

# REGULAR

STATE OF CALIFORNIA—OFFICE OF ADMINISTRATIVE LAW

## NOTICE PUBLICATION/REGULATIONS SUBMISSION

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER	REGULATORY ACTION NUMBER	EMERGENCY NUMBER
	Z-2016-0219-02	2017-0217-03S	

**ENDORSED - FILED**  
In the office of the Secretary of State  
of the State of California

APR 04 2017

1:40 PM

For use by Office of Administrative Law (OAL) only	
RECEIVED FOR FILING PUBLICATION DATE FEB 19 '16    MAR 04 '16 Office of Administrative Law	2017 FEB 17 P 4:41 OFFICE OF ADMINISTRATIVE LAW
NOTICE	REGULATIONS

AGENCY WITH RULEMAKING AUTHORITY Occupational Safety and Health Standards Board	AGENCY FILE NUMBER (if any)
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### A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE GISO Section 5155	TITLE(S) Title 8	FIRST SECTION AFFECTED GISO Section 5155	2. REQUESTED PUBLICATION DATE March 4, 2016
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Marley Hart, Executive Officer	TELEPHONE NUMBER (916)-274-5721	FAX NUMBER (Optional) (916)-274-5743
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER 2016-10-2	PUBLICATION DATE 3/4/2016	

### B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Airborne Contaminants - Wood Dust and Western Red Cedar	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND Section 5155
TITLE(S) 8	REPEAL

3. TYPE OF FILING			
<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1(b))	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Other (Specify) _____		

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1) January 25, 2017 - February 9, 2017
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5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)
<input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) <input type="checkbox"/> Effective on filing with Secretary of State <input type="checkbox"/> \$100 Changes Without Regulatory Effect <input type="checkbox"/> Effective other (Specify) _____

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY		
<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) _____		

7. CONTACT PERSON Marley Hart	TELEPHONE NUMBER 916.274.5721	FAX NUMBER (Optional) 916.274.5743	E-MAIL ADDRESS (Optional) mhart@dir.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Marley Hart</i>	DATE 2/16/17
TYPED NAME AND TITLE OF SIGNATORY Marley Hart, Executive Officer	

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**ENDORSED APPROVED**

APR 04 2017

Office of Administrative Law

**STANDARDS PRESENTATION  
TO  
CALIFORNIA OCCUPATIONAL SAFETY AND HEALTH STANDARDS BOARD**

PROPOSED STATE STANDARD,  
TITLE 8, CHAPTER 4

Amend Section 5155 to read:

§5155. Airborne Contaminants.

(a) Scope and Application.

(1) This section establishes requirements for controlling employee exposure to airborne contaminants and skin contact with those substances which are readily absorbed through the skin and are designated by the "S" notation in Table AC-1 at all places of employment in the state.

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Table AC-1

PERMISSIBLE EXPOSURE LIMITS FOR CHEMICAL CONTAMINANTS

Chemical Abstracts Registry Number <sup>(a)</sup>	Skin <sup>(b)</sup>	Name <sup>(c)</sup>	PEL <sup>(d)</sup>		Ceiling <sup>(g)</sup>	STEL <sup>(e)</sup>	
			ppm <sup>(f)</sup>	mg/M <sup>3(f)</sup>		ppm <sup>(f)</sup>	mg/M <sup>3(f)</sup>

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Wood dust							
All soft and hard woods, except Western red cedar			--	5 <u>2</u>		--	40 <u>5</u>
Wood dust, Western red cedar			--	2-5 <u>0.5</u>			

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NOTE: Authority cited: Section 142.3, Labor Code. Reference: Sections 142.3 and 144.6, Labor Code.