OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

1 ISSUANCE DATE	2 OSHA NUMBER	
05/17/78	*R5407-027*	
3 REGION	4 AREA	5 PAGE
06	*7070*	*1* OF *1*

TYPE OF VIOLATION(S)	CITATION NO.
Serious	*1*

Citation issued on 5-8-78 is Amended:

TO: ***Tyler Pipe Industries, Inc.***
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATIO UNLESS CONTESTED (See enclosed Booklet)

This Section M. Be Detached Before Posting

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
1. (Deleted and revised as follows, abatement date modified) *29 CFR 1910.132(a): Protective equipment was not used where it was necessary by reason of hazards encountered in a manner capable of causing injury or impairment in the function of any part of the body:* *Muller operator, North Plant, exposed to phenolic flake resin via* *a. Whole body skin contact through his clothing.* *b. Eye contact through safety glass by-pass.* *c. Hand contact through poor glove maintenance and/or work without gloves.*	*06/19/78*	

PLAINTIFF'S EXHIBIT
TPI-16

10 AREA DIRECTOR
ROBERT B. SIMMONS *Robert B. Simmons*

NO CHANGE IN PENALTY

TOTAL PENAL FOR THIS CITATION
Make check or Mc Order Payable "DOL-OSHA Indicate OSHA on Remittan

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EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION – The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

CITATION AND NOTIFICATION OF PENALTY

OSHA 2 REV 5/76

This form is provided for the assistance of any complainant and is not intended to constitute the exclusive means by which a complaint may be registered with the U.S. Department of Labor.

Form Approved
O.M.B. No. 044R1449

§8(f)(1) of the Williams-Steiger Occupational Safety and Health Act, 29 U.S.C. 651, provides as follows: Any employees or representative of employees who believe that a violation of a safety or health standard exists that threatens physical harm, or that an imminent danger exists, may request an inspection by giving notice to the Secretary or his authorized representative of such violation or danger. Any such notice shall be reduced to writing, shall set forth with reasonable particularity the grounds for the notice, and shall be signed by the employees or representative of employees, and a copy shall be provided the employer or his agent no later than at the time of inspection, except that, upon request of the person giving such notice, his name and the names of individual employees referred to therein shall not appear in such copy or on any record published, released, or made available pursuant to subsection (g) of this section. If upon receipt of such notification the Secretary determines there are reasonable grounds to believe that such violation or danger exists, he shall make a special inspection in accordance with the provisions of this section as soon as practicable, to determine if such violation or danger exists. If the Secretary determines there are no reasonable grounds to believe that a violation or danger exists he shall notify the employees or representative of the employees in writing of such determination.

NOTE: Section 11 (c) of the Act provides explicit protection for employees exercising their rights, including making safety and health complaints

206

For Official Use Only		
Area	Date Received	Time
7070	5-31-78	12:30 ø
Region	Received By	Formal ☐
6	Jack Fontaine VIA Telecon	Non Formal ☐

The undersigned *(check one)*

☒ Employee ☐ Representative of Employees ☐ Other *(specify)* _____

believes that a violation at the following place of employment of an occupational safety or health standard exists which is a job safety or health hazard.

Employer's Name
, ler Pipe Industries

Employer's Address *(Street)*
Hwy 69 North

(City)
Tyler

(State)
Texas

(Zip Code)

Telephone

1. Kind of business
Cast Iron pipe manufacturing

2. Specify the particular building or worksite where the alleged violation is located, including address.
North Plant-Sand line spun pipe, Pipe

Machine 456

3. Specify the name and phone number of employer's agent(s) in charge.

4. Describe briefly the hazard which exists there including the approximate number of employees exposed to or threatened by such hazard.
Silica Dust

Occupational Safety and Health Administration
Complaint

U.S. Department of Labor

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Form Approved
O.M.B. No. 044R1449

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NOTE: Section 11 (c) of the Act provides explicit protection for employees exercising their rights, including making safety and health complaints.

IH Classification: O

Log 234

Jack M. Mathews Ind. Hygiene
Tyler OSHA Office

For Official Use Only

Area	Date Received	Time
7070	8-14-78	3:40 pm
Region	Received By	
06	J. Fontaine walk-in	Formal ☒ Non Formal ☐

The undersigned *(check one)*

☒ Employee ☐ Representative of Employees ☐ Other *(specify)* _____

believes that a violation at the following place of employment of an occupational safety or health standard exists which is a job safety or health hazard

Employer's Name
Tyler Pipe Co.

Employer's Address *(Street)* Tyler *(City)*

(State) TX *(Zip Code)* Telephone

1. Kind of business
Pipe

2. Specify the particular building or worksite where the alleged violation is located, including address
North plant, cupola, main gang-way

3. Specify the name and phone number of employer's agent(s) in charge
Billy Palmer, N. Plant Production

4. Describe briefly the hazard which exists there including the approximate number of employees exposed to or threatened by such hazard.
Too much fumes coming inside work area. 50 workers.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

1 ISSUANCE DATE	2 OSHA NUMBER	
05/01/78	R5407-027	
3 REGION	4 AREA	5 PAGE
06	7070	3 OF 3

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATI[illegible]

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

INSPECTION DATE: 11/15/77

ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED; DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
studies and their results; c) outline the ordering of equipment and materials and completion of the design phase; and d) outline dates for the anticipated implementation of the plan.		
STEP 3 - Feasible engineering controls and/or administrative controls shall be determined.	08/30/78	
STEP 4 - Abatement shall be completed by implementation of feasible engineering and/or administrative controls and its effectiveness at achieving compliance verified. 90-day progress letters are requested during the abatement period.	05/01/79	

AREA DIRECTOR
ROBERT B. SIMMONS

$2,000.
TOTAL PENA
FOR THIS
CITATION
Make check or M
Order Payable
"DOL-OSH
Indicate OSHA
on Remittan

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CITATION AND NOTIFICATION OF PENALTY
DUPLICATE

OSHA-2 REV. 5/76

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

1 ISSUANCE DATE	2 OSHA NUMBER	
05/17/78	R5407-027	
3 REGION	4 AREA	5 PAGE
06	7070	1 OF 2

Tyler Area Office
208 Federal Building
Tyler, TX 75702

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	*2*

Citation issued 5-8-78 is Amended:

TO: *Tyler Pipe Industries, Inc.*
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

INSPECTION DATE:
11/15/78
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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6 ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	9 DATE BY WHICH VIOLATION MUST BE CORRECTED	10 PENALTY
1A. (Deleted and revised as follows) *29 CFR 1910.1000(c): Employee(s) were exposed to material(s) in excess of the 8-hour time weighted average limit(s) listed for that material(s) in table Z-3 of subpart Z of 29CFR Part 1910:* *Respirable dust containing silica located in the following areas of the North Plant:* *a. Hub core machine operators* *b. Core machine operators (adjacent to wheel area)* *c. Muller operator* *1B(1) (Deleted and revised as follows)* *29 CFR 1910.134(a)(2): Respirators were not provided by the employer when such equipment was necessary to protect the health of the employee(s):* *In the North Plant for operators of hub cor and cor machines who are exposed to respirable dust containing silica.* *1B(2) (Item 9 deleted and revised as follows)* *29 CFR 1910.134(b)(10): Persons were assigned to tasks requiring use of respirators and it had not been determined that they were physically able to perform the work and use the equipment, and the respirator user's medical status was not reviewed periodically (for instance annually):* *Muller operator in the North Plant who is overexposed to respirable dust containing silica.* *1C (Deleted and revised as follows, abatement dates modified)* *29 CFR 1910.100(e): Feasible administrative or engineering controls were not determined and implemented to reduce employee exposure(s):* *Respirable dust containing silica for operators of the*		

11 AREA DIRECTOR
ROBERT B. SIMMONS

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TOTAL PENAL FOR THIS CITATION
Makecheckor Mo Order Payable "DOL-OSHA Indicate OSHA on Remittanc

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

1 ISSUANCE DATE	2 OSHA NUMBER	
05/17/78	*R5407+027*	
3 REGION	4 AREA	5 PAGE
06	*7070*	*2* OF *2*

6 TYPE OF VIOLATION(S)	7 CITATION NO.
REPEAT	*2*

Citation issued 5-8-78 is amended:

INSPECTION DATE:
11/15/78

INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: *Tyler Pipe Industries, Inc.*
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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8 ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	9 DATE BY WHICH VIOLATION MUST BE CORRECTED	10 PENALTY
following machines or lines of machines in the North Plant:		
a. Hub core		
b. Core machine		
c. Muller		
STEP 1	*06/19/78*	
STEP 2	*7/31/78*	
STEP 3	*9/29/78*	

11 AREA DIRECTOR
ROBERT B. SIMMONS *Robert B. Simmons*

NO CHANGE IN PENALTY

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U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION
ROOM 208, FEDERAL BUILDING
211 W. FERGUSON STREET
(214) 595-2438 Tyler, Texas 75701

May 17, 1978

Mr. J. Warner, President
Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Dear Mr. Warner:

The enclosed Amended Citations and Notification of Proposed Penalty are being issued in order to change the wording of certain items in Citations 1 and 2 and also to amend the abatement dates of certain items in Citations 1 and 2. Please note that there is no change in the proposed penalties.

You are required to post the Amended Citation and Notification of Proposed penalty in the same manner as the original citation, and you will have a period of 15 working days from the receipt of the enclosed Amended Citation and Notification of Proposed Penalty to contest the violation, the proposed penalty or both.

If you have any questions, please feel free to contact this office.

Sincerely,

ROBERT B. SIMMONS
Area Director

Enclosure

U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

1 ISSUANCE DATE	2 OSHA NUMBER	
05/17/78	*R5407-027*	
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TYPE OF VIOLATION(S)	CITATION NO.
Serious	*1*

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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Tyler, TX 75710

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AREA DIRECTOR
ROBERT B. SIMMONS

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TOTAL PENA FOR THIS CITATION
Make check or M Order Payable "DOL-OSHA Indicate OSHA on Remittan

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OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER	
05/17/78	*R5407-027*	
REGION	AREA	PAGE
06	*7070*	*1* OF *2*

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	*2*

Citation issued 5-8-78 is Amended:

TO: *Tyler Pipe Industries, Inc.*
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

INSPECTION DATE:
11/15/78
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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AREA DIRECTOR
ROBERT B. SIMMONS

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TOTAL PENA FOR THIS CITATION

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CITATION and NOTIFICATION OF PENALTY

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TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	*2*

Citation issued 5-8-78 is amended:

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P. O. Box 2027
Tyler, TX 75710

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INSPECTION DATE:
11/15/78

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ITEM NUMBER / STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	7 DATE BY WHICH VIOLATION MUST BE CORRECTED	8 PENALTY
following machines or lines of machines in the North Plant:		
a. Hub core		
b. Core machine		
c. Muller		
STEP 1	*06/19/78*	
STEP 2	*7/31/78*	
STEP 3	*9/29/78*	

AREA DIRECTOR
ROBERT B. SIMMONS [signature]

NO CHANGE IN PENALTY

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OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

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1 ISSUANCE DATE	2 OSHA NUMBER	
05/08/78	R5407-027	
3 REGION	4 AREA	5 PAGE
06	7070	1 OF 3

6 TYPE OF VIOLATION(S)	7 CITATION NO.
REPEAT	2

8 INSPECTION DATE:
11/15/78
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATI UNLESS CONTESTED (See enclosed Booklet)

This Section M Be Detached Before Postin

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

9 ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	10 DATE BY WHICH VIOLATION MUST BE CORRECTED	11 PENALTY
The violations 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.		
1A. 29 CFR 1910.1000(c): Employee(s) were exposed to material(s) in excess of the 8-hour time weighted average limit(s) listed for that material(s) in table Z-3 of subpart Z of 29 CFR part 1910: Quartz (silica) located in the following areas of the North Plant: a. Hub core machine operators b. Core machine operators (adjacent to wheel area) c. Muller operator	See Below	$2,000.(
1B(1) 29 CFR 1910.134(a)(2): Respirators were not provided by the employer when such equipment was necessary to protect the health of the employee(s): In the North Plant for operators of hub core and core machines who are exposed to silica dust.		
1B(2). 29 CFR 1910.134(a)(2): The employer did not establish and maintain a respiratory protection program which included the requirements outlined in paragraph (b) of this section: 29 CFR 1910.134(b)(1): Written standard operating procedures governing the selection and use of respirators were not established: 29 CFR 1910.134(b)(3): The users of respirators were not instructed and trained in the proper use of respirators and their limitations: 29 CFR 1910.134(b)(5): Respirators were not regularly cleaned and disinfected: 29 CFR 1910.134(b)(5): Respirators issued for the exclusive use of one worker were not cleaned after each day's use, or more often		

12 AREA DIRECTOR
ROBERT B. SIMMONS

13

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.

