First read important information on the reverse side; then complete one appeal form for each citation.

1. This is an appeal from:

[X] Citation No(s): 1, 2, 3, 4

[ ] Notification of failure to abate alleged violation

Citation No(s): Item No(s):

[ ] Special Order/Special Action No:

Item No(s):

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes

[ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHA website at: http://www.dir.ca.gov/OSHAB/oshab.html
(Signature of Employer or Employer's Representative)

[If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing]

Clifford & Brown, PC atttn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

(Address) {Address where all communications from the Appeals Board will be sent}

Bakersfield, CA 93301-5230

(Address where all communications from the Appeals Board will be sent)

(City) (State) (Zip Code)

661-322-6023 SafetyFred@xordium.com 04/11/2012

(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/68
State of California  
Division of Occupational Safety and Health  
Cal/OSHA District Office (0950625; 4025)  
2550 Mariposa Street, Room 4000  
Fresno, CA 93721  

Phone: (559) 445-5302 Fax: (559) 445-5786  

Citation and Notification of Penalty  

Company Name: Community Recycling & Resource Recovery  
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241  

Citation 1 Item 1 Type of Violation: GENERAL  

Title 8 California Code of Regulations  

Section: 5157(c)(4) - If the employer decides that its employees will enter permit spaces, the employer shall develop and implement a written permit space program that complies with this section. The written program shall be available for inspection by employees and their authorized representatives.  

On and before 10/12/11, prior to employees entering a permit confined space, the employer failed to develop and implement a written permit space program as required by this section.  

Date By Which Violation Must be Abated: ABATED  
Proposed Penalty: $ 210.00  

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
Citation 1 Item 2  Type of Violation:  GENERAL

Title 8 California Code of Regulations

Section: 5157(d)(8) Under the permit required confined space program required by subsection (c)(4), the employer shall:

Designate the persons who are to have active roles (as, for example, authorized entrants, attendants, entry supervisors, or persons who test or monitor the atmosphere in a permit space) in entry operations, identify the duties of each such employee, and provide each such employee with the training required by subsection (g).

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to designate the persons who were to have active roles in entry operations, identify the duties of each such employee, and provide each such employee with the training required by subsection (g), as required by this section.

Date By Which Violation Must be Abated:  04/02/2012
Proposed Penalty:  $ 210.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 1 Item 3  Type of Violation: GENERAL

Title 8 California Code of Regulations

Section: 5157(d)(10) - Under the permit required confined space program required by subsection (c)(4), the employer shall:

Develop and implement a system for the preparation, issuance, use, and cancellation of entry permits as required by this section.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to develop and implement a system for the preparation, issuance, use, and cancellation of entry permits as required by this section.

Date By Which Violation Must be Abated: ABATED
Proposed Penalty: $ 210.00
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 1 Item 4 Type of Violation: GENERAL

Title 8 California Code or Regulations

Section: 5157(e)

(1) Before entry is authorized, the employer shall document the completion of measures required by subsection (d)(3) by preparing an entry permit.

Note: Appendix D presents examples of permits whose elements are considered to comply with the requirements of this section.

(2) Before entry begins, the entry supervisor identified on the permit shall sign the entry permit to authorize entry.

(3) The completed permit shall be made available at the time of entry to all authorized entrants or their authorized representatives, by posting it at the entry portal or by any other equally effective means, so that the entrants can confirm that pre-entry preparations have been completed.

(4) The duration of the permit may not exceed the time required to complete the assigned task of job identified on the permit in accordance with subsection (f)(2).

(5) The entry supervisor shall terminate entry and cancel the entry permit when:

(A) The entry operations covered by the entry permit have been completed; or

(B) A condition that is not allowed under the entry permit arises in or near the permit space.

(6) The employer shall retain each canceled entry permit for at least 1 year to facilitate the review of the permit space program required by subsection (d)(14). Any problems encountered during an entry operation shall be noted on the pertinent permit so that appropriate revisions to the permit space program can be made.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to document the completion of measures as required by this section, by preparing an entry permit.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $ 210.00
OCCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

APPEAL FORM

315072637
Inspection Number on Citation

Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

2012-R 2-D 5 -1157

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[ ] CITATION NO(s): ______ Item No(s): ______

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): __________ Item No(s): __________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: __________
Item No(s): __________

2. Specific ground(s) for this appeal are: (Check all that apply)

[ ] The safety order was not violated.

[ ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes  [ ] Time allowed to complete changes

[ ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHA/oshab.html

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
4. (Signature of Employer or Employer’s Representative)

[If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing]

Fred C. Gillett
Risk Control Consultant

11902 Pine Street

(Address) {Address where all communications from the Appeals Board will be sent}
Los Alamitos, CA 90720

(City) (State) (Zip Code)

714-423-1034 SafetyFred@vordium.com 03/30/2012

(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
State of California  
Division of Occupational Safety and Health  
Cal/OSHA District Office (0950625; 4025)  
2550 Mariposa Street, Room 4000  
Fresno, CA  93721  

Phone: (559) 445-5302  Fax: (559) 445-5786

Citation and Notification of Penalty

Company Name:  Community Recycling & Resource Recovery  
Inspection Site:  1261 N. Wheeler Ridge Rd, Lamont, CA  93241

Citation 2 Item 1 Type of Violation:  SERIOUS

Title 8 California Code of Regulations

Section: 5157(c)(2) - If the workplace contains permit spaces, the employer shall inform exposed employees and other employees performing work in the area, by posting danger signs or by any other equally effective means, of the existence, location of and the danger posed by the permit spaces.

Note: A sign reading "DANGER -- PERMIT-REQUIRED CONFINED SPACE, DO NOT ENTER" or using other similar language would satisfy the requirement for a sign.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to inform exposed employees and other employees performing work in the area, by posting danger signs or by any other equally effective means, of the existence, location of and the danger posed by the permit spaces at this facility as required by this section.

Date By Which Violation Must be Abated:  04/02/2012
Proposed Penalty:  $ 7650.00

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

315072637
Inspection Number on Citation

Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

2012-R 2D5 -1158

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:
   [X] CITATION NO(s): 2 Item No(s): 1
   [ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
     CITATION NO(s): ______________ Item No(s): ______________
   [ ] SPECIAL ORDER/SPECIAL ACTION NO: ____________________
     Item No(s): ____________________

2. Specific ground(s) for this appeal are: (Check all that apply)
   [X] The safety order was not violated.
   [X] The classification (i.e. serious, willful, repeat) is incorrect.
   [ ] The abatement requirements are unreasonable.
     [ ] Required changes  [ ] Time allowed to complete changes
   [X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html

______________________________________________________________
______________________________________________________________
4. [Signature of Employer or Employer's Representative]  
(If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing)  

Clifford & Brown, PC  attn: Fred C. Gillett, Risk Control Consultant  

Bank of America Bld. 1430 Truxtun Avenue, Suite 900  

(Address) [Address where all communications from the Appeals Board will be sent]  
Bakersfield, CA 93301-5230  

(City)  (State)  (Zip Code)  
661-322-6023 SafetyFred@xordium.com 04/11/2012  
(Telephone)  (E-Mail Address)  (Date)  

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing}  

IMPORTANT INFORMATION  

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.  

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.  

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8)  

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.  

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.  

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.  

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.  

H. Late appeals will not be accepted unless good cause is shown.  

OSHAB 5/08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 3 Item 1 Type of Violation: SERIOUS

Title 8 California Code of Regulations
Section: 5157(d)(1) - Under the permit required confined space program required by subsection (c)(4), the employer shall: Implement the measures necessary to prevent unauthorized entry.

On and before 10/12/11, the employer failed to implement measures necessary to prevent unauthorized entry to permit required confined spaces present at this facility, as required by this section.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $ 7650.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE
THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[ X ] CITATION NO(s): 4 Item No(s): 1

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): __________ Item No(s): __________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: __________
Item No(s): __________

2. Specific ground(s) for this appeal are: (Check all that apply)

[ X ] The safety order was not violated.

[ X ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes [ ] Time allowed to complete changes

[ X ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
(Signature of Employer or Employer’s Representative)

(If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing)

Clifford & Brown, PC  attn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

(Address)  {Address where all communications from the Appeals Board will be sent}
Bakersfield, CA  93301-5230

(City) (State) (Zip Code)

661-322-6023 SafetyFred@xordium.com  04/11/2012

(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 3:08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 4 Item 1 Type of Violation: SERIOUS

Title 8 California Code of Regulations

Section: 5157(d)(2) - Under the permit required confined space program required by subsection (c)(4), the employer shall:

Identify and evaluate the hazards of permit spaces before employees enter them.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to identify and evaluate the hazards of permit spaces before employees entered them.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $ 7650.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

1. This is an Appeal from:

[ X ] CITATION NO(s): 5 _______ Item No(s): 1 ______________

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): _______________ Item No(s): _______________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: ______________________
Item No(s): ______________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[ X ] The safety order was not violated.

