



EXHIBIT 2

Westinghouse
Electric Corporation

Westinghouse Building
Gateway Center
Pittsburgh, Pennsylvania 15222

July 25, 1991

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

OSHA Area Director
U.S. Department of Labor
Occupational Safety and Health Administration
2002 Richard Jones Road
Suite C-205
Nashville, TN 37215

Re: *Notice of Contest of Citation and Specification of Penalty*
(OSHA No. R-128 issued June 27, 1991)

Dear Sir:

Westinghouse Electric Corporation received the above-referenced citation on July 3, 1991. This letter is to inform you that, pursuant to the provisions of 29 CFR, it is our decision to contest the citation and penalty for items 1 and 2b.

Very truly yours,

Roger E. Wills, Jr.
Chief Counsel

R [Redacted]
C. W. Bickarstad

30029479



DOCUMENTS PRODUCED
DALLAS COUNTY CASES 3/18/92

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

Citation and Notification of Penalty
US Department of Labor
Occupational Safety and Health Admin.
2002 Richard Jones Rd., Suite C-205
Nashville, TN 37215

1. Citation Number	2. Date of Violation
3. Nature of Violation	4. Date of Inspection
5. Severity of Violation	6. Date of Citation
7. Date of Citation	8. Date of Citation
9. Date of Citation	10. Date of Citation
11. Date of Citation	12. Date of Citation
13. Date of Citation	14. Date of Citation
15. Date of Citation	16. Date of Citation
17. Date of Citation	18. Date of Citation
19. Date of Citation	20. Date of Citation
21. Date of Citation	22. Date of Citation
23. Date of Citation	24. Date of Citation
25. Date of Citation	26. Date of Citation
27. Date of Citation	28. Date of Citation
29. Date of Citation	30. Date of Citation
31. Date of Citation	32. Date of Citation
33. Date of Citation	34. Date of Citation
35. Date of Citation	36. Date of Citation
37. Date of Citation	38. Date of Citation
39. Date of Citation	40. Date of Citation
41. Date of Citation	42. Date of Citation
43. Date of Citation	44. Date of Citation
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69. Date of Citation	70. Date of Citation
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81. Date of Citation	82. Date of Citation
83. Date of Citation	84. Date of Citation
85. Date of Citation	86. Date of Citation
87. Date of Citation	88. Date of Citation
89. Date of Citation	90. Date of Citation
91. Date of Citation	92. Date of Citation
93. Date of Citation	94. Date of Citation
95. Date of Citation	96. Date of Citation
97. Date of Citation	98. Date of Citation
99. Date of Citation	100. Date of Citation

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

3. Issuance Date	4. Inspection Number
06/27/91	017397324
5. Reporting ID	6. CSMO ID
0420100	R6129
7. Optional Report No.	8. Page No.
	1 of 3

10. Inspection Details
11. Inspection Site:
1499 Steam Plant Road
Callatin, TN 37066

9. To:
Westinghouse Electric Corp.
and its successors
500 W Madison, Suite 2000
Chicago, IL 60606

THE LAW REQUIRES that a copy of this Citation be posted immediately in a prominent place at or near the location of the violation(s) cited below. The Citation must remain posted until the violation(s) have been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer. This Citation describes violations of the Occupational Safety and Health Act of 1970. The citations are based on these violations. You must abate the violations referred to in this Citation by the dates listed below and pay the penalties provided within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and notify you must a notice of abatement to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your rights and responsibilities and should be read in conjunction with this form.) You are further notified that unless you inform the Area Director, within the time period to correct the Citation or proposed penalties within 15 working days after receipt, this Citation and the proposed penalties will become final and the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to correct as provided for in the Act or, if contested, unless the Citation is affirmed by the Review Commission.

12. Item Number	13. Standard, Regulation or Section of the Act Violated	14. Description	15. Date by Which Violation Must Be Abated	16. Penalty
1	29 CFR 1926.58(f)(2)(i): Employer did not perform initial monitoring at the initiation of each asbestos job to accurately determine the air-borne concentration of asbestos to which employees may have been exposed:	a) Initial monitoring was not conducted at the initiation of the asbestos encapsulation operation on turbine units 1-3. b) Initial monitoring was not conducted at the initiation of the repair operation on turbine units 1-3 which contained asbestos.	07/03/91	1875

17. Area Director
Cris M. Brown

NOTICE TO EMPLOYEES — The law gives an employee or his representative the opportunity to object to any abatement date set for a violation if he believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and penalty.