TOTAL PENA FOR THIS CITATIO Make check or M Order Payable "DOL-OSH Indicate OSHA on Remitta

EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION – The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

1 ISSUANCE DATE	2 OSHA NUMBER	
05/03/78	R5407-027	
3 REGION	4 AREA	5 PAGE
06	7070	2 OF 3

6 TYPE OF VIOLATION(S)	7 CITATION NO.
REPEAT	2

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industires, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

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ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED; DESCRIPTION	8 DATE BY WHICH VIOLATION MUST BE CORRECTED	10 PENALTY
if necessary:		
29 CFR 1910.134(b)(6): Respirators were not stored in a convenient, clean and sanitary location:		
29 CFR 1910.134(b)(7): Respirators used routinely were not inspected during cleaning and worn or deteriorated parts replaced:		
29 CFR 1910.134(b)(9): There were no regular inspections and evaluations to determine the continued effectiveness of the respirator program.		
29 CFR 1910.134(b)(10): Persons were assigned to tasks requiring use of respirators and it had not been determined that they were physically able to perform the work and use the equipment, and the respirator user's medical status was not reviewed periodically (for instance annually):		
Muller operator in the North plant who is overexposed to Quartz (silica).		
1C. 29 CFR 1910.1000(e): Feasible administrative or engineering controls were not determined and implemented to reduce employee exposure(s):		
Quartz (silica) for operators of the following machines or lines of machines in the North Plant:		
a. Hub core		
b. Core machine		
c. Muller		
STEP 1 - Effective respiratory protection shall be provided and used by employee(s) as an interim protective measure.	Immediately	
STEP 2 - A written detailed plan of abatement leading to the complete abatement of this item shall be submitted to the Area Director. Such a plan shall: a) employ the use of qualified engineering personnel; b) include detailed engineering	06/30/78	

9 AREA DIRECTOR
ROBERT B. SIMMONS

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.

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TOTAL PENA FOR THI CITATIO Makecheckor M Order Payable "DOL OSH Indicate OSHA on Remitta

EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION - The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

CITATION AND NOTIFICATION OF PENALTY
DUPLICATE

OSHA 2 REV. 5/76

5. (a) To your knowledge is this condition being considered by any other Government agency, or has it been considered by any other Government agency?

Yes ☐ No ☒

5. (b) If yes, and you know, which Government agency?

6. Has this condition been brought to the attention of the employer?

Yes ☒ No ☐ Don't know ☐

7. Please indicate your desire

☒ I *do not* want my name revealed to the employer. ☐ My name *may be* revealed to the employer

NOTE: It is unlawful to make any false statement, representation or certification in any document filed pursuant to the Occupational Safety and Health Act of 1970. Violations can be punished by a fine of not more than $10,000, or by imprisonment of not more than six months, or by both. (Section 17(g))

Signature _____ Date 8-14-78

Typed or Printed Name _____

Address *(Street)* _____ *(City)* _____

(State) _____ *(Zip Code)* _____ Telephone _____

If you are an authorized representative of employees affected by this complaint, please state the name of your organization and your title _____

GPO 923-242

U.S. Department of Labor

Occupational Safety and Health Administration

Reply to the Attention of:

Federal Building
Room 208
211 W. Ferguson
Tyler, TX 75702
214 595-2438

June 16, 1981

Mr. J. Warner, President
Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Dear Mr. Warner:

This is in reference to our Citation R5407-027, issued on May 8, 1978.

The final abatement date for the implementation of feasible engineering controls for dust is July 31, 1981.

Do you anticipate meeting this abatement date or will you request an extension of time for abatement? If you request an extension (Petition for Modification of Abatement), the following information is required by our regulations (29 CFR 1903.14a):

1. Steps you have taken so far in an effort to achieve compliance, and dates of those steps;

2. Additional time period you need to comply;

3. Why you need additional time;

4. Interim steps you are taking to safeguard your employees against the cited hazard during abatement period;

5. A statement that the petition has been posted, and, if appropriate, served on an authorized representative of affected employees. The petition must remain posted for ten days, during which time your employees may file an objection.

Please let us know as soon as possible the status of your abatement program.

Sincerely,

C. R. HOLDER
Area Director

Tyler, Texas 75710, Tel 214/882-5511

Tyler Pipe

Subsidiary of
Tyler Corporation

June 18, 1981

U. S. Department of Labor

Occupational Safety & Health Administration

Room 208 Federal Building

211 West Ferguson Street

Tyler, Texas 75702

Attention: Mr. C. R. Holder/Area Director

Dear Sir:

Regarding your letter dated June 16, 1981, we are submitting the following information as a Petition for Modification of Abatement.

1. The following projects and their completion dates are steps taken so far in an effort to achieve compliance.
   a) Hub Core water-cooled blowheads - projects completed June 1, 1979.
   b) Hub Core area vent doors - project completed June 1, 1979.
   c) Ventilation and collection of dust generated at both Hub Core saws - project completed December 1, 1979. (These saws have since been eliminated).
   d) Ventilation and collection of mullors additives barrels - project completed December 1, 1979.
   e) Fittings Core Machines #1 and #2 enclosures and ventilation - project completed January 1, 1980.

f) Fittings Core Machines #3 and #4 enclosures and ventilation - project completed March 1, 1980.

g) Fittings Core Machines #5 and #6 enclosures and ventilation - project completed May 1, 1980.

h) Fittings Core Machines #7 and #8 enclosures and ventilation - project completed July 1, 1980.

i) Fittings Core Machines #9 and #10 enclosures and ventilation - project completed September 1, 1980.

j) Fittings Core Machines #11 and #12 enclosures and ventilation - project completed November 1, 1980.

k) Cold Box Hub Core Machine #1 - project completed December 1, 1980.

l) Fittings Core Machines #13 and #14 enclosures and ventilation - project completed January 1, 1981.

m) Cold Box Hub Core Machine #2 - project completed January 1, 1981.

n) Cold Box Hub Core Machine #3 - project completed March 1, 1981.

o) Fittings Core Machine #15 (final machine) enclosure and ventilation - project completed March 1, 1981.

2. At this time we would like to apply for a twelve month extension to our abatement plan.

3. The need for an extension is due to experimentation with various cold box core producing materials and the associated equipment requirements. In the origin of the existing abatement plan, we were using only one type of material for cold box core making. Since that time consideration has been given to the advantages

and disadvantages of using this material. These considerations include which material is best suited for use from an environmental standpoint and also from a core production standpoint. Once the proper material has been selected, machine and associated equipment needs can be established. Then machine fabrication and purchasing can be initiated. We respectfully request your consideration of granting this request for an abatement extension until July 31, 1982.

4. During the existing abatement period we have required the use of respirators in this area. This program will be continued during the requested extension.

5. A copy of this petition has been posted on the company premises and will remain posted for a minimum of ten days.

If further information is needed regarding the above, please advise.

Cordially,

Ron Howell

Ron Howell

Design Engineering Manager

RH:dv

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE	OSHA NUMBER
7/10	R5407-027
REGION	AREA	PAGE
6	7070	1 OF 1

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

Citation issued 5/8/78 is Amended

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO:
Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATION UNLESS CONTESTED (See enclosed Booklet)

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ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
1C (abatement date modification) Step 4	7/31/82	



AREA DIRECTOR
C. P. HOLDER

NO CHANGE IN PENALTY

TOTAL PENALTY FOR THIS CITATION

Make check or Money Order Payable To "DOL-OSHA" Indicate OSHA No. on Remittance

NOTICE TO EMPLOYEES — The law gives an employee or his representative the opportunity to object to any abatement date for a violation if he believes the date to be unreasonable. Such 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.

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EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION — The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification

July 17, 1978

TO: ALL EMPLOYEES

A request has been filed with the Occupational Safety and Health Administration for modification of abatement date. This request is for an extension of 120 days for Step 2 of the abatement schedule. An extension is needed to complete the research and development to determine the feasibility of proposed changes.

A copy of the request is available for examination in the Safety Department during normal working hours.

Charles Kuenemann
Safety & Security Manager

5. (a) To your knowledge is this condition being considered by any other Government agency, or has it been considered by any other Government agency?

Yes ☐ No ☒

5. (b) If yes, and you know, which Government agency?

6. Has this condition been brought to the attention of the employer?

Yes ☒ No ☐ Don't know ☐

7. Please indicate your desire:

☒ I *do not* want my name revealed to the employer. ☐ My name *may be* revealed to the employer.

NOTE: **It is unlawful to make any false statement, representation or certification in any document filed pursuant to the Occupational Safety and Health Act of 1970. Violations can be punished by a fine of not more than $10,000, or by imprisonment of not more than six months, or by both. (Section 17(g))**

Signature _____ Date 8-14-78

Typed or Printed Name _____

Address *(Street)* _____ *(City)* _____

(State) _____ *(Zip Code)* _____ Telephone _____

If you are an authorized representative of employees affected by this complaint, please state the name of your organization and your title

GPO 921-743

Occupational Safety and Health Administration
Complaint

U.S. Department o. .abor

...s form is provided for the assistance of any complainant and is not intended ...onstitute the exclusive means by which a complaint may be registered ...n the U.S. Department of Labor.

Form Approved
O.M.B. No 044R1449

Sec. 8(f) (1) of the Williams-Steiger Occupational Safety and Health Act, 29 U.S.C. 651, provides as follows: Any employees or representative of employees who believe that a violation of a safety or health standard exists that threatens physical harm, or that an imminent danger exists, may request an inspection by giving notice to the Secretary or his authorized representative of such violation or danger. Any such notice shall be reduced to writing, shall set forth with reasonable particularity the grounds for the notice, and shall be signed by the employees or representative of employees, and a copy shall be provided the employer or his agent no later than at the time of inspection, except that, upon request of the person giving such notice, his name and the names of individual employees referred to therein shall not appear in such copy or on any record published, released, or made available pursuant to subsection (g) of this section. If upon receipt of such notification the Secretary determines there are reasonable grounds to believe that such violation or danger exists, he shall make a special inspection in accordance with the provisions of this section as soon as practicable, to determine if such violation or danger exists. If the Secretary determines there are no reasonable grounds to believe that a violation or danger exists he shall notify the employees or representative of the employees in writing of such determination.

NOTE: Section 11 (c) of the Act provides explicit protection for employees exercising their rights, including making safety and health complaints.

III Classification: O

Log 234

Jack M. Mathews Ind. Hygiene
Tyler OSHA Office

For Official Use Only

Area	Date Received	Time
7070	8-14-78	3:40 pm
Region	Received By	Formal ☒
06	J. Fontaine walk-in	Non Formal ☐

The undersigned *(check one)*

☐ Employee ☐ Representative of Employees ☐ Other *(specify)* _____

believes that a violation at the following place of employment of an occupational safety or health standard exists which is a job safety or health hazard.

Employer's Name
Tyler Pipe Co.

