **Employer Appeal Rights** – You have 15 working days to appeal this citation.

You must immediately post this Citation and Notice of Assessment at or near where the violation(s) occurred, where employees can easily find and read it, or where employees normally receive posted information. All postings must remain until you have corrected all violations, or for seven working days, whichever is longer. “Working day” means a calendar day, except Saturdays, Sundays and all legal state holidays.

Because this inspection is public information, the result will be posted online 30 days after the above date by the Department of Labor & Industries. You may view it at <https://secure.lni.wa.gov/verify> .

Please visit <https://www.lni.wa.gov/agency/public-disclosure/> if you would like to request a copy of the inspection file. Your choices are:

- Safety & Health Citation Only
- Safety & Health Brief Inspector Summary Report (short description the inspector writes to summarize the reason for the inspection only – not complete file)
- Safety & Health Detailed Inspection Summary Report (detailed summary of inspection including penalty calculation only – not complete file)
- Safety & Health Citation and Complete Inspection File (The complete legal file which contains the detailed information regarding the inspector’s findings, the citation, and calculation of any penalty. This will be especially helpful if you are contemplating filing an appeal.)

If you have questions, call the compliance supervisor, Victoria Cibicki, at (509) 886-6513.

Respectfully,

L&I Assistant Director
Division of Occupational Safety & Health

Enclosure(s)



Washington State Department of
Labor & Industries
 Division of Occupational Safety and Health

Invoice

Inspection: 317976345

UBI: 602994642
Legal Name: STEMILT GROWERS LLC
DBA Name: STEMILT GROWERS LLC
Inspection: 88 S Ward St,
Site: East Wenatchee, WA, 98802

Issued: March 12, 2024
Opening Conference: October 1, 2023
Closing Conference: March 5, 2024
Inspector ID: B7592

Summary of Assessed Penalties Due

The Citation and Notice of Assessment includes a full description of each violation.

Violation Item	Violation Type	WAC	Correction Due Date	Penalty Amount
1-1	Willful Serious	WAC 296-307-64406	3/20/2024	\$70,000.00
2-1	Serious	WAC 296-307-64602	3/20/2024	\$6,300.00
<u>Total Penalty Due</u>				\$76,300.00

PAYMENT INFORMATION

Payment is due 15 working days from receipt of this citation.

Make check payable to the Department of Labor and Industries.

Write Inspection number 317976345 on the check and mail to:

Attn: DOSH Cashier
Department of Labor and Industries
PO Box 44835
Olympia, WA 98504-4835
 Or deliver to: **Any L&I office**



Post This Document

Citation and Notice of Assessment
Citación por Infracción y Multa Civil
Inspection: 317976345

UBI: 602994642

Issued: March 12, 2024

Legal Name: STEMILT GROWERS LLC

Opening Conference: October 1, 2023

DBA Name: STEMILT GROWERS LLC

Closing Conference: March 5, 2024

Inspection Site: 88 S Ward St East Wenatchee, WA 98802

Inspector ID: B7592

Violation 1 Item 1

Violation Type: Willful Serious

WAC 296-307-64406

The employer did not inform the contractor of any required precautions or procedures while working in or near their confined spaces.

A Pace International (the contractor) employee was tasked to fog a confined space (controlled atmosphere room) and entered the oxygen-deficient room.

Employees entering permit-required confined spaces may be exposed to potential physical or atmospheric hazardous conditions resulting in serious injuries or death.

Correct by: 3/20/2024
Assessed penalty: \$70,000.00

Violation 2 Item 1

Violation Type: Serious

WAC 296-307-64602

Employer did not develop a written confined space program that has all the necessary elements, including: documentation used for alternate entry procedures, how to reclassify a PRCs, designation of employee roles, identification of designated employee duties, training requirements, how to identify and evaluate hazards, use and maintenance of equipment, how to prevent unauthorized entry, how to coordinate with another employer, as well as how to rescue entrants, lack of a program administrator.

A Pace International (the contractor) employee was tasked to fog a confined space (controlled atmosphere room) and entered the oxygen-deficient room.

Employees entering permit-required confined spaces may be exposed to potential physical or atmospheric hazardous conditions resulting in serious injuries or death.

Correct by: 3/20/2024
Assessed penalty: \$6,300.00

Employer Certification of Abatement Instructions Inspection: 317976345

What you must do now:

- Check the correction due date(s) shown on the enclosed Employer Certification of Abatement Form. You must fully correct the hazards by these dates.
 - Describe on the form how you corrected each hazard, rather than what you *intend to do* in the future. Examples:
Right: *All staff have received the required training.*
Wrong: *All staff will receive the required training next week.*
- Use attachments if you need more space. Submit additional documentation of hazard correction if requested in the citation packet.
- Fill in the date you corrected the hazard and sign.
 - Post a copy of the completed form for at least seven working days, or until you have corrected all violations, whichever is longer. It must be posted near the hazard location or in a place that is readily accessible by affected employees and their representatives.
 - Send your completed form to the address provided.