EMPLOYER RIGHTS AND RESPONSIBILITIES — The enclosed booklet outlines employer rights and responsibilities and should be read in conjunction with this notification.

EMPLOYER DISCRIMINATION UNLAWFUL — The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he has been discriminated against may file a complaint no later than 30 days after the discrimination with the U.S. Department of Labor Area Office at the address shown above.

Penalties Are Due Within 15 Days of Receipt of This Notification Unless Contested (See enclosed Booklet)

This Section May Be Detached Before Posting

30029480

18. Last Page

Total Penalty for This Citation
Make Check Money Order Payable to DOL-OSHA
Include Inspection Number on Remittance

DOCUMENTS PRODUCED
DALLAS COUNTY CASES 3/18/92

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

Citation and Notification of Penalty
US Department of Labor
Occupational Safety and Health Admin.
2002 Richard Jones Rd., Suite C-205
Nashville, TN 37215

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

Severity	01
Category	01

3. Issuance Date	4. Inspection Number
06/27/91	017397324
5. Reporting ID	6. CASH ID
0420100	R5129
7. Optional Report No.	8. Page No.
	3 of 3

10. Inspection Date(s)
5/30/91 5/31/91

11. Inspection Site:

1499 Stearn Plant Road
Gallatin, TN 37066

9. To:

Westinghouse Electric Corp.
and its successors
500 W Madison, Suite 1950
Chicago, IL 60606

THE LAW REQUIRES that a copy of this Citation be posted immediately in a prominent place in the work area of the violator(s) cited below. The Citation must remain posted until the violator(s) cited below have been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

This Citation describes violations of the Occupational Safety and Health Act of 1970. The penalties assessed are based on these violations. You must abate the violations referred to in this Citation by the dates listed below and pay the assessed penalties within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation. If you fail to pay the assessed penalties within 15 working days, the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your rights and responsibilities and should be read in conjunction with this form.) You are further notified that unless you inform the Area Director in writing that you intend to contest the Citation, the Citation is deemed final within 15 working days after receipt. The Citation and the proposed penalties will be sent to the U.S. Department of Labor and Health, Human Resources and Services Commission and may not be reviewed by any court or agency. Issuance of this Citation does not constitute a finding of a violation of the Act, nor does it constitute a finding of a failure to correct as provided for in the Act or, if contested, unless the Citation is upheld by the Review Commission.

12. Item Number

13. Standard, Regulation or Section of the Act Violated

14. Description

15. Date by Which Violation Must Be Abated

16. Penalty

2b

29 CFR 1926.59(g)(5): Employer did not maintain copies of the required material safety data sheets for each hazardous chemical in the work-place and ensure that they were readily accessible to the employees in their work area during each work shift:

a) Material safety data sheets were located in an office file which was not accessible to employees.

07/17/91

3

29 CFR 1926.59(h): Employees were not provided information and training as specified in 29 CFR 1910.1200(h)(1) and (2) on hazardous chemicals in the work area at the time of their initial assignment and whenever a new hazard was introduced into their work area:

a) Information and training as specified in (h)(1) and (2) were not provided to employees exposed to hazardous chemicals such as welding fumes, welding gases, cleaning compounds and asbestos.

07/24/91

1875

30029481

17. Area Director

Colin M. Brown

18. \$ 4875

NOTICE TO EMPLOYEES — The law gives an employee or his representative the opportunity to object to any abatement date set for a violation if he believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and penalty.

EMPLOYER DISCRIMINATION UNLAWFUL — The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he has been discriminated against may file a complaint no later than 30 days after the discrimination with the U.S. Department of Labor Area Office at the address shown above.

EMPLOYER RIGHTS AND RESPONSIBILITIES — The enclosed booklet outlines employer rights and responsibilities and should be read in conjunction with this notification.

CITATION AND NOTIFICATION OF PENALTY

ORIGINAL

OSHA-300 (Rev. 1/80)

Penalty
Are Due
Within 15
Days of
Receipt
of This
Citation
(See
enclosed
booklet)

This Section
May Be
Detached
Before
Posting

DOCUMENTS PRODUCED
DALLAS COUNTY CASES 3/18/92

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

Citation and Notification of Penalty
U.S. Department of Labor

Occupational Safety and Health Admin.
2002 Richard Jones Rd., Suite C-205
Nashville, TN 37215

Serious		01
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The violation(s) described in this Citation are alleged to have occurred on or about the day the inspection was made unless otherwise indicated within the description given below.

