Introduction to OSHA

STUDENT HANDOUT PACKET

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**Weekly Fatality/Catastrophe Report**

This table contains the weekly summaries of fatalities and catastrophes resulting in the hospitalization of three or more workers. Employers must report these incidents to OSHA within eight hours. The summaries below include only preliminary information, as reported to OSHA Area Offices or to States which operate OSHA-approved State Plans. The fatalities listed here include only those that initially appear to be work-related, but excludes fatalities that do not appear to be work-related, such as an apparent heart attack of a sedentary worker. OSHA investigates all work-related fatalities and catastrophes. After OSHA’s investigation is complete, these reports will be updated with inspection results and citation information.

### Weekly Summary (Federal and State data tabulated week ending Dec 25, 2009)

<table>
<thead>
<tr>
<th>Date of Incident</th>
<th>Company and Location</th>
<th>Preliminary Description of Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/17/2009</td>
<td>Manion &amp; Associates, Inc., Brandenburg, KY 40108</td>
<td>Two workers were doing road surveying each on either side of the road. A civilian driver came over the hill and suddenly applied his brakes, even though no person, equipment, or car was in the road. This caused his car to spin off the road, running over one of the workers.</td>
</tr>
<tr>
<td>12/17/2009</td>
<td>TBM, Inc., Visalia, CA 93277</td>
<td>Worker fell from a ladder while working inside an airplane.</td>
</tr>
<tr>
<td>12/18/2009</td>
<td>Pro-Tech Contracting of Georgia LLC, Lawrenceville, GA</td>
<td>Worker was securing tarp on a roof (not wearing fall protection, although it was available) and fell 35 feet to lower level.</td>
</tr>
<tr>
<td>12/18/2009</td>
<td>Sonoma Compost Company, LLC, Petaluma, CA 94952</td>
<td>Worker was on ground when he was run over by a front loader.</td>
</tr>
<tr>
<td>12/19/2009</td>
<td>Auto Zone Store, Oakland, CA 94603</td>
<td>Security guard worker was shot three times during robbery. The assailants took his weapon.</td>
</tr>
<tr>
<td>12/20/2009</td>
<td>Gateco, Newbury Park, CA 91360</td>
<td>Worker, who is the owner, was doing electrical work and fell through the skylight. (No inspection planned)</td>
</tr>
<tr>
<td>12/20/2009</td>
<td>Premier Asphalt and Masonry, Inc., Coram, NY 11727</td>
<td>Worker was found in vehicle with engine running; carbon monoxide over exposure.</td>
</tr>
<tr>
<td>12/21/2009</td>
<td>County of Los Angeles - Office of Education, Downey, CA 90242</td>
<td>Worker was found unconscious in her cubicle by a janitor. (Inspection planned)</td>
</tr>
<tr>
<td>12/21/2009</td>
<td>Country Club Auto Repair, Inc., Lake Charles, LA 70305</td>
<td>Worker was repairing a roof insulation and fell 14 feet to the ground.</td>
</tr>
<tr>
<td>12/21/2009</td>
<td>Estes Express Lines, Seekonk, MA 02771</td>
<td>Worker was crushed between the forklift he was operating and a concrete bollard next to the loading dock door after stepped off the forklift.</td>
</tr>
<tr>
<td>12/21/2009</td>
<td>Kenvelm, Inc. dba KE Beal Company, Cape Coral, FL 33919</td>
<td>Worker was part of a four man tree trimming crew and was in the process of cutting down a 25-foot palm tree. Worker walked into the path of the falling tree and was struck by the tree.</td>
</tr>
<tr>
<td>12/22/2009</td>
<td>3 ML Construction Company, Inc., Methuen, MA</td>
<td>Worker was installing shingles and moving planks on a roof and fell 20’ 6”’ from the roof to a driveway below.</td>
</tr>
<tr>
<td>Date of Incident</td>
<td>Company and Location</td>
<td>Preliminary Description of Incident</td>
</tr>
<tr>
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</tr>
<tr>
<td>12/22/2009</td>
<td>ANF Engineering, Inc., Redwood City, CA 94061</td>
<td>Worker was cleaning up on side of the road and was run over by a dump truck backing up.</td>
</tr>
<tr>
<td>12/22/2009</td>
<td>South Dakota Wheat Growers Association, McLaughlin, SD 57642</td>
<td>Worker entered a storage bin through a track side access hole that was 15 feet above ground and was engulfed by sunflower seeds.</td>
</tr>
<tr>
<td>12/23/2009</td>
<td>Golden Empire Concrete Products, Inc., Bakersfield, CA 93311</td>
<td>Worker, a Quality Control Manager, was found lying face down. (Inspection planned)</td>
</tr>
<tr>
<td>12/23/2009</td>
<td>I.G. Express Electric, New Braunfels, TX 78130</td>
<td>Worker was being elevated from a trash box on a forklift to reach a light pole. The trash box and worker fell to the parking lot.</td>
</tr>
<tr>
<td>12/23/2009</td>
<td>Storage Battery Systems, Inc., Alsip, IL 60803</td>
<td>Worker was working beneath an elevated hydraulic platform and the platform failed, crushing the worker.</td>
</tr>
<tr>
<td>12/23/2009</td>
<td>Walls Contractors, Inc., Newport, AR 72112</td>
<td>Worker was preparing drywall to be painted and found a coil of wire hanging from the ceiling. He attempted to throw the coil over a beam in the ceiling. The coil of wires struck the beam and fell back down. The wires contacted the worker and he was electrocuted.</td>
</tr>
<tr>
<td>12/25/2009</td>
<td>Stark Excavation, Inc., Normal, IL 61790</td>
<td>Worker was operating a track hoe to remove columns lodged against a building. The columns were rigged with a nylon strap and were attached to the track hoe. While hoisting the façade from the building, the strap broke and the concrete façade fell on the cab of the track hoe, fatally injuring the worker.</td>
</tr>
<tr>
<td>12/26/2009</td>
<td>Tomcat Drilling, LLC, Ames, OK 73718</td>
<td>Worker on a derrick board fell with the collapsing mast. The derrick board broke loose from the mast and the worker was thrown against a metal structure on the ground.</td>
</tr>
</tbody>
</table>

**CATASTROPHES - MULTIPLE WORKERS HOSPITALIZED** (None Reported)

**NOTES:**

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Free assistance in identifying and correcting hazards or complying with standards is available to employers, without citation or penalty, through OSHA-supported consultation programs in each state.

1-800-321-OSHA  
www.osha.gov
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Section 1 – PRODUCT AND COMPANY INFORMATION

Product Name: Chemical Stuff  
Synonyms: Methyltoxy Solution  
CAS Number: 00-00-0  
Product Use: Organic Synthesis  
Manufacturer: My Company  
Address: My Street, Mytown, TX 00000  
Phone: 713-000-000  
Transportation Emergency Number: CHEMTREC: 800-424-9300

Section 2 – HAZARDS IDENTIFICATION

GHS Classification:

<table>
<thead>
<tr>
<th>Health</th>
<th>Environmental</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Acute Toxicity</strong> – Category 2(inhalation), Category 3 (oral/dermal)</td>
<td><strong>Aquatic Toxicity</strong> – Acute 2</td>
<td><strong>Flammable Liquid</strong> – Category 2</td>
</tr>
<tr>
<td>Eye Corrosion – Category 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin Corrosion – Category 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin Sensitization – Category 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mutagenicity – Category 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carcinogenicity – Category 1B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reproductive/Developmental – Category 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target Organ Toxicity (Repeated) – Category 2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

GHS Label(s)

Hazard Statements  
DANGER! Highly Flammable Liquid and Vapor. Fatal if inhaled. Causes severe skin burns and eye damage. May cause allergic skin reaction. Toxic if swallowed and in contact with skin. May cause cancer. Suspected of damaging the unborn child. Suspected of causing genetic defects. May cause damage to cardiovascular, respiratory, nervous, and gastrointestinal systems and liver and blood through prolonged or repeated exposure. Toxic to aquatic life.

Precautionary Statements  
Do not eat, drink or use tobacco when using this prod. Do not breathe mist/vapors. Keep container tightly closed. Keep away from heat/sparks/open flame. - No smoking Wear respiratory protection, protective gloves and eye/face Use only in a well-ventilated area. Take precautionary measures against static discharge Use only non-sparking tools. Store container tightly closed in cool/well-ventilated p. Wash thoroughly after handling.

