Subject: Occupational Safety and Health - Exposure to Airborne Asbestos Fibers - Request for Survey

SL SR 79-05-398

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AT&T

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PLAINTIFF'S EXHIBIT

SWB-294

to: Assistant Vice President - Support Services
Copies to Medical Directors and Safety Coordinators

from: Assistant Vice President - Support Services

description: Requests comprehensive survey to determine extent of sprayed-on asbestos in Bell System owned and leased facilities.

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Section 29 CFR 1910.1001 of standards issued by the Occupational Safety and Health Administration (OSHA) requires all employers to establish and maintain an effective program for protecting their employees against asbestos exposures which may be above acceptable levels. As a result of this standard, there is a need to provide guidance to the OTCs so that they may develop and implement the programs needed to assure compliance with the current OSHA Standards for asbestos.

Baseline environmental studies conducted by the Environmental Health and Safety Department of Bell Telephone Laboratories have shown that there are two categories of asbestos usage which may potentially result in employee exposures which may be above acceptable levels:

1. Motor vehicle maintenance operations on brakes and clutches.

2. Operations in areas where sprayed-on asbestos was used for fire-proofing and heat insulation.

Instructions contained in GL 77-07-024 and GL 78-08-045 establish procedures for protecting employees from asbestos exposures while performing maintenance operations on brakes and clutches in company-owned vehicles. However, at present there remains a need for guidance concerning employees in facilities (owned and leased) with sprayed-on asbestos.

In order to develop guidelines which are both meaningful and realistic, there is a need for basic information concerning the extent of sprayed-on asbestos in Bell System facilities. As a result, each OTC is requested to perform a comprehensive survey of all their facilities (owned and leased) to identify all buildings which appear to have sprayed-on asbestos. Although bulk sample tests are not requested at this time, the OTCs might choose to do some sampling for corroboration.

NOTICE

Not for use or disclosure outside the Bell System except under written agreement

This request supersedes a previous request for data (GL 77-04-188). The 1977 data was accumulated within a very short time frame, and the information on leased facilities was generally incomplete. However, each company should review this data to determine its completeness with respect to owned and leased facilities. This might simplify and expedite the present request for information.

A form is attached which must be completed for each owned and leased facility. Also attached is a transmittal sheet which requests the total number of owned and leased locations in that company.

Each OTC should establish and maintain an official record of all facilities (owned and leased), with and without sprayed-on asbestos, since OSHA may request this information some time in the future. The survey forms, one for every owned and leased facility, could serve as the OTC offical record.

For your information sprayed-on asbestos was used extensively in construction during the period from 1958 to 1972, after which it was banned by the Environmental Protection Agency. In addition it was employed primarily in low-cost light-weight construction. Within the Bell System this means it would, in general, not exist in equipment buildings since this type of construction is not employed for these facilities. However, asbestos was probably used in a number of administrative buildings, which may be company owned or leased. The likelihood is that it was used extensively in leased buildings built during this period, and these facilities presently comprise approximately 23% of all Bell System space. Thus, a comprehensive survey of leased facilities is essential.

THE SURVEY PACKAGE, WHICH INCLUDES A COMPLETED FORM FOR EACH BUILDING WITH SPRAYED-ON MATERIAL AND THE TRANSMITTAL SHEET WITH TABULATED RESULTS, SHOULD BE FORWARDED TO AT&T BY AUGUST 1, 1979.

Since the survey data will be used to design models for evaluating employee exposures to airborne asbestos during typical work procedures, a formal solution to asbestos compliance will not be available until 1980. However, interim guidelines will be issued in the near future for use where it is desirable to proceed prior to 1980.

Each OTC should identify a coordinator for the survey and he/she should contact the AT&T coordinate on this issue, N. J. DeCapua on 201-221-4984, as soon as possible.

S. R. Collis
Assistant Vice President
Support Services

ASBESTOS SURVEY

Company:

Survey Coordinator:

Owned Facilities

Total Number _____

Number with Sprayed-On Asbestos _____

Leased Facilities

Total Number _____

Number with Sprayed-On Asbestos _____

Return this form and copy of survey form for each facility with sprayed-on asbestos to:

N. J. DeCapua
AT&T
295 North Maple Avenue
Room 3336C1
Basking Ridge, NJ 07920

CONFIDENTIAL

ASBESTOS MATERIAL INVESTIGATION

(See instructions in accompanying letter SL-)

COMPANY: _____

BUILDING DATA SECTION--

BUILDING NAME: _____ BLDG. AGE: _____ (Years)

IDENT: NO./AREA CODE: _____ SPRAYED ON MAT'L: YES NO (Circle)

BUILDING ADDRESS: _____

TOT. NO. STORIES (Above grade): _____ SQ. FOOTAGE (Approx.) _____

PRIMARY FUNCTION(S): _____

NO. ASSIGNED EMPLOY: _____ TRANSIENT EMPLOY. DAILY (Approx.) _____

COMPANY OWNED: (or)* LEASED: YRS. REMAIN. ON LEASE: _____

IF LEASED: Entire Bldg. Telco _____

Partial Bldg. Telco _____

Define Telco Portion _____

*NOTE: Asbestos information only related to Telco portion of leased buildings.

ASBESTOS RELATED INFORMATION--

SPRAYED ON MATERIAL PRESENT YES NO (Circle)

If Yes:

Above Hung Ceil.	YES	NO
On Col./Beam/Gird.	YES	NO
Other (Explain)	YES	NO

_____

INSPECTED BY: _____ DATE INSP: _____

TELE. NO. _____

RETURN THIS FORM IMMEDIATELY TO: (OTC Survey Coordinator)

IF SUSPECTED ASBESTOS MATERIAL WAS PREVIOUSLY TESTED, PROVIDE FOLLOWING INFORMATION--

ASBESTOS CONFIRMED: YES NO DATE OF BULK TEST _____

TESTING COMPANY: _____ TELE. NO. _____

AIR TEST: YES NO DATE(S) OF AIR TEST _____

IF YES, RESULTS: _____

_____

TESTING COMPANY _____ TELE. NO. _____

INDICATE REMEDIAL ACTION TAKEN (If any): _____

_____

_____

SWBT 002350

MISC. REMARKS: