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1.0 INTRODUCTION

1.1 Purpose

The purpose of this procedure is to define the Anacortes Refinery's requirements for properly managing PSM-related recommendations. These requirements are intended to be consistent with requirements in related Refining PSM procedures. In addition, this procedure defines a consistent recommendation management process for our site that will help ensure compliance with regulatory, corporate and refining requirements related to the management of PSM-related recommendations. In addition, the procedure outlines the process for developing, approving, and managing recommendations and action items from recommendations assigned for tracking and resolution through Intelex.

1.2 Scope

This procedure is applicable to the management of recommendations resulting from:

A. Process Safety Advisories,

B. Process Hazards Analyses (PHA),

C. Category 2-4 Incident Investigation root causes from PSE1 or PSE2 incidents,

D. PSM Tier II Compliance Audits,

E. API 751 Audits,

F. PSM Tier III Management System Audits,

G. Safety Integrity Level (SIL) analyses,

H. Building Siting analyses,

I. Layer of Protection Analyses (LOPA),

J. Relief Studies,

K. Quantitative Risk Analyses (QRA), and

L. Emergency Isolation Valve (EIV) studies.

NOTE: These recommendations are referred to as PSM recommendations in this procedure.

1.3 Out-of-Scope

This procedure is not intended to be applicable to the management of the following types of recommendations:

A. PHA safety suggestions, operability recommendations, good ideas, or other PHA recommendations not associated with a process safety concern,

B. Category 0 or 1 incidents, or non-process safety incidents,

C. Reliability and Operational Excellence Advisories (ROEAs),

D. Audit Opportunities for Improvement (OFI) or Best Management Practices (BMP), or

E. Incident Lessons Learned, supplemental recommendations, opportunities for improvement, or other recommendations NOT related to a root cause of the incident.

NOTE: While application of this procedure is not required for non-PSM recommendations, a site may choose to apply it to them at its discretion.

2.0 REFERENCES

2.1 Marathon Standards, Policies & Procedures

- GEN-1010, Risk Calibration Procedure
- PSM-1070, Process Safety Management
- RSP-1240-000, Relief System Risk Management and Mitigation Plans
- RSP-1300-015, PSM Related Recommendation Management
- RSP-1303, PSM/RMP Process Hazards Analysis
- RSP-1310, PSM/RMP Incident Investigation
- RSP-1312, PSM/RMP Compliance Audits
- RSP-1315-000, Layer of Protection Analysis
- RSP-1704-000, Incident Investigation

2.2 Government Regulations

- EPA 40 CFR Part 68, Accidental Release Prevention requirements: Risk Management Programs
- OSHA 29 CFR 1910.119, Process Safety Management of Highly Hazardous Chemicals

3.0 DEFINITIONS

The following definitions are applicable to this procedure.

Table 1 Acronyms

Term	Description
INTELEX	Marathon Event Management database which incorporates management systems for recommendation tracking, Incident Investigation Incident/Near Miss reporting and MOC/PSSR
PSA	Process Safety Advisory, PSAs are detailed incident reports detailing the causes and consequences of high-level events in our corporation, and at times, in the industry. These are typically generated from API Tier 1/2 events and contain details of the failures and lessons learned and require action on each sites part, at a minimum, a review of the event, but often include actions to prevent similar events from occurring at our site. These actions will be assigned and tracked in the Intelex tracking database.

Table 2 Definitions

Term	Description
Audits	Audits can include the following: • Marathon Tier I audits or 1st Party Audits, such as R-10-003 and EHS Audits, led by Marathon Anacortes Refinery employees from a department, typically different from the department being audited. • The Refinery Leadership Team in concert with this procedure determines which, if any, audit finding will be tracked in formal action tracking databases. • Marathon Tier II audits or 2nd Party Audits, such as PSM/RMP Audits, led by Auditors from within Marathon, but who do not come from Marathon Anacortes Refinery. The independent group for the most part sets the requirements, including which action items will be tracked to completion. • Marathon Tier III audits or 3rd Party Audits, such as Marathon focused management system audits and Underwriting/Insurance Audits, led by Auditors from inside and outside Marathon and are provided in response to specific agency or stakeholder requirements. The external groups set these requirements and determine action items and response requirements, for the most part.
Recommendation	Recommendations address gaps in performance, requirements or procedures through the development, modification, or enhancement of safeguards. Recommendations must be assigned to a Department Manager or Team Lead/Supervisor. A recommendation will usually have action item(s) that can be assigned to any employee at the Anacortes Refinery.
Safety Flash	Summary of an incident shared among the Marathon site(s) for the purpose of learning and incident prevention.