3. Issuance Date 06/27/91	4. Inspection Number 017397324
5. Reporting ID 0420100	6. CSHO ID R6129
7. Optional Report No.	8. Page No. 2 of 3

10. Inspection Date(s):

6/26/91 - 6/31/91

11. Inspection Site:

1499 Steam Plant Road
Gallatin, TN 37066

9. To:

Westinghouse Electric Corp.
and its successors
500 W. Madison, Suite 2900
Chicago, IL 60606

THE LAW REQUIRES that a copy of this Citation be posted immediately in a prominent place at or near the location of the violation(s) cited below. The Citation must remain posted until the violation(s) cited below have been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

This Citation describes violation(s) of the Occupational Safety and Health Act of 1970. The penalty provisions are based on these violations. You must abate the violations referred to in this Citation by the date cited below and pay the penalty assessed within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation. If you wish to request a review of this Citation, you must file a request for review with the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet outlining employer rights and responsibilities and procedures for review in conjunction with this form.) You are further notified that unless you inform the Area Office in writing within 15 working days of receipt of this Citation, the citation is deemed to be a final citation and you are liable for the penalty assessed within 15 working days after receipt. This Citation and the proposed penalties are deemed a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency. Issuance of this Citation does not constitute an admission that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless the Citation is affirmed by the Review Commission.

12. Item Number

13. Standard, Regulation or Section of the Act Violated

14. Description

15. Date by Which Violation Must Be Abated

16. Penalty

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

2a

29 CFR 1926.59(g)(1): Employer did not have a material safety data sheet for each hazardous chemical used in the workplace:

- a) Material Safety Data Sheets (MSDS) were not available for all hazardous chemicals on site, such as, oxygen, argon, acetylene, kerosene, radio welding rod, and 308 welding wire.

07/10/91

112

30029482

17. Area Director

Cois H. Brown

18. Last P

NOTICE TO EMPLOYEES — The law gives an employee or his representative the opportunity to object to any abatement date set for a violation if he believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and penalty.

EMPLOYER DISCRIMINATION UNLAWFUL — The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he has been discriminated against may file a complaint no later than 30 days after the discrimination with the U.S. Department of Labor Area Office at the address shown above.

EMPLOYER RIGHTS AND RESPONSIBILITIES — The enclosed booklet outlines employer rights and responsibilities and should be read in conjunction with this notification.

CITATION AND NOTIFICATION OF PENALTY

ORIGINAL

OSHA-6 (Rev. 1/80)

Penalties Are Due Within 15 Days of Receipt of This Notification Unless Contested (See enclosed Booklet)

The Section May Be Detached Before Posting

Total Penalty for This Citation
State Check Money Order
Payable to: OCA-Cash
Include Instructions
Number on Back

DOCUMENTS PRODUCED
DALLAS COUNTY CASES 3/18/92

P 020 210 877

RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 SEE FOR INTERNATIONAL MAIL
 (See Reverse)

To: Mr. Clarence Reynolds	
Street and No. 4725 Charlotte Avenue	
P.O. Box and ZIP Code Nashville, TN 37209	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 020 210 879

RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 SEE FOR INTERNATIONAL MAIL
 (See Reverse)

To: Mr. Tommy Bonds	
Street and No. 5105 Alabama Ave.	
P.O. Box and ZIP Code Nashville, TN 37209	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 020 210 878

RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 SEE FOR INTERNATIONAL MAIL
 (See Reverse)

To: Mr. Billy Borchert	
Street and No. 631 North 1 st	
P.O. Box and ZIP Code Nashville, TN 37203	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 020 210 880

RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 SEE FOR INTERNATIONAL MAIL
 (See Reverse)

To: Mr. Bob Borer	
Street and No. 624 Kingston Ave.	
P.O. Box and ZIP Code Nashville, TN 37210	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom and Date Delivered	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE.

CERTIFIED MAIL, P.M., AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see back)

1. If you want this receipt postmarked, attach the guaranteed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your retail carrier. (no extra charge)
2. If you do not want this receipt postmarked, attach the guaranteed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, with the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the back of the article by means of the guaranteed stub. It expires per-sonally. Otherwise, attach to back of article. Subsequent loss of article NOT INSURED. RECEIPT NOT RETURNED TO SENDER.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the back of the article.
5. Enter here for the services requested in the appropriate spaces on the back of this receipt. If return receipt is requested, attach the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you wish inquiry.

