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/OSHAB/oshab.htm

The height limit that the building is permitted and constructed under is 35 feet.
OCCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

A P P E A L F O R M

300873189
Inspection Number on Citation

DAVE SHAW CONCRETE AND BLOCK INC.
Employer Name on Citation

Employer Legal Name or DBA (Optional)

2550 VIA TEJON ST
Address

PASOS VENTURAS EST, CA 90274

DOCKET _________
(Leave blank-Appeals Board will fill in.)

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): 1 Item No(s): 2

☐ 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 OSHA website at: http://www.dir.ca.gov/OSHA/OSHAB/oshab.html

Employees were pouring piles next to

Sharing
APPEAL FORM

Docket 300873189

Inspection Number on Citation

Dave Shaw Concrete and Block Inc.

Employer Name on Citation

2550 Via Tejon, Suite D

Address

Pasos Veedos Est, CA 90271

Employer Legal Name or DBA (Optional)

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

DOCKET

(Leave blank—Appeals Board will fill in.)

1. This is an Appeal from:

☐ CITATION NO(s): 1 Item No(s): 3

☐ NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION

☐ 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 OSHA website at: http://www.dir.ca.gov/OSHA/oshab.html

Copy was available but not observed.
OCCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

APPEAL FORM

300873189
Inspection Number on Citation

Dave Shaw Concrete and Block, Inc.
Employer Name on Citation

2550 VIA TECNO SFD
Address
PASO NUEVA EST. CA 90271

Employer Legal Name or DBA (Optional)

DOCKET
(Leave blank—Appeals Board will fill in.)

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

1. This is an Appeal from:

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

 [ ] 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.

We have and have always had an effective Injury & Illness Prevention Program.
OCCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

APPEAL FORM

300873189 DOCKET
Inspection Number on Citation

DAVE SHAW CONCRETE AND BLOCK INC.
Employer Name on Citation

Employer Legal Name or DBA (Optional)

2550 VIA TEJON SIE D
Address

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): 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)

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/OSHAB/oshab.html

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

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.
This is an Appeal from:

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

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

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

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.

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

It is not true that we don't supply drinking water. Water was available on site.
This is an Appeal from:

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

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

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

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.

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

Ladder was not there for 6 months. Temporary ladder. As used was unauthorized.
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): 1 Item No(s): 8
   - [ ] 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.
   - [ ] 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
   Supervisory personnel have been provided with heat/illness prevention training.
OCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

APPEAL FORM

DOCKET
(Leave blank—Appeals Board will fill in.)

300873189
Inspection Number on Citation

DAVE SHAW CONCRETE AND BLOCK, INC.
Employer Name on Citation

Employer Legal Name or DBA (Optional)

2550 VIA TEJON SED
Address
PASO VERDES EST, CA 90274

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): 1 Item No(s): 9

[ ] 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.

We don't use fork lift in our business. Use of forklift was unauthorized.
All employees that use equipment on all of our jobs have been trained to operate it.
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
This is an Appeal from:

[ ] 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): 

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/OSHAB/osha1.htm

Only I, Beam was uncovered at-time of accident. This hole was being worked on. There was an I Beam in flt. Area was barricaded. Employees were acting outside of their authority.
(Signature of Employer or Employer's Representative)

DAVID B. SHAW

(President)

2550 VIA TETON, STE 2

(Panas Verdes EST CA 90274)

310-373-3280 DAUGHSTON CONCRETE 9/17/2010

(All correspondence from the Appeals Board will be sent to the representative above and 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 an individual 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. 4 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 your 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
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):   3   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)
   - 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 OSHA website at: http://www.dir.ca.gov/OSHA/oshab.html
   
   Employee was not using Mikasa Rammer as pile driver
   Employees were not authorized to do what they were doing.
   Fork attachment use was not authorized.
   Catapiller forks are equal or better than Mikasa forks. Fork attachments. Forks are GENERIC.
IMPORTANT INFORMATION

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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.

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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
OCCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751
FAX (916) 274-5785

APPEAL FORM

300873189
Inspection Number on Citation

DAVE SHAW CONCRETE AND BLOCK INC
Employer Name on Citation

Employer Legal Name or DBA (Optional)

2550 VIA TEJON SR
Address

PASOS VECES EST, CA 90274

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 form:

[ ] 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

[ ] 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

Work was in progress at time of inspection.
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.
This is an Appeal from:

[ ] 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 grounds 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/OSHAB/oshab.html

Work was in progress and decking had only been in place for a while. Finish concrete was just poured. Most of the building was in compliance.
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. 10 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.

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

OSHAB 5/08
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/OSHAB/oshab.html

Employees were working outside of authorized scope of work. Marasa Pamberi was not being used to drive piles. Work was not authorized and violated company policy.
IMPORTANT INFORMATION

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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.

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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.

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OSHAB 5/08