

**U.S. Department of Labor**  
Occupational Safety and Health Administration  
201 Varick Street  
Room 908  
New York, NY 10014  
Phone: 212-620-3200 Fax: 212-620-4121



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## Citation and Notification of Penalty

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**To:**  
Brookdale University Hospital & Medical Center  
and its successors  
One Brookdale Plaza  
Brooklyn, NY 11212

**Inspection Number:** 958112  
**Inspection Date(s):** 02/10/2014 - 08/06/2014  
**Issuance Date:** 08/07/2014

**Inspection Site:**  
One Brookdale Plaza  
Brooklyn, NY 11212

*The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.*

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This Citation and Notification of Penalty (this Citation) describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed herein is (are) based on these violations. You must abate the violations referred to in this Citation by the dates listed and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and Notification of Penalty you **either call to schedule an informal conference (see paragraph below) or** you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. Please refer to the enclosed booklet (OSHA 3000) which outlines your rights and responsibilities and which should be read in conjunction with this form. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless this Citation is affirmed by the Review Commission or a court.

**Posting** - The law requires that a copy of this Citation and Notification of Penalty be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because of the nature of the employer's operations, where it will be readily observable by all affected employees. This Citation must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

**Informal Conference** - An informal conference is not required. However, if you wish to have such a conference you may request one with the Area Director during the 15 working day contest period. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation(s) and/or penalty(ies).

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of this Citation. The running of this contest period is not interrupted by an informal conference.

If you decide to request an informal conference, please complete, remove and post the Notice to Employees next to this Citation and Notification of Penalty as soon as the time, date, and place of the informal conference have been determined. Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

**Right to Contest** – You have the right to contest this Citation and Notification of Penalty. You may contest all citation items or only individual items. You may also contest proposed penalties and/or abatement dates without contesting the underlying violations. Unless you inform the Area Director in writing that you intend to contest the citation(s) and/or proposed penalty(ies) within 15 working days after receipt, the citation(s) and the proposed penalty(ies) will become a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency.

**Penalty Payment** – Penalties are due within 15 working days of receipt of this notification unless contested. (See the enclosed booklet and the additional information provided related to the Debt Collection Act of 1982.) Make your check or money order payable to “DOL-OSHA”. Please indicate the Inspection Number on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on OSHA Penalty Payment Form. The direct link is:

<https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>.

You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$50,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will process the payments as if these restrictions or conditions do not exist.

**Notification of Corrective Action** – For each violation which you do not contest, you must provide *abatement certification* to the Area Director of the OSHA office issuing the citation and identified above. This abatement certification is to be provided by letter within 10 calendar days after each abatement date. Abatement certification includes the date and method of abatement. If the citation indicates that the violation was corrected during the inspection, no abatement certification is required for that item. The abatement certification letter must be posted at the location where the violation appeared and the corrective action took place or employees must otherwise be effectively informed about abatement activities. A sample abatement certification letter is enclosed with this Citation. In addition, where the citation indicates that *abatement documentation* is necessary, evidence of the purchase or repair of equipment, photographs or video, receipts, training records, etc., verifying that abatement has occurred is required to be provided to the Area Director.

**Employer Discrimination Unlawful** – The law prohibits discrimination by an employer against an

employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he/she has been discriminated against may file a complaint no later than 30 days after the discrimination occurred with the U.S. Department of Labor Area Office at the address shown above.

**Employer Rights and Responsibilities** – The enclosed booklet (OSHA 3000) outlines additional employer rights and responsibilities and should be read in conjunction with this notification.

**Notice to Employees** – The law gives an employee or his/her representative the opportunity to object to any abatement date set for a violation if he/she believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above and postmarked within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and Notification of Penalty.

**Inspection Activity Data** – You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this citation. You are encouraged to review the information concerning your establishment at [www.osha.gov](http://www.osha.gov). If you have any dispute with the accuracy of the information displayed, please contact this office.



## NOTICE TO EMPLOYEES OF INFORMAL CONFERENCE

An informal conference has been scheduled with OSHA to discuss the citation(s) issued on 08/07/2014. The conference will be held by telephone or at the OSHA office located at 201 Varick Street, Room 908, New York, NY 10014 on \_\_\_\_\_ at

\_\_\_\_\_. Employees and/or representatives of employees have a right to attend an informal conference.