4.0 ROLES AND RESPONSIBILITIES

The table below describes the roles and responsibilities related to this document

Table 3 Roles and Responsibilities

Term	Description
Refinery Site Management	A. Ensures the Recommendation Management procedure is implemented. B. Dedicates resources necessary to develop, review, approve and resolve recommendations that meet the requirements outlined in this procedure. C. Confirms that PSM recommendations and associated action plans are implemented on schedule. D. Ensures that communication of recommendation status to affected personnel occurs.

Table 3 Roles and Responsibilities

Term	Description
Site ES&S Manager	A. Provides managerial oversight for managing recommendations. B. Maintains a working knowledge of the Recommendation Management Policy and the local site plan. C. Reviews and revises (with employee participation) the local Recommendation Management site plan to maintain compliance with the relevant procedures/policies and addresses issues identified during other PSM activities (audits, incident investigations, regulatory inspections, etc.).
Site PSM Coordinator	A. Ensures PSM recommendations are entered, assigned and tracked in the recommendation tracking software. B. Ensures the local Recommendation Management site plan is in compliance with the relevant procedures/policies and addresses issues identified during other PSM activities (audits, incident investigations, regulatory inspections, etc.). C. Reviews the adequacy of closure documentation for in-scope recommendations. D. Reports Recommendation Management metrics monthly to Refinery and Refining Organization Management.

5.0 RECOMMENDATION APPROVAL

5.1 Requirements

5.1.1 The following Refining documents provide requirements for recommendation approvals:

A. RSP-1303, PSM/RMP Process Hazards Analysis

B. RSP-1310, PSM/RMP Incident Investigation

C. RSP-1312, PSM/RMP Compliance Audits

5.1.2 For each of the above listed PSM elements, a written site plan that details the recommendation approval process is required.

5.1.3 This document assumes the recommendation has been reviewed and approved in accordance with the applicable site guidelines prior to entry into the documentation and tracking system.

6.0 RECOMMENDATION RISK RANKING

6.1 Requirement

All recommendations subject to GEN-1010 must have a risk ranking documented in the tracking system.

7.0 RECOMMENDATION DATE MANAGEMENT

7.1 Initial Target Due Date

7.1.1 Marathon Procedure GEN-1010 Risk Calibration Procedure provides guidance on applicable target due dates. The guidelines in this document do not supersede the minimum response criteria of the Risk Calibration Procedure.

7.1.2 The table below provides guidelines for establishing target dates for certain types of recommendations. The target date should be established based on the date the recommendation is approved. These are suggested guidelines and should not be interpreted as requirements. It is understood that there may be situations where a longer duration is necessary. For risk ranked recommendations, where GEN-1010 would suggest an earlier due date than shown below, the GEN-1010 date takes precedence.

7.1.3 If any interim measures are necessary to safely operate until the target date, they shall have action items created with appropriate target dates.

Recommendation Type	Suggested Target Due Date
Action Plan Development (not implementation)	60 days
Documentation Updates	3 months
Refinery Bulletin / Communication	3 months
Engineering or Reliability Assessment	3 months minimum (for complex assessment, longer durations are acceptable)
Procedural or Program Revisions	6 months
Training Enhancements	6 months
Routine Work (Unit shutdown not required)	6 months
Routine Work (Unit shutdown required)	Next planned shutdown (e.g., major maintenance, turnaround)
Capital Improvement (Unit shutdown not required)	2 years (sooner if funding available)
Capital Improvement (Unit shutdown required)	Next scheduled unit turnaround cycle

7.2 Target Due Date Extensions

NOTE: R-12-005-F01 is required to be executed and approved to modify, deny or extend target dates for defined recommendations (e.g., PHA or PSA), follow form instructions.

