

**Crane.**

- Nothing asbestos specific
- 1969 & 1972 inspections
- 1966 evidence of dust studies,
- Operation/Hazard/Control Measure matrix
- 1967-1968 x-ray program, respirator program, and air ventilation.

REGION IV  
 PROD. MFG. OR SERVICE Air conditioners mfg.  
 DATE OF ACTIVITY Feb. 11, 1969

COMMONWEALTH OF PENNSYLVANIA  
 DEPARTMENT OF HEALTH  
 OCCUPATIONAL HEALTH  
 FIELD ACTIVITY REPORT

|                  |           |
|------------------|-----------|
| EMPLOYEES        | COUNTY    |
| MALE <u>221</u>  | <u>07</u> |
| FEMALE <u>17</u> | IND. CODE |
| TOTAL <u>238</u> | <u>34</u> |

PLANT Crane Company  
 ADDRESS (Wye Switches) - Dancansville ZIP 16635 PHONE 814-695-9854  
 PERSON INTERVIEWED Mr. Robert Miller TITLE Safety Director

PURPOSE: INVEST.; SURVEY; INSPECT.; PRELIM.; F.U.; CONF.; VISIT;

REASON: SELF-INIT.; O.D. REP.; COMPL.; REQUEST; SOURCE

| SPECIFIC HAZARD OR<br>CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS      | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|----------------------|--------------|----|----------|
|                                 |                    | WRITTEN - - - VERBAL | YES          | NO | IN PROG. |
|                                 |                    |                      |              |    |          |
|                                 |                    |                      |              |    |          |
|                                 |                    |                      |              |    |          |
|                                 |                    |                      |              |    |          |

SAMPLES COLLECTED \_\_\_\_\_ TOTAL \_\_\_\_\_  
 (NO. & KIND)

DETERM. MADE \_\_\_\_\_ TOTAL \_\_\_\_\_  
 (NO. & KIND)

MEDICAL - O.D. REPORTED, NO. & KIND \_\_\_\_\_

PUNCH CARD YES ☒ NO ☐ FOLDER YES ☒ NO ☐

REMARKS: Update punch card dated 7/68.

Additions/detelctions:

No more paint dip operations.

ADDED: A new electrostatic painting operation automatic, conveyor system with no personnel exposure.

Has the Bureau of Mines approved respirators for painting and also for silica dust. Also (if needed) plant has and provides employees with ear plugs for noise (a noise survey previously made by us and last week the Insurance Co. (PMA) also did a noise survey in the plant (Jake Shirer)?

A close check indicated that there is not any painting operations which the paint could contain a mixture of silica dust. The paint being used is Gledden acrylic and enamel with toluene and xylene thinners. The ceramic paint is used at Somerset Plant.

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 PA STATE ARCHIVES  
 350 North Street, Harrisburg, PA 17120-0090  
 PA Historical & Museum Commission

BY A.J. Majer RHM 3/10/69

WINS 3.5

*file* *The Crane Co.*  
*Altoona, Pa.*  
OPERATION

HAZARD

CONTROL MEASURE

Page 2

Degreasing steam (cont.)

wall & ceiling fans

lathes, drill press,  
punch press, saws,  
millers, shear, bores

silica dust on parts  
iron metal dust &  
particles  
oil mist  
dermatitis  
noise  
illumination

general vent  
floor, wall & ceiling fans  
high ceiling & windows  
protective clothing  
personal hygiene & creams  
local & general lighting  
some limited operations  
sporadic exposures  
good housekeeping

Grinders; vertical,  
horizontal belt  
grinder

silica dust & particles  
iron metal dust &  
particles  
carborundum dust &  
particles  
noise  
abrasive dermatitis  
illumination

general vent  
wall, floor, ceiling fans  
high ceiling & windows  
some limited operations  
personal hygiene & creams  
local & general lighting  
some venting  
good housekeeping

Degreasing (limited)

silica dust on parts  
dermatitis vapor  
stoddard solvent vapor  
illumination

general vent  
wall, floor & ceiling fans  
very limited use  
sporadic exposure  
safety labeled containers  
personal hygiene & creams  
local & general lighting  
good housekeeping

Welding (repair)

coated & uncoated rods  
silica dust on parts  
heat, smoke,  
Fluorides, Ozone  
iron oxide fumes  
manganese fumes  
carbon monoxide &  
dioxide gas  
oxides of nitrogen  
infra red rays  
ultraviolet light

local exhaust vent  
floor, wall, & ceiling fans  
limited operation  
sporadic exposure  
protective clothing, helmets  
welding booth areas  
good lighting  
good housekeeping