Section 3 – COMPOSITION/INFORMATION ON INGREDIENTS

<table>
<thead>
<tr>
<th>Component</th>
<th>CAS Number</th>
<th>Weight%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methyltoxy</td>
<td>000-00-0</td>
<td>80</td>
</tr>
</tbody>
</table>

(See Section 8 for Exposure Limits)
Section 4 – FIRST AID MEASURES

**Eye:** Eye irritation. Flush immediately with large amounts of water for at least 15 minutes. Eyelids should be held away from the eyeball to ensure thorough rinsing. Get immediate medical attention.

**Skin:** Itching or burning of the skin. Immediately flush the skin with plenty of water while removing contaminated clothing and shoes. Get immediate medical attention. Wash contaminated clothing before reuse.

**Inhalation:** Nasal irritation, headache, dizziness, nausea, vomiting, heart palpitations, breathing difficulty, cyanosis, tremors, weakness, red flushing of face, irritability. Remove exposed person from source of exposure to fresh air. If not breathing, clear airway and start cardiopulmonary resuscitation (CPR). Avoid mouth-to-mouth resuscitation.

**Ingestion:** Get immediate medical attention. Do not induce vomiting unless directed by medical personnel.

Section 5 – FIRE FIGHTING MEASURES

**Suitable Extinguishing Media:** Use dry chemical, foam, or carbon dioxide to extinguish fire. Water may be ineffective but should be used to cool fire-exposed containers, structures and to protect personnel. Use water to dilute spills and to flush them away from sources of ignition.

**Fire Fighting Procedures:** Do not flush down sewers or other drainage systems. Exposed firefighters must wear NIOSH-approved positive pressure self-contained breathing apparatus with full-face mask and full protective clothing.

**Unusual Fire and Explosion Hazards:** Dangerous when exposed to heat or flame. Will form flammable or explosive mixtures with air at room temperature. Vapor or gas may spread to distant ignition sources and flash back. Vapors or gas may accumulate in low areas. Runoff to sewer may cause fire or explosion hazard. Containers may explode in heat of fire. Vapors may concentrate in confined areas. Liquid will float and may reignite on the surface of water.

**Combustion Products:** Irritating or toxic substances may be emitted upon thermal decomposition. Thermal decomposition products may include oxides of carbon and nitrogen.

Section 6 – ACCIDENTAL RELEASE MEASURES

Keep unnecessary people away; isolate hazard area and deny entry. Stay upwind; keep out of low areas. (Also see Section 8).

Vapor protective clothing should be worn for spills and leaks. Shut off ignition sources; no flares, smoking or flames in hazard area. Small spills: Take up with sand or other noncombustible absorbent material and place into containers for later disposal. Large spills: Dike far ahead of liquid spill for later disposal.

Do not flush to sewer or waterways. Prevent release to the environment if possible. Refer to Section 15 for spill/release reporting information.

Section 7 – HANDLING AND STORAGE

**Handling**

Do not get in eyes, on skin or on clothing. Do not breathe vapors or mists. Keep container closed. Use only with adequate ventilation. Use good personal hygiene practices. Wash hands before eating, drinking, smoking. Remove contaminated clothing and clean before re-use. Destroy contaminated belts and shoes and other items that cannot be decontaminated.

Keep away from heat and flame. Keep operating temperatures below ignition temperatures at all times. Use non-sparking tools.
Storage
Store in tightly closed containers in cool, dry, well-ventilated area away from heat, sources of ignition and incompatibles. Ground lines and equipment used during transfer to reduce the possibility of static spark-initiated fire or explosion. Store at ambient or lower temperature. Store out of direct sunlight. Keep containers tightly closed and upright when not in use. Protect against physical damage.
Empty containers may contain toxic, flammable and explosive residue or vapors. Do not cut, grind, drill, or weld on or near containers unless precautions are taken against these hazards.

Section 8 – EXPOSURE CONTROLS – PERSONAL PROTECTION

Exposure Limits:
Component, Methyltoxy – OSHA PEL (8-hourTWA): 3 ppm (skin) - STEL: C 15 ppm (15 min.

Engineering Controls: Local exhaust ventilation may be necessary to control air contaminants to their exposure limits. The use of local ventilation is recommended to control emissions near the source. Provide mechanical ventilation for confined spaces. Use explosion-proof ventilation equipment.

Personal Protective Equipment (PPE) Eye Protection: Wear chemical safety goggles and face shield. Have eye-wash stations available where eye contact can occur.

Skin Protection: Avoid skin contact. Wear gloves impervious to conditions of use. Additional protection may be necessary to prevent skin contact including use of apron, face shield, boots or full body protection. A safety shower should be located in the work area. Recommended protective materials include: Butyl rubber and for limited contact Teflon.

Respiratory Protection: If exposure limits are exceeded, NIOSH approved respiratory protection should be worn. A NIOSH approved respirator for organic vapors is generally acceptable for concentrations up to 10 times the PEL. For higher concentrations, unknown concentrations and for oxygen deficient atmospheres, use a NIOSH approved air-supplied respirator. Engineering controls are the preferred means for controlling chemical exposures. Respiratory protection may be needed for non-routine or emergency situations. Respiratory protection must be provided in accordance with OSHA 29 CFR 1910.134.

Section 9 – PHYSICAL AND CHEMICAL PROPERTIES

Flashpoint: 20°C (35°F)
Autoignition Temperature: 480°C (896°F)
Boiling Point: 77°C (170.6°F) @ 760 mm Hg
Melting Point: -82°C Vapor Pressure: 100.0 mm Hg @ 23°C
Vapor Pressure: 100.0 mm Hg @ 23°C
Vapor Density (Air=1): 1.7; air = 1
% Solubility in Water: 10 @ 20°C
Pour Point: NA
Molecular Formula: Mixture
Odor/Appearance: Clear, colorless liquid with mild, pungent odor.
Lower Flammability Limit: >3.00%
Upper Flammability Limit: <15.00%
Specific Gravity: 0.82g/ml @ 20°C %
Volatile: 100 Evaporation Rate (Water=1): 5(Butyl Acetate =1)
Viscosity: 0.3 cP @ 25°C
Octanol/Water Partition Coefficient: log Kow: 0.5
pH: 7, 8% aqueous solution
Molecular Weight: Mixture

Section 10 – STABILITY AND REACTIVITY

Stability/Incompatibility: Incompatible with ammonia, amines, bromine, strong bases and strong acids.
Hazardous Reactions/Decomposition Products: Thermal decomposition products may include oxides of carbon and nitrogen.

Section 11 – TOXICOLOGICAL INFORMATION

Signs and Symptoms of Overexposure: Eye and nasal irritation, headache, dizziness, nausea, vomiting, heart palpitations, difficulty breathing, cyanosis, tremors, weakness, itching or burning of the skin.

Acute Effects:
Eye Contact: may cause severe conjunctival irritation and corneal damage.
Skin Contact: may cause reddening, blistering or burns with permanent damage. Harmful if absorbed through the skin. May cause allergic skin reaction.
Inhalation: may cause severe irritation with possible lung damage (pulmonary edema).
Ingestion: may cause severe gastrointestinal burns.

Target Organ Effects: May cause gastrointestinal (oral), respiratory tract, nervous system and blood effects based on experimental animal data. May cause cardiovascular system and liver effects.

Chronic Effects: based on experimental animal data, may cause changes to genetic material; adverse effects on the developing fetus or on reproduction at doses that were toxic to the mother. Methyltoxy is classified by IARC as group 2B and by NTP as reasonably anticipated to be a human carcinogen. OSHA regulates Methyltoxy as a potential carcinogen.

Medical Conditions Aggravated by Exposure: preexisting diseases of the respiratory tract, nervous system, cardiovascular system, liver or gastrointestinal tract.

Acute Toxicity Values
Oral LD50 (Rat) = 100 mg/kg
Dermal LD50 (Rabbit) = 225-300 mg/kg Inhalation
LC50 (Rat) = 200 ppm/4 hr., 1100 ppm vapor/1 hr

Section 12 – ECOLOGICAL INFORMATION

LC50 (Fathead Minnows) = 9 mg/L/96 hr.
EC50 (Daphnia) = 8.6 mg/L/48 hr.

Bioaccumulation is not expected to be significant. This product is readily biodegradable.