**CERTIFICATION OF CORRECTIVE ACTION WORKSHEET**

**Inspection Number: 958112**

Company Name: Brookdale University Hospital & Medical Center  
Inspection Site: One Brookdale Plaza, Brooklyn, NY 11212  
Issuance Date: 08/07/2014

List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return to: **U.S. Department of Labor – Occupational Safety and Health Administration, 201 Varick Street, Room 908, New York, NY 10014**

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Title

**NOTE: 29 USC 666(g)** whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment of not more than 6 months or both.

**POSTING:** A copy of completed Corrective Action Worksheet should be posted for employee review



### Citation and Notification of Penalty

**Company Name:** Brookdale University Hospital & Medical Center

**Inspection Site:** One Brookdale Plaza, Brooklyn, NY 11212

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#### Citation 1 Item 1 Type of Violation: **Willful**

Section 5(a)(1) of the Occupational Safety and Health Act of 1970: The employer did not furnish employment and a place of employment which was free from recognized hazards that were causing or likely to cause death or serious physical harm to employees in that employees were exposed to the hazard of workplace violence.

On or about February 7, 2014 through April 12, 2014, Brookdale University Hospital and Medical Center employees were exposed to violent assaults and physical threats by patients and visitors including hitting, kicking, and punching, which resulted in head, eye, face, hand, groin and other bodily injuries while performing routine duties throughout the hospital facility. One instance, on or about February 7, 2014, involved an evening nurse in the 5th floor, CHC Department, who was attacked while attending to a patient and was repeatedly kicked in the head, resulting in severe brain damage.

Among other methods, feasible and acceptable means to abate the workplace violence at Brookdale University Hospital and Medical Center include:

#### 1) Engineering Controls:

- Install and regularly maintain alarm systems and other security devices, panic buttons, hand held alarms or noise devices at workstations or worn.
- Use a closed-circuit video recording for high-risk areas on a 24-hour basis.
- Enclose nurse's stations and/or have a security doors to prohibit access to area, install deep service counters or shatterproof glass in reception triage and admitting areas or client rooms.
- Provide metal detectors; hand held or installed.
- Secure furniture and other items that could be used as weapons.

#### 2) Administrative Controls:

- Develop and implement an effective and comprehensive violence prevention program that includes management commitment/employee involvement, worksite analysis, hazard prevention and control, safety and health training, recordkeeping and program evaluation.
- Implement, maintain or improve a system and procedures to perform a root cause or similar type of

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.



### Citation and Notification of Penalty

**Company Name:** Brookdale University Hospital & Medical Center  
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analysis for every incident of work place violence. The hospital should also review and evaluate the data collected to identify patterns and trends. The analysis should be used to identify and implement the types of hazard prevention and control measures needed to reduce the likelihood or eliminate the possibility of an incident of workplace violence from occurring.

- Establish a system such as chart tags, log books or verbal census reports to identify patients, clients and visitors with a history of violence.
- Ensure that all new and transferred patients are promptly screened for potential violence and past violent or assaultive behavior, and that such screening is considered when assigning patients to particular areas of the hospital.
- Evaluate workplace controls and implement new policies and procedures when appropriate to reduce violence in the workplace.
- Use properly trained security officers to deal with aggressive behavior. Follow written security procedures.
- Develop building access control procedures to include a sign in procedure with passes for visitors. Enforce visitor hours and procedures.
- Establish a list of restricted visitors for patients with a history of violence or gang activity. Make copies available at security checkpoints, nurse's stations and visitor sign-in area.
- Use the "buddy system" especially when personal safety may be threatened.
- Put procedures in place that would allow communication of any incident of workplace violence to the staff that might come in contact with that patient so the employees who might not have access to a patients chart would be aware of a previous act of aggression or violence.
- Ensure that security staff members, and/or a response team other than employees on the floor are readily and immediately available to render assistance in the event of an incident of workplace violence and that all are provided with specialized training to deal with aggressive behavior.
- Ensure that the psychiatric floors/areas have sufficient security staffing.
- The employer shall create a safety committee to assist in the development, implementation, monitoring, and evaluation of the Workplace Violence Prevention Program. The committee should be made up of representatives from management, security, and labor, as well as representatives from all departments and shifts. The committee should be involved in all aspects of worksite analysis, hazard prevention and control, training, recordkeeping and program evaluation.

### 3) Employee Training:

- Conduct training for all employees so they are aware of what the hospital's Violence Prevention Plan

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Occupational Safety and Health Administration

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in the Workplace plan is and what procedures to follow to address the hazard. Conduct comprehensive mandatory training specific to the prevention of workplace violence, early recognition of aggressive or violent behavior and techniques for conflict resolution.

- Conduct training for all employees so they are aware of the mandatory requirement to report all incidents of workplace violence which include: verbal threats, nonverbal threats, threats of bodily harm or intimidation, physical assault and/or menacing.
- Develop Post-Incident Procedures and Services to provide comprehensive treatment for employees who may be traumatized by witnessing or being involved in a workplace violence incident.

Note: IN ADDITION TO ABATEMENT CERTIFICATION, THE EMPLOYER IS REQUIRED TO SUBMIT ABATEMENT DOCUMENTATION FOR THIS ITEM, FAILURE TO COMPLY WILL RESULT IN AN ADDITIONAL PENALTY OF \$1,000.00 AS PER 29CFR 1903.19.

