

State of California
Department of Industrial Relations
Division of Occupational Safety and Health
Van Nuys District Office
6150 Van Nuys Blvd, Suite 405
Van Nuys, CA 91401
Phone: (818) 901-5403 Fax: (818) 901-5578



CITATION AND NOTIFICATION OF PENALTY

To:
ARMORCAST PRODUCTS COMPANY, INC.
and its successors
9140 Lurline Ave.
Chatsworth, CA 91311

Inspection #: 1479039
Inspection Date (s): 06/12/2020 - 04/05/2021
Issuance Date: 04/05/2021
CSHO ID: B9670
Optional Report #: 032-20
Reporting ID: 0950643

Inspection Site:
9140 Lurline Ave.
Chatsworth, CA 91311

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

This Citation and Notification of Penalty (hereinafter Citation) is being issued in accordance with California Labor Code Section 6317 for violations that were found during the inspection/investigation. **This Citation or a copy must be prominently posted upon receipt by the employer at or near the location of each violation until the violative condition is corrected or for three working days, whichever is longer.** Violations of Title 8 of the California Code of Regulations or of the California Labor Code may result in some instances in prosecution for a misdemeanor.

YOU HAVE A RIGHT to contest this Citation and Notification of Penalty by filing an appeal with the Occupational Safety and Health Appeals Board. To initiate your appeal, you **must** contact the Appeals Board, in writing or by telephone, or online, within 15 working days from the date of receipt of this Citation. If you miss the 15 working day deadline to appeal, the Citation and Notification of Penalty becomes a final order of the Appeals Board, not subject to review by any court or agency.

Informal Conference - You may request an informal conference with the manager of the district office which issued the Citation within 10 working days after receipt of the Citation. However, if the citation is appealed, you may request an informal conference at any time prior to the day of the hearing. Employers are encouraged to schedule a conference at the earliest possible time to assure an expeditious resolution of any issues. At the informal conference, you may discuss the existence of the alleged violation(s), classification of the violation(s), abatement date or proposed penalty.

Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

The Occupational Safety and Health Appeals Board (Appeals Board) consists of three members appointed by the Governor. The Appeals Board is a separate entity from the Division of Occupational Safety and Health (Cal/OSHA or the Division) and employs experienced administrative law judges to hear appeals fairly and impartially. To initiate an appeal from a Citation and Notification of Penalty, you must contact the Appeals Board in writing, or by telephone, or online via the Board's OASIS system, within 15 working days from the date of receipt of a Citation.

After you have initiated your appeal, you must then file a completed appeal form with the Appeals Board, at the address listed below, or online via the Board's OASIS system, for each contested Citation. Failure to file a completed appeal form with the Appeals Board may result in dismissal of the appeal. Appeal forms are available to print online at: <https://www.dir.ca.gov/oshab/appealform.pdf>. You may also file the appeal through the Board's online OASIS system at: <https://www.dir.ca.gov/oshab/>. Hard copies can also be picked up from district offices of the Division, or from the Appeals Board:

Occupational Safety and Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
Telephone: (916) 274-5751 or (877) 252-1987
Fax: (916) 274-5785

If the Citation you are appealing alleges more than one item, you must specify on the appeal form which items you are appealing. The appeal form also asks you to identify the grounds for your appeal. Among the specific grounds for an appeal are the following: the safety order was not violated, the classification of the alleged violation (e.g., serious, repeat, willful) is incorrect, the abatement requirements are unreasonable or the proposed penalty is unreasonable.

Important: You must notify the Appeals Board, not the Division, of your intent to appeal within 15 working days from the date of receipt of the Citation. Otherwise, the Citation and Notification of Penalty becomes a final order of the Appeals Board not subject to review by any court or agency. An informal conference with Cal/OSHA or the Division **does not** constitute an appeal and **does not** stay the 15 working day appeal period. If you have any questions concerning your appeal rights, call the Appeals Board, at (916) 274-5751 or (877) 252-1987.

PENALTY PAYMENT OPTIONS

Penalties are due within 15 working days of receipt of this Citation and Notification of Penalty unless contested. If you are appealing any item of the Citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form for payment.

If you are paying electronically, please have the Penalty Remittance Form on-hand when you are ready to make your payment. The company name, inspection number, and Citation number(s) will be required in order to ensure that the payment is accurately posted to your account. Please go to: www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html to access the secure payment processing site. **Additionally, you must also mail the Penalty Remittance Form to the address below.**

If you are paying by check, return one copy of the Citation, along with the Notice of Proposed Penalties Sheet and the Penalty Remittance Form and mail to:

Department of Industrial Relations
Cal/OSHA Penalties
P. O. Box 516547
Los Angeles, CA 90051-0595

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

NOTIFICATION OF CORRECTIVE ACTION

For violations which you do not contest, you should notify the Division of Occupational Safety and Health promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation and Notification of Penalty. Please inform the district office listed on the Citation by submitting the Cal/OSHA 160 form with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for general violations has already been reduced by 50% on the presumption that the employer will correct the violations by the abatement date. The adjusted penalty for serious violations, if any, has already been reduced by 50% because abatement of those violations has been completed.

Note: Return the Cal/OSHA 160 form to the district office listed on the Citation and as shown below:

Division of Occupational Safety and Health
Van Nuys District Office
6150 Van Nuys Blvd, Suite 405
Van Nuys, CA 91401
Telephone: (818) 901-5403
Fax: (818) 901-5578

EMPLOYEE RIGHTS

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under Labor Code Section 6310 or 6311. An employee who believes that he/she has been discriminated against may file a complaint no later than six (6) months after the discrimination occurred with the Division of Labor Standards Enforcement.

Employee Appeals - An employee or authorized employee's representative may, within 15 working days of the issuance of a citation, special order, or order to take special action, appeal to the Occupational Safety and Health Appeals Board the reasonableness of the period of time fixed by the Division of Occupational Safety and Health (Division) for abatement. An employee appeal may be filed with the Appeals Board or with the Division. No particular format is necessary to initiate the appeal, but the notice of appeal must be in writing.

If an Employee Appeal is filed with the Division, the Division shall note on the face of the document the date of receipt, include any envelope or other proof of the date of mailing, and promptly transmit the document to the Appeals Board. The Division shall, no later than 10 working days from receipt of the Employee Appeal, file with the Appeals Board and serve on each party a clear and concise statement of the reasons why the abatement period prescribed by it is reasonable.

Employee Appeal Forms are available from the Appeals Board, or from a district office of the Division.

Employees Participation in Informal Conference - Affected employees or their representatives may notify the District Manager that they wish to attend the informal conference. If the employer objects, a separate informal conference will be held.

DISABILITY ACCOMMODATION

Disability accommodation is available upon request. Any person with a disability requiring an accommodation, auxiliary aid or service, or a modification of policies or procedures to ensure effective communication and access to the programs of the Division of Occupational Safety and Health, should contact the Disability Accommodation Coordinator at the local district office or the Statewide Disability Accommodation Coordinator at 1-866-326-1616 (toll free). The Statewide Coordinator can also be reached through the California Relay Service, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY - Spanish).

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.

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Inspection #: 1479039
Inspection Dates: 06/12/2020 - 04/05/2021
Issuance Date: 04/05/2021
CSHO ID: B9670
Optional Report #: 032-20



Citation and Notification of Penalty

Company Name: ARMORCAST PRODUCTS COMPANY, INC.

Establishment DBA:

and its successors

Inspection Site: 9140 Lurline Ave.
Chatsworth, CA 91311

Citation 1 Item 1 Type of Violation: **Regulatory**

California Code of Regulation, Title 8 §342. Reporting Work-Connected Fatalities and Serious Injuries.

a) Every employer shall report immediately by telephone or telegraph to the nearest District Office of the Division of Occupational Safety and Health any serious injury or illness, or death, of an employee occurring in a place of employment or in connection with any employment.