Section 13 – DISPOSAL CONSIDERATIONS

As sold, this product, when discarded or disposed of, is a hazardous waste according to Federal regulations (40 CFR 261). It is listed as Hazardous Waste Number Z000, listed due to its toxicity. The transportation, storage, treatment and disposal of this waste material must be conducted in compliance with 40 CFR 262, 263, 264, 268 and 270. Disposal can occur only in properly permitted facilities. Refer to state and local requirements for any additional requirements, as these may be different from Federal laws and regulations. Chemical additions, processing or otherwise altering this material may make waste management information
presented in the MSDS incomplete, inaccurate or otherwise inappropriate.

Section 14 – TRANSPORT INFORMATION

U.S. Department of Transportation (DOT)
Proper Shipping Name: Methyltoxy
Hazard Class: 3, 6.1
UN/NA Number: UN0000
Packing Group: PG 2
Labels Required: Flammable Liquid and Toxic

International Maritime Organization (IMDG)
Proper Shipping Name: Methyltoxy
Hazard Class: 3 Subsidiary 6.1
UN/NA Number: UN0000
Packing Group: PG 2
Labels Required: Flammable Liquid and Toxic

Section 15 – REGULATORY INFORMATION

U.S. Federal Regulations
Comprehensive Environmental Response and Liability Act of 1980 (CERCLA):
The reportable quantity (RQ) for this material is 1000 pounds. If appropriate, immediately report to the National Response Center (800/424-8802) as required by U.S. Federal Law. Also contact appropriate state and local regulatory agencies.

Toxic Substances Control Act (TSCA): All components of this product are included on the TSCA inventory.


Clean Air Act (CAA): Methyltoxy is a hazardous substance under the Clean Air Act. Consult Federal, State and local regulations for specific requirements.

Superfund Amendments and Reauthorization Act (SARA) Title III Information:
SARA Section 311/312 (40 CFR 370) Hazard Categories:
Immediate Hazard: X
Delayed Hazard: X
Fire Hazard: X
Pressure Hazard:
Reactivity Hazard:
This product contains the following toxic chemical(s) subject to reporting requirements of SARA Section 313 (40 CFR 372).

<table>
<thead>
<tr>
<th>Component</th>
<th>CAS Number</th>
<th>Maximum %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methyltoxy</td>
<td>00-00-0</td>
<td>80</td>
</tr>
</tbody>
</table>

**State Regulations**
California: This product contains the following chemicals(s) known to the State of California to cause cancer, birth defects or reproductive harm:

<table>
<thead>
<tr>
<th>Component</th>
<th>CAS Number</th>
<th>Maximum %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methyltoxy</td>
<td>00-00-0</td>
<td>80</td>
</tr>
</tbody>
</table>

**International Regulations**
Canadian Environmental Protection Act: All of the components of this product are included on the Canadian Domestic Substances list (DSL).
Canadian Workplace Hazardous Materials Information System (WHMIS):
Class B-2 Flammable Liquid
Class D-1-B Toxic
Class D-2-A Carcinogen
Class D-2-B Chronic Toxin
Class E Corrosive

This product has been classified in accordance with the hazard criteria of the Controlled Products Regulations and the SDS contains all the information required by the Controlled Products Regulations.

European Inventory of Existing Chemicals (EINECS): All of the components of this product are included on EINECS.

EU Classification: F Highly Flammable; T Toxic; N Dangerous to the Environment
EU Risk (R) and Safety (S) Phrases:
R11: Highly flammable
R23/24/25: Toxic by inhalation, in contact with skin and if swallowed
R37/38: Irritating to respiratory system and skin
R41: Risk of serious damage to eyes
R43: May cause sensitization by skin contact
R45: May cause cancer
R51/53: Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment
S53: Avoid exposure - obtain special instructions before use
S16: Keep away from sources of ignition - No Smoking
S45: In case of accident or if you feel unwell, seek medical advice immediately (show the label where possible)
S9: Keep container in a well-ventilated place
S36/37: Wear suitable protective clothing and gloves
S57: Use appropriate container to avoid environmental contamination.
Section 16 – OTHER INFORMATION

National Fire Protection Association (NFPA) Ratings: This information is intended solely for the use of individuals trained in the NFPA system
Health: 3
Flammability: 3
Reactivity: 0

Version 1.0 prepared 8/13/2013

ACGIH  American Conference of Governmental Hygienists
AKA    Also Known As, Synonym
CAS    Chemical Abstract Service
IARC   International Agency for Research of Cancer
mg/m³  milligrams per Cubic Meter
N      No, None, Not listed
NA     Not Applicable, Not Available
ND     Not Determined
NIL    Not measurable, significant, noticeable, or an affect
NTP    National Toxicology Program
OSHA   Occupational Safety and Health Administration
ppm    parts per million
Y      Yes, Does Exists, Is Listed,
Your Rights as a Whistleblower

You may file a complaint with OSHA if your employer retaliates against you by taking unfavorable personnel action because you engaged in protected activity relating to workplace safety and health, commercial motor carrier safety, pipeline safety, air carrier safety, nuclear safety, the environment, asbestos in schools, corporate fraud, SEC rules or regulations, railroad carrier safety or security, or public transportation agency safety or security.

Whistleblower Laws Enforced by OSHA

Each law requires that complaints be filed within a certain number of days after the alleged retaliation.

You may file complaints by telephone or in writing under the:

- Occupational Safety and Health Act (30 days)
- Surface Transportation Assistance Act (180 days)
- Asbestos Hazard Emergency Response Act (90 days)
- International Safe Container Act (60 days)
- Federal Rail Safety Act (180 days)
- National Transit Systems Security Act (180 days)

Under the following laws, complaints must be filed in writing:

- Clean Air Act (30 days)
- Comprehensive Environmental Response, Compensation and Liability Act (30 days)
- Energy Reorganization Act (180 days)
- Federal Water Pollution Control Act (30 days)
- Pipeline Safety Improvement Act (180 days)
- Safe Drinking Water Act (30 days)
- Sarbanes-Oxley Act (90 days)
- Solid Waste Disposal Act (30 days)
- Toxic Substances Control Act (30 days)
- Wendell H. Ford Aviation Investment and Reform Act for the 21st Century (90 days)

Unfavorable Personnel Actions

Your employer may be found to have retaliated against you if your protected activity was a contributing or motivating factor in its decision to take unfavorable personnel action against you. Such actions may include:

- Firing or laying off
- Blacklisting
- Demoting
- Denying overtime or promotion
- Disciplining
- Denying benefits
- Failing to hire or rehire
- Intimidation
- Reassignment affecting promotion prospects
- Reducing pay or hours

Filing a Complaint

If you believe that your employer retaliated against you because you exercised your legal rights as an employee, contact your local OSHA office as soon as possible, because you must file your complaint within the legal time limits. OSHA conducts an in-depth interview with each complainant to determine whether to conduct an investigation. For more information, call your closest OSHA Regional Office:

- Boston (617) 565-9860
- New York (212) 337-2378
- Philadelphia (215) 861-4900
- Atlanta (404) 562-2300
- Chicago (312) 353-2220
- Dallas (972) 850-4145
- Kansas City (816) 283-8745
- Denver (720) 264-6550
- San Francisco (415) 625-2547
- Seattle (206) 553-5930

Addresses, fax numbers and other contact information for these offices can be found on OSHA’s website, www.osha.gov, and in local directories. Some complaints must be filed in writing and some may be filed verbally (call your local OSHA office for assistance). Written complaints may be filed by mail (we recommend certified mail), fax, or hand-delivered during business hours. The date postmarked, faxed or hand-delivered is considered the date filed.

If retaliation for protected activity relating to occupational safety and health issues takes place in a state that operates an OSHA-approved state plan, the complaint should be filed with the state agency, although persons in those states may file with Federal OSHA at the same time. Although the Occupational Safety and
Health Act covers only private sector employees, state plans also cover state and local government employees. For details, see http://www.osha.gov/fso/osp/index.html.

How OSHA Determines Whether Retaliation Took Place
The investigation must reveal that:
• The employee engaged in protected activity;
• The employer knew about the protected activity;
• The employer took an adverse action; and
• The protected activity was the motivating factor (or under some laws, a contributing factor) in the decision to take the adverse action against the employee.

If the evidence supports the employee’s allegation and a settlement cannot be reached, OSHA will issue an order requiring the employer to reinstate the employee, pay back wages, restore benefits, and other possible remedies to make the employee whole.