Assembly of cooling units  
& inspection

Freon - 22 gas  
illumination

general vent  
wall, floor & ceiling fans  
limited operation  
in containers & pipes (Freon)  
sporadic exposure  
local & general lighting

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350 North Street, Harrisburg, PA 17120-0090

PA Historical & Museum Commission



CRANE CO. • 4100 SOUTH KEDZIE AVENUE • CHICAGO, ILLINOIS 60632

January 5, 1968

Doctor Jan Lieben  
 Director  
 Division of Occupational Health  
 Department of Health  
 Harrisburg, Pennsylvania

Reproduction of an Original Record

PA STATE ARCHIVES

350 North Street, Harrisburg, PA 17120-0090

PA Historical &amp; Manuscript Commission

Dear Doctor Lieben:

Starting with February, 1968, Crane Company's New Castle Plant will initiate an annual chest x-ray program for foundry personnel exposed to dust, in accordance with your recommendations. This annual chest x-ray program will be conducted through our plant Medical Department and the x-rays will become a part of each employee's Medical record. I trust that this program will satisfy the recommendations submitted by your office.

In addition to the above, we have included chest x-rays for new employees as a part of our pre-employment physical examination program. As I mentioned to you, Crane Co. intends to improve the operations in our New Castle plant to the extent where dust exposures will be more than adequately contained and controlled. However, this planned improvement program will take some time to be completed.

In the meantime, personnel who might be required to work in atmospheres where there may be possible dust exposures are provided with Bureau of Mines Approved respirators and are required to wear the respirators while in the exposure areas.

Again, thank you very much for your continued interest and assistance in our operations which is most certainly appreciated. I look forward to renewing our acquaintance in the near future when I am in the Harrisburg area.

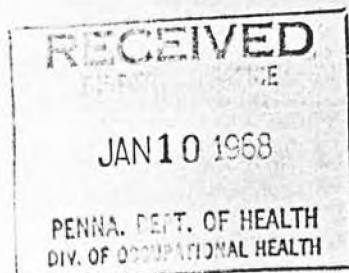
My best wishes to you for a Happy New Year.

Sincerely yours,



Lee R. Becker  
 Director of Safety and Health

LRB:rk



December 12, 1967

Mr. Paul J. Bryan  
Plant Manager  
Crane Company  
P. O. Box 711  
New Castle, Pennsylvania

Dear Mr. Bryan:

We have today received a letter from your Mr. Leon R. Becker regarding recommendation 1 presented to you in our letter of September 3, 1967. This recommendation read: "Institute a program of annual chest X-ray examinations for personnel exposed to dust". The steps as outlined in Mr. Becker's letter can not be regarded as compliance with the requirement of our Regulation 432 since we do not know what the criteria of Dr. Wilson are for x-raying employees. We would appreciate knowing these criteria from you no later than January 1, 1968.

We are asking these questions because a respirator program without a periodic x-ray check is unacceptable. Should we fail to obtain a satisfactory x-ray check we would have to insist on absolute dust controls below the T.L.V. values at all operations.

The Division's x-ray unit is available to you should you wish to utilize it for the accomplishment of the recommendation--see enclosure.

Very truly yours,

Jan Lieben, M.D., Director  
Division of Occupational Health

JL:efh

c.c. Mr. Suroviec - Region III  
Mr. Becker

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360 North Street, Harrisburg, PA 17120-0090


**CRANE**

CRANE CO. • 4100 SOUTH KEDZIE AVENUE • CHICAGO, ILLINOIS 60632

December 8, 1967

Doctor Jan Lieben  
 Director, Division of Occupational Health  
 Department of Health  
 Harrisburg, Pennsylvania

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 350 North Street, Harrisburg, PA 17120-0090  
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Dear Doctor Lieben:

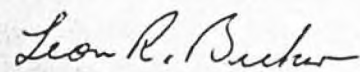
In reply to your letter of October 26, 1967, addressed to Mr. Paul Bryan, Crane Company's New Castle Plant Manager, we wish to advise that this matter has been taken up with our Plant Physician, Doctor Paul B. Wilson, who supervises the Medical and Health Program at the New Castle Plant. For your information, Doctor Wilson is in the plant three times each week and is on call at all hours. The Medical and Health Program has provided for chest x-ray examination of employees where Doctor Wilson deems this advisable.

Based upon your recommendations, all personnel at key locations have been issued and are required to wear Bureau of Mines approved respirators whenever there is a possibility the employee may be in an exposure requiring protection. Further, a program has been instituted whereby all new employees are given chest x-ray examinations as a part of their pre-employment physical examinations.

While we shall continue to conduct chest x-ray examinations of individual employees, as deemed advisable by Doctor Wilson, in order to effectuate your recommendations we propose to notify all employees of the Lawrence County Tuberculosis and Health Society Community Chest x-ray Programs which are conducted in New Castle by the Society three to four times a year. Our employees will be notified in advance by written notices in their pay envelopes and on bulletin boards, and all employees will be urged to participate by obtaining a chest x-ray. The next scheduled chest x-ray program will be conducted by the Society in New Castle during February, 1968. We shall urge all of our employees to obtain chest x-rays at this time. In the future we shall continue to notify our employees of the Society Chest X-ray schedules in the same manner.

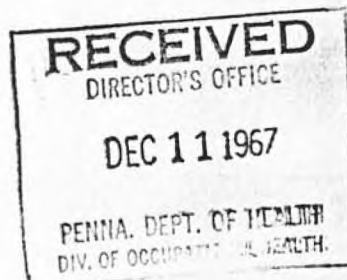
We trust that this action on our part will be acceptable to you.

Yours very truly,



Leon R. Becker  
 Director of Safety and Health

LRB:rk



## COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF HEALTH  
OCCUPATIONAL HEALTH

## FIELD ACTIVITY REPORT

REGION III  
PROD. MFG. OR SERVICE Cast iron  
water heaters & condensers  
DATE OF ACTIVITY 10/19/67

|                  |           |
|------------------|-----------|
| EMPLOYEES        | COUNTY    |
| MALE <u>448</u>  | <u>37</u> |
| FEMALE <u>22</u> | IND. CODE |
| TOTAL <u>470</u> | <u>33</u> |

|                                                      |                                               |                          |
|------------------------------------------------------|-----------------------------------------------|--------------------------|
| PLANT<br><u>Crane Company</u>                        | ZIP<br><u>16101</u>                           | PHONE<br><u>654-5531</u> |
| ADDRESS<br><u>Box 711, New Castle</u>                |                                               |                          |
| PERSON INTERVIEWED <u>P. J. Bryan<br/>H. J. Hill</u> | TITLE <u>Plant Manager<br/>Plant Engineer</u> |                          |

PURPOSE: INVEST.: INSPECT.: PRELIM.: F.U.: CONF.: VISIT: \_\_\_\_\_REASON: SELF-INIT.: O.D. REP.: COMPL.: REQUEST: SOURCE: \_\_\_\_\_

| SPECIFIC HAZARD OR<br>CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS                     | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|-------------------------------------|--------------|----|----------|
|                                 |                    | WRITTEN --- VERBAL                  | YES          | NO | IN PROG. |
| Silica dust                     | 400                | 1. Institute a chest X-ray program  |              | X  |          |
|                                 |                    | 2. Supply approved respirators      | X            |    |          |
|                                 |                    | 3. Repair ceiling exhaust fan       | X            |    |          |
|                                 |                    | 4. Exhaust ventilate the millers    |              |    | X        |
|                                 |                    | 5. Exhaust ventilate shakeout units |              |    | X        |

SAMPLES COLLECTED None TOTAL \_\_\_\_\_  
(NO. & KIND)DETERM. MADE None TOTAL \_\_\_\_\_  
(NO. & KIND)MEDICAL - O.D. REPORTED, NO. & KIND None

|            |                                         |                             |        |                                         |                             |
|------------|-----------------------------------------|-----------------------------|--------|-----------------------------------------|-----------------------------|
| PUNCH CARD | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> | FOLDER | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
|------------|-----------------------------------------|-----------------------------|--------|-----------------------------------------|-----------------------------|

## REMARKS:

A conference was held with the above officials to discuss the steps outlined in the letter from Mr. Bryan dated October 5, 1967. Mr. Bryan stated that in a meeting on October 12, 1967, between the company safety supervisor, Dr. P. B. Wilson, the company physician, and himself that it was decided to institute a program of preplacement chest X-ray examinations and to do the other workers when Dr. Wilson deems it to be necessary. When told that he was being sent a letter from Dr. Lieben requiring that they comply with the recommendation for yearly chest X-rays for all exposed workers, he said that he would refer the matter to the main office when he received the letter and let us know of the decision.

Mr. Bryan feels that he can set up a 100% effective respirator program in the plant until effective engineering controls are made. The engineering changes mentioned in letter include the complete revamping of the #3 line to include both automation and local exhaust ventilation. They are also looking at ways to local exhaust ventilate the shakeout unit in the clean out room.