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:	09/06/2014
Proposed Penalty:	\$70000.00

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The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury or illness.

**Citation 2 Item 1 a** Type of Violation: **Other-than-Serious**

29 CFR 1904.4(a): Each employer required by this Part to keep records of fatalities, injuries, and illnesses did not record each fatality, injury and illness that was work-related, a new case, and meets one or more of the general recording criteria:

Location: Brookdale University Hospital and Medical Center, One Brookdale Plaza, Brooklyn, NY:

On or about April 21, 2014, the employer did not record the following workplace injuries and illnesses on the OSHA 300 Log for calendar year 2014.

- a) On or about 2/07/2014 Employee Incident Report Dated 2/07/14, an employee assaulted by a patient which resulted in severe head trauma and life threatening injuries.
- b) On or about 2/26/2014 Employee Incident Report #32644, An employee standing on a chair slipped and fell, injury not listed. Case resulted in 1 day away from work.
- c) On or about 3/11/2014 Employee Incident Report #35847, an employee assaulted by a patient causing a chin contusion. Case resulted in 2 days away from work.
- d) On or about 3/20/2014 Employee Incident Report #28680, an employee tripped over patient wheelchair injuring left knee. Case resulted in 3 days away from work.
- e) On or about 3/25/2014 Employee Incident Report #29018, an employee struck by falling box surgical supplies, hitting face and right eye. Case resulted in 3 days away.
- f) On or about 3/25/2014 Employee Incident Report #36904, an employee tripped by a patient injured left knee, arms & hands. Case resulted in 2 days away from work.

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Occupational Safety and Health Administration

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- g) On or about 4/01/2014 Employee Incident Report #25121, an employee injured when food cart fell and struck both feet. Case resulted in 3 days away from work.
- h) On or about 4/8/2014 Employee Incident Report #4814, An employee injured when punched in left back by patient. Case resulted in 2 days away from work.

**NOTE: IN ADDITION TO ABATEMENT CERTIFICATION, THE EMPLOYER IS REQUIRED TO SUBMIT ABATEMENT DOCUMENTATION FOR THIS ITEM, FAILURE TO COMPLY WILL RESULT IN AN ADDITIONAL PENALTY OF \$1,000.00 AS PER 29 CFR 1903.19**

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:	08/21/2014
Proposed Penalty:	\$1000.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.



**Citation and Notification of Penalty**

**Company Name:** Brookdale University Hospital & Medical Center  
**Inspection Site:** One Brookdale Plaza, Brooklyn, NY 11212

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**Citation 2 Item 1 b Type of Violation: **Other-than-Serious****

29 CFR 1904.7(b)(3): The employer did not record the injury or illness involved in one or more days away from work on the OSHA 300 Log with the number of calendar days away from work in the number of days column:

Location: Brookdale University Hospital and Medical Center, One Brookdale Plaza, Brooklyn, NY:

On or about April 21, 2014, the employer did not record correctly the following number of days away from work in column "L" of workplace injuries and illnesses on the OSHA Form 300 Log for calendar year 2014.

- a) On or about 2/21/2014 Employee Incident Report #NY204881, 0 days away from work recorded.
- b) On or about 3/06/2014 Employee Incident Report #NY204885, 0 days away from work recorded.

**NOTE: IN ADDITION TO ABATEMENT CERTIFICATION, THE EMPLOYER IS REQUIRED TO SUBMIT ABATEMENT DOCUMENTATION FOR THIS ITEM, FAILURE TO COMPLY WILL RESULT IN AN ADDITIONAL PENALTY OF \$1,000.00 AS PER 29 CFR 1903.19**

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:

08/21/2014



**Citation and Notification of Penalty**

**Company Name:** Brookdale University Hospital & Medical Center  
**Inspection Site:** One Brookdale Plaza, Brooklyn, NY 11212

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**Citation 2 Item 1 c** Type of Violation: **Other-than-Serious**

29 CFR 1904.29(b)(1): A log of all recordable work-related injuries and illness (OSHA Form 300 or equivalent) was not completed in the detail required by the regulation.

Location: Brookdale University Hospital and Medical Center, One Brookdale Plaza, Brooklyn, NY:

On or about April 12, 2014, the employer did not correctly record the following workplace injuries and illnesses on the OSHA 300 Log for calendar year 2014.

- a) All entries in Column F of the OSHA Form 300 for calendar year 2014 did not describe the injury or illness, parts of the body affected, and the object/substance that directly injured or made the person ill as required by the regulation and listed in the instructions on the form.
- b) Entries in Column E did not identify where the event occurred in the details as described in the instructions.