Violation

The employer did not report immediately to the Division serious Covid-19 illnesses that occurred at its workplace or in connection with the employer's work.

Instance No. 1: Employer failed to report immediately Employee #1's COVID-19 illness, which resulted in hospitalization on May 20, 2020.

Instance No. 2: Employer failed to report immediately Employee #2's COVID-19 illness, which resulted in hospitalization on April 1, 2020.

Instance No. 3: Employer failed to report immediately Employee #3's COVID-19 illness, which resulted in hospitalization on April 1, /2020.

Instance No. 4: Employer failed to report immediately Employee #4's COVID-19 illness, which resulted in hospitalization on January 17, 2021.

Instance No. 5: Employer failed to report immediately Employee #5's COVID-19 illness, which resulted in hospitalization on January 19, 2021.

Date By Which Violation Must be Abated:
Proposed Penalty:

May 10, 2021
\$5000.00

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Citation and Notification of Penalty

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Establishment DBA:

and its successors

Inspection Site: 9140 Lurline Ave.
Chatsworth, CA 91311

Citation 1 Item 2 Type of Violation: **Regulatory**

California Code of Regulations, Title 8. Section 3203. Injury and Illness Prevention Program.

(b) Records of the steps taken to implement and maintain the Program shall include:

(2) Documentation of safety and health training required by subsection (a)(7) for each employee, including employee name or other identifier, training dates, type(s) of training, and training providers. This documentation shall be maintained for at least one (1) year.

Violation

Prior to and during the course of the inspection, including but not limited to June 12 , 2020, the employer failed to maintain documentation of safety and health training for COVID-19 in accordance with section 3203(b)(2) for at least one (1) year that included the employee name or other identifier, training dates, and training providers.

Date By Which Violation Must be Abated: May 10, 2021
Proposed Penalty: \$375.00

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 Division of Occupational Safety and Health
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Inspection #: 1479039
Inspection Dates: 06/12/2020 - 04/05/2021
Issuance Date: 04/05/2021
CSHO ID: B9670
Optional Report #:

**Citation and Notification of Penalty**

Company Name: ARMORCAST PRODUCTS COMPANY, INC.

Establishment DBA:

and its successors

Inspection Site: 9140 Lurline Ave.
 Chatsworth, CA 91311

Citation 1 Item 3 Type of Violation: **Regulatory**

California Code of Regulations, Title 8, Section 14300.4(a). Forms.

Each employer required by this article to keep records of fatalities, injuries, and illnesses must record each fatality, injury and illness that: (1) Is work-related; and (2) Is a new case; and (3) Meets one or more of the general recording criteria of Section 14300.7 or the application to specific cases of Section 14300.8 through Section 14300.12.

Violation

Prior to and during the course of inspection, the Employer failed to record a COVID-19 fatality of an employee on and around June 7, 2020, on the Cal/OSHA Form 300

Date By Which Violation Must be Abated:

May 10, 2021

Proposed Penalty:

\$375.00

State of California

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**Citation and Notification of Penalty****Company Name:** ARMORCAST PRODUCTS COMPANY, INC.**Establishment DBA:**

and its successors

Inspection Site: 9140 Lurline Ave.
Chatsworth, CA 91311Citation 1 Item 4 Type of Violation: **General****California Code of Regulations, Title 8, § 3203. Injury and Illness Prevention Program.**

(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

(7) Provide training and instruction:

(A) When the program is first established;

(B) To all new employees;

(C) To all employees given new job assignments for which training has not previously been received;

(D) Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;

(E) Whenever the employer is made aware of a new or previously unrecognized hazard; and,

(F) For supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.

(8) Allow employee access to the Program.