Employer's Address *(Street)* Tyler *(City)*

(State) *(Zip Code)* Telephone
TX

1. Kind of business
Pipe

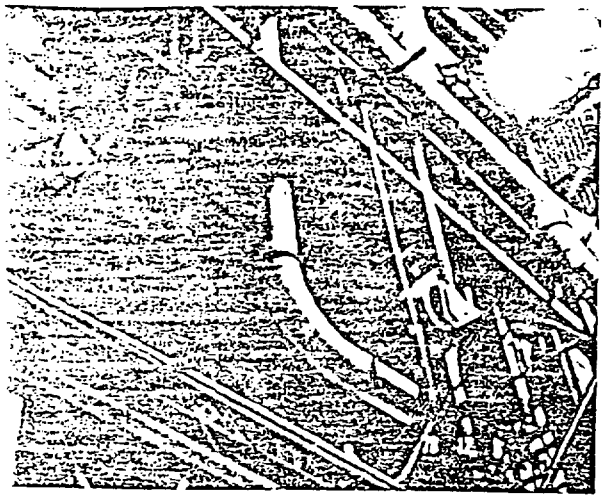
2. Specify the particular building or worksite where the alleged violation is located, including address.
North plant, cupola, main gang-way

3. Specify the name and phone number of employer's agent(s) in charge.
Billy Palmer, N. Plant Production

4. Describe briefly the hazard which exists there including the approximate number of employees exposed to or threatened by such hazard.
Too much fumes coming inside work area. 50 workers.

Photo Mounting Worksheet

CSHO No.	Report No.	Page
F5395	32	1 of 4



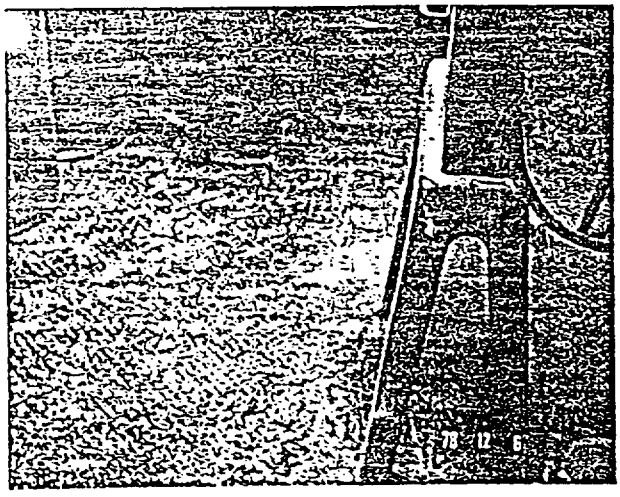
1. Photo ID No. # 1 | 2. Date/Time 12-6-78

3. Citation No — | 4. Item No — | 5. Instance No. —

6. Location: *(Photo and Photographer)*
Muller operator platform North Plant

7. Description:
Roof shield over Muller operator
(See Item #1 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



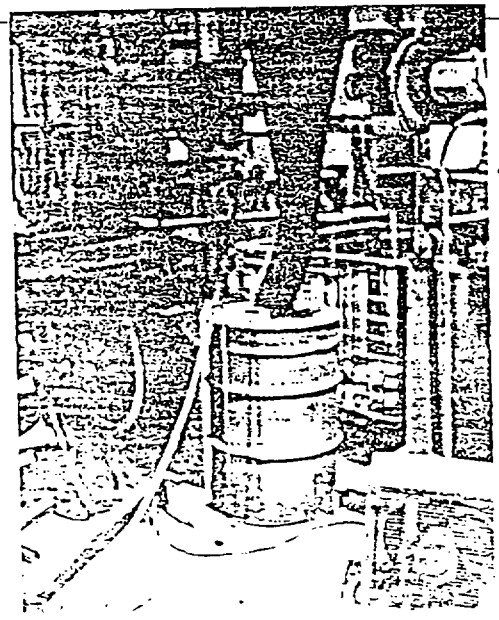
1. Photo ID No. # 2 | 2. Date/Time 12-6-78

3. Citation No — | 4. Item No. — | 5. Instance No. —

6. Location. *(Photo and Photographer)*
Solid deck plate under Muller operator platform - North Plant

7. Description.
(See Item #2 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No. # 5 | 2. Date/Time 12-6-78

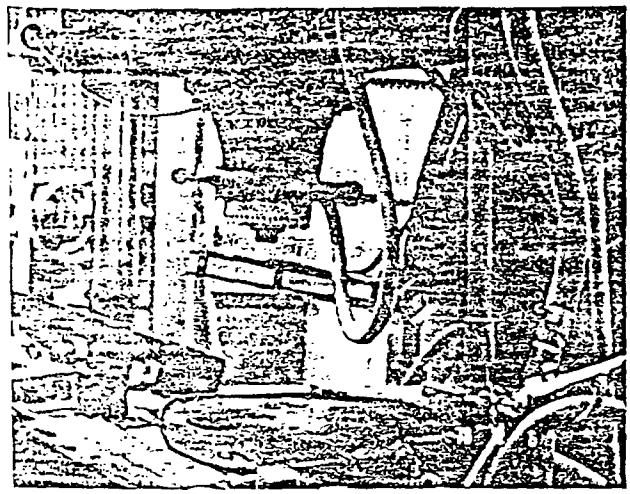
3. Citation No. — | 4. Item No. — | 5. Instance No. —

6. Location: *(Photo and Photographer)*
Hub Core Machine Area - North Plant

7. Description:
Exhaust valves dust collection system

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED

Photo Mounting Worksheet



CSHO No.	Report No.	Page
F5345	32	2 of 4

1. Photo ID No.	2. Date/Time
#3	12-6-78

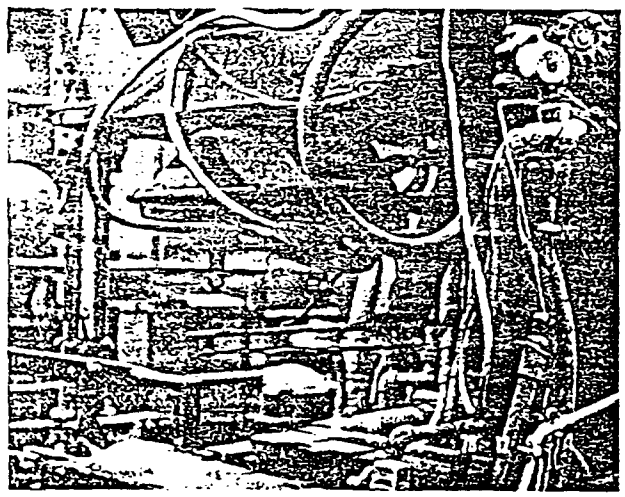
3. Citation No.	4. Item No.	5. Instance No.
—	—	—

6. Location. (Photo and Photographer)
Hub Core Machine Area - North Plant

7. Description.
Air-cooled blowhead on hub core machine

(See Item 7 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No.	2. Date/Time
#4	12-6-78

3. Citation No.	4. Item No.	5. Instance No.
—	—	—

6. Location. (Photo and Photographer)
Hub Core Machine Area - North Plant

7. Description
Water-cooled blowhead on hub core machine

(See Item 7 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No.	2. Date/Time
#12	12-6-78

3. Citation No.	4. Item No.	5. Instance No.
—	—	—

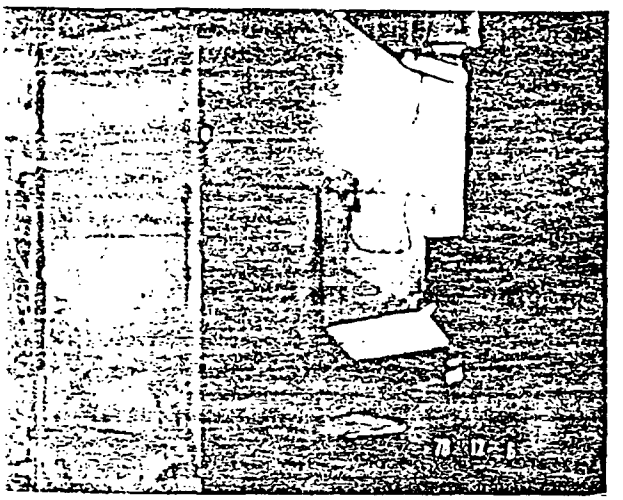
6. Location. (Photo and Photographer)
Fittings Core Machine Area - North Plant

7. Description:
Fittings Core Machine with no ventilation enclosure

(See Item #8 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED

Photo Mounting Worksheet



CSHO No.	Report No.	Page
F5395	32	3 of 4

1. Photo ID No.	2. Date/Time
#11	12-6-78

3. Citation No.	4. Item No.	5. Instance No.
—	—	—

6. Location: (Photo and Photographer)

Fittings Core Machine Area - North Plant

7. Description:

Ventilation enclosure for fittings core machine.

(See Item #8 on Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No.	2. Date/Time
#10	12-6-78

3. Citation No.	4. Item No.	5. Instance No.
—	—	—

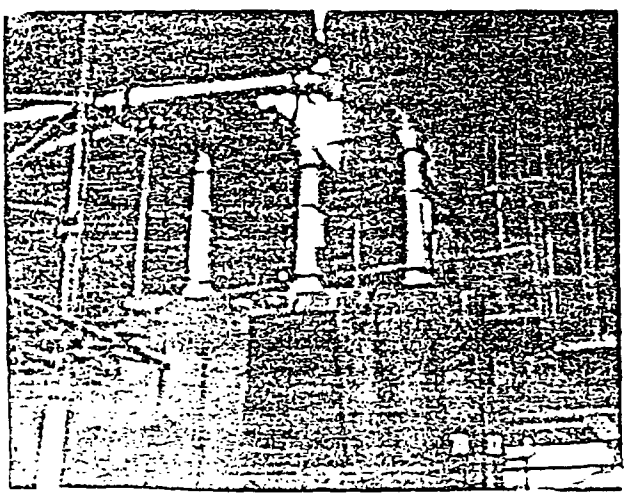
6. Location: (Photo and Photographer)

Same as above

7. Description:

Same as above

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No.	2. Date/Time
#9	12-6-78

3. Citation No.	4. Item No.	5. Instance No.
—	—	—

6. Location: (Photo and Photographer)

Scrap shell core sand reclamation hopper - North Plant

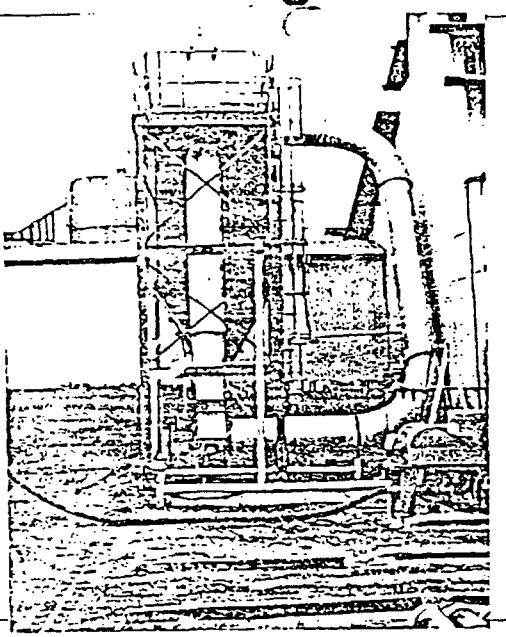
7. Description:

Dustwork & enclosure

(See Item #12 on Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED

Photo Mounting Worksheet



CSHO No.	Report No.	Page
F5395	32	1 of 4

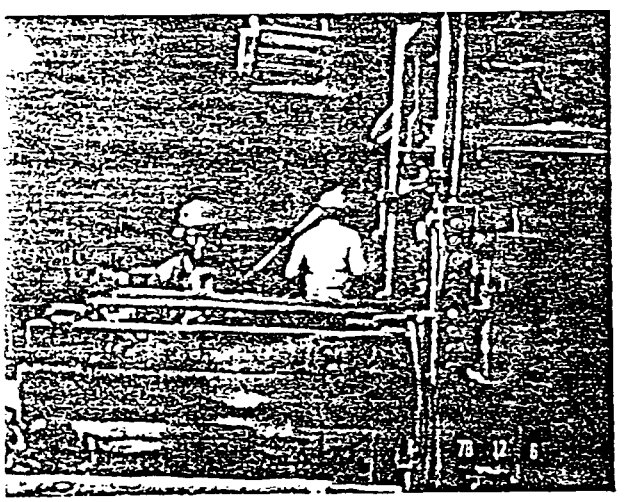
1. Photo ID No. #1 | 2. Date/Time 12-6-78

