

OSHA Training Institute



Student Handout Packet

INTRODUCTION TO OSHA LESSON

Contents:

- #1. OSHA Poster
- #2. Your Rights as a Whistleblower Fact Sheet
- #3. Refusing to Work Because Conditions are Dangerous
- #4. Employers Must Provide and Pay for Most PPE
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Workplace
- #8. Filing an OSHA Complaint:
 - a. General Industry
 - b. Construction
 - c. Maritime Industry

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Job Safety and Health

It's the law!



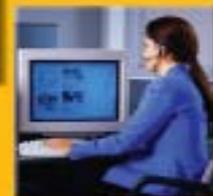
EMPLOYEES:

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request an OSHA inspection if you believe that there are unsafe and unhealthful conditions in your workplace. You or your representative may participate in that inspection.
- You can file a complaint with OSHA within 30 days of retaliation or discrimination by your employer for making safety and health complaints or for exercising your rights under the *OSH Act*.
- You have the right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violations.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records and records of your exposures to toxic and harmful substances or conditions.
- Your employer must post this notice in your workplace.
- You must comply with all occupational safety and health standards issued under the *OSH Act* that apply to your own actions and conduct on the job.

EMPLOYERS:

- You must furnish your employees a place of employment free from recognized hazards.
- You must comply with the occupational safety and health standards issued under the *OSH Act*.

This free poster available from OSHA –
The Best Resource for Safety and Health



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 (6742)
www.osha.gov

OSHA 1884-02-2025



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OSHA FactSheet

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.**

REFUSING WORK IS PROTECTED IF:

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.

CONDITIONS ARE MET, NEXT STEPS:

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.

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

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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.

Employer Obligations	Workers should:
<ul style="list-style-type: none"> ✓ Performing a "hazard assessment" of the workplace to identify and control physical and health hazards. ✓ Identifying and providing appropriate PPE for employees. ✓ Training employees in the use and care of the PPE. ✓ Maintaining PPE, including replacing worn or damaged PPE. ✓ Periodically reviewing, updating and evaluating the effectiveness of the PPE program. 	<ul style="list-style-type: none"> ✓ Properly wear PPE ✓ Attend training sessions on PPE ✓ Care for, clean and maintain PPE, and ✓ Inform a supervisor of the need to repair or replace PPE.

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



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

OSHA General Industry PPE Standards

- 1910.132: General requirements and payment
- 1910.133: Eye and face protection
- 1910.134: Respiratory protection
- 1910.135: Head protection
- 1910.136: Foot protection
- 1910.137: Electrical protective devices
- 1910.138: Hand protection

OSHA Construction PPE Standards

- 1926.28: Personal protective equipment
- 1926.95: Criteria for personal protective equipment
- 1926.96: Occupational foot protection
- 1926.100: Head protection
- 1926.101: Hearing protection
- 1926.102: Eye and face protection
- 1926.103: Respiratory protection

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.

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)*



Government Resources

OSHA: <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/>
Phone NIOSH at 1-800-CDC-INFO (1-800-232-4636) or Email at: cdcinfo@cdc.gov

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

Universities

CORNELL UNIVERSITY

School of Industrial and Labor Relations: <http://www.ilr.cornell.edu/healthSafety/>

LABOR OCCUPATIONAL HEALTH PROGRAM, University of California at Berkeley: <http://www.lohp.org/>

NATIONAL LABOR COLLEGE, George Meany Center: <http://www.nlc.edu/>

UCLA, Labor Occupational Safety and Health (UCLA-LOSH): <http://www.iosh.ucla.edu/>

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/>

CACOSH – Chicago Area Committee on Occupational Safety and Health: <http://www.cacosh.org/>

MASSCOSH –Massachusetts Coalition on Occupational Safety and Health: <http://www.masscosh.org/>

NYCOSH – New York Committee for Occupational Safety and Health: <http://www.nycosh.org/>

PHILAPOSH – Philadelphia Area Project for Occupational Safety and Health: <http://www.philaposh.org/> Prevention (<http://www.cdc.gov/>).

Unions

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

AFL-CIO: <http://www.aflcio.org/Issues/Job-Safety>

AFSCME: <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/>

SEIU (Service Employees International Union) Health and Safety Department: <http://www.seiu.org/a/members/safety-and-health.php>

UAW Health and Safety Department: <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:

UNITED STATES DEPARTMENT OF LABOR Occupational Safety & Health Administration

All DOL OSHA SEARCH

A to Z Index | En Español | Contact Us | What's New | About OSHA

A-Z Index: ABCDEFGHIJKLMNOPQRSTUVWXYZ Search OSHA GO

Highlights
Combustible Dust
 Dust
 Graphic slideshow of OSHA highlights. Graphics are linked to the respective website.

Latest News
 Links to the most current OSHA news and information.

Worker Fatalities
 Connecticut Power Plant Explosion, Klean Energy Systems, Middletown CT, Sunday, Feb 7. At least 5 workers were killed and at least 12 injured.
 Recent incidents, as well as weekly summaries are posted.

Top Links
 >Regulations/Standards >Enforcement
 >Laws & Rulemaking >Offices >S&H Topics
 >Training >How to File a Complaint >MORE

Featured Videos
 >Videos >Data & Statistics >Other Resources >MORE

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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?