**NOTE: IN ADDITION TO ABATEMENT CERTIFICATION, THE EMPLOYER IS REQUIRED TO SUBMIT ABATEMENT DOCUMENTATION FOR THIS ITEM, FAILURE TO COMPLY WILL RESULT IN AN ADDITIONAL PENALTY OF \$1,000.00 AS PER 29 CFR 1903.19**

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:

08/21/2014

U.S. Department of Labor  
Occupational Safety and Health Administration

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**Company Name:** Brookdale University Hospital & Medical Center  
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**Citation 2 Item 1 d Type of Violation: **Other-than-Serious****

29 CFR 1904.29(b)(3): Each recordable injury or illness was not entered on the OSHA 300 Log and/or an incident report (OSHA Form 301 or equivalent) within seven (7) calendar days of receiving information that a recordable injury or illness has occurred:

Location: Brookdale University Hospital and Medical Center, One Brookdale Plaza, Brooklyn, NY:

On or about April 21, 2014, the employer did not record the following workplace injuries and illnesses on the OSHA 300 Log within 7 calendar days.

- a) On or about 2/18/2014 Employee Incident Report #204882, an employee slipped from water on floor hit right knee, twisted left leg. Case resulted in 13 days away from work.
- b) On or about 2/18/2014 Employee Incident Report #NY201003, an employee repositioning a patient felt pain in shoulder. Case resulted in 30 days away from work.

**NOTE: IN ADDITION TO ABATEMENT CERTIFICATION, THE EMPLOYER IS REQUIRED TO SUBMIT ABATEMENT DOCUMENTATION FOR THIS ITEM, FAILURE TO COMPLY WILL RESULT IN AN ADDITIONAL PENALTY OF \$1,000.00 AS PER 29 CFR 1903.19**

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

Date By Which Violation Must be Abated:

08/21/2014

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

U.S. Department of Labor  
Occupational Safety and Health Administration

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**Citation and Notification of Penalty**

**Company Name:** Brookdale University Hospital & Medical Center  
**Inspection Site:** One Brookdale Plaza, Brooklyn, NY 11212

**Citation 2 Item 2** Type of Violation: **Other-than-Serious**

29 CFR 1904.35(b)(2)(v)(B): When an authorized employee representative asks for a copies of the OSHA 301 Incident Reports for an establishment where the agent represents employees under a collective bargaining agreement, The employer did not provide copies of those forms to the authorized employee representative within 7 calendar days. You are only required to give the authorized employee representative information from the OSHA 301 Incident Report section titled "Tell us about the case." You must remove all other information from the copy of the OSHA 301 Incident Report or the equivalent substitute form that you give to the authorized employee representative.

On or about February 18, 2014 An authorized representative from the Service Employee International Union (SEIU) requested copies of OSHA 301 Incident Reports or equivalentents from Brookdale University Hospital and Medical Center and was not provided copies within 7 calenders days as required.

**NOTE: BECAUSE ABATEMENT OF THIS VIOLATION IS ALREADY DOCUMENTED IN THE CASEFILE, THE EMPLOYER NEED NOT SUBMIT CERTIFICATION NOR DOCUMENTATION OF ABATEMENT OF THIS VIOLATION AS NORMALLY REQUIRED BY 29 CFR 1903.19.**

Date By Which Violation Must be Abated:  
Proposed Penalty:

Corrected During Inspection  
\$7000.00

A handwritten signature in black ink, appearing to read "Kay Gee", is written over a horizontal line.

**Kay Gee**  
Area Director

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

**U.S. Department of Labor**  
Occupational Safety and Health Administration  
201 Varick Street  
Room 908  
New York, NY 10014  
Phone: 212-620-3200 Fax: 212-620-4121



## INVOICE / DEBT COLLECTION NOTICE

**Company Name:** Brookdale University Hospital & Medical Center  
**Inspection Site:** One Brookdale Plaza, Brooklyn, NY 11212  
**Issuance Date:** 08/07/2014

<b>Summary of Penalties for Inspection Number</b>	<b>958112</b>
<b>Citation 1, Willful</b>	<b>\$70000.00</b>
<b>Citation 2, Other-than-Serious</b>	<b>\$8000.00</b>
<b>TOTAL PROPOSED PENALTIES</b>	<b>\$78000.00</b>

To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on **OSHA Penalty Payment Form**. The direct link is <https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>. You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$50,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will cash the check or money order as if these restrictions or conditions do not exist.

If a personal check is issued, it will be converted into an electronic fund transfer (EFT). This means that our bank will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will then usually occur within 24 hours and will be shown on your regular account statement. You will not receive your original check back. The bank will destroy your original check, but will keep a copy of it. If the EFT cannot be completed because of insufficient funds or closed

account, the bank will attempt to make the transfer up to 2 times.

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

**Interest:** Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is one percent (1%). Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

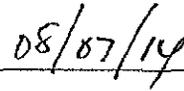
**Delinquent Charges:** A debt is considered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

**Administrative Costs:** Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.



Kay Gee

Area Director



Date