3. Citation No. — | 4. Item No. — | 5. Instance No —

6. Location (Photo and Photographer)
Outside North Plant

7. Description:
Baghouse collection for controlling silica dust and dust from grinding dust.
(See Items 9 & 10 of Abatement Plan)

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



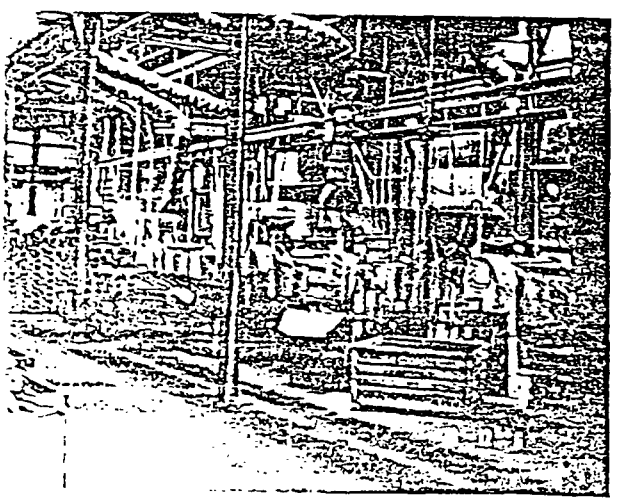
1. Photo ID No. #6 | 2. Date/Time 12-6-78

3. Citation No. — | 4. Item No. — | 5. Instance No. —

6. Location: (Photo and Photographer)
Exxune machines - North Plant

7. Description:
Operators wearing dust respirators

8. ☐ CONFIDENTIAL MATERIALS | CONTINUED



1. Photo ID No. #2 | 2. Date/Time 12-6-78

3. Citation No. — | 4. Item No. — | 5. Instance No. —

6. Location: (Photo and Photographer)
Shell Core Area - North Plant

7. Description:
Note non-coated at each location

8 ☐ CONFIDENTIAL MATERIALS | CONTINUED

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE NO.	OSHA NUMBER
1-16	RS407-027
REGION	AREA	PAGE
06	7070	1 OF 1

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

Citation issued 5-8-78 is Amended

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

TO: Tyler Pipe Industries, Inc.
P. O. Box 2027.
Tyler, TX 75710

Attn: J. Warner, President

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED
1C (Abatement date modification)	
STEP 4	7-31-81

AREA DIRECTOR
C. R. HOLDER

NO CHANGE IN PENALTY

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F53.5-32
Tyler Pipe

J4039

READ THIS NOTICE: This processing order constitutes an agreement by you that any film or print damaged or lost will be replaced with unexposed film or processing. Except for such replacement, handling of film & prints is without warranty or liability for negligence or other fault.

TOP

Taylor Pipe	Picture No
No 9 & 10	1
Shell Core Room	2
#7 Hub Core Machine (Air Cooled)	3 &
" (H_2O cooled)	4
#6 Exhaust Valve Dust Collector	5
Isocure Machine Operators Showing Respirator wage	6
#1 Rod Shield	7
#2 Solid Decking	8
#12	9
#8 (After)	10 & 11
(Before)	12

Citation posted in Area of Violation

TOP

Continuously sweep w/2 sweepers inside North Plant

Vacuum ≅ once per shift.

Company normally takes dust samples about once per year.

Have computer program that prints out employee exposure. (copy given to T.H.)

[illegible] DUST REPORT

TEST DATE : 11 10 75
REFERENCE NUMBER :

[illegible] : THOMAS WHITEHEAD SOURCE :
[illegible] OF SAMPLING APPARATUS : [illegible] CYCLONE ASSEMBLY, FIELD CASSETTE FILTER UNIT.

[illegible] DATA ...

STATION OPERATOR : ROBERT MOORE, JR. PRODUCT PRODUCED : 3' X 5' CH AND DH PIPE.
[illegible]IPTION OF WORK : HOLDING LADLE OPERATOR.
[illegible]ER OF MANCOOLERS AND / OR FANS AT WORKSTATION : 2 TEMPERATURES - DEGREES FAHRENHEIT ...
[illegible]ER OF MANCOOLERS AND/OR FANS IN USE DURING TEST : 2 (wet bulb) : 0 (dry bulb) : 0
[illegible] IN CHARGE : TOMMY SIDES.
[illegible] : OPERATOR IS NOT WEARING A RESPIRATOR. OTHER SAFETY EQUIPMENT IS IN USE, HOWEVER. WET AND DRY TEMPERATURES WERE NOT TAKE [illegible] THIS TEST.

[illegible] DATA ...

[illegible]T TIME : 5:00 AM STOP TIME : 10:29 AM REASON : LUNCH
[illegible]T TIME : 11:00 AM STOP TIME : 12:45 PM REASON : END OF TEST

[illegible]ARKS : AT 6:30 AM AND 8:45 AM MOORE WENT TO BREAK FOR 10 MIN. AND 30 MIN. RESPECTIVELY. SAMPLER WAS LEFT RUNNING ON BOTH OCCAS[illegible]

[illegible] RESULTS ...

[illegible] SAMPLE TIME (minutes) : 434 SAMPLING RATE (liters/minute) : 2.0
[illegible]ULATED SAMPLE VOLUME - E (liters) : 868.00 (cubic meters) : 0.8679
[illegible] FILTER WEIGHT (milligrams) : 52.51 FILTER NUMBER : 76113
[illegible] FILTER WEIGHT (milligrams) : 53.49

[illegible]TER GAIN (milligrams) : 0.98 : RESPIRABLE DUST CONCENTRATION (milligrams/cubic meter) : 1.13 :

[illegible] SILICA DETERMINATION ...

[illegible]LYTICAL METHOD EMPLOYED : TLV (milligrams/cubic meter) = 10 (milligrams/cubic meter) / (% free silica + 2)
(X) X-RAY DIFFRACTION
( ) WET CHEMISTRY

[illegible] SILICA CONTENT (milligrams) : 0.01
: [illegible] CONCENTRATION [illegible] : [illegible]
: ACTUAL CONCENTRATION (milligrams/cubic meter) : [illegible]

[illegible]ENT FREE SILICA : 1.53

[illegible]SHOLD LIMIT VALUE (TLV) : 2.83

[illegible] REMARKS : NONE

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER
08/07	R5407-027
REGION	AREA / PAGE
06	7070 / 1 OF 1

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

Citation issued 5-17-78 is Amended

INSPECTION DATE:
11/15/77

INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATI UNLESS CONTESTED (See enclosed Booklet)

This Section M Be Detached Before Postin

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ITEM NUMBER / STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED:	DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
1C Step 2	(Abatement date modification)	12/01/78	

AREA DIRECTOR
ROBERT B. SIMMONS

NO CHANGE IN PENALTY

TOTAL PENA FOR THIS CITATION

(Make check or M Order Payable "DOL OSH. Indicate OSH- on Remitta

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.

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EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION – The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

PS Form 3811, Apr. 1977 RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER Complete items 1, 2 and 3.
Add your address in the "RETURN TO" space on reverse.

1 The following service is requested (check one).
- ☒ Show to whom and date delivered ____¢
- ☐ Show to whom, date, and address of delivery ____¢
- ☐ RESTRICTED DELIVERY
  Show to whom and date delivered ____¢
- ☐ RESTRICTED DELIVERY
  Show to whom, date, and address of delivery $____
  (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Tyler Pipe Ind
P O Box 2027
Tyler, TX 75710

3 ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO	INSURED NO.
	146964	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent

DATE OF DELIVERY 8/8/78 POSTMARK

5. ADDRESS (Complete only if requested)
TYLER, TX

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO 1977—O—249-395

R5407-027 (amend)

No. 146964

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO
Tyler Pipe Ind

STREET AND NO.
P O Box 2027

P.O. STATE AND ZIP CODE
Tyler, TX 75710

POSTAGE		$
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE	¢
OPTIONAL SERVICES	SPECIAL DELIVERY	¢
	RESTRICTED DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM AND DATE DELIVERED	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	¢
TOTAL POSTAGE AND FEES		$

POSTMARK OR DATE
8-7-78

R5407-027

PS Form 3800, Apr. 1976

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE NO.	OSHA NUMBER
05/24	RS407-027
REGION	AREA	PAGE
06	7070	1 OF 1

TYPE OF VIOLATION(S)	CITATION NO.
SERIOUS	1

Citation issued on 5-8-78 is amended:

INSPECTION DATE:
11/15/77

INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICAT UNLESS CONTESTEI (See enclosec Booklet)

This Section Be Detached Before Postir

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALT
Serious citation issued on 5-8-78 is amended to Other.		
1		

AREA DIRECTOR
ROBERT B. SIMMONS

NEW TOTAL — 0

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 employer of this citation and penalty.

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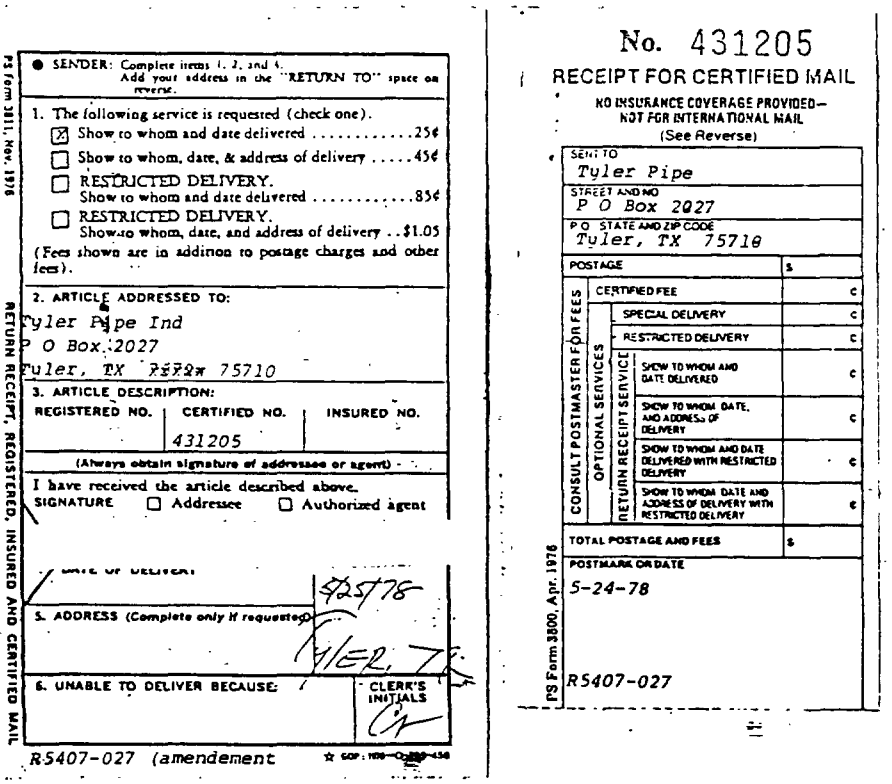
EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION — The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

TOTAL PENA FOR THIS CITATION
Make check or M Order Payable "DOL-OSHA Indicate OSHA on Remittan



PS Form 3811, Nov. 1976

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 4.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [X] Show to whom and date delivered ..... 25¢
- [ ] Show to whom, date, & address of delivery ..... 45¢
- [ ] RESTRICTED DELIVERY.
Show to whom and date delivered ..... 85¢
- [ ] RESTRICTED DELIVERY.
Show to whom, date, and address of delivery .. $1.05

(Fees shown are in addition to postage charges and other fees).

