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

October 29, 2026

NIPPON DYNAWAVE PACKAGING CO
Po Box 188
Longview, WA 98632

Inspection: 317991087
UBI: 604016670
Region: 04 – Safety
Inspector ID: D1600
Reference: 209491120

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

- **Citation Invoice** – the total assessed penalty is $77,800.00.
- **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 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 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 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, Allen Brannan, at (360) 896-2387.

Respectfully,

L&I Assistant Director
Division of Occupational Safety & Health
Enclosure(s)

Copy: AWPPW, Local 633

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

Invoice

Inspection: 317991087

UBI:	604016670	Issued:	October 29, 2026
Legal Name:	NIPPON DYNAWAVE PACKAGING CO	Opening Conference:	May 06, 2026
DBA Name:	NIPPON DYNAWAVE PACKAGING CO	Closing Conference:	October 20, 2026
Inspection Site:	3401 Industrial Way, Longview, WA 98632-9285	Inspector ID:	D1600

Summary of Assessed Penalties Due

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

Violation Item	Violation Type	WAC	Abatement Due Date	Penalty Amount
1-1	Willful Serious	WAC 296-800-11005	12/01/2026	$74,910.00
2-1	Serious	WAC 296-79-140(2)(a)	12/01/2026	$2,890.00
Total Penalty Due				$77,800.00

PAYMENT INFORMATION

Payment is due 15 *working days from receipt of this citation (unless appealed).

Pay L&I the amount due on this invoice by scanning the QR code listed below, or by visiting www.lni.wa.gov/agency/pay-a-balance-due/

You may also mail a check made payable to the Department of Labor and Industries.
Write Inspection number 317991087 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**

*Working day" means a calendar day, except Saturdays, Sundays, and all legal state holidays.

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

Post This Document

Citation and Notice of Assessment
Citación por Infracción y Multa Civil
Inspection: 317991087

UBI:	604016670	Issued:	October 29, 2026
Legal Name:	NIPPON DYNAWAVE PACKAGING CO	Opening Conference:	May 06, 2026
DBA Name:	NIPPON DYNAWAVE PACKAGING CO	Closing Conference:	October 20, 2026
Inspection Site:	3401 Industrial Way, Longview, WA 98632-9285	Inspector ID:	D1600

Violation 1 Item 1 Violation Type: Willful Serious
WAC 296-800-11005

The employer did not ensure that they provided a workplace free of recognized hazards. The employer did not ensure employees were afforded protections by use of adequate controls, methods, or procedures to protect them from harmful temperatures and engulfment hazards.

An employee was exposed to serious thermal and engulfment hazards while working in approximately 145-degree pulp that was approximately 4 feet deep.

Exposure to hazards of this nature can lead to serious injuries involving permanent disability, death, or chronic irreversible illness.

The following additional correction documentation is required for this violation: Develop a written procedure on how employees are going safely control and clean up pulp spills. Provide a copy of the written procedure, the documentation showing employee training on this procedure, and the completed Employer Certification of Abatement form for review to:

Tom Day
Safety and Health Compliance Officer, Region 4
Department of Occupational Safety and Health (DOSH)
Washington State Department of Labor & Industries (L&I)
711 Vine St
Kelso, WA 98626-2621
360-575-6954
dayy235@lni.wa.gov

Correct By: 12/01/2026

Assessed penalty: $74,910.00

Violation 2 Item 1 Violation Type: Serious
WAC 296-79-140(2)(a)

The employer did not maintain a formal program of inspections and maintenance for pipes, hoses, valves and fittings for all hazardous material piping systems.

The employer's Hazardous Piping Inspection and Maintenance Program did not include the L3 Paper Machine Mid-ply pulp piping system. The pulp that is conveyed in this piping system is over 130 degrees Fahrenheit, which is classified as a hazardous material system.

Exposure to hazards of this nature can lead to serious injuries involving permanent disability, death, or chronic irreversible illness.

The following additional correction documentation is required for this violation: Update your Hazardous Piping Inspection and Maintenance Program to include systems with pulp exceeding 130 degrees F. Provide the updated program, showing these systems are added, along with the completed Employer Certification of Abatement form for review to:

Tom Day
Safety and Health Compliance Officer, Region 4
Department of Occupational Safety and Health (DOSH)
Washington State Department of Labor & Industries (L&I)
711 Vine St
Kelso, WA 98626-2621
360-575-6954
dayy235@lni.wa.gov

Correct By: 12/01/2026

Assessed penalty: $2,890.00

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

Employer Certification of Abatement Instructions
Inspection: 317991087

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: (360) 896-2387	Allen Brannan, Compliance Supervisor Department of Labor and Industries 312 SE Stonemill Dr Ste 120 Vancouver, WA 98684

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.

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

Employer Certification of Abatement Form
Inspection: 317991087

UBI:	604016670	Issued:	October 29, 2026
Legal Name:	NIPPON DYNAWAVE PACKAGING CO	DBA Name:	NIPPON DYNAWAVE PACKAGING CO
Inspection Site:	3401 Industrial Way, Longview, WA 98632-9285		

You must complete this form and return it to:

Tom Day
Department of Labor & Industries
711 Vine St
KELSO, WA 98626

Or Fax to: (360) 575-6918
Or Email to: dayy235@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 296-800-11005	12/01/2026
Exposure to Thermal and Engulfment Hazards			
How you corrected the hazard ➔			
Date you corrected the hazard ➔			

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

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
2-1	Serious	WAC 296-79-140(2)(a)	12/01/2026
Paper Machine Pulp Not Part of Hazardous Piping Program			
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		Printed Name
Title	Date	Phone No.
DOSH USE ONLY		

DOSH Reviewer's Signature Date

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

Post This Document

Appeal Rights
Inspection: 317991087

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 abatement due date(s)".**

Your appeal must include:

- Business name, address, telephone number, and contact information 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 believe is wrong with the citation and any related facts.
  2. What you believe should be changed, and why.
  3. What relief you are seeking and why.
  4. Signature and Date.

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 abatement due date(s).

Your appeal must include:

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

Send all Appeals to:	Scan the QR Code below to:	
Assistant Director for DOSH Services **Attn: DOSH Appeals** **PO Box 44604** **Olympia, WA 98504-4604** Electronically to: DOSHAppeals@Lni.wa.gov Fax to: **(360) 902-5581** or deliver to: **Any L&I office**	Complete the WISHA Citation & Notice Appeal Form, OR visit www.Lni.wa.gov/safety-health/safety-rules/safety-citation-appeals	

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