The following “**Caution Health Hazards**” and “**Caution Safety Hazards**” tables provide more information.



CAUTION: Health Hazards

Common types of health hazards in the workplace are:
<ul style="list-style-type: none"> Chemical (asbestos, solvents, chlorine) Biological (tuberculosis, HIV, hepatitis, molds) Physical (noise, heat and cold, radiation, vibration) Ergonomics or Repetitive Strain Injuries (carpal tunnel syndrome, back injuries) Psychological (stress)
How health hazards enter your body:
<ul style="list-style-type: none"> Breathing (inhalation) Swallowing (ingestion) Skin (absorption) Cuts (injection)
Harm caused by health hazards depends on:
<ul style="list-style-type: none"> 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:
<ul style="list-style-type: none"> 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
<ul style="list-style-type: none"> 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 exposure.
Sensitization
<ul style="list-style-type: none"> You may become allergic or sensitive to some agents you work with. Sensitization can develop over time. For example, a health care worker may develop a serious allergic reaction to latex used in gloves.
Reproductive effects
<ul style="list-style-type: none"> Both men and women can be affected by reproductive hazards at work. Reproductive hazards cause miscarriages and birth defects.

To “**CAUTION: Safety Hazards**” table

CAUTION: Safety Hazards**Common types of safety hazards in the workplace are:**

- Slips, trips and falls
- Being caught in or struck by moving machinery or other objects
- Fire and explosions
- Transportation and vehicle-related accidents
- Confined spaces
- Violence

Slips, Trips and Falls

- Bad housekeeping and poor drainage can make floors and other walking surfaces wet and slippery.
- Electrical wires along the floor pose a tripping hazard.
- You can fall if you are not provided with fall protection equipment, guardrails, and safe ladders.

Caught In or Struck By Moving Machinery/Objects

- Machinery can cause injuries in different ways:
- You can get parts of your body caught in or struck by exposed moving parts if machines are not properly guarded, or not locked out when being repaired.
- You can be struck by flying objects from machines without protective guards.

Fire and Explosions

- Improper labeling, handling or storage of certain materials can pose a risk of fire or explosion.
- Every workplace should have an evacuation plan for getting people out of a building in case of fire and an alarm or alert system to quickly inform employees of an emergency.
- Every worker should be trained on what to do in case of an emergency.

Transportation and Vehicle-Related Accidents

- Operators of vehicles and equipment can be injured or cause injury to pedestrians if equipment is unsafe or if adequate training has not been provided.
- You can be seriously injured or killed after being hit by a vehicle while repairing roads or doing other work in traffic zones. This danger exists when traffic is not properly routed and/or adequate barriers are not placed between the workers and the traffic.

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.



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.
4. Has this condition been brought to the attention of the employer or another government agency? You should indicate on the form if you have tried to get the employer to fix the hazard before filing the complaint. Also, if another agency, such as a local fire or building department, has been notified of these hazards, OSHA may want to consult with them.
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.

U. S. Department of Labor Occupational Safety and Health Administration		1	
Notice of Alleged Safety or Health Hazards			
		Complaint Number	
Establishment Name			
Site Address		2	
		Site Phone	Site FAX
Mailing Address			
		Mail Phone	Mail FAX
Management Official		Telephone	
Type of Business			
HAZARD DESCRIPTION/LOCATION. 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.			
3			
Has this condition been brought to the attention of:		<input type="checkbox"/> Employer <input type="checkbox"/> Other Government Agency (specify)	
Please Indicate Your Desire:		<input type="checkbox"/> Do NOT reveal my name to my Employer <input type="checkbox"/> 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) <input type="checkbox"/> Employee <input type="checkbox"/> Federal Safety and Health Committee <input type="checkbox"/> Representative of Employees <input type="checkbox"/> Other (specify)	
Complainant Name		Telephone	
Address (Street, City, State, Zip)			
Signature		Date	
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:	

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.

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.

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.
4. Has this condition been brought to the attention of the employer or another government agency? You should indicate on the form if you have tried to get the employer to fix the hazard before filing the complaint. Also, if another agency, such as a local fire or building department, has been notified of these hazards, OSHA may want to consult with them.
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.

U. S. Department of Labor Occupational Safety and Health Administration		1	
Notice of Alleged Safety or Health Hazards			
		Complaint Number	
Establishment Name			
Site Address	Site Phone	2	Site FAX
Mailing Address	Mail Phone		Mail FAX
Management Official		Telephone	
Type of Business			
HAZARD DESCRIPTION/LOCATION. 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.			
3			
Has this condition been brought to the attention of:	<input type="checkbox"/> Employer	<input type="checkbox"/> Other Government Agency (specify)	4
Please Indicate Your Desire:	<input type="checkbox"/> Do NOT reveal my name to my Employer <input type="checkbox"/> 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) <input type="checkbox"/> Employee <input type="checkbox"/> Representative of Employees <input type="checkbox"/> Federal Safety and Health Committee <input type="checkbox"/> Other (specify)		
Complainant Name			Telephone
Address (Street, City, State, Zip)	6		
Signature			Date
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:		

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.

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Maritime Industry Complaint Scenario

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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