(A) As used in this subsection:

1. The term "access" means the right and opportunity to examine and receive a copy.

2. The term "designated representative" means any individual or organization to whom an employee gives written authorization to exercise a right of access. A recognized or certified collective bargaining agent shall be treated automatically as a designated representative for the purpose of access to the Program.

Violation

Prior to and during the course of the inspection, including but not limited to June 12, 2020, the employer's written Injury and Illness Prevention Program did not include allowing employee access to the Program, in accordance with 3203(a)(8) of this subsection.

Date By Which Violation Must be Abated:**May 10, 2021****Proposed Penalty:****\$560.00**

Zulfiqar Merchant
 Compliance Officer / District Manager

State of California
Department of Industrial Relations
Division of Occupational Safety and Health
Van Nuys District Office
6150 Van Nuys Blvd, Suite 405
Van Nuys, CA 91401
Phone: (818) 901-5403 Fax: (818) 901-5578



NOTICE OF PROPOSED PENALTIES

Company Name: ARMORCAST PRODUCTS COMPANY, INC.
Establishment DBA:
and its successors
Inspection Site: 9140 Lurline Ave., Chatsworth, CA 91311
Mailing Address: 9140 Lurline Ave., Chatsworth, CA 91311
Issuance Date: 04/05/2021
Reporting ID: 0950643
CSHO ID: B9670

Summary of Penalties for Inspection Number 1479039

| | |
|----------------------------------|------------------|
| Citation 1 Item 1, Regulatory | \$5000.00 |
| Citation 1 Item 2, Regulatory | \$375.00 |
| Citation 1 Item 3, Regulatory | \$375.00 |
| Citation 1 Item 4, General | \$560.00 |
| TOTAL PROPOSED PENALTIES: | \$6310.00 |

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If you are paying electronically: Please have this form on-hand when you are ready to make your payment. The company name, reporting ID and Citation number(s) will be required to ensure that the payment is accurately posted to your account. Please go to: www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html to access the secure payment processing site. **Additionally, you must also mail the Penalty Remittance Form to the address below.**

If you are paying by check: Mail this Notice of Proposed Penalties, the Penalty Remittance Form, along with a copy of the Citation and Notification of Penalty to:

**DEPARTMENT OF INDUSTRIAL RELATIONS
CAL/OSHA PENALTIES
P. O. BOX 516547
LOS ANGELES, CA 90051-0595**

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

**DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH – CAL/OSHA
Accounting Office - Cashiering Unit
Phone (415) 703-4310 or (415) 703-4308**

PENALTY REMITTANCE FORM

| | | |
|---|---|------------------------------|
| CIVIL PENALTY INFO | INSPECTION NO.: 1479039 | REPORTING ID: 0950643 |
| COMPANY NAME: | ARMORCAST PRODUCTS COMPANY, INC. | FEIN/SEIN: UNKNOWN |
| ESTABLISHMENT DBA: | | |
| CONTACT PERSON: | Martin Gonzalez | |
| PHONE NO.: | UNKNOWN | FAX NO.: UNKNOWN |
| SITE ADDRESS: | 9140 Lurline Ave., Chatsworth, CA 91311 | |
| MAILING ADDRESS: | 9140 Lurline Ave., Chatsworth, CA 91311 | |
| CITATION INFORMATION: Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this Citation, remittance is still due on all items that are not appealed. | | |
| PAYMENT INSTRUCTIONS: For check or money order: please make check or money order payable to Department of Industrial Relations. Write the inspection number and total amount enclosed on the payment coupon below and on the check or money order. For credit card or EFT payment, go to: www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html | | |

----- Detach here and return bottom portion with check or money order payment -----

PAYMENT COUPON



Inspection No.: 1479039

Amount Enclosed: \$ _____

Mail payment to:

For credit card or EFT payment, go to:
www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html

DEPARTMENT OF INDUSTRIAL RELATIONS
CAL/OSHA PENALTIES
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