2. ARTICLE ADDRESSED TO:
Tyler Pipe Ind
P O Box 2027
Tyler, TX 75710

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	431205	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent

DATE OF DELIVERY: 5-25-78

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE:

CLERK'S INITIALS

R5407-027 (amendement

☆ GPO : 1978—O-260-456

No. 431205

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO
Tyler Pipe

STREET AND NO.
P O Box 2027

P.O. STATE AND ZIP CODE
Tyler, TX 75710

POSTAGE		$
CONSULT POSTMASTER FOR FEES — OPTIONAL SERVICES	CERTIFIED FEE	¢
	SPECIAL DELIVERY	¢
	RESTRICTED DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM AND DATE DELIVERED	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY	¢
	RETURN RECEIPT SERVICE — SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	¢
TOTAL POSTAGE AND FEES		$

POSTMARK OR DATE
5-24-78

R5407-027

PS Form 3800, Apr. 1976

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER
05/17/78	RS407-027

REGION	AREA	PAGE
06	7070	1 OF 1

TYPE OF VIOLATION(S)	CITATION NO.
Serious	1

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICAT UNLESS CONTESTE (See enclose Booklet)

This Section Be Detachec Before Posti

Citation issued on 5-8-78 is Amended:

TO: *Tyler Pipe Industries, Inc.*
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALT
1. *(Deleted and revised as follows, abatement date modified)* *29 CFR 1910.132(a): Protective equipment was not used where it was necessary by reason of hazards encountered in a manner capable of causing injury or impairment in the function of any part of the body:* *Muller operator, North Plant, exposed to phenolic flake resin via* *a. Whole body skin contact through his clothing.* *b. Eye contact through safety glass by-pass.* *c. Hand contact through poor glove maintenance and/or work without gloves.*	*06/19/78*	

AREA DIRECTOR
ROBERT B. SIMMONS

NO CHANGE IN PENALTY

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TOTAL PEN FOR TH CITATIC
Makecheckor Order Payab "DOL OS
Indicate OS on Remitt

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER
05/1[illegible]/78	R5407-027

REGION	AREA	PAGE
06	7070	1 OF 2

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

Citation issued 5-8-78 is Amended:

TO: Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

INSPECTION DATE:
11/15/78
INSPECTION SITE:
Hwy 69 N
Tyler, TX

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ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
1A. (Deleted and revised as follows) 29 CFR 1910.1000(c): Employee(s) were exposed to material(s) in excess of the 8-hour time weighted average limit(s) listed for that material(s) in table Z-3 of subpart Z of 29CFR Part 1910: Respirable dust containing silica located in the following areas of the North Plant: a. Hub core machine operators b. Core machine operators (adjacent to wheel area) c. Muller operator		
1B(1) (Deleted and revised as follows) 29 CFR 1910.134(a)(2): Respirators were not provided by the employer when such equipment was necessary to protect the health of the employee(s): In the North Plant for operators of hub cor and cor machines who are exposed to respirable dust containing silica.		
1B(2) (Item 9 deleted and revised as follows) 29 CFR 1910.134(b)(10): Persons were assigned to tasks requiring use of respirators and it had not been determined that they were physically able to perform the work and use the equipment, and the respirator user's medical status was not reviewed periodically (for instance annually): Muller operator in the North Plant who is overexposed to respirable dust containing silica.		
1C (Deleted and revised as follows, abatement dates modified) 29 CFR 1910.100(c): Feasible administrative or engineering controls were not determined and implemented to reduce employee exposure(s): Respirable dust containing silica for operators of the		

AREA DIRECTOR
ROBERT B. SIMMONS

TOTAL PENALTY FOR THIS CITATION

Make check or Money Order Payable to "DOL-OSHA" Indicate OSHA No. on Remittance

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CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER	
05/1[illegible]/78	RS407-027	
REGION 06	AREA 7070	PAGE 2 OF 2

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

Citation issued 5-8-78 is amended:

INSPECTION DATE:
11/15/77

INSPECTION SITE:
Hwy 69 N
Tyler, TX

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

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This Section Be Detached Before Posting

TO:
Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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ITEM NUMBER / STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
following machines or lines of machines in the North Plant: *a. Hub core* *b. Core machine* *c. Muller*		
STEP 1	*06/19/78*	
STEP 2	*7/31/78*	
STEP 3	*9/29/78*	

AREA DIRECTOR
ROBERT B. SIMMONS

NO CHANGE IN PENALTY

TOTAL PENALTY FOR THIS CITATION

Make check or money order payable to "DOL OSHA" Indicate OSHA on Remittance

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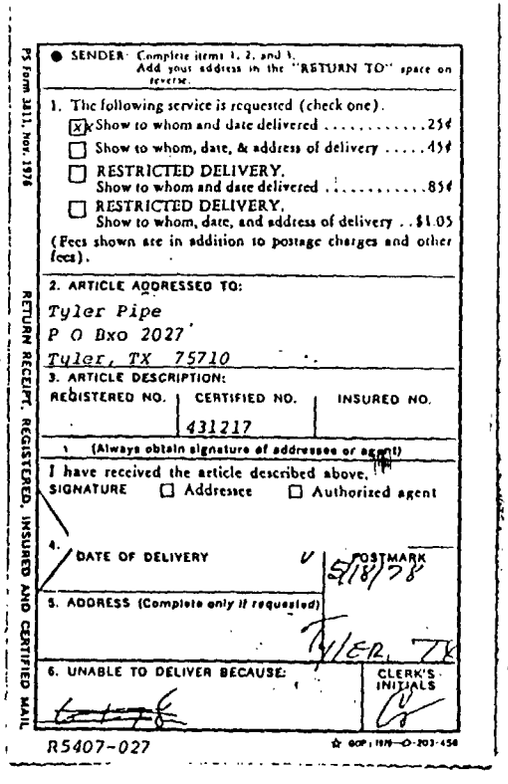


PS Form 3811, Nov. 1976

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3. Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [X] Show to whom and date delivered ..... 25¢
- [ ] Show to whom, date, & address of delivery ..... 45¢
- [ ] RESTRICTED DELIVERY. Show to whom and date delivered ..... 85¢
- [ ] RESTRICTED DELIVERY. Show to whom, date, and address of delivery .. $1.05

(Fees shown are in addition to postage charges and other fees).

2. ARTICLE ADDRESSED TO:
Tyler Pipe
P O Box 2027
Tyler, TX 75710

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	431217	

4. (Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE [ ] Addressee [ ] Authorized agent

4. DATE OF DELIVERY V POSTMARK 5/18/78

5. ADDRESS (Complete only if requested)
TYLER, TX

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

R5407-027

☆ GPO: 1976—O-203-458

No. 431217

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO
Tyler Pipe
STREET AND NO
P O Box 2027
P O STATE AND ZIP CODE
Tyler, TX 75710

POSTAGE		$
CONSULT POSTMASTER FOR FEES — OPTIONAL SERVICES — CERTIFIED FEE		¢
SPECIAL DELIVERY		¢
RESTRICTED DELIVERY		¢
RETURN RECEIPT SERVICE — SHOW TO WHOM AND DATE DELIVERED		¢
SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY		¢
SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY		¢
SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY		¢
TOTAL POSTAGE AND FEES		$

POSTMARK OR DATE
5-17-78

R5407-027

PS Form 3800, Apr. 1976

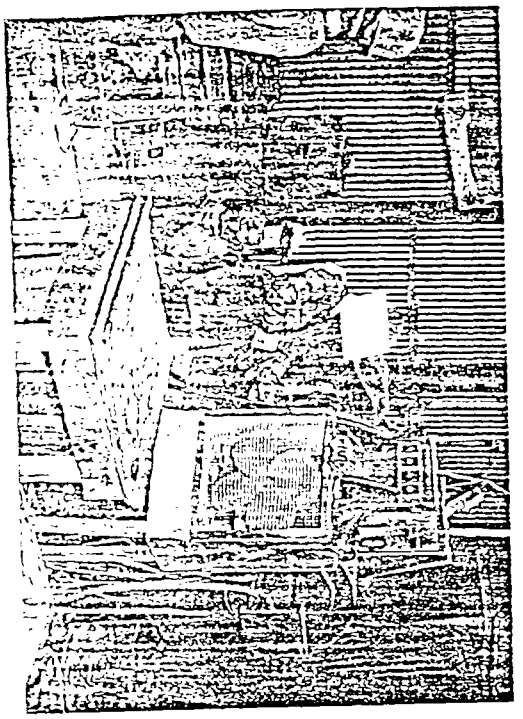
[illegible]	1
[illegible]	8
[illegible]	8
[illegible]	8
[illegible]	8
[illegible]	33
[illegible]	6.6
[illegible]	8
TOTAL	7.3 ⇒ 7

(12 CONT) Muller operators hands are in extremely poor condition. The dermis has thicken, cracked and blistered to such an extent that the hand/fingers cannot be completely opened without difficulty. This condition is indictive of depcoteination of the tendon sheathing.

See hands.

cracking and blistering

HOTOGRAPHER: _____ 1 of 6



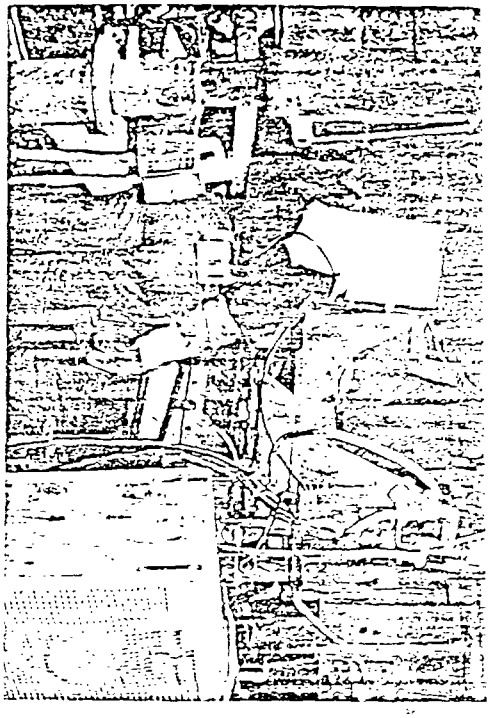
5

ATE: _____ TIME: _____

OCATION: _____

IRECTION: _____

IOLATION: _____



DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____



ATE: _____ TIME: _____

OCATION: _____

IRECTION: _____

IOLATION: _____



DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____

ESTABLISHMENT: Lykes

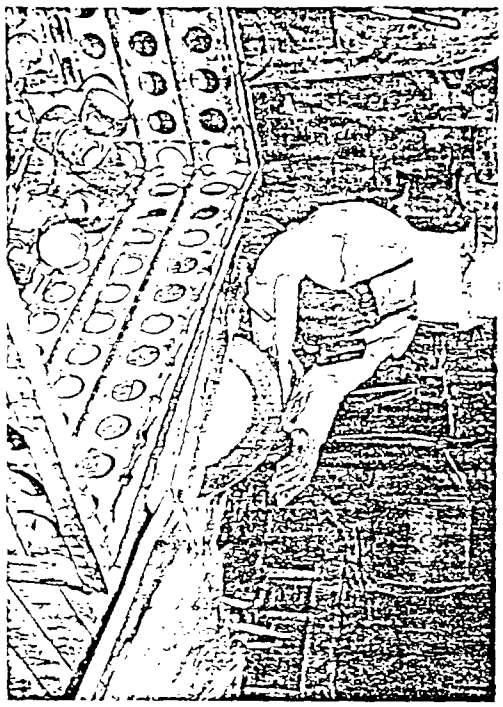
ADDRESS:

INSPECTION DATE & TIME: 2/14/78

PHOTOGRAPHER: Reap

CSHO NO	FY	OSHA
R5407	77	25
AREA		REGION
7070		

(1)



DATE: TIME:

LOCATION:

DIRECTION:

VIOLATION:

(2)



DATE: TIME:

LOCATION:

DIRECTION:

VIOLATION:

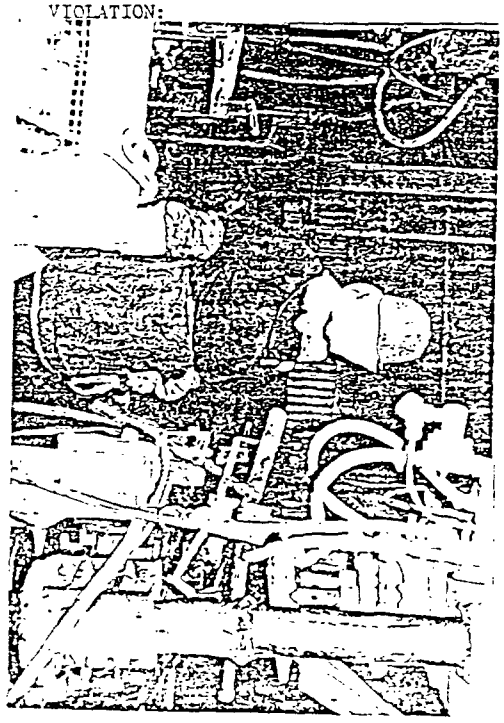
(3)



DATE: TIME:

LOCATION:

(4)



DATE: TIME:

LOCATION:

ADDRESS: _____

INSPECTION DATE & TIME: 2/14/78

PHOTOGRAPHER: Rauf

OSHO NO	TY	OSHA
R5407 77	2	
AREA		REGION
7070		

(9)



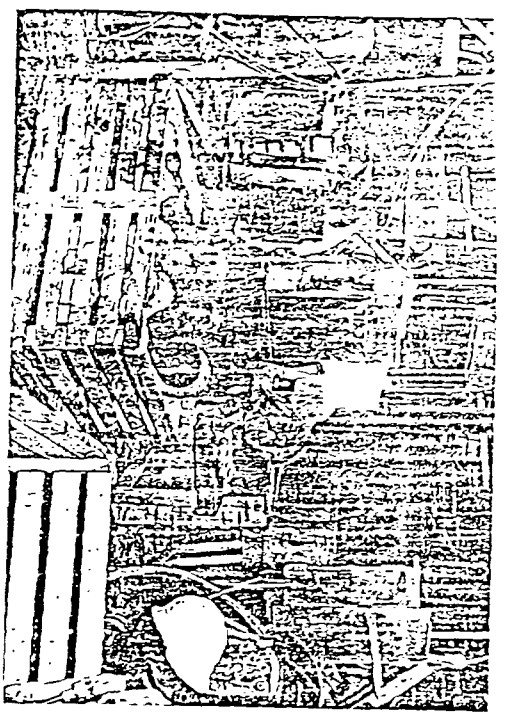
DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____

(10)



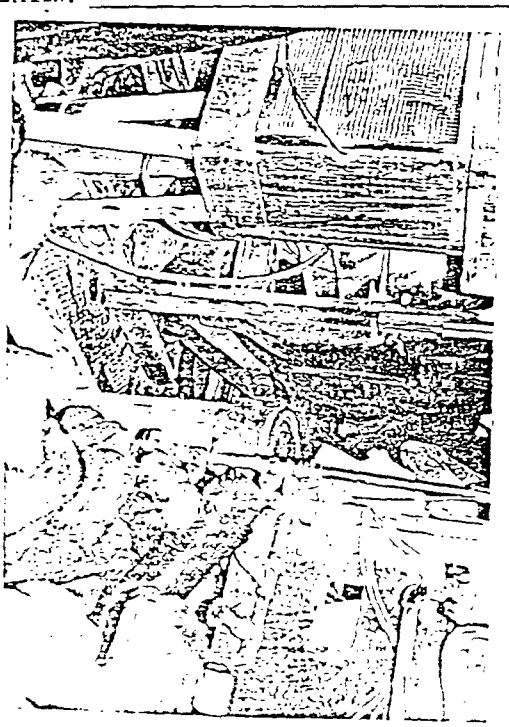
DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____

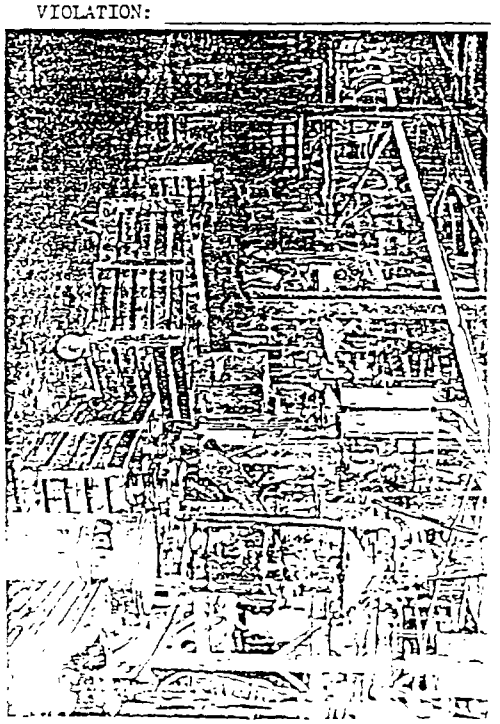
(11)



DATE: _____ TIME: _____

LOCATION: _____

(12)



DATE: _____ TIME: _____

LOCATION: _____

PHOTOGRAPHER: _____

ATE: _____ TIME: _____

OCATION: _____

IRECTION: _____

IOLATION: _____



(71)

DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____



STABLISHMENT: _____

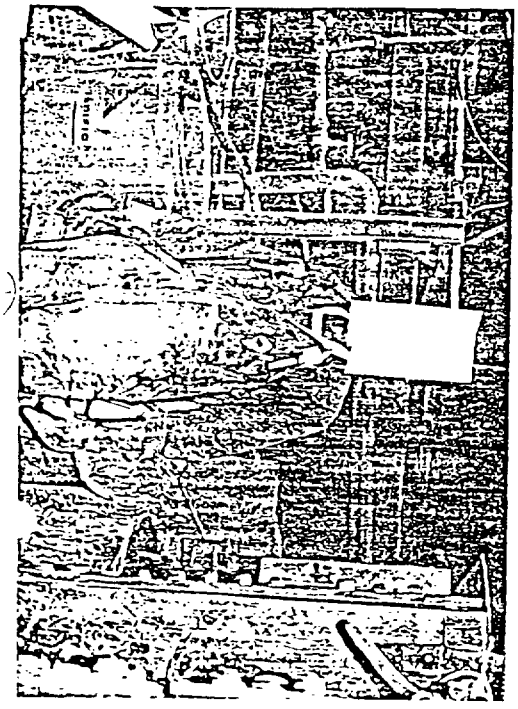
DDRESS: _____

Tyler Pipe

INSPECTION DATE & TIME: 2/14/78

PHOTOGRAPHER: C Reed

OSHO NO	FY	OSHA
R5407	77	27
AREA		REGION
7070		



(16)



ATE: _____ TIME: _____

OCATION: _____

IRECTION: _____

IOLATION: _____

DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____



(18)



TE: _____ TIME: _____

CATION: _____

DATE: _____ TIME: _____

LOCATION: _____

HOTOGRAPHER: _____

ATE: _____ TIME: _____

OCATION: _____

IRECTION: _____

OLATION: _____



DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____



TE: _____ TIME: _____

CATION: _____

RECTION: _____

OLATION: _____

DATE: _____ TIME: _____

LOCATION: _____

DIRECTION: _____

VIOLATION: _____

ly and Health or Accident[illegible]pection Report

1. Area: 7017Ø | 2. Region: Ø6 | 3. CSHO No.: R5341 | 4. Report No.: Ø13121[illegible] | 5. CSHO Job Title: L

6. Inspection Dates — From: Month Day Year | To: 12 Ø6 78 | 7. SIC: 3312

8. Establishment Name (Print legal name): Tyler Pipe Industries, Inc.

9. Site Location: WILKINSON 169 NORTH

10. City: TYLER | 11. State: TX | 12. Zip Code: 75701Ø | 13. City Code: 7ØØ7Ø | 14. St. Code: 48 | 15. Cnty. Code: 423

16. Name of Controlling Corporation, Partner or Sole Owner: Tyler Corporation | 17. Telephone Number: 214 882-5571

18. Citation Mailing Address if Different From Above: P.O. Box 2027, Tyler, TX 75710

19. Type of Inspection: Accident ☐ Complaint ☐ General Schedule ☐ Follow-up ☒

20. Special Programs: TIP ☐ THHP ☐ Other Health ☒ Special Emphasis ☐ Other ☐

21. If a previous OSHA inspection has been made in this establishment enter the id of the First OSHA inspection: Region Ø6 | Area 7017Ø | CSHO Number R5341[illegible] | Report Number Ø127

22. Check this box if OSHA Training Received by Establishment ☐

23. Number of Employees: Employed in Establishment 1215Ø | Covered by Inspection 150 | Controlled by Employer: 0-19 ☐ 20-99 ☐ Over 99 ☒

24. Advance Notice (Check One): ☒ Given; no adverse effect ☐ Adverse effect (CSHO) ☐ Adverse effect (Employee)

25. Check this box if an employee representative exercised walk around privileges during this inspection ☐

26. Number Safety or Health Hazards Not Covered by a Standard

27. Inspection Status Block: Citations Will Be Issued Yes ☐ No ☐ | Date Case Completed: Month Day Year 1 Ø 16 81 | Abatements Completed ☐ | Penalties Paid ☐ | Follow-Up Inspection id: CSHO No. R5341[illegible] | Report No. Ø127Ø

28. Enter Related Complaint Log Numbers

29. Enter "total-occupational injuries and illnesses" from the OSHA 102

Cal. Yr.	Total Cases	Deaths	Lost Workday Cases: Total Lost Workday Cases	Cases Involving Days Away From Work	Days Away From Work	Days of Restricted Work Activity	Nonfatal Cases Without Lost Workdays	Termina-tions or Permanent Transfers

). Enter cross reference codes if desired for this inspection:

Accident Data

31. OSHA-36 Prelim. Report No. | 32. Date of Accident: Month Day Year | 33. No. Deaths | 34. Hospitalized Injuries | 35. Non-hospitalized Injuries

36. Injured/Deceased

Line No	Name	Disp. Code	Nature of Inj.	Part of Body	Source of Inj.	Event Type	Contr. Envir. Factor	Contr. Human Factor	Task Assn.	Hazardous Substance
Ø 1										
Ø 2										
Ø 3										
Ø 4										
Ø 5										

37. CSHO's Signature [signature] 12-7-78 | 38. Area Director's Signature [signature] 12-7-78

AND HEALTH ADMINISTRATION

NARRATIVE

Inspection No. F5395 | 2. Report No. 32

3. Employer Name: Tyler Pipe Industries, Inc.

4. Type Of Legal Entity: Corporation

5. Type Of Business Or Plant: Cast iron pipe manufacturer

6. NAMES AND ADDRESSES OF ALL ORGANIZED EMPLOYEE GROUPS:

Name
Local No. Tele. No.
Address
Zip Code

Name
Local No. Tele. No.
Address
Zip Code

7. AUTHORIZED REPRESENTATIVES OF EMPLOYEES:

Name Tele. No.
Organization Title
Home Address
Zip Code

Name Tele. No.
Organization Title
Home Address
Zip Code

W A

☐ Y ☐ N

☐ Y ☐ N

8. EMPLOYER REPRESENTATIVES CONTACTED: (1 = Opening Conf. Presented; C = Closing Conf.; O = Opening Conf.; M = Other Mgmt. Official)

W A

☐ Y
☐ Y
☐ Y

9. OTHER PERSONS CONTACTED:

Name, Occupation & Affiliation
Home Address Tele. No
Zip Code

Name, Occupation & Affiliation
Home Address Tele. No
Zip Code

10. COVERAGE INFORMATION: Ship cast iron pipe all over the U.S.

Name, Occupation & Affiliation
Home Address Tele. No
Zip Code

11. Date & Time of Entry:	12. Date & Time Walkaround Began:	13. Date & Time Closing Conference Began:	14. Date & Time of Exit:
12-6-78 1:30 p.m.	12-6-78 2:00 p.m.	(1) 12-6-78 (2) 4:00 p.m.	12-6-78 4:30 p.