[ X ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes    [ ] Time allowed to complete changes

[ X ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 5 Item 1 Type of Violation: SERIOUS

Title 8 California Code of Regulations

Section: 5157(d)(3) - Under the permit required confined space program required by subsection (c)(4), the employer shall:

(3) Develop and implement the means, procedures, and practices necessary for safe permit space entry operations, including, but not limited to, the following:

(A) Specifying acceptable entry conditions;

(B) Isolating the permit space;

(C) Purging, inerting, flushing, or ventilating the permit space as necessary to eliminate or control atmospheric hazards;

(D) Providing pedestrian, vehicle, or other barriers as necessary to protect entrants from external hazards; and

(E) Verifying that conditions in the permit space are acceptable for entry throughout the duration of an authorized entry.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to develop and implement the means, procedures and practices necessary for safe permit space entry operations as required by this section.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $7650.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE
THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[X] CITATION NO(s): 6 ___________ Item No(s): 1 ___________

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): ___________ Item No(s): ___________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: _______________________
   Item No(s): _______________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

      [ ] Required changes      [ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHA/oshab.html
(Signature of Employer or Employer’s Representative)

[If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing]

Clifford & Brown, PC  attn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

(Address) {Address where all communications from the Appeals Board will be sent}
Bakersfield, CA 93301-5230

(City) (State) (Zip Code)
661-322-6023 SafetyFred@yordium.com 04/11/2012

(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing.}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (For example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
State of California
Division of Occupational Safety and Health
Cal/OSHA District Office (0950625; 4025)
2550 Mariposa Street, Room 4000
Fresno, CA 93721

Phone: (559) 445-5302   Fax: (559) 445-5786

Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 6 Item 1  Type of Violation: SERIOUS

Title 8 California Code of Regulations

Sections: 5157(d)(4) Under the permit required confined space program required by subsection (c)(4), the employer shall: Provide the following equipment (specified in subsections (A) through (I), below) at no cost to employees, maintain that equipment properly, and ensure that employees use that equipment properly:

(A) Testing and monitoring equipment needed to comply with subsection (d)(5);

(B) Ventilating equipment needed to obtain acceptable entry conditions;

(C) Communications equipment necessary for compliance with subsections (h)(3) and (i)(5);

(D) Personal protective equipment insofar as feasible engineering and work practice controls do not adequately protect employees;

(E) Lighting equipment needed to enable employees to see well enough to work safely and to exit the space quickly in an emergency;

(F) Barriers and shields as required by subsection (d)(3)(D);

(G) Equipment, such as ladders, needed for safe ingress and egress by authorized entrants;

(H) Rescue and emergency equipment needed to comply with subsection (d)(9), except to the extent that the equipment is provided by rescue services.

(I) Any other equipment necessary for safe entry into and rescue from permit spaces.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
State of California  
Division of Occupational Safety and Health  
Cal/OSHA District Office (0950625; 4025)  
2550 Mariposa Street, Room 4000  
Fresno, CA 93721  

Phone: (559) 445-5302  Fax: (559) 445-5786

**Citation and Notification of Penalty**

**Company Name:** Community Recycling & Resource Recovery  
**Inspection Site:** 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

On and before 10/12/11, when employees entered a permit required confined space, the employer failed to provide the equipment (as specified in subsections A through I, above) to maintain that equipment properly, and to ensure that employees used that equipment, as required by this section, resulting in the death of two employees.

**Date By Which Violation Must be Abated:** 04/02/2012  
**Proposed Penalty:** $7650.00

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

315072637
Inspection Number on Citation

Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

2012-R2D5-1162

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[X] CITATION NO(s): 7 Item No(s): 1

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): _____________________ Item No(s): _____________________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: _____________________
Item No(s): _____________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes
[ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
Clifford & Brown, PC attn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

(Address) {Address where all communications from the Appeals Board will be sent} Bakersfield, CA 93301-5230

(City) (State) (Zip Code)

661-322-6023 SafetyFred@xordium.com 04/11/2012

(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
State of California  
Division of Occupational Safety and Health  
Cal/OSHA District Office (0950625; 4025)  
2550 Mariposa Street, Room 4000  
Fresno, CA  93721

Phone: (559) 445-5302  Fax: (559) 445-5786

Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery  
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA  93241

Citation 7 Item 1 Type of Violation: SERIOUS

Title 8 California Code of Regulations

Section: 5157(j) - The employer shall ensure that each entry supervisor:

(1) Knows the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposure;

(2) Verifies, by checking that the appropriate entries have been made on the permit, that all tests specified by the permit have been conducted and that all procedures and equipment specified by the permit are in place before endorsing the permit and allowing entry to begin;

(3) Terminates the entry and cancels the permit as required by subsection (e)(5);

(4) Verifies that rescue services are available and that the means for summoning additional services are operable;

(5) Removes unauthorized individuals who enter or who attempt to enter the permit space during entry operations; and

(6) Determines, whenever responsibility for a permit space entry operation is transferred and at intervals dictated by the hazards and operations performed within the space, that entry operations remain consistent with terms of the entry permit and that acceptable entry conditions are maintained.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
On and before 10/12/11, when employees entered a permit required confined space, the employer failed to ensure that each entry supervisor knew and could perform the supervisory duties required by this section.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $7650.00
2012-RZ D5-1163

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[X] CITATION NO(s): 8 Item No(s): 1

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): Item No(s):

[ ] SPECIAL ORDER/SPECIAL ACTION NO:
Item No(s):

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes [ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5:08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 8 Item 1 Type of Violation: SERIOUS

Title 8 California Code of Regulations
Section: 5157(k) The employer shall ensure that at least one standby person at the site is trained and immediately available to perform rescue and emergency services.

If the employer decides that its employees and other employees performing work in the area will not enter permit spaces, the employer shall take effective measures to prevent all such employees from entering the permit spaces and shall comply with subsections (c)(1), (c)(2), (c)(6), and (c)(8).

On and before 10/12/11, when employees entered a permit required confined space, the employer failed to ensure that at least one standby person was trained and immediately available to perform rescue and emergency services as required by this section.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $ 7650.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
315072637
Inspection Number on Citation

Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

2012-R 2 D 5-1164

1. You only have 15 working days from receipt of a citation to appeal.
2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[ X ] CITATION NO(s): 9 Item No(s): _____________

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): _____________ Item No(s): _____________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: ________________
Item No(s): ____________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[ X ] The safety order was not violated.

[ X ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes [ ] Time allowed to complete changes

[ X ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing.

Clifford & Brown, PC

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

661-322-6023 SafetyFred@xordium.com 04/11/2012

If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 9 Item 1 Type of Violation: SERIOUS ACCIDENT RELATED

Title 8 California Code of Regulations

Section: 5155(c)(3) - Employee exposures shall be controlled such that the applicable ceiling limit specified in Table AC-1 for any airborne contaminant is not exceeded at any time.

On and before 10/12/11, when employees entered a permit required confined space, the employer failed to control employee exposure to airborne contaminants present in the space as required by this section, resulting in the death of two employees. Airborne contaminants present in the space included, but may have not been limited to, H2S and NH3.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $22500.00

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

315072637
Inspection Number on Citation

Community Recycling & Resource Recovery
1261 N. Wheeler Ridge Rd.
Lamont, CA 93241

1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE
THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[ X ] CITATION NO(s): 10 Item No(s): 1

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): Item No(s): 

[ ] SPECIAL ORDER/SPECIAL ACTION NO:
Item No(s): 

2. Specific ground(s) for this appeal are: (Check all that apply)

[ X ] The safety order was not violated.

[ X ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes [ ] Time allowed to complete changes

[ X ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html


I. If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing

Clifford & Brown, PC attn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxton Avenue, Suite 900

(Bank of America Bld. 1430 Truxton Avenue, Suite 900)

(Address) (Address where all communications from the Appeals Board will be sent)

Bakersfield, CA 93301-5230

(City) (State) (Zip Code)

661-322-6023 SafetyFred@xordium.com 04/11/2012

(Telephone) (E-Mail Address) (Date)

All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing.

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, "Citation No. 1, Item Nos. 2, 5, and 8")

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 10 Item 1  Type of Violation: SERIOUS ACCIDENT RELATED

Title 8 California Code of Regulations

Section: - 5157(c)(3) If the employer decides that its employees and other employees performing work in the area will not enter permit spaces, the employer shall take effective measures to prevent all such employees from entering the permit spaces and shall comply with subsections (c)(1), (c)(2), (c)(6), and (c)(8).

On and before 10/12/11, when employees entered a permit required confined space, the employer failed to ensure that employees performing work in the area of the permit confined spaces did not enter those spaces. The employer did not take effective measures to prevent these employees from entering the permit space, resulting in the death of two employees.