U.S.E.P.S. 1987-1988-750

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE.

CERTIFIED MAIL, P.M., AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see back)

1. If you want this receipt postmarked, attach the guaranteed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your retail carrier. (no extra charge)
2. If you do not want this receipt postmarked, attach the guaranteed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
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6. Save this receipt and present it if you wish inquiry.

U.S.E.P.S. 1987-1988-750

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE.

CERTIFIED MAIL, P.M., AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see back)

1. If you want this receipt postmarked, attach the guaranteed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your retail carrier. (no extra charge)
2. If you do not want this receipt postmarked, attach the guaranteed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, with the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the back of the article by means of the guaranteed stub. It expires per-sonally. Otherwise, attach to back of article. Subsequent loss of article NOT INSURED. RECEIPT NOT RETURNED TO SENDER.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the back of the article.
5. Enter here for the services requested in the appropriate spaces on the back of this receipt. If return receipt is requested, attach the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you wish inquiry.

U.S.E.P.S. 1987-1988-750

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE.

CERTIFIED MAIL, P.M., AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see back)

1. If you want this receipt postmarked, attach the guaranteed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your retail carrier. (no extra charge)
2. If you do not want this receipt postmarked, attach the guaranteed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, with the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the back of the article by means of the guaranteed stub. It expires per-sonally. Otherwise, attach to back of article. Subsequent loss of article NOT INSURED. RECEIPT NOT RETURNED TO SENDER.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the back of the article.
5. Enter here for the services requested in the appropriate spaces on the back of this receipt. If return receipt is requested, attach the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you wish inquiry.

U.S.E.P.S. 1987-1988-750

P 020 210 881

RECEIPT FOR CERTIFIED MAIL
NO REFUND OR CASH REFUND
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	Mr. Hank Pierce
Street and No.	295 Plus Park Blvd.
P.O. Box and Zip Code	Nashville, TN 37217-1022
Postage	\$
Certified Fee	
Registered Fee	
Restricted Delivery Fee	
Return Receipt (Money to whom and Date Delivered)	
Return Receipt (Money to whom, Date, and Address of Delivery)	
TOTAL Postage and Fees	\$
Postmark or Date	30029488

PS Form 3800, June 1985

P 020 210 881

RECEIPT FOR CERTIFIED MAIL
NO REFUND OR CASH REFUND
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	Mr. Ray P. Smith
Street and No.	4122 Charlotte Ave
P.O. Box and Zip Code	Nashville, TN 37209
Postage	\$
Certified Fee	
Registered Fee	
Restricted Delivery Fee	
Return Receipt (Money to whom and Date Delivered)	
Return Receipt (Money to whom, Date, and Address of Delivery)	
TOTAL Postage and Fees	\$
Postmark or Date	30029488

PS Form 3800, June 1985

CONFIDENTIAL

DALE COUNTY INVESTING HOUSE
R. RAINIER V. TVA
PRODUCED
CASES 3/18/92

TO ARTICLE 16 COVER FIRST CLASS POSTAGE.
FEES FOR AIR MAIL SELECTED SPECIAL SERVICES. (see back)

Indicate the guaranteed rate in the right of the return address leaving
to be at a post office address whether or hand it to your retail carrier

Indicate the guaranteed rate in the right of the return address of
receipt, and mail the article.

Indicate the number and your name and address on a return
the front of the article by means of the guaranteed rate if other per-
Guarantee form of article RETURNABLE RECEIPT REQUIRED

Indicate, or to an authorized agent of the addressee, address
of the article.

Indicate the appropriate space on the front of this receipt. If return
to blocks in Item 1 of Form 3811.

Indicate inquiry

U.S. D.P.O. 1987-007-722

3/18/92

ENTER FOR SOME STIMULUS TO ASSIST YOU TO COVER YOUR TRAVEL EXPENSES.

- Anybody expects that in the near future there will be**

U.S. G.P.O. 1967-107-727

STOCK FUTURE SYMPOSIUM ARTICLE TO COVER FIRST CLASS POSTAGE.
ENCLOSED MAIL PER. AND CHARGES FOR ANY DELIVERED OFFICIAL SERVICE. (4)

THE NEW YORK PUBLIC LIBRARY
ASTOR LENOX TILDEN FOUNDATION
500 5TH AVENUE
NEW YORK 17, N.Y.

2. Save this receipt and present it if you make inquiry

443, Q.P.O. 1007-107-726