

Section 1. Registration Information

Source Identification

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| Facility Name: | CHS INC - Pine City |
| Parent Company #1 Name: | CHS INC (Formally ST. JOHN GRANGE SUPPLY INC.) |
| Submission Type: | Resubmission |
| Receipt Date: | May 2009 |
| Status: | Deregistered |
| Deregistration Effective Date: | August 2010 |

Facility Identification

| | |
|--------------|----------------|
| Facility ID: | 1000 0002 9756 |
|--------------|----------------|

Dun and Bradstreet Numbers (DUNS)

| | |
|----------------|---------|
| Facility DUNS: | 6147177 |
|----------------|---------|

Facility Location Address

| | |
|-----------|----------------|
| Street 1: | PINE CITY ROAD |
| Street 2: | N/A |
| City: | ST. JOHN |
| State: | WA |
| ZIP: | 99171 |
| ZIP4: | N/A |
| County: | Whitman |

Facility Latitude and Longitude

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|----------------------|-------------|
| Latitude (decimal): | 47.201896 |
| Longitude (decimal): | -117.528488 |

Local Emergency Planning Committee and Regulations

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|--------------|---------------------|
| LEPC: | Whitman County LEPC |
| OSHA PSM: | N/A |
| EPCRA 302: | Yes |
| CAA Title V: | N/A |

Process Chemicals

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|------------------|-------------------------|
| Program Level: | Program Level 2 process |
| Chemical Name: | Ammonia (anhydrous) |
| CAS Number: | 7664-41-7 |
| Flammable/Toxic: | Toxic |

Process NAICS

| | |
|--------------------|--|
| NAICS Code: | 11511 |
| NAICS Description: | Support Activities for Crop Production |

Section 6. Accident History

No records found.

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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|---|-----|
| Community Plan (Is facility included in written community emergency response plan?): | N/A |
| Facility Plan (Does facility have its own written emergency response plan?): | Yes |
| Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?): | Yes |
| Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?): | Yes |
| Healthcare (Does facility's ER plan include information on emergency health care?): | Yes |

Local Agency

| | |
|--|-------------------------------|
| Agency Name (Name of local agency with which the facility ER plan or response activities are coordinated): | St. John Volunteer Fire Dept. |
| Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated): | (509) 648-3311 |