NOTE: The site requirement is that all modification, denial or extension changes may require a change request in Intelex that must be generated by a PSM group member and must be approved by an RLT member (RP transfer can be emailed to PSM and PSM will change the RP without change request in Intelex)

7.2.1 Target dates may on occasion need to be revised based on changes in work priorities/personnel, changes in work scope, or for other unforeseen reasons. The minimum requirements for target date extensions are:

A. Consideration as to whether new or different interim measures are necessary to safely operate until the new target date.

NOTE: If any interim measures are necessary to safely operate until the new target date, they shall have action items created with appropriate target dates.

B. Proper adherence to GEN-1010 and GEN-1016 recommendation closure timing requirements.

C. Documenting the rationale for date extension, any necessary interim measures, and approval from Refinery Management, or designee,

7.2.2 This site shall have a written plan with a system clearly identified for managing the minimum requirements for target due date extensions.

7.2.3 All due date extensions shall be managed through the Change Request function in the electronic recommendation management system.

- The required documentation approving a target due date extension shall be maintained as an attachment in the electronic recommendation management system when approval is gathered external to the Change Request function.
- Target due dates may be extended without the use of the change request function such as in the case of an IT upload, the Refining PSM Manager will approve the exception.

7.2.4 Due date extensions for recommendations from Process Safety Advisories require the approval of the Refining PSM Manager

7.2.5 Due date extensions from Audit Recommendations defined as PSM recommendations require the approval of the Refining PSM Manager or HES&S Planning Committee. Contact the Refining PSM Coordinator prior to extending these recommendations, if extending beyond the maximum allowed to close Findings (and OFIs) by the governing standard or before extending beyond the start date of the next subsequent audit if scheduled before the maximum date of the governing document. Applicable audit recommendations include:

- PSM/RMP Compliance Audit Findings and OFI Recommendations (Governed by RSP-1312),
- PSM Collaborative Audit Finding and OFI recommendations (Governed by GEN-1016) or,

- API RP 751 Audit Finding and OFI recommendations (Governed by RSP-1129-005)
- Approval also required by the HF Alkylation Technologist.

7.2.6 Due date extensions from other PSM recommendations as defined by this standard must meet the minimum approval requirements of GEN-1010 and the applicable standard.

8.0 RECOMMENDATION REJECTION/MODIFICATION

8.1 Rejection of Recommendation

NOTE: R-12-005-F01 is required to be executed and approved to reject recommendations, follow form instructions.

NOTE: The site requirement is that all modification, denial or extension changes may require a change request in Intelex that must be generated by a PSM group member and must be approved by an RLT member (RP transfer can be emailed to PSM and PSM will change the RP without change request in Intelex)

8.1.1 A recommendation can be justifiably declined where it can be documented in writing, and based on adequate evidence, that one or more of the following is true:

A. The analysis upon which the recommendation is based contains factual errors.

B. The recommendation is not necessary to protect the health and safety of the

- Employer's own employees,
- Employees of contractors, or
- Offsite receptors (i.e., the public)

C. An alternative measure would provide a sufficient level of protection.

D. The recommendation is infeasible.

8.1.2 The rejection of a recommendation from a PHA must be communicated back to the recommending team or an equivalent team if the original is no longer available. Any subsequent recommendations of the team must be handled in the same manner as the original recommendation.

8.1.3 The rejection of a recommendation from an incident investigation must be communicated back to the Investigation Team Leader (at a minimum) or preferably the entire Investigation Team. Any subsequent recommendations must be handled in the same manner as the original recommendation.

8.1.4 The rejection of a recommendation from a PSM/RMP Compliance, PSM Collaborative Audit or API RP 751 Audit Finding or OFI requires approval from the Refining PSM Manager, HF Alkylation Technologist and for Compliance only, Law – ES&S.

8.1.5 The rejection approval and reason for rejection shall be documented in the electronic recommendation tracking system.

- All rejection approvals shall be managed through the Change Request function in the electronic recommendation management system.
- The required documentation approving the rejection shall be maintained as an attachment in the electronic recommendation management system when approval is gathered external to the Change Request function.

8.1.6 The approval level for rejecting a recommendation shall be the same, or higher, as for the approval of the original recommendation.

8.1.7 This site shall have a written plan with a system clearly identified for managing the minimum requirements for rejecting recommendations.

Refer to Attachment 2 for the form required to be authorized for modification, denial or extension. This form is available via SharePoint as R-12-005-F01.