Date By Which Violation Must be Abated: 04/02/2012
Proposed Penalty: $ 22500.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE
THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[ X ] CITATION NO(s): Item No(s):

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): Item No(s):

[ ] SPECIAL ORDER/SPECIAL ACTION NO:
Item No(s):

2. Specific ground(s) for this appeal are: (Check all that apply)

[ X ] The safety order was not violated.
[ X ] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes  [ ] Time allowed to complete changes

[ X ] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
(Signature of Employer or Employer’s Representative)

If there is any change in representation after you file your appeal, you must notify the Appeals Board in writing.

Clifford & Brown, PC attn: Fred C. Gillett, Risk Control Consultant

Bank of America Bld. 1430 Truxtun Avenue, Suite 900

(Address) [Address where all communications from the Appeals Board will be sent]
Bakersfield, CA 93301-5230

(City) (State) (Zip Code)
661-322-6023 SafetyFred@xardium.com 04/11/2012
(Telephone) (E-Mail Address) (Date)

{All correspondence from the Appeals Board will be sent to the representative above at the address above. If there is any change in address, telephone number, and/or e-mail address after you file your appeal, you must notify the Appeals Board of the change(s). All such notifications must be in writing.}

IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, “Citation No. 1, Item Nos. 2, 5, and 8)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 11 Item 1 Type of Violation: SERIOUS ACCIDENT RELATED

Title 8 California Code of Regulations

Section: 5157(d)(5) - Under the permit required confined space program required by subsection (c)(4), the employer shall:

Evaluate permit space conditions as follows when entry operations are conducted:

(A) Test conditions in the permit space to determine if acceptable entry conditions exist before entry is authorized to begin, except that, if isolation of the space is infeasible because the space is large or is part of a continuous system (such as a sewer), pre-entry testing shall be performed to the extent feasible before entry is authorized and, if entry is authorized, entry conditions shall be continuously monitored in the areas where authorized entrants are working;

(B) Test or monitor the permit space as necessary to determine if acceptable entry conditions are being maintained during the course of entry operations, and

(C) When testing for atmospheric hazards, test first for oxygen, then for combustible gases and vapors, and then for toxic gases and vapors.

(D) Provide each authorized entrant or that employee’s authorized representative an opportunity to observe the pre-entry and any subsequent testing or monitoring of permit spaces;

(E) Reevaluate the permit space in the presence of any authorized entrant or that employee’s authorized representative who requests that the employer conduct such reevaluation because the entrant or representative has reason to believe that the evaluation of that space may not have been adequate;

(F) Immediately provide each authorized entrant or that employee’s authorized representative with the results of any testing conducted in accord with subsection (d).

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
State of California
Division of Occupational Safety and Health
Cal/OSHA District Office (0950625; 4025)
2550 Mariposa Street, Room 4000
Fresno, CA 93721

Phone: (559) 445-5302 Fax: (559) 445-5786

Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Note: Atmospheric testing conducted in accordance with Appendix B would be considered as satisfying the requirements of this subsection. For permit space operations in sewers, atmospheric testing conducted in accordance with Appendix B, as supplemented by Appendix E, would be considered as satisfying the requirements of this subsection.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to test and monitor the permit space as necessary to determine if acceptable entry conditions were being maintained during the course of entry operations as required by this section.

Date By Which Violation Must be Abated: 03/27/2012
Proposed Penalty: $22500.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
1. You only have 15 working days from receipt of a citation to appeal.

2. A copy of this form must be attached to each citation or notification appealed. Failure to file a completed form may result in dismissal of the appeal.

1. This is an Appeal from:

[X] CITATION NO(s): __________ Item No(s): ________________

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): ________________ Item No(s): ________________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: _______________________
Item No(s): ________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes

[ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html

________________________________________________________________________

________________________________________________________________________
IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (for example, "Citation No. 1, Item Nos. 2, 5, and 8")

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 12 Item 1 Type of Violation: SERIOUS ACCIDENT RELATED

Title 8 California Code of Regulations

Section: 5157(d)(9) Permit-required confined space program (permit space program). Under the permit required confined space program required by subsection (c)(4), the employer shall:

Develop and implement procedures for rescuing entrants from permit spaces, for providing necessary emergency services to rescued employees, for summoning additional rescue and emergency services, and for preventing unauthorized personnel from attempting a rescue.

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to develop and implement procedures for rescuing entrants from permit spaces, for providing necessary emergency services to rescued employees, for summoning additional rescue and emergency services, and for preventing unauthorized personnel from attempting a rescue as required by this section, resulting in the deaths of two employees.