Note: If we do not receive written confirmation you have corrected the hazards, we will take follow-up action, which may include additional penalties. If you provide us with false information, you may face criminal penalties.

If you are unable to fix the hazard(s) by the correction due date(s):

We must receive your written request for an extension **before** the correction due date(s) listed for the hazard(s). Correction due dates are shown on the enclosed Citation and Notice of Assessment and on your Employer Certification of Abatement Form(s).

Extensions are not automatically granted. To be considered for an extension, you must provide the following:

- Inspection number, employer name, telephone number, and site address.
- Violation and Item number for each requested extension.
- Correction due date on the citation and additional time needed.
- Steps taken to fix the hazard by the correction due date.
- Why you cannot correct the hazard by the correction due date.
- How you will protect your employees until you fix the hazard.

For more information, contact:

Or call: (509) 886-6513

Victoria Cibicki, Compliance Supervisor

Department of Labor and Industries

519 Grant Rd.

East Wenatchee, WA 98802

You must post all documentation associated with your request for extension with your citation packet. All postings must remain until you have corrected all violations, or unless you have appealed and received and posted your hearing notice.



Employer Certification of Abatement Form

Inspection: 317976345

UBI: 602994642

Issued: March 12, 2024

Legal Name: STEMILT GROWERS LLC

DBA Name: STEMILT GROWERS LLC

Site Address: 88 S Ward St, East Wenatchee, WA, 98802

You must complete this form and return it to: **Emily Began**
Department of Labor & Industries
1205 Ahtanum Ridge Dr. Suite C,
UNION GAP, WA 98903-1204
 Or Fax to: **(509) 454-3710**
 Or Email to: **bemi235@lni.wa.gov**

Violation(s) are fully described in the Citation and Notice of Assessment section.

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
1-1	Willful Serious	WAC 296-307-64406	3/20/2024
Violation Summary: Contractor Not Informed of Precautions/Procedures Required by Host ER			
How you corrected the hazard →			
Date you corrected the hazard →			
2-1	Serious	WAC 296-307-64602	3/20/2024
Violation Summary: Confined Space Program Missing Elements			
How you corrected the hazard →			
Date you corrected the hazard →			

I certify that the hazards described in this Employer Certification of Abatement Form have been corrected as described above. Affected employees and their representatives have been informed of the correction activities. I am aware that knowingly providing false information may result in criminal penalties (RCW 49.17.190(2)).

Signature Name

Title Date Phone No.

DOSH USE ONLY

DOSH Reviewer's Signature Date

For Employers

If you are cited for a violation of Occupational Safety and/or Health rules, you have the right to appeal the citation. **You have 15 working days from the date you receive this citation to appeal.** (RCW 49.17.140(1)) "Working day" means a calendar day, except Saturdays, Sundays and all legal state holidays. Your appeal must be in writing. It may be mailed, faxed, personally delivered or electronically filed. If you electronically file, the Department will send an automated acknowledgement that the appeal was received. **If you do not receive acknowledgement, please ensure you have addressed it to the correct email.** You can also contact the Appeals Program at the number listed below.

For violations classified as serious, willful, repeat serious, or failure to abate serious, an employer must correct the violations by the date listed on the Citation and Notice / Employer's Certification of Abatement form unless a stay of abatement date is requested in the appeal as described on this page. A stay of abatement date means the employer's requirement to abate or correct the hazard is put on hold until the appeal is resolved. All general and repeat general violations under appeal automatically have stay of abatement dates until a final order on those violations has been issued. If you only need an extension of an abatement date, please see the above section entitled, **"If you are unable to fix the hazard(s) by the correction due date(s)"**.

Your appeal must include:

- Name, address, telephone number, and fax number if available of the employer who is appealing, and for the employer's representative, if any, such as an attorney or interpreter.
- Inspection Number (You will find this nine-digit number in the top right corner of this page.)
- Statement explaining:
 1. What you think is wrong with the citation and any related facts.
 2. How you think the citation should be changed.
 3. What relief you are seeking and why.

If you are requesting a stay of abatement date for serious, willful, repeat serious or failure to abate serious, you must also include:

- Each violation and item number for which a stay of abatement date is requested; and
- The reason for the stay of abatement date request.

Note: Employees and/or employee representatives may elect to participate in appeal hearings.

Posting requirement:

You must post your appeal documents (along with this citation packet) until the appeal is resolved. You must also post all other documents related to this appeal.

For Employees or Their Representatives

If your employer is cited, you may only appeal the correction due date(s).

Your appeal must include:

- Your name, address, telephone number, and fax number if available and the same information for anyone who is representing you, if any.
- Inspection number.
- Statement explaining why the correction due date should be changed.

Send all appeals to:

Assistant Director for DOSH
Attn: Appeals Program
PO Box 44604
Olympia, WA 98504-4604
Fax to: **(360) 902-5581** or deliver to: **Any L&I office**
Electronically to: DOSHAppeals@Lni.wa.gov

For more information call the Appeals Program: **(360) 902-5486.**

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