8.2 Modification of Recommendation

NOTE: R-12-005-F01 is required to be executed and approved to modify recommendations, follow form instructions.

NOTE: The site requirement is that all modification, denial or extension changes may require a change request in Intelex that must be generated by a PSM group member and must be approved by an RLT member (RP transfer can be emailed to PSM and PSM will change the RP without change request in Intelex)

8.2.1 Recommendations may require wording or scope modification if adequate evidence of one or more of the following is true:

A. The recommendation does not directly or adequately address the consequence of interest,

B. The wording does not clearly convey the recommendation's intention, or

C. A scope change is warranted after investigation by the responsible person(s) or other subject matter experts. Scope changes to compliance audit findings must still satisfy the intent of the audit recommendation.

8.2.2 The modification of a recommendation from a PHA must be communicated back to the recommending team or an equivalent team if the original is no longer available.

8.2.3 The modification of a recommendation from a PSM/RMP Compliance, PSM Collaborative Audit or API RP 751 Audit Finding or OFI requires approval from the Refining PSM Manager, HF Alkylation Technologist or HES&S Planning Committee.

8.2.4 The modification of a recommendation from an incident investigation must be communicated back to the Investigation Team Leader (at a minimum) or preferably the entire Investigation Team.

8.2.5 The modification approval and reason for requesting the modification shall be documented in the documentation and tracking system.

- All modification approvals shall be managed through the Change Request function in the electronic recommendation management system.
- The required documentation approving the modification shall be maintained as an attachment in the electronic recommendation management system when approval is gathered external to the Change Request function.

8.2.6 The approval level for modification of a recommendation shall be the same, or higher, as for the approval of the original recommendation.

8.2.7 This site shall have a written plan with a system clearly identified for managing the minimum requirements for modifying recommendations.

9.0 RECOMMENDATION ACTION PLANS

9.1 Action Plans

9.1.1 Action plans for how to resolve a recommendation are extremely useful to assist in documenting progress towards completion. Action plans are not required for compliance with this procedure but are strongly recommended.

A. Recommendations for simple changes may only have one action item, normally assigned to the recommendation responsible person. This action item is typically identical to the recommendation text. Examples of simple changes include modify a procedure, update documentation, provide training, etc.

B. Recommendations with a larger scope may require multiple action items, which may have different due dates and assigned persons. Examples of complex changes include engineering projects with milestone schedules, multiple changes grouped by major equipment (i.e., addition of 3 RVs to one tower) or recommendations requiring an engineering study and subsequent implementation of the results of the study.

NOTE: All action items must be completed prior to the overall recommendation target due date.

9.1.2 Action plans should be developed within 60 days of the approval of the recommendation in order to allow closure actions to begin in a timely fashion.

9.1.3 This site should have a written plan with a system clearly identified for developing and managing action plans for recommendations.

Action Items shall include relevant details and meet SMART criteria:

- Specific - Provide sufficient detail to enable the assigned individual to understand the reason(s) for the action and each step, task, action, or behavior required to effectively implement it.
- Measurable - The action results in an outcome that can be detected.
- Achievable - The action is within management's control and can be implemented by the assigned individual.

- Relevant - The action is truly capable of addressing the problem, the extent of condition, causal factors or contributing factors.
- Timely - Action due dates make sense.

10.0 RECOMMENDATION DOCUMENTATION AND TRACKING SYSTEM

10.1 Requirements

This site must maintain a system for managing, monitoring and tracking implementation of recommendations.

At a minimum, the management system must:

A. Assure that recommendations are reviewed with Refinery Management or designee and assigned to a responsible party,

B. Provide a written schedule of when actions are to be completed,

C. Communicate recommendations and action plans to operating, maintenance and other employees whose work assignments are in the affected process and who may be impacted by the recommendation when required to do so,

NOTE: The requirements for communication are contained in RSPs for the sources of the recommendations.