15. EVALUATION OF SAFETY AND HEALTH PROGRAM: (Codes: 0 = Nonexistent 1 = Inadequate 2 = Average 3 = Above Average)

Comprehensiveness of Safety & Health Program

Written?

Copy Enclosed?

Communication of Program to Employees

How? _____

Safety Meetings

Frequency? _____

By Whom? _____

Enforcement

How? _____

Safety Training Program

Health Training Program

Safety Staff

Health Staff

Accident/Injury Investigations Performed

Preventative Action Taken

Health Monitoring Program

Hazard? _____

Medical Programs

Frequency? _____

Agent? _____

Hazard Control – Engineering & Administration

– Personal Protective Equipment

– Regulated Areas

– Emergency Procedures

Records: 100 – 101 – 102 – Supplementary Health

If SH, specify _____

Notice to Employees (Poster)

Add'l Comments: _____

16. FOLLOW UP INSPECTION RECOMMENDED.

Recommend citation of employer's control plan.

17. OSHO Signature & Date: [signature] 12-7-78

18. Accompanied By:

Form OSHA

1) Review Hazards Observed/Standards Allegedly Violated ☐ 2) Encourage Compliance ☐

20. ADDITIONAL COMMENTS

This inspection was a monitoring inspection to ascertain the validity of certain statements made by Tyler Pipe during an informal conference in which they presented their abatement plan for violations found during inspection R5407-. Also, since their abatement plan calls for a final abatement date of July, 1981 the inspection was also for monitoring a PMA.

The opening conference was held with (13) (14) (5) The scope of the inspection was discussed with including the necessity of verifying the existence of engineering controls as stipulated in their abatement plan dated November 27, 1978

During the walkaround, photographs were made of each area in which some type of control had been instituted. The attached photo sheets show all such areas and the description of each operation.

No samples were taken for determining silica dust exposure as it was determined that no substantive decrease in exposure would be found from such few engineering controls.

A visit was made to the company's respirator cleaning and repair facility in the North Plant. In this facility, respirators are cleaned, repaired, new filters installed, placed into clean plastic bags and distributed to pick-up points. Each employee has a clean respirator to wear each day. All potentially exposed employees were wearing respirators in the North Plant.

A closing conference was held with

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
205 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER	
05/08	R5407-027	
REGION 06	AREA 7070	PAGE 1 OF 1

ALLEGED VIOLATION(S)	CITATION NO.
SERIOUS	1

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICATI UNLESS CONTESTED (See enclosed Booklet)

This Section Be Detached Before Postin

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
The violations 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.		
1. 29 CFR 1910.132(a): Protective equipment was not used where it was necessary by reason of hazards encountered in a manner capable of causing injury or impairment in the function of any part of the body: Muller operator, North Plant, exposed to a chemical family of tertiary amine (hexamethylenetetramine) and phenolic flake resin via a. Whole body skin contact through his clothing. b. Eye contact through safety glass by-pass. c. Hand contact through poor glove maintenance and/or work without gloves.	Immediately	$1,000.

AREA DIRECTOR
ROBERT D. SIMMONS

$1,000

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. Any 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 RESPONSIBILITIES AND COURSES OF ACTION — The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

TOTAL PEN FOR TH CITATIO

Make check or Order Payab DOL OS Indicate OSH on Remit

NOTICE &
KNOWLEDGE
'81-'93

Safety and Health or Accident Inspection Report

1. Area	2. Region	3. CSHO No.	4. Report No.	5. CSHO Job Title
7070	06	R5407	2700	I

6. Inspection Dates

	Month	Day	Year
From	11	15	77
To			

7. SIC: 3321

8. Establishment Name (Print legal name): TYLER PIPE INDUSTRIES INC.

9. Site Location: HWY 69 NORTH

10. City	11. State	12. Zip Code	13. City Code	14. St. Code	15. Cnty. Code
TYLER	TX	75710	7070	48	423

16. Name of Controlling Corporation, Partner or Sole Owner: TYLER CORP.

17. Telephone Number: 882-5511

18. Citation Mailing Address if Different From Above:

19. Type of Inspection: Accident [ ] Complaint [X] General Schedule [ ] Follow-up [ ]

20. Special Programs: TIP [ ] THHP [ ] Other Health [S] Special Emphasis [ ] Other [ ]

21. If a previous OSHA inspection has been made in this establishment enter the id of the First OSHA Inspection:

Region	Area
06	1730

CSHO Number	Report Number FY/00
S3054	4273

22. Check this box if OSHA Training Received by Establishment [ ]

23. Number of Employees

Employed in Establishment	Covered by Inspection
2890	50

Controlled by Employer: 0-19 [ ] 20-99 [ ] Over 99 [X]

24. Advance Notice (Check One):
- [ ] Given; no adverse effect
- [ ] Adverse effect (CSHC)
- [ ] Adverse effect (Employee)

25. Check this box if an employee representative exercised walk around privileges during this inspection [ ]

26. Number Safety or Health Hazards Not Covered by a Standard

27. Inspection Status Block

Citations Will Be Issued: Yes [ ] No [ ]

Date Case Completed: Month 10 Day 06 Year 82

[X] Abatements Completed

[X] Penalties Paid

Follow-Up Inspection id

CSHO No.	Report No.
75395	03200

28. Enter Related Complaint Log Numbers: 90

29. Enter "total-occupational injuries and illnesses" from the OSHA 102

Cal. Yr.	Total Cases	Deaths	Lost Workday Cases: Total Lost Workday Cases	Cases Involving Days Away From Work	Days Away From Work	Days of Restricted Work Activity	Nonfatal Cases Without Lost Workdays	Terminations or Permanent Transfers

30. Enter cross reference codes if desired for this Inspection: N

Accident Data

31. OSHA-36 Prelim. Report No.	32. Date of Accident (Month Day Year)	33. No. Deaths	34. Hospitalized Injuries	35. Non-hospitalized Injuries

36. Injured/Deceased

Line No.	Name	Disp. Code	Nature of Inj.	Part of Body	Source of Inj.	Event Type	Contr. Envir. Factor	Contr. Human Factor	Task Assn.	Hazardous Substance
01										
02										
03										
04										
05										

37. CSHO's Signature: [signature]

38. Area Director's Signature: [signature] 11-17-7

Area Office

OSHA-

KUENAMAN #5

U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION
ROOM 208, FEDERAL BUILDING
211 W. FERGUSON STREET

(214) 595-2438 Tyler, Texas 75701

May 4, 1978

Mr. Charles Kuenemann
Safety and Security Manager
Tyler Pipe Industries, Inc.
Tyler, Texas 75701

Dear Mr. Kuenemann:

Re: letter of April 28, 1978, in which you requested information on the September 1977 monitoring inspection and December 1977 complaint inspection of Tyler Pipe.

Information requested is shown on the enclosed sheets.

Sincerely,

ROBERT B. SIMMONS
Area Director

2 Enclosures

COMPLAINT INSPECTION: DECEMBER 1977- FEBRUARY 1978

Area	Item	Amount	Over PEL
Hub Core #1	Silica	2.22 mg/m^3	Yes
Hub Core #2	Silica	1.35 mg/m^3	No
Muller North Plant	Silica	2.83 mg/m^3	Yes
Hub Core #7 & 8	Silica	1.36 mg/m^3	Yes
Core #3 & 4	Silica	1.59 mg/m^3	Yes
Core #1 & 2	Silica	1.46 mg/m^3	Yes
Set Core Wheel 3	Silica	1.69 mg/m^3	Yes
Core Relief	NH^4	9.1 mg/m^3	No
Hub Core #2	NH^4	8.0 mg/m^3	No
Core Relief	Phenol	3.0 mg/m^3	No
Hub Core #10	Phenol	1.4 mg/m^3	No
Hub Core #5 & 6	Silica	ø	No

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER
05/03/73	R5407-027

REGION	AREA	PAGE
06	7070	1 OF 3

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

INSPECTION DATE:
11/15/73
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICAT UNLESS CONTESTE (See enclose Booklet)

This Section Be Detachec Before Posti

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations. You must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this citation and penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be read in conjunction with this form.)

ITEM NUMBER, STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED; DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALT
The violations 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.		
1A. 29 CFR 1910.1000(c): Employee(s) were exposed to material(s) in excess of the 8-hour time weighted average limit(s) listed for that material(s) in table Z-3 of subpart Z of 29 CFR part 1910: Quartz (silica) located in the following areas of the North Plant: a. Hub core machine operators b. Core machine operators (adjacent to wheel area) c. Muller operator	See Below	$2,000
1B(1) 29 CFR 1910.134(a)(2): Respirators were not provided by the employer when such equipment was necessary to protect the health of the employee(s): In the North Plant for operators of hub core and core machines who are exposed to silica dust.		
1B(2). 29 CFR 1910.134(a)(2): The employer did not establish and maintain a respiratory protection program which included the requirements outlined in paragraph (b) of this section: 29 CFR 1910.134(b)(1): Written standard operating procedures governing the selection and use of respirators were not established: 29 CFR 1910.134(b)(3): The users of respirators were not instructed and trained in the proper use of respirators and their limitations: 29 CFR 1910.134(b)(5): Respirators were not regularly cleaned and disinfected: 29 CFR 1910.134(b)(5): Respirators issued for the exclusive use of one worker were not cleaned after each day's use, or more often		

AREA DIRECTOR
ROBERT B. SIMMONS

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 RESPONSIBILITIES AND COURSES OF ACTION – The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification

TOTAL PEN FOR TH CITATIO Make check or Order Payab "DOL OS Indicate OSH on Remit

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

NARRATIVE

1. OSHA No | 2. Report No

3. Employer Name:

4. Type Of Legal Entity | 5. Type Of Business Or Plant

6. NAMES AND ADDRESSES OF ALL ORGANIZED EMPLOYEE GROUPS:

Name
Local No. | Tele. No.
Address
Zip Code

Name
Local No. | Tele. No.
Address
Zip Code

7. AUTHORIZED REPRESENTATIVES OF EMPLOYEES: | W A

Name | Tele. No. | ☐ Y
Organization | Title
Home Address | ☐ N
Zip Code

Name | Tele. No. | ☐ Y
Organization | Title
Home Address | ☐ N
Zip Code

8. EMPLOYER REPRESENTATIVES CONTACTED: (I = Conference Presumed, O = Opening Conf, C = Closing Conf, M = Other Mgmt. Official) | W A

Name | Title | Function | ☐ Y

☐ Y
☐ Y
☐ Y

9. OTHER PERSONS CONTACTED:

Name, Occupation & Affiliation
Home Address | Tele. No
Zip Code
Name, Occupation & Affiliation
Home Address | Tele. No
Zip Code
Name, Occupation & Affiliation
Home Address | Tele. No
Zip Code

10. COVERAGE INFORMATION

11. Date & Time of Entry: | 12. Date & Time Walkaround Began: | 13. Date & Time Closing Conference Began: (1) (2) | 14. Date & Time of Exit:

15. EVALUATION OF SAFETY AND HEALTH PROGRAM: (Codes: 0 = Nonexistent 1 = Inadequate 2 = Average 3 = Above Average)

Comprehensiveness of Safety & Health Program 0 1 2 3
Written? Y N
Copy Enclosed? Y N
Communication of Program to Employees 0 1 2 3
How?
Safety Meetings 0 1 2 3
Frequency?
By Whom?
Enforcement 0 1 2 3
How?
Safety Training Program 0 1 2 3
Health Training Program 0 1 2 3
Safety Staff Y N
Health Staff Y N
Accident/Injury Investigations Performed 0 1 2 3
Preventative Action Taken Y N

Health Monitoring Program 0 1 2
Hazard?
Medical Programs 0 1 2
Frequency?
Agent?
Extent?
Content?
Hazard Control — Engineering & Administration 0 1 2
— Personal Protective Equipment 0 1 2
— Regulated Areas 0 1 2
— Emergency Procedures 0 1 2
Records: 100 — 101 — 102 — Supplementary Health
If SH, specify
Notice to Employees (Poster) Y N
Add'l Comments:

16. FOLLOW-UP INSPECTION RECOMMENDED. Yes ☐ No ☐ Reason

17. OSHA Signature & Date | 18. Accompanied By

Form OSHA

1) Review Hazards Observed/Standards Allegedly Violated ☐ | 2) Encourage Compliance ☐

20. ADDITIONAL COMMENTS

(1) in which was discussed the necessity of posting their abatement plan dated November 27, 1978, as a Petition for Modification of Abatement.