Date By Which Violation Must be Abated: 03/27/2012
Proposed Penalty: $22500.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
FIRST READ IMPORTANT INFORMATION ON THE REVERSE SIDE
THEN COMPLETE ONE APPEAL FORM FOR EACH CITATION

1. This is an Appeal from:

[X] CITATION NO(s): 13_________ Item No(s): ________________

[ ] NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
CITATION NO(s): ___________________ Item No(s): ___________________

[ ] SPECIAL ORDER/SPECIAL ACTION NO: _______________________
Item No(s): _______________________

2. Specific ground(s) for this appeal are: (Check all that apply)

[X] The safety order was not violated.

[X] The classification (i.e. serious, willful, repeat) is incorrect.

[ ] The abatement requirements are unreasonable.

[ ] Required changes   [ ] Time allowed to complete changes

[X] The proposed penalty is unreasonable.

3. Explain any other reasons for appeal or issues to be raised on appeal. Affirmative defenses must be specifically stated. Some important affirmative defenses are listed on the OSHAB website at: http://www.dir.ca.gov/OSHAB/oshab.html
IMPORTANT INFORMATION

A. Use this form to appeal a Citation, Notification of Failure to Abate Alleged Violation, or Special Order/Special Action.

B. You must complete a separate appeal form for each citation or notification you wish to appeal and attach a copy of the complete citation or notification that you are appealing.

C. If the citation or notification being appealed includes more than one item do not use separate appeals forms for each item. Instead, specify the items you are appealing in the space provided in No. 1 on the front of this form. (For example, “Citation No. 1, Item Nos. 2, 5, and 8”)

D. Be sure to sign your appeal form and provide all the information requested in No. 4 above.

E. Your appeal form shall be deemed not completed unless you attach a copy of each citation or notification that you are appealing, and failure to file a completed appeal form may result in dismissal of the appeal.

F. If you or your representative change address, telephone number, and/or e-mail address, it is your responsibility to notify the Appeals Board in writing of the change(s). Otherwise the Appeals Board will continue to use the address it has on file and you risk not receiving notices or other communications from the Appeals Board. Appeals Board regulations make it the employer’s obligation to notify the Appeals Board of any changes to the employer’s and/or representative’s contact information.

G. Mail each completed Appeal form and citation or notification to the Occupational Safety and Health Appeals Board, 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

H. Late appeals will not be accepted unless good cause is shown.

OSHAB 5/08
State of California
Division of Occupational Safety and Health
Cal/OSHA District Office (0950625; 4025)
2550 Mariposa Street, Room 4000
Fresno, CA 93721

Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

Citation 13 Item 1 Type of Violation: SERIOUS ACCIDENT RELATED

Title 8 California Code of Regulations
Section: 5157(g) Training

(1) The employer shall provide training so that all employees whose work is regulated by this section acquire the understanding, knowledge, and skills necessary for the safe performance of the duties assigned under this section.

(2) Training shall be provided to each affected employee:

(A) Before the employee is first assigned duties under this section;

(B) Before there is a change in assigned duties;

(C) Whenever there is a change in permit space operations that presents a hazard about which an employee has not previously been trained;

(D) Whenever the employer has reason to believe either that there are deviations from the permit space entry procedures required by subsection (d)(3) or that there are inadequacies in the employee’s knowledge or use of these procedures.

(3) The training shall establish employee proficiency in the duties required by this section and shall introduce new or revised procedures, as necessary, for compliance with this section.

(4) The employer shall certify that the training required by subsections (g)(1) through (g)(3) has been accomplished. The certification shall contain each employee’s name, the signatures or initials of the trainers, and the dates of training. The certification shall be available for inspection by employees and their authorized representatives.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
State of California
Division of Occupational Safety and Health
Cal/OSHA District Office (0950625; 4025)
2550 Mariposa Street, Room 4000
Fresno, CA 93721

Phone: (559) 445-5302  Fax: (559) 445-5786

Citation and Notification of Penalty

Company Name: Community Recycling & Resource Recovery
Inspection Site: 1261 N. Wheeler Ridge Rd, Lamont, CA 93241

On and before 10/12/11, prior to employees entering a permit required confined space, the employer failed to provide training so that employees who performed work regulated by this section acquired the understanding, knowledge, and skills necessary for the safe performance of their duties, resulting in the deaths of two employees.

Date By Which Violation Must be Abated: 03/27/2012
Proposed Penalty: $ 22500.00

[Signature]
Compliance Officer/District Manager

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