D. Track recommendations via the electronic recommendation management system (e.g., Intelex) to track the status of the recommendation to completion, and

E. Document closure of recommendations.

11.0 RECOMMENDATION RESOLUTION

11.1 Closure

Recommendations and associated action items are considered complete when either the item has been verified as implemented or the item has been justifiably rejected. Implementation is complete when the resolution to the recommendation is in place and functional. Implementation does not mean:

A. Developing a plan,

B. Putting the item on a work order or turnaround list,

C. Assignment of an engineering project, or

D. Reassignment to another department or individual.

11.2 Closure Documentation

The work prescribed by the recommendation must be completed before closure will be approved. Closure "on a promise" is not allowed. Recommendation closures should include:

A. Description of specific actions completed for closure,

B. MOC number (if applicable),

C. WO number (if applicable),

D. Engineering Job Number (if applicable),

E. Photographs (if applicable), or

F. Other forms of documentation that support the completion of the work.

11.3 Closure Verification

11.3.1 PSM related recommendations and actions must be verified as complete prior to being closed. The verification will be completed by the assignee's supervision or a Department Manager level employee. Recommendations assigned to Department Managers and higher may be self-verified. The verification will ensure:

A. necessary actions are complete,

B. work completed meets the objective(s) of the recommendation, and

C. closure documentation clearly and correctly reflects the actions taken.

11.3.2 The adequacy of closure documentation shall be reviewed by the PSM Coordinator or designee. The review will ensure:

A. action is not closed on a promise or a plan to complete future work, and

B. closure statements, and any necessary documents, are complete and attached.

11.3.3 The Corporate HES&S Auditing Group will verify all recommendations from Tier II and Tier III Non-Conformance or Non-Compliance audit finding as well as any Tier III Opportunity for Improvement (OFIs) prior to being closed.

11.3.4 This site shall have a written plan with a system clearly identified for verifying closure of recommendations and associated action plans.

12.0 RECOMMENDATION METRICS

12.1 Metrics Categories

The following recommendation management metrics shall be reported quarterly:

A. PSM recommendations past due,

B. PSM recommendations open over 2 years,

C. PSM recommendations open over 5 years,

D. "A" Risk recommendations:

- Number open,
- Number past due, and
- Number open over 6 months, and

E. "B" Risk recommendations:

- Number open,
- Number past due, and
- Number open over 12 months.

12.2 Metrics Coding Strategies

To facilitate efficient tracking of recommendations and associated metrics, sites should enter recommendations following the coding strategy defined in RSP-1300-015-ATT1 Intelex Coding Strategy.

NOTE: Updates to RSP-1300-015-ATT1 will be approved by the Refining PSM Manager.

13.0 TRAINING

13.1 Training

13.1.1 Personnel who are routinely assigned as the responsible person for completing recommendations shall be trained in this procedure including:

A. Technical Services,

B. Engineering,

C. Supervisors,

D. Foreman,

E. Process Specialists,

F. Operations Trainers,

G. Products Control,

H. Maintenance, and

I. HES&S.

13.1.2 This site shall have a written plan with a training plan clearly identified for ensuring all necessary personnel receive training on this procedure. In addition, and as necessary based on procedure updates, employees will receive refresher training in the form of notifications of changes or modification to this procedure.

13.2 MOC & PSSR

The system to develop, review and approve MOC and PSSR recommendations and their applicable corrective actions is contained in R-12-006 .

14.0 AUDITS OF ACTION ITEM CLOSURES

The PSM Department will be responsible for ensuring site action item closures are audited on a monthly basis with the PSM Coordinator being the lead. The monthly audit results will be

reviewed with the Process Safety Council and Plant Health & Safety Committee in the monthly meeting.

Audit findings will be documented via a spreadsheet maintained by the Process Safety Representative and can be accessed on the Process Safety SharePoint page.

14.1 Monthly Audits

A sampling of action item closures from the following will be audited:

- PHA's (Full/Partial/Revalidations)
- PSM Compliance Audits
- Intermediate and Formal Investigations
- Third party audits (examples: Insurance audits, Deep Dives, Assessments)

Sample size for the monthly Action Item Closure Audits:

- If the total completed Recommendation Actions is equal to or less than 11 in a month, audit all Recommendation Actions. If the total monthly Recommendation Actions closed are greater than 11, sample 11 + 10% of the total. [Action items from PSM Compliance Audits, PHA's, Intermediate and Formal Investigations and Third-party audits (examples: Insurance Audits, Deep Dives, Assessments) are included in these calculations.]