Limited Protections for Employees Who Refuse to Work
You have a limited right under the OSH Act to refuse to do a job because conditions are hazardous. You may do so under the OSH Act only when (1) you believe that you face death or serious injury (and the situation is so clearly hazardous that any reasonable person would believe the same thing); (2) you have tried to get your employer to correct the condition, and there is no other way to do the job safely; and (3) the situation is so urgent that you do not have time to eliminate the hazard through regulatory channels such as calling OSHA.

Regardless of the unsafe condition, you are not protected if you simply walk off the job. For details, see http://www.osha.gov/as/opa/worker/refuse.html. OSHA cannot enforce union contracts or state laws that give employees the right to refuse to work.

Whistleblower Protections in the Transportation Industry
Employees whose jobs directly affect commercial motor vehicle safety are protected from retaliation by their employers for refusing to violate or for reporting violations of Department of Transportation (DOT) motor carrier safety standards or regulations, or refusing to operate a vehicle because of such violations or because they have a reasonable apprehension of death or serious injury.

Similarly, employees of air carriers, their contractors or subcontractors who raise safety concerns or report violations of FAA rules and regulations are protected from retaliation, as are employees of owners and operators of pipelines, their contractors and subcontractors who report violations of pipeline safety rules and regulations. Employees involved in international shipping who report unsafe shipping containers are also protected. In addition, employees of railroad carriers or public transportation agencies, their contractors or subcontractors who report safety or security conditions or violations of federal rules and regulations relating to railroad or public transportation safety or security are protected from retaliation.

Whistleblower Protections for Voicing Environmental Concerns
A number of laws protect employees who report violations of environmental laws related to drinking water and water pollution, toxic substances, solid waste disposal, air quality and air pollution, asbestos in schools, and hazardous waste disposal sites. The Energy Reorganization Act protects employees who raise safety concerns in the nuclear power industry and in nuclear medicine.

Whistleblower Protections When Reporting Corporate Fraud
Employees who work for publicly traded companies or companies required to file certain reports with the Securities and Exchange Commission are protected from retaliation for reporting alleged mail, wire, or bank fraud; violations of rules or regulations of the SEC; or federal laws relating to fraud against shareholders.

More Information
To obtain more information on whistleblower laws, go to www.osha.gov, and click on the link for “Whistleblower Protection.”

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.

For more complete information:

U.S. Department of Labor
www.osha.gov (800) 321-OSHA
Refusing to Work because Conditions are Dangerous

Workers have the right to refuse to do a job if they believe in good faith that they are exposed to an imminent danger. "Good faith" means that even if an imminent danger is not found to exist, the worker had reasonable grounds to believe that it did exist.

The United States Supreme Court, in the Whirlpool case, issued the landmark ruling which more clearly defined a worker's right to refuse work where an employee has reasonable apprehension that death or serious injury or illness might occur as a result of performing the work. However, as a general rule, you do not have the right to walk off the job because of unsafe conditions.

Your right to refuse to do a task is protected if ALL of the following conditions are met:

✓ Where possible, you have asked the employer to eliminate the danger, and the employer failed to do so; **and**
✓ You refused to work in "good faith." This means that you must genuinely believe that an imminent danger exists. Your refusal cannot be a disguised attempt to harass your employer or disrupt business; **and**
✓ A reasonable person would agree that there is a real danger of death or serious injury; **and**
✓ There isn't enough time, due to the urgency of the hazard, to get it corrected through regular enforcement channels, such as requesting an OSHA inspection.

When all of these conditions are met, you take the following steps:

✓ Ask your employer to correct the hazard;
✓ Ask your employer for other work;
✓ Tell your employer that you won't perform the work unless and until the hazard is corrected; **and**
✓ Remain at the worksite until ordered to leave by your employer.

The table below offers a few “IF/THEN” scenarios to follow.

<table>
<thead>
<tr>
<th>IF</th>
<th>THEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>You believe working conditions are unsafe or unhealthful.</td>
<td>Call your employer's attention to the problem.</td>
</tr>
<tr>
<td>Your employer does not correct the hazard or disagrees with you about the extent of the hazard.</td>
<td>You may file a complaint with OSHA.</td>
</tr>
<tr>
<td>Your employer discriminates against you for refusing to perform the dangerous work.</td>
<td>Contact OSHA immediately.</td>
</tr>
</tbody>
</table>

Intentional blank page to accommodate 2-sided printing.
OSHA's Form 300 (Rev. 01/2004)
Log of Work-Related Injuries and Illnesses

You must report information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also report all significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also report all work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you’re not sure whether a case is recordable, call your local OSHA office for help.

<table>
<thead>
<tr>
<th>Case No.</th>
<th>Employee's Name</th>
<th>Job Title</th>
<th>Date of Injury or Onset of Illness (Mo./Day)</th>
<th>Where the Event Occurred</th>
<th>Describe Injury or Illness, Parts of Body Affected, and Object/Substance that Directly Injured or Made Person Ill</th>
<th>Identify the Person</th>
<th>Describe the Case</th>
<th>Classify the Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Tammy Newcomer</td>
<td>Chemist</td>
<td>2/5</td>
<td>Lab</td>
<td>Breathing difficulty-inhaled from chlorine gas</td>
<td>X</td>
<td>Days away from work: 13</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>Pat James</td>
<td>Electrican</td>
<td>3/4</td>
<td>Maintenance Dept.</td>
<td>Gunshot wound left shoulder from ex-wife on 3rd shift</td>
<td>X</td>
<td>X</td>
<td>25</td>
</tr>
<tr>
<td>3</td>
<td>Jose Ortega</td>
<td>CNA</td>
<td>5/30</td>
<td>3rd Fl, South wing</td>
<td>Hernia, lower right abdomen from lifting resident</td>
<td>X</td>
<td>X</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Georgina Gonzella</td>
<td>Welder</td>
<td>6/29</td>
<td>Welding Area</td>
<td>Welder flash, both eyes from TIG welder</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>William Handwerk</td>
<td>Temp Help</td>
<td>8/7</td>
<td>Shipping Department</td>
<td>Broke left wrist from fall to dock floor</td>
<td>X</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>6</td>
<td>Privacy Case</td>
<td>Janitor</td>
<td>10/4</td>
<td>Rm 6, 2nd Fl, North Wing</td>
<td>Needlestick from used syringe from Right Hand</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Ellen Bass</td>
<td>Press Opr</td>
<td>12/5</td>
<td>Sheet Metal Dept.</td>
<td>Hearing loss, right ear</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Page totals: 0 3 1 3 43 48 4 0 1 0 1 1

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.
Employers Must Provide and Pay for PPE

Personal Protective Equipment (PPE)

The Occupational Safety and Health Administration (OSHA) requires that employers protect you from workplace hazards that can cause injury or illness. Controlling a hazard at its source is the best way to protect workers. However, when engineering, work practice and administrative controls are not feasible or do not provide sufficient protection, employers must provide personal protective equipment (PPE) to you and ensure its use.

PPE is equipment worn to minimize exposure to a variety of hazards. Examples include items such as gloves, foot and eye protection, protective hearing protection (earplugs, muffs), hard hats and respirators.

<table>
<thead>
<tr>
<th>Employer Obligations</th>
<th>Workers should:</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Performing a &quot;hazard assessment&quot; of the workplace to identify and control physical and health hazards.</td>
<td>✓ Properly wear PPE</td>
</tr>
<tr>
<td>✓ Identifying and providing appropriate PPE for employees.</td>
<td>✓ Attend training sessions on PPE</td>
</tr>
<tr>
<td>✓ Training employees in the use and care of the PPE.</td>
<td>✓ Care for, clean and maintain PPE, an</td>
</tr>
<tr>
<td>✓ Maintaining PPE, including replacing worn or damaged PPE.</td>
<td>✓ Inform a supervisor of the need to repair or replace PPE.</td>
</tr>
<tr>
<td>✓ Periodically reviewing, updating and evaluating the effectiveness of the PPE program.</td>
<td></td>
</tr>
</tbody>
</table>

Employers Must Pay for Personal Protective Equipment (PPE)

On May 15, 2008, a new OSHA rule about employer payment for PPE went into effect. With few exceptions, OSHA now requires employers to pay for personal protective equipment used to comply with OSHA standards. The final rule does not create new requirements regarding what PPE employers must provide.

The standard makes clear that employers cannot require workers to provide their own PPE and the worker’s use of PPE they already own must be completely voluntary. Even when a worker provides his or her own PPE, the employer must ensure that the equipment is adequate to protect the worker from hazards at the workplace.