(5) During the closing presented the Company's monitoring procedure including their computer printout of exposure data (copy attached)

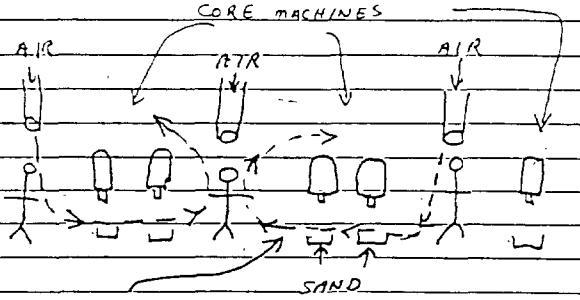
Exit from plant was made at 4:30 p

[illegible] 12-8-78

15 (CONT) (1)

(13)

12 CONT) to reduce their wind chill factor, ie, attempting to stay warm (Pictures 19 and 5). Futhermore the high speed air stream slips pass the operators breathing zone, hits the floor, picks up sand from the shake-out bins and then vortexes into other workers breathing zones.



	RATING	
PROBABILITY	8	over 20 people
Duration	8	over 40 hrs/wk
Proximity	8	at point-danger
Conditions	8	high stress
Other	8	other
TOTAL	40	
Avoidance	8	
Severity	8	perm. injury/death
SCORE	$\frac{16}{2} = 8$	

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
208 Federal Building
Tyler, TX 75702

05/0[illegible]78	R5407-027	
REGION 06	AREA 7070	PAGE 2 OF 3

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industires, Inc.
P. O. Box 2027
Tyler, TX 75710

Attn: J. Warner, President

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 violations cited below have been corrected, or for 3 working days (excluding weekends and Federal holidays) whichever is longer.

PENALTIES ARE DUE WITHIN 15 DAYS OF RECEIPT OF THIS NOTIFICA UNLESS CONTESTE (See enclose Booklet)

This Section Be Detachec Before Posti

This citation describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed below are based on these violations ou must correct the violations referred to in this citation by the dates listed below and pay the penalties proposed, unless within 15 working days excluding weekends and Federal holidays) from your receipt of this citation, and penalty you mail a notice of contest to the U.S. Department of abor Area Office at the address shown above. (See the enclosed booklet which outlines your responsibilities and courses of action and should be ead in conjunction with this form.)

ITEM NUMBER / STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED; DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENAL
if necessary:		
29 CFR 1910.134(b)(6): Respirators were not stored in a convenient, clean and sanitary location:		
29 CFR 1910.134(b)(7): Respirators used routinely were not inspected during cleaning and worn or deteriorated parts replaced:		
29 CFR 1910.134(b)(9): There were no regular inspections and evaluations to determine the continued effectiveness of the respirator program.		
29 CFR 1910.134(b)(10): Persons were assigned to tasks requiring use of respirators and it had not been determined that they were physically able to perform the work and use the equipment, and the respirator user's medical status was not reviewed periodically (for instance annually):		
Muller operator in the North plant who is overexposed to Quartz (silica).		
1C. 29 CFR 1910.1000(e): Feasible administrative or engineering controls were not determined and implemented to reduce employee exposure(s):		
Quartz (silica) for operators of the following machines or lines of machines in the North Plant:		
a. Hub core		
b. Core machine		
c. Muller		
STEP 1 - Effective respiratory protection shall be provided and used by employee(s) as an interim protective measure.	Immediately	
STEP 2 - A written detailed plan of abatement leading to the complete abatement of this item shall be submitted to the Area Director. Such a plan shall: a) employ the use of qualified engineering personnel; b) include detailed engineering	06/30/78	

AREA DIRECTOR
ROBERT B. SIMMONS

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 RESPONSIBILITIES AND COURSES OF ACTION - The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.

TOTAL PE FOR T CITAT Makecheck Order Pay "DOL O Indicate O on Rem

CITATION AND NOTIFICATION OF PENALTY

CITATION and NOTIFICATION OF PENALTY

Tyler Area Office
203 Federal Building
Tyler, TX 75702

ISSUANCE DATE	OSHA NUMBER
05/0	05407-027
REGION 06	AREA 7070 / PAGE 3 OF 3

TYPE OF VIOLATION(S)	CITATION NO.
REPEAT	2

INSPECTION DATE:
11/15/77
INSPECTION SITE:
Hwy 69 N
Tyler, TX

TO: Tyler Pipe Industries, Inc.
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ITEM NUMBER / STANDARD, REGULATION OR SECTION OF THE ACT VIOLATED: DESCRIPTION	DATE BY WHICH VIOLATION MUST BE CORRECTED	PENALTY
studies and their results; c) outline the ordering of equipment and materials and completion of the design phase; and d) outline dates for the anticipated implementation of the plan.		
STEP 3 – Feasible engineering controls and/or administrative controls shall be determined.	08/30/78	
STEP 4 – Abatement shall be completed by implementation of feasible engineering and/or administrative controls and its effectiveness at achieving compliance verified. 90-day progress letters are requested during the abatement period.	05/01/79	

AREA DIRECTOR
ROBERT B. SIMMONS

$2,000.
TOTAL PENA FOR THIS CITATION

Make check or M Order Payable "DOL OS– Indicate OSH on Remitta

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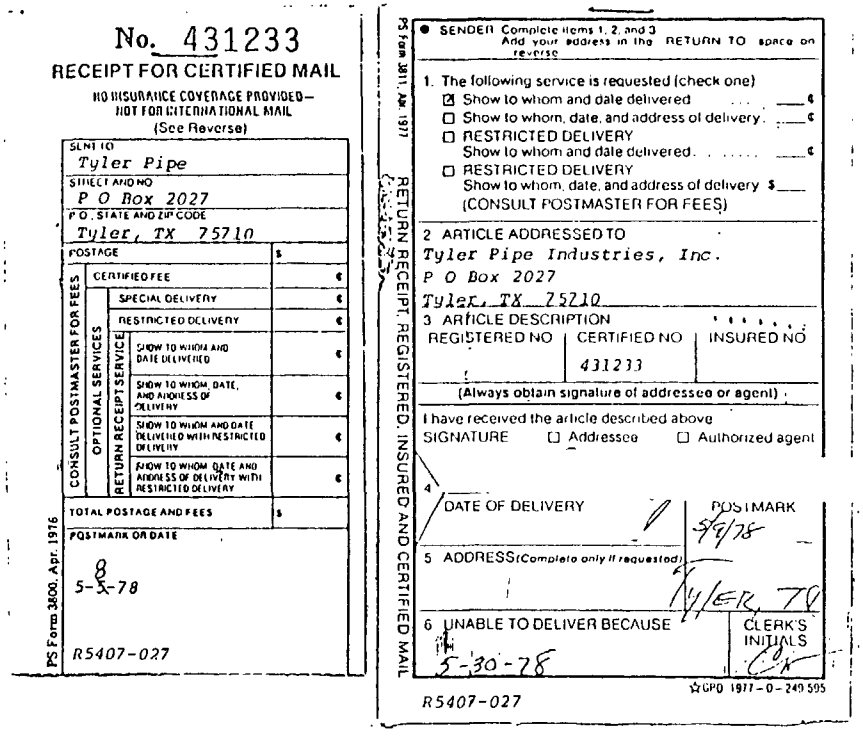
EMPLOYER RESPONSIBILITIES AND COURSES OF ACTION – The enclosed booklet outlines employer responsibilities and courses of action and should be read in conjunction with this notification.



No. 431233

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO: Tyler Pipe			
STREET AND NO: P O Box 2027			
P.O., STATE AND ZIP CODE: Tyler, TX 75710			
POSTAGE			$
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE		¢
	OPTIONAL SERVICES	SPECIAL DELIVERY	¢
		RESTRICTED DELIVERY	¢
		RETURN RECEIPT SERVICE: SHOW TO WHOM AND DATE DELIVERED	¢
		RETURN RECEIPT SERVICE: SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY	¢
		RETURN RECEIPT SERVICE: SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY	¢
		RETURN RECEIPT SERVICE: SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	¢
TOTAL POSTAGE AND FEES			$
POSTMARK OR DATE: 5-~~5~~ 8-78			

R5407-027

PS Form 3800, Apr. 1976

PS Form 3811, Apr. 1977

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER Complete items 1, 2, and 3
Add your address in the RETURN TO space on reverse

1. The following service is requested (check one)
   - ☒ Show to whom and date delivered ... ¢
   - ☐ Show to whom, date, and address of delivery ... ¢
   - ☐ RESTRICTED DELIVERY
     Show to whom and date delivered ... ¢
   - ☐ RESTRICTED DELIVERY
     Show to whom, date, and address of delivery $___
     (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO
Tyler Pipe Industries, Inc.
P O Box 2027
Tyler, TX 75710

3. ARTICLE DESCRIPTION

REGISTERED NO	CERTIFIED NO	INSURED NO
	431233	

(Always obtain signature of addressee or agent)

I have received the article described above
SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY: 1 | POSTMARK: 5/9/78

5. ADDRESS (Complete only if requested): Tyler, TX

6. UNABLE TO DELIVER BECAUSE: 5-30-78 | CLERK'S INITIALS: [illegible]

☆GPO 1977-0-249 595

R5407-027

U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION
ROOM 208, FEDERAL BUILDING
211 W. FERGUSON STREET
(214) 595-2438 Tyler, Texas 75701

May 4, 1978

Mr. Charles Kuenemann
Safety and Security Manager
Tyler Pipe Industries, Inc.
Tyler, Texas 75701

Dear Mr. Kuenemann:

Re: letter of April 28, 1978, in which you requested information on the September 1977 monitoring inspection and December 1977 complaint inspection of Tyler Pipe.

Information requested is shown on the enclosed sheets.

Sincerely,

ROBERT B. SIMMONS
Area Director

2 Enclosures

MONITORING INSPECTION: SEPTEMBER 1977

Area	Item	Amount	Over PEL
Pallet Muller South	Silica	0.147 mg/m^3	NO
Paller Muller South	Silica	0.60 mg/m^3	NO
Area Sample PM wheel	Silica	1.54 mg/m^3	YES
456 line slinger	Silica	1.48 mg/m^3	YES
Area 456 line slinger	Silica	1.36 mg/m^3	YES
Area 234 line slinger	Silica	0.16 mg/m^3	NO
234 line slinger	Silica	1.29 mg/m^3	NO
PM wheel	Silica	0.61 mg/m^3	NO

COMPLAINT INSPECTION: DECEMBER 1977- FEBRUARY 1978

Area	Item	Amount	Over PEL
Hub Core #1	Silica	2.22 mg/m^3	Yes
Hub Core #2	Silica	1.35 mg/m^3	No
Muller North Plant	Silica	2.83 mg/m^3	Yes
Hub Core #7 & 8	Silica	1.36 mg/m^3	Yes
Core #3 & 4	Silica	1.59 mg/m^3	Yes
Core #1 & 2	Silica	1.46 mg/m^3	Yes
Set Core Wheel 3	Silica	1.69 mg/m^3	Yes
Core Relief	NH^4	9.1 mg/m^3	No
Hub Core #2	NH^4	8.0 mg/m^3	No
Core Relief	Phenol	3.0 mg/m^3	No
Hub Core #10	Phenol	1.4 mg/m^3	No
Hub Core #5 & 6	Silica	ø	No