15.0 REVIEW AND REVISION HISTORY

Revision #	Preparer	Date	Description
0	Mark Willand	4/4/2022	Reformatted and Numbered per Document Control Policy, R-63-001.
1	Terry Hering	8/18/2022	Updated per requirements of RSP-1300-015 revisions. Slight edits to Section 7.2 to clarify the due date extension process. Added clarity to Section 8.1 on rejection approvals needing to be managed through an electronic management system. Added clarity to Section 8.2 on API 751 modifications. Added Section 12.2 to emphasize that in order to facilitate efficient tracking, sites should use the Intelex Coding Strategy when entering recommendations.

16.0 ATTACHMENT 1 – CHECK YOUR ACTION ITEMS STATUS

In the Intelex Database

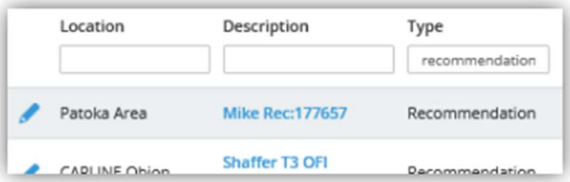
- Find the Intelex Production Environment in the PSM SharePoint site and log in using the Marathon PIC and password combination
- Click on "My Tasks" to access your responsible recommendations and actions
- Follow the steps below to address your items.

INTELEX Recommendations

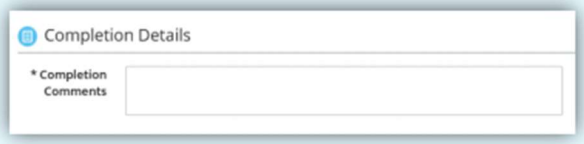
If a recommendation has been assigned to you in Intelex, below are in instructions on how to complete it.

1 From Intelex Home, click "My Tasks". Find the recommendation and open it by clicking the pencil icon.

TIP: Within "My Tasks" filter by entering "recommendation" within the "Type" column.



2 Within the Recommendation, scroll down to "Completion Details" and enter "Completion Comments" into the text box.



3 Users can include additional information by navigating through the menu tabs below "Completion Details". To add images or external documentation click the "Attachments" menu and select "Attach Document".

4 When finished click "Complete" at the top of the screen.

INTELEX Recommendations cont.

Creating Recommendation Change Requests

1 To create a change request for a recommendation, use the menu tabs below "Completion Details" and select "**Change Requests**" and click "**Add Change Request**"

NOTE: All change requests must be approved by an RLT member. Requestor shall select the appropriate RLT member related to the change request.

The requestor must be specific as to justification for the change request per local policy

2 On the "**New Change Request**" page, complete the "**Change Request Details**".
NOTE: Requestor adds new target date, RP or modifies recommendation

3 To complete the change request, click "**Submit**" at the top of the page.
NOTE: Once submitted, the PSM group (Recommendation Coordinator) must approve the request, which is then routed to the approver (RLT Member)

4 To approve the change request, click "**Approve**" at the top of the page.

NOTE: Once approved, the PSM group (Recommendation Coordinator) must update the action for the changes to take effect.

NOTE: Approver also has the option to deny request (change will not take effect) or request additional information (routed back to requestor which resets the change request process)

17.0 ATTACHMENT 2 – MODIFICATION, DENIAL OR EXTENSION FORM SAMPLE (R-12-005-F01)

Marathon Petroleum Company LP	REFINERY-WIDE	R-12-005-F01
ANACORTES REFINERY	Modification, Denial or Extension Form	Page 1 of 3
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This form will be utilized to document approval to Modify, Deny or Extend recommendation target date for PSM related recommendations. Attachments to this form may be used when supporting documents are necessary. A copy of this completed form shall be attached to the modification or denial or extension of PSM related recommendations change request in INTELEX, the original shall be forwarded to Process Safety for records retention. Per our site requirements, the 1st approver for these changes must be an RLT member.

There are no requirements for use of the form for requests of RP change. Requests for a change of RP should not be completed by the requestor or other individuals. These requests require forwarding information to the PSM group for an RP change. The RP change must be authorized by an RLT member.

Form R-12-005-F01 should be accessed on the refinery menu in SharePoint.