Examples of PPE that Employers Must Pay for Include:

- Metatarsal foot protection
- Rubber boots with steel toes
- Non-prescription eye protection
- Prescription eyewear inserts/lenses for full face respirators
- Goggles and face shields
- Fire fighting PPE (helmet, gloves, boots, proximity suits, full gear)
- Hard hats
- Hearing protection
- Welding PPE
Employers Must Provide and Pay for PPE

Payment Exceptions under the OSHA Rule

Employers are not required to pay for some PPE in certain circumstances:

- Non-specialty safety-toe protective footwear (including steel-toe shoes or boots) and non-specialty prescription safety eyewear provided that the employer permits such items to be worn off the job site. (OSHA based this decision on the fact that this type of equipment is very personal, is often used outside the workplace, and that it is taken by workers from jobsite to jobsite and employer to employer.)
- Everyday clothing, such as long-sleeve shirts, long pants, street shoes, and normal work boots.
- Ordinary clothing, skin creams, or other items, used solely for protection from weather, such as winter coats, jackets, gloves, parkas, rubber boots, hats, raincoats, ordinary sunglasses, and sunscreen
- Items such as hair nets and gloves worn by food workers for consumer safety.
- Lifting belts because their value in protecting the back is questionable.
- When the employee has lost or intentionally damaged the PPE and it must be replaced.

OSHA Standards that Apply

<table>
<thead>
<tr>
<th>OSHA General Industry PPE Standards</th>
<th>OSHA Construction PPE Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>1910.132: General requirements and payment</td>
<td>1926.28: Personal protective equipment</td>
</tr>
<tr>
<td>1910.133: Eye and face protection</td>
<td>1926.95: Criteria for personal protective equipment</td>
</tr>
<tr>
<td>1910.134: Respiratory protection</td>
<td>1926.96: Occupational foot protection</td>
</tr>
<tr>
<td>1910.135: Head protection</td>
<td>1926.100: Head protection</td>
</tr>
<tr>
<td>1910.136: Foot protection</td>
<td>1926.101: Hearing protection</td>
</tr>
<tr>
<td>1910.137: Electrical protective devices</td>
<td>1926.102: Eye and face protection</td>
</tr>
<tr>
<td>1910.138: Hand protection</td>
<td>1926.103: Respiratory protection</td>
</tr>
</tbody>
</table>

There are also PPE requirements in shipyards and marine terminals and many standards on specific hazards, such as 1910.1030: Bloodborne pathogens and 1910.146: Permit-required confined spaces.

OSHA standards are online at [www.osha.gov](http://www.osha.gov).

Sources:

- *Employers Must Provide and Pay for PPE, New Jersey Work Environment Council (WEC) Fact Sheet*
- OSHA Standards, 1910.132(h) and 1926.95(d)
- *Employer Payment for Personal Protective Equipment Final Rule, Federal Register: November 15, 2007 (Volume 72, Number 220)*
How to Read the OSHA Standards
29 CFR 1910 – General Industry

Under Title 29, Chapter XVII, the OSHA regulations are broken down into Parts. Part 1910, for example, is commonly known as the OSHA General Industry Standards. Part 1926 covers OSHA construction standards and Parts 1915, 1917 and 1918 include the OSHA standards for the maritime industry.

Subparts
Under each part, such as Part 1910, major blocks of information are further broken into subparts. The major subparts in 1910 standards include:

<table>
<thead>
<tr>
<th>Subpart</th>
<th>Walking-Working Surfaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subpart E</td>
<td>Means of Egress</td>
</tr>
<tr>
<td>Subpart F</td>
<td>Powered Platforms, Manlifts, and Vehicle-Mounted Work Platforms</td>
</tr>
<tr>
<td>Subpart G</td>
<td>Occupational Health and Environmental Control</td>
</tr>
<tr>
<td>Subpart H</td>
<td>Hazardous Materials</td>
</tr>
<tr>
<td>Subpart I</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>Subpart J</td>
<td>General Environmental Controls</td>
</tr>
<tr>
<td>Subpart K</td>
<td>Medical and First Aid</td>
</tr>
<tr>
<td>Subpart L</td>
<td>Fire Protection</td>
</tr>
<tr>
<td>Subpart M</td>
<td>Compressed Gas and Compressed Air Equipment</td>
</tr>
<tr>
<td>Subpart N</td>
<td>Materials Handling and Storage</td>
</tr>
<tr>
<td>Subpart O</td>
<td>Machinery and Machine Guarding</td>
</tr>
<tr>
<td>Subpart P</td>
<td>Hand and Portable Powered Tools</td>
</tr>
<tr>
<td>Subpart Q</td>
<td>Welding, Cutting and Brazing</td>
</tr>
<tr>
<td>Subpart R</td>
<td>Special Industries</td>
</tr>
<tr>
<td>Subpart S</td>
<td>Electrical</td>
</tr>
<tr>
<td>Subpart Z</td>
<td>Toxic and Hazardous Substances</td>
</tr>
</tbody>
</table>

Sections
Each Subpart is further broken down into sections. For example, Subpart D – Walking-Working Surfaces has sections 1910.21 through 1910.30.

- 1910.21 – Definitions.
- 1910.22 – General requirements.
- 1910.23 – Guarding floor and wall openings and holes.
- 1910.25 – Portable wood ladders.
- 1910.26 – Portable metal ladders.
- 1910.27 – Fixed ladders.
- 1910.28 – Safety requirements for scaffolding.
- 1910.29 – Manually propelled mobile ladder stands and scaffolds (towers).
- 1910.30 – Other working surfaces.

Example: Reading OSHA Standards – Breaking Down the Numbers

Portable containers shall not be taken into buildings except as provided in paragraph (b)(6)(i) of this section.

Numbers:

<table>
<thead>
<tr>
<th>Code of Title</th>
<th>Fed. Reg.</th>
<th>Part</th>
<th>Section</th>
<th>Lower Case Alpha</th>
<th>Arabic Number</th>
<th>Lower Case Roman</th>
<th>Italicized*</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>CFR</td>
<td>1910</td>
<td>.110</td>
<td>(b)</td>
<td>(13)</td>
<td>(ii)</td>
<td>(b)(7)(iii)</td>
</tr>
</tbody>
</table>

*For standards promulgated prior to 1979, italics are used to list the fourth set of parentheses. After 1979, a capital/upper case letter is used in this space.
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<table>
<thead>
<tr>
<th>SUBPARTS</th>
<th>SECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subpart C General Safety and Health Provisions</td>
<td>Each Subpart is further broken down into Sections. For example, Subpart C – General Safety and Health Provisions, has sections 1926.20 through 1926.35.</td>
</tr>
<tr>
<td>Subpart D Occupational Health and Environmental Controls</td>
<td>- 1926.20 – General safety and health provisions.</td>
</tr>
<tr>
<td>Subpart E Personal Protective and Life Saving Equipment</td>
<td>- 1926.21 – Safety training and education.</td>
</tr>
<tr>
<td>Subpart F Fire Protection and Prevention</td>
<td>- 1926.22 – Recording and reporting of injuries.</td>
</tr>
<tr>
<td>Subpart G Signs, Signals and Barricades</td>
<td>- 1926.23 – First aid and medical attention.</td>
</tr>
<tr>
<td>Subpart H Materials Handling, Storage, Use, and Disposal</td>
<td>- 1926.24 – Fire protection and prevention.</td>
</tr>
<tr>
<td>Subpart J Welding and Cutting</td>
<td>- 1926.26 – Illumination.</td>
</tr>
<tr>
<td>Subpart K Electrical</td>
<td>- 1926.27 – Sanitation.</td>
</tr>
<tr>
<td>Subpart L Scaffolds</td>
<td>- 1926.28 – Personal protective equipment.</td>
</tr>
<tr>
<td>Subpart M Fall Protection</td>
<td>- 1926.29 – Acceptable certifications.</td>
</tr>
<tr>
<td>Subpart N Cranes, Derricks, Hoists, Elevators, and Conveyors</td>
<td>- 1926.30 – Shipbuilding and ship repairing.</td>
</tr>
<tr>
<td>Subpart P Excavations</td>
<td>- 1926.32 – Definitions.</td>
</tr>
<tr>
<td>Subpart Q Concrete and Masonry Construction</td>
<td>- 1926.33 – Access to employee exposure and medical records.</td>
</tr>
<tr>
<td>Subpart R Steel Erection</td>
<td>- 1926.34 – Means of egress.</td>
</tr>
<tr>
<td>Subpart S Underground Construction, Caissons, Cofferdams, and Compressed Air</td>
<td>- 1926.35 – Employee emergency action plans.</td>
</tr>
<tr>
<td>Subpart T Demolition</td>
<td>NOTES:</td>
</tr>
<tr>
<td>Subpart U Blasting and the Use of Explosives</td>
<td></td>
</tr>
<tr>
<td>Subpart V Power Transmission and Distribution</td>
<td></td>
</tr>
<tr>
<td>Subpart W Rollover Protective Structures; Overhead Protection</td>
<td></td>
</tr>
<tr>
<td>Subpart X Ladders</td>
<td></td>
</tr>
<tr>
<td>Subpart Y Commercial Diving</td>
<td></td>
</tr>
<tr>
<td>Subpart Z Toxic and Hazardous Substances</td>
<td></td>
</tr>
</tbody>
</table>

EXAMPLE: READING OSHA STANDARD NUMBERS

STANDARD: 29 CFR 1926.152(i)(1)(i)(C)  
Tanks built of materials other than steel shall be designed to specifications embodying principles recognized as good engineering design for the material used.

BREAKING DOWN THE NUMBER:

<table>
<thead>
<tr>
<th>TITLE</th>
<th>Code of Fed. Reg.</th>
<th>PART</th>
<th>SECTION</th>
<th>LOWER CASE ALPHA</th>
<th>ARABIC NUMBER</th>
<th>LOWER CASE ROMAN</th>
<th>CAPITAL/UPPER CASE ALPHA*</th>
</tr>
</thead>
<tbody>
<tr>
<td>29 CFR</td>
<td>1926</td>
<td>.152</td>
<td>(i)</td>
<td>(1)</td>
<td>(i)</td>
<td>(C)</td>
<td></td>
</tr>
</tbody>
</table>

*For standards promulgated after 1979, a capital/upper case letter is used in the fourth set of parentheses. Prior to 1979, the fourth set of parentheses are italicized.
Intentional blank page to accommodate 2-sided printing.
How to Read the OSHA Standards


Under Title 29, Chapter XVII, the OSHA regulations are broken down into parts. Parts 1915, 1917 and 1918 include the OSHA standards for the maritime industry. Part 1910 covers OSHA general industry standards and Part 1926 is commonly known as the OSHA construction standards.

Subparts of 29 CFR 1915

Each part, such as Part 1915 Occupational Safety and Health Standards for Shipyard Employment, major blocks of information are further broken into subparts. The major subparts in 1915 standards include:

| Subpart A | General Provisions |
| Subpart B | Confined and Enclosed Spaces and Other Dangerous Atmospheres in Shipyard Employment |
| Subpart C | Surface Preparation and Preservation |
| Subpart D | Welding, Cutting and Heating |
| Subpart E | Scaffolds, Ladders and Other Working Surfaces |
| Subpart F | General Working Conditions |
| Subpart G | Gear and Equipment for Rigging and Materials Handling |
| Subpart H | Tools and Related Equipment |
| Subpart I | Personal Protective Equipment |
| Subpart J | Ship's Machinery and Piping Systems |
| Subpart K | Portable, Unfired Pressure Vessels, Drums and Containers, Other Than Ship's Equipment |
| Subpart L | Electrical Machinery |
| Subpart M, N, O | [Reserved] |
| Subpart P | Fire Protection in Shipyard Employment |
| Subpart Q, R, S, T, U, V, W, X, Y | [Reserved] |
| Subpart Z | Toxic and Hazardous Substances |

Sections

Each subpart is further broken down into sections. For example, Subpart B – Confined and Enclosed Spaces and Other Dangerous Atmospheres in Shipyard Employment, has sections 1915.11 through 1915.16 with appendices.

- 1915.11 – Scope, application, and definitions applicable to this subpart.
- 1915.12 – Precautions and the order of testing before entering confined and enclosed spaces and other dangerous atmospheres.
- 1915.13 – Cleaning and other cold work.
- 1915.14 – Hot work.
- 1915.15 – Maintenance of safe conditions.
- 1915.16 – Warning signs and labels.
- 1915 Subpart B App A – Compliance Assistance Guidelines for Confined and Enclosed Spaces and Other Dangerous Atmospheres.
- 1915 Subpart B App B – Reprint of U.S. Coast Guard Regulations referenced in Subpart B, for Determination of Coast Guard Authorized Persons.

Notes:

Example: Reading OSHA Standard Numbers

| Standard: | Breaking down the number: |
| 1915.7(b)(2)(iii)(B) | The roster shall contain, as a minimum, the date the employee was trained as a competent person. |

<table>
<thead>
<tr>
<th>Standard</th>
<th>Title</th>
<th>Code of Fed. Reg.</th>
<th>Part</th>
<th>Section</th>
<th>Lower Case Alpha</th>
<th>Arabic Number</th>
<th>Lower Case Roman</th>
<th>Lower Case Upper Case Alpha*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1915.7(b)(2)(iii)(B)</td>
<td>29 CFR</td>
<td>1915</td>
<td>.7</td>
<td>(b)</td>
<td>(2)</td>
<td>(iii)</td>
<td>(B)</td>
<td></td>
</tr>
</tbody>
</table>

*For standards promulgated after 1979, a capital/upper case letter is used in the fourth set of parentheses. Prior to 1979, the fourth set of parentheses is italicized.
How to Read the OSHA Standards

SUBPARTS OF 29 CFR 1917
Under each part, such as Part 1917 Marine Terminals, major blocks of information are further broken into subparts. The major subparts in 1917 Standards include:

<table>
<thead>
<tr>
<th>Subpart</th>
<th>Scope and Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subpart B</td>
<td>Marine Terminal Operations</td>
</tr>
<tr>
<td>Subpart C</td>
<td>Cargo Handling Gear and Equipment</td>
</tr>
<tr>
<td>Subpart D</td>
<td>Specialized Terminals</td>
</tr>
<tr>
<td>Subpart E</td>
<td>Personal Protection</td>
</tr>
<tr>
<td>Subpart F</td>
<td>Terminal Facilities</td>
</tr>
<tr>
<td>Subpart G</td>
<td>Related Terminal Operations and Equipment</td>
</tr>
</tbody>
</table>

SUBPARTS OF 29 CFR 1918
Under each part, such as Part 1918 Safety and Health Regulations for Longshoring, major blocks of information are further broken into subparts. The major subparts in 1918 Standards include:

<table>
<thead>
<tr>
<th>Subpart</th>
<th>Scope and Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subpart B</td>
<td>Gear Certification</td>
</tr>
<tr>
<td>Subpart C</td>
<td>Gangways and Other Means of Access</td>
</tr>
<tr>
<td>Subpart D</td>
<td>Working Surfaces</td>
</tr>
<tr>
<td>Subpart E</td>
<td>Opening and Closing Hatches</td>
</tr>
<tr>
<td>Subpart F</td>
<td>Vessel's Cargo Handling Gear</td>
</tr>
<tr>
<td>Subpart G</td>
<td>Cargo Handling Gear and Equipment Other Than Ship's Gear</td>
</tr>
<tr>
<td>Subpart H</td>
<td>Handling Cargo</td>
</tr>
<tr>
<td>Subpart I</td>
<td>General Working Conditions</td>
</tr>
<tr>
<td>Subpart J</td>
<td>Personal Protective Equipment</td>
</tr>
</tbody>
</table>

SECTIONS
Each subpart is further broken down into sections. For example, Subpart G – Related Terminal Operations and Equipment, has sections 1917.151 through 1917.158.

- 1917.151 – Machine guarding.
- 1917.152 – Welding, cutting and heating (hot work)
- 1917.153 – Spray painting
- 1917.154 – Compressed air
- 1917.155 – Air receivers
- 1917.156 – Fuel handling and storage.
- 1917.157 – Battery charging and changing.
- 1917.158 – Prohibited operations.

NOTES:

EXAMPLE: READING OSHA STANDARD NUMBERS

- 29 CFR 1917.43(g)(2)(i)(C)
  The drive chain shall be enclosed to a height of eight feet (2.44 m) except for that portion at the lower half of the lower sprocket.

- 1918.66(a)(14)(iii)(A)
  Holding brakes torque 125 percent when used with other than mechanically controlled braking means.

*For standards promulgated after 1979, a capital/upper case letter is used in the fourth set of parentheses. Prior to 1979, the fourth set of parentheses are italicized.
Government Resources

**OSHA:** [http://www.osha.gov/](http://www.osha.gov/) Contact the OSHA Office nearest you or contact the toll free number: 1-800-321-OSHA (6742)

**NIOSH:** [http://www.cdc.gov/niosh/](http://www.cdc.gov/niosh/) Phone NIOSH at 1-800-CDC-INFO (1-800-232-4636) or Email at: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov)

NIOSH is a part of the Centers for Disease Control and Prevention ([http://www.cdc.gov/](http://www.cdc.gov/)). CDC has extensive information on health and safety topics.

COSH GROUPS

COSH groups are private, non-profit coalitions of labor unions, health and technical professionals, and others interested in promoting and advocating for worker health and safety. If you don’t see a COSH group in your area, check the NATIONAL COSH website for local COSH groups.

**NATIONAL COUNCIL FOR OCCUPATIONAL SAFETY & HEALTH** National COSH is a federation of local and statewide "COSH" groups: [http://www.coshnetwork.org/](http://www.coshnetwork.org/)

- **CACOSH** – Chicago Area Committee on Occupational Safety and Health: [http://www.cacosh.org/](http://www.cacosh.org/)
- **MASSCOSH** – Massachusetts Coalition on Occupational Safety and Health: [http://www.masscosh.org/](http://www.masscosh.org/)
- **NYCOSH** – New York Committee for Occupational Safety and Health: [http://www.nycosh.org/](http://www.nycosh.org/)

Universities

- **CORNELL UNIVERSITY** School of Industrial and Labor Relations: [http://www.ilr.cornell.edu/healthSafety/](http://www.ilr.cornell.edu/healthSafety/)
- **LABOR OCCUPATIONAL HEALTH PROGRAM,** University of California at Berkeley: [http://www.lohp.org/](http://www.lohp.org/)
- **NATIONAL LABOR COLLEGE,** George Meany Center: [http://www.nlc.edu/](http://www.nlc.edu/)

Unions

The following is a sample list of unions with links to useful health and safety information.


**AFSCME:** [http://www.afscme.org/issues/73.cfm](http://www.afscme.org/issues/73.cfm)

**eLCOSH** – The Electronic Library of Construction Safety and Health is a collection of information on construction safety and health developed by CPWR – Center for Construction Research and Training, with funding by NIOSH: [http://www.elcosh.org/](http://www.elcosh.org/)


**UAW** Health and Safety Department: [http://www.uaw.org/healthsafety](http://www.uaw.org/healthsafety)
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Navigating the OSHA Website

http://www.osha.gov

The elements of this valuable source of occupational safety and health information are featured:
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Identifying Safety and Health Problems in the Workplace

Identifying health and safety problems can be as easy as answering basic questions. To determine if there are health and safety problems that need to be addressed in your workplace, use these questions:

- Do you or your co-workers have injuries or health complaints? If so, what types?
- Who has been hurt or is having symptoms?
- When do you or your co-workers feel these symptoms?
- Where in the workplace are safety or health problems occurring?
- What are the conditions that are causing problems?

<table>
<thead>
<tr>
<th>HEALTH HAZARDS</th>
<th>SAFETY HAZARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Common types of health hazards in the workplace are:</strong></td>
<td><strong>Common types of safety hazards in the workplace are:</strong></td>
</tr>
<tr>
<td>o Chemical (asbestos, solvents, chlorine)</td>
<td>o Slips, trips and falls</td>
</tr>
<tr>
<td>o Biological (tuberculosis, HIV, hepatitis, molds)</td>
<td>o Being caught in or struck by moving machinery or other objects</td>
</tr>
<tr>
<td>o Physical (noise, heat and cold, radiation, vibration)</td>
<td>o Fire and explosions</td>
</tr>
<tr>
<td>o Ergonomics or Repetitive Strain Injuries (carpal tunnel syndrome, back injuries)</td>
<td>o Transportation and vehicle-related accidents</td>
</tr>
<tr>
<td>o Psychological (stress)</td>
<td>o Confined spaces</td>
</tr>
<tr>
<td></td>
<td>o Violence</td>
</tr>
</tbody>
</table>

**How health hazards enter your body:**
- Breathing (inhalation)
- Swallowing (ingestion)
- Skin (absorption)
- Cuts (injection)

**The harm caused by health hazards depends on:**
- Strength, or potency, of the agent.
- Amount of the agent that is present.
- How long you are exposed to the agent.
- Part of your body that is exposed.

**Types of health effects:**
- Acute: the effect shows up right away.
- Chronic: problems show up after a long period of exposure and/or long after the exposure ends.
- Local: only the part of the body that was exposed is affected.
- Systemic: an agent enters the body and affects other parts of the body.

**Cancer**
- Cancer is a term for many diseases in different parts of the body.
- Carcinogens are agents that cause cancer.
- There is no totally safe level of exposure to something that causes cancer.
- Cancer from a workplace exposure may develop 10, 20 or more years after the exposure.

**Reproductive effects**
- Both men and women can be affected by reproductive hazards at work.
- Reproductive hazards cause miscarriages and birth defects.

**Confined Spaces**
- A confined space is an area with small openings for a worker to enter and exit and is not designed for regular work. Examples of confined spaces include manholes, sewer digestors and silos. There are many hazards in confined spaces.
- Workers can become unconscious and die from a lack of oxygen.
- There may be too much oxygen, or other chemicals that can catch fire or explode.
- Poisonous gases and vapors, such as hydrogen sulfide or carbon monoxide, may also build up in a confined space.
- Confined spaces can also pose physical hazards. They can be very hot or cold, very loud, or slippery and wet.
- Grain, sand or gravel can bury a worker.

**Violence**
- Violence on the job is a growing problem.
- Homicides are the second leading cause of workplace fatalities. Workplace violence includes physical assault as well as near misses, verbal abuse and sexual harassment.

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HANDOUT #12a  
Filing an OSHA Complaint – Tips for Completing the Complaint Form

INSTRUCTIONS Provided on the Form:
Open the form and complete the front page as accurately and completely as possible. Describe each hazard you think exists in as much detail as you can. If the hazards described in your complaint are not all in the same area, please identify where each hazard can be found at the worksite. If there is any particular evidence that supports your suspicion that a hazard exists (for instance, a recent accident or physical symptoms of employees at your site) include the information in your description. If you need more space than is provided on the form, continue on any other sheet of paper. After you have completed the form, return it to your local OSHA office.

Here are tips for completing the form:
1. Be specific and include appropriate details: The information on the complaint form may be the only description of the hazard that the inspector will see before the inspection. The inspector will base his or her research and planning on this information.
2. Establishment Name, Address, & Type of Business: Be thorough and specific. The inspector’s research on the company and the industry’s hazards will be based on this information.
3. Hazard Description/Location: The hazard description is the most important part of the form. Your answer should explain the hazards clearly. If your complaint is about chemicals, identify them whenever possible and attach copies of labels or SDSs if you can. Identify the location so the inspector will know where to look.
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5. Do NOT reveal my name: OSHA will keep your name off the complaint, if you wish. Remember that discrimination for health and safety activity is illegal. If you are a union representative, you may wish to have your name on the complaint.
6. Signature and address: It is important to sign the complaint if you want OSHA to conduct an onsite inspection. Also, your address will allow OSHA to send copies of inspection related materials to you.
Use the following scenario to determine what information should be put on an OSHA complaint form. Is any additional information needed?

You have worked at Ben Brothers Woodworking for 8 years as a janitor. Ben Brothers is located at 88 Wren Street, Anytown, USA, 40001. The company makes and refinishes office furniture. You usually work the second shift, but come in early sometimes. You and at least 3 of your co-workers have been getting headaches when you are working in the warehouse and the propane-operated forklift is running. You have had headaches over the past two months, at least twice a week.

The forklift operator told you that there are a lot of problems with the forklift and it needs to be replaced. You reported your headaches to your supervisor. She told you to go outside until you felt better and that there was nothing more she could do. You did some research and found out that exposure to propane in a confined, unventilated area can cause headaches, dizziness, difficulty breathing and unconsciousness. There is no monitoring of the air in the warehouse. There is no union at the facility. You decide to file a complaint with OSHA.
Notice of Alleged Safety or Health Hazards

For the General Public:

This form is provided for the assistance of any complainant and is not intended to constitute the exclusive means by which a complaint may be registered with the U.S. Department of Labor.