1) INFORMATION SECTION

Recommendation Number:		**Responsible Person:**
Source:	☐ PSA (Additional Corporate Approval Needed)	
	☐ PSM (PHA/LOPA, PSE1/2 II, PSM Tier 2/3 Audit, API 751, QRA, STE, EIV, Building Siting & Relief Study)	
	☐ Other (Source other than described above and within R12-005 Section 1.2 Scope)	
Recommendation Title:	Copy and paste the exact verbiage from INTELEX.	
Recommendation Description:	Copy and paste the exact verbiage from INTELEX.	
Additional Details:	Copy and paste the exact verbiage from INTELEX.	
Recommended Action Description:	Individual action target dates shall not be extended beyond the overall recommendation target date.	
(recommendation proposal additional details tab) **Recommendation Initiation Date:**		
(recommendation proposal details or action page) **Current Target Closure Date:**		
(ensure extension includes time to address all actions) **Proposed Target Closure Date:**		
(recommendation proposal details page) **Recommendation Risk Ranking:**		

SAMPLE

2) ACTION PLANS AND SAFEGUARDS

Immediate corrective actions taken and or safeguards implemented for a continued safe operation:
Additional actions or safeguards required during extension period:
Justification for Modification, Denial or Extension:

3) MODIFICATION, DENIAL OR EXTENSION APPROVAL (transfer signatures must be from the receiving department)

Recommendation/Action previously extended? (If yes, attach previous extension form(s)) ☐ Yes ☐ No	**Approval Signature and Date**
☐ Source is MPC Standards Gap Assessment & extension impacts conformance date (Corp./Refining SME plus risk-based approval)*	
☐ Source is PSA (Refining Manager of Process Safety and Risk)*	
☐ A or B+ risk – Extension (Refinery Manager & V.P. of Refining)*	
☐ B risk – Extension (Refinery Manager <1Yr or V.P. of Refining >1Yr)*	
☐ C+ risk – Extension (Refinery Manager & V.P. of Refining)*	
☐ C risk – Extension (Dept. Manager or Refinery Manager if >2Yrs)	

ATTENTION: Printed copies should be used with caution.
The user of this document must ensure the current approved version of the document is being used.
R-12-005-F01 This copy was printed on 8/18/2022

☐ D risk – (Department Manager)	
☐ Unranked – (Department Manager)	

*Contact PSM to discuss Risk Ranked A or B recommendations or PSAs. Changes require off-site approval (VP or PSM manager). Items that require corporate approvals (A, B, B+, C+ risk, or PSA) may document approval via email.

NOTE: PHA Denial/Modification PHA Team Review Meeting:
When a PHA recommendation requires denial (does not include closure of evaluation) or modification (change in intent) the PHA team will need reconvene to determine if revised recommendations should be developed. Refer to the minimum PHA team members table below. This process must be verified by PHA Coordinator.

MODIFICATION

New Description:

Basis:

FOR PHA ONLY:

Date Re-evaluated by PHA Team (Attach documentation) *:**

Subsequent Recommendation (If none, N/A) *:**

PHA Coordinator Signature*:**

DENIAL

Check Basis for Denial (The following are the only acceptable reasons for denial):

☐ The analysis upon which the recommendation is based contains factual errors
☐ The recommendation is not necessary to protect the health and safety of MRD employees, employees of contractors, or off-site receptors (i.e. the public)
☐ An alternative measure would provide a sufficient level of protection
☐ The recommendation is infeasible (not practical)

Justification:

FOR PHA ONLY:

Date Re-evaluated by PHA Team (Attach documentation) *:**

Subsequent Recommendation (If none, N/A) *:**

PHA Coordinator Signature*:**

Marathon Petroleum Company	REFINERY-WIDE	R-12-005-F01
ANACORTES REFINERY	Modification, Denial or Extension Form	Page 3 of 3
		REVISION: 1

The table below shows the minimum PHA team members required to re-convene for the re-evaluation of PHA recommendation denial or modifications. Attempts should be made to assemble the original PHA team members but if some have left the company, an analogous replacement may be used.

Job Function	Name	Signature	Date
Operations/Specialist/Day Foreman			
Board Operator			
Maintenance Rep			
Engineering Rep			
Tech Service Engineer			

This form must be completed with appropriate approvals and then forwarded to Anacortes PSM to make the change and attach in system.

Attach approved form to recommendation and then forward to PSM Coordinator for records retention.