Sec 8(f)(1) of the Williams-Steiger Occupational Safety and Health Act, 29 U.S.C. 651, provides as follows: Any employees or representative of employees who believe that a violation of a safety or health standard exists that threatens physical harm, or that an imminent danger exists, may request an inspection by giving notice to the Secretary or his authorized representative of such violation or danger. Any such notice shall be reduced to writing, shall set forth with reasonable particularity the grounds for the notice, and shall be signed by the employee or representative of employees, and a copy shall be provided the employer or his agent no later than at the time of inspection, except that, upon request of the person giving such notice, his name and the names of individual employees referred to therein shall not appear in such copy or on any record published, released, or made available pursuant to subsection (g) of this section. If upon receipt of such notification the Secretary determines there are reasonable grounds to believe that such violation or danger exists, he shall make a special inspection in accordance with the provisions of this section as soon as practicable to determine if such violation or danger exists. If the Secretary determines there are no reasonable grounds to believe that a violation or danger exists, he shall notify the employees or representative of the employees in writing of such determination.

NOTE: Section 11(c) of the Act provides explicit protection for employees exercising their rights, including making safety and health complaints.

For Federal Employees:

This report format is provided to assist Federal employees or authorized representatives in registering a report of unsafe or unhealthful working conditions with the U.S. Department of Labor.

The Secretary of Labor may conduct unannounced inspection of agency workplaces when deemed necessary if an agency does not have occupational safety and health committees established in accordance with Subpart F, 29 CFR 1960; or in response to the reports of unsafe or unhealthful working conditions upon request of such agency committees under Sec. 1-3, Executive Order 12196; or in the case of a report of imminent danger when such a committee has not responded to the report as required in Sec. 1-201(h).

INSTRUCTIONS:

Open the form and complete the front page as accurately and completely as possible. Describe each hazard you think exists in as much detail as you can. If the hazards described in your complaint are not all in the same area, please identify where each hazard can be found at the worksite. If there is any particular evidence that supports your suspicion that a hazard exists (for instance, a recent accident or physical symptoms of employees at your site) include the information in your description. If you need more space than is provided on the form, continue on any other sheet of paper.

After you have completed the form, return it to your local OSHA office.

NOTE: It is unlawful to make any false statement, representation or certification in any document filed pursuant to the Occupational Safety and Health Act of 1970. Violations can be punished by a fine of not more than $10,000. or by imprisonment of not more than six months, or by both. (Section 17(g))

Public reporting burden for this voluntary collection of information is estimated to vary from 15 to 25 minutes per response with an average of 17 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An Agency may not conduct or sponsor, and persons are not required to respond to the collection of information unless it displays a valid OMB Control Number. Send comment regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Directorate of Enforcement Programs, Department of Labor, Room N-3119, 200 Constitution Ave., NW, Washington, DC; 20210.

OMB Approval# 1218-0064; Expires: 03-31-2011

Do not send the completed form to this Office.
# Notice of Alleged Safety or Health Hazards

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</thead>
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<tr>
<td>Site Phone</td>
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</tr>
<tr>
<td>Mailing Address</td>
<td></td>
</tr>
<tr>
<td>Mail Phone</td>
<td>Mail FAX</td>
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<tr>
<td>Management Official</td>
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## Type of Business

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| Has this condition been brought to the attention of: |
| ~ Employer  |
| ~ Other Government Agency (specify) |

| Please Indicate Your Desire: |
| ~ Do NOT reveal my name to my Employer |
| ~ My name may be revealed to the Employer |

| The Undersigned believes that a violation of an Occupational Safety or Health standard exists which is a job safety or health hazard at the establishment named on this form. (Mark "X" in ONE box) |
| ~ Employee |
| ~ Representative of Employees |
| ~ Federal Safety and Health Committee |
| ~ Other (specify) |

<table>
<thead>
<tr>
<th>Complainant Name</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address(Street,City,State,Zip)</td>
<td></td>
</tr>
<tr>
<td>Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>

If you are an authorized representative of employees affected by this complaint, please state the name of the organization that you represent and your title:

| Organization Name: | Your Title: |

2 OSHA-7(Rev. 3/96)
Filing an OSHA Complaint – Tips for Completing the Complaint Form

INSTRUCTIONS Provided on the Form:
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Here are tips for completing the form:

1. Be specific and include appropriate details: The information on the complaint form may be the only description of the hazard that the inspector will see before the inspection. The inspector will base his or her research and planning on this information.
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6. Signature and address: It is important to sign the complaint if you want OSHA to conduct an onsite inspection. Also, your address will allow OSHA to send copies of inspection related materials to you.
Use the following scenario to determine what information should be put on an OSHA complaint form. Is any additional information needed?

You are a construction worker for ABC, Inc, 1000 Sweet Road, Anytown, USA, 40001. ABC does non-residential plumbing, heating and air-conditioning work. You have worked for ABC for 3 years. You, along with 7 co-workers, have been installing sheetmetal ductwork in the lower level of the Anytown Shopping Mall, which is undergoing renovation, for the past few weeks. The site is located in the Northwest quadrant, in the basement of the anchor store, located at 555 Times Drive, in Anytown. One of your co-workers has been operating a 65-horsepower concrete cutting saw in the same area. The saw is being run in the propane mode. You and several co-workers get headaches from the fumes whenever the saw is used and have told your supervisor about the problem. The supervisor said that nothing could be done, because the General Contractor, CAB Management, has control over the site and this job will be complete in another month. You did some research and found out that exposure to propane in a confined, unventilated area can cause headaches, dizziness, difficulty breathing and unconsciousness. There is no ventilation or monitoring of the air in the area.

After talking to your union representative, you decide to file a complaint with OSHA.

NOTES:
Notice of Alleged Safety or Health Hazards

For the General Public:

This form is provided for the assistance of any complainant and is not intended to constitute the exclusive means by which a complaint may be registered with the U.S. Department of Labor.

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**Establishment Name**

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**Mailing Address**

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**Management Official**

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**Signature**

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If you are an authorized representative of employees affected by this complaint, please state the name of the organization that you represent and your title:

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Use the following scenario to determine what information should be put on an OSHA complaint form. Is any additional information needed?

You are a longshoreman who operates a propane-operated forklift truck for ABC, Inc, 1000 Pier Street, Anytown, USA, 40001. ABC is involved in terminal operations and warehousing. You have worked for ABC for 3 years. For the past week, you have been transporting rolls of coiled steel from a storage area to a different section of the longshoring terminal, due to hurricane damage to another part of the terminal. As a result, you have been working inside the terminal more than you usually do. The area you are working in is somewhat confined and crowded due to extra storage. You have noticed that you are getting headaches and feeling dizzy. Two other co-workers working with you are also having the same symptoms. You are concerned that the forklift needs maintenance, and have asked your supervisor to have it checked out, but he looked it over and said it didn’t need service. You and your union representative requested air monitoring of the area, but your supervisor did not agree. There is limited ventilation in the area. You did some research and found out that exposure to propane in a confined, unventilated area can cause headaches, dizziness, difficulty breathing and unconsciousness.

After talking to your union representative, you decide to file a complaint with OSHA.

NOTES:

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</tr>
<tr>
<td>Mail Phone</td>
<td>Mail FAX</td>
</tr>
<tr>
<td>Management Official</td>
<td>Telephone</td>
</tr>
</tbody>
</table>

**Type of Business**

<table>
<thead>
<tr>
<th>HAZARD DESCRIPTION/LOCATION.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe briefly the hazard(s) which you believe exist. Include the approximate number of employees exposed to or threatened by each hazard. Specify the particular building or worksite where the alleged violation exists.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Has this condition been brought to the attention of:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>~ Employer</td>
<td>~ Other Government Agency(specify)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Please Indicate Your Desire:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>~ Do NOT reveal my name to my Employer</td>
<td>~ My name may be revealed to the Employer</td>
</tr>
</tbody>
</table>

The Undersigned believes that a violation of an Occupational Safety or Health standard exists which is a job safety or health hazard at the establishment named on this form. (Mark "X" in ONE box)

<table>
<thead>
<tr>
<th>~ Employee</th>
<th>~ Federal Safety and Health Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>~ Representative of Employees</td>
<td>~ Other (specify)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Complainant Name</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address(Street, City, State, Zip)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

If you are an authorized representative of employees affected by this complaint, please state the name of the organization that you represent and your title:

| Organization Name | Your Title: |  |

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