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BY J. A. PierroRIM WJWINS 2.0

*Dr. Baier*  
 COMMONWEALTH OF PENNSYLVANIA  
 996 South Main Street  
 Meadville, Pennsylvania  
 October 9, 1967

SUBJECT Crane Company  
 Box 711  
 New Castle, Pennsylvania 16101

TO E. J. Baier, Chief  
 Industrial Hygiene Section

FROM John Pierro *John A. Pierro*  
 Industrial Hygienist II  
 Region III

Thru: Regional Industrial Hygienist

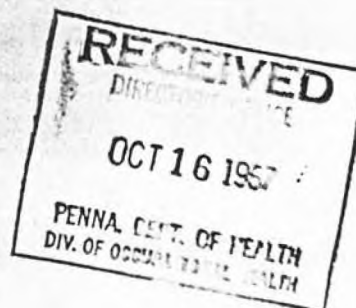
Attached is a copy of a letter received from the above company in reply to a certified letter sent to them on September 15, 1967.

Mr. Byran is new with the company. I was unable to meet with him during the last follow-up visit as he had another appointment; however, Mr. Reagan states that he was more concerned with the dusty conditions in the plant than was the previous plant manager. An improved housekeeping program was evident in the plant. A conference will be scheduled with the new plant manager to discuss the planned improvements to learn if they are to cover all the areas of concern.

The company had indicated in a previous letter (8/8/66) that they would start a chest X-ray program. However, on the follow-up visit it was learned that these plans had been dropped. It might be advisable for one of our physicians to contact the plant's physician and explain the necessity for establishing a periodic chest X-ray program.

JAP:ilp

attachment



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 350 North Street, Harrisburg, PA 17120-0090  
 PA Historical & Museum Commission

*Copy to Hbg.*

TELEPHONE: 222-0710 222-0711 222-0712



CRANE CO. • 4100 SOUTH KEDZIE AVENUE • CHICAGO, ILLINOIS 60632

Reply To:  
P. O. BOX 711  
NEW CASTLE, PENNSYLVANIA  
Phone: Oliver 4-5531  
TWX-415-477-0346

October 5, 1967

Mr. H. J. Suroviec  
Regional Industrial Hygienist  
Region III Office  
996 South Main Street  
Meadville, Pennsylvania 16335

Dear Mr. Suroviec:

In response to your letter dated September 15, 1967 please be advised as follows:

With regard to Recommendation No. 1 in your survey report of July 12, 1967, our Medical and Health program, which is under the direct supervision of the plant physician, Dr. Paul B. Wilson, calls for X-rays of employees who our observation indicates may have excessive dust exposure. These will be taken as Dr. Wilson deems necessary from a medical point of view.

It is also to be noted in conjunction with the existence of dust exposure that our adoption of Bureau of Mines approved respirators following your original survey has attained the point wherein all personnel at key locations are wearing this equipment thereby eliminating much of the hazard. Mr. Pierro has noted this improvement.

In reply to your comments on Recommendations No. 4 and No. 5, we respectfully request that your department be cognizant of the fact that our New Castle Plant is an old plant. The equipment has been in operation for a number of years. This makes adequate ventilation controls exceptionally hard to achieve.

We have completed since Mr. Pierro's visit on August 9, 1967 the replacement of a worn out exhaust ventilating stack at #1 and #2 unit muller. This work was accomplished on September 1st and 2nd and we feel sure has made a difference in the dust concentration in this area.

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RECEIVED  
OCT 6 - 1967  
REGION III

CRANE CO. • 4100 SOUTH KEDZIE AVENUE • CHICAGO, ILLINOIS 60632

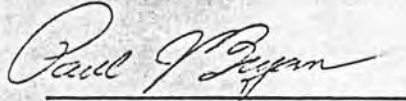
October 5, 1967

We are currently planning modernization of our foundry production facilities which will make it possible to alleviate the conditions mentioned in the recommendations. However, this planning is now in the engineering phase and to date is only on a drawing board. Our new foundry unit when it is installed will contain modern exhaust systems which are lacking on the older equipment. At this time we can only give you a tentative completion date for this project of mid-year 1969.

We trust that this will satisfy the recommendations of your department.

Very truly yours,

CRANE CO.

  
Paul J. Bryan  
Plant Manager

PJB:gs

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PA Historical & Museum Commission

Region III Office  
996 South Main Street  
Meadville, Pennsylvania 16335  
Phone: (814) 336-1191  
September 15, 1967

Crane Company  
Box 711  
New Castle, Pennsylvania 16101

Attention: Mr. Paul J. Bryan  
Plant Manager

Gentlemen:

A survey was made on February 24 and March 2, 1966 to evaluate employees' exposures to silica dust in the foundry. A report was sent to the company on July 12, 1966 and the following recommendations were made:

1. Institute a program of annual chest X-ray examinations for personnel exposed to dust.
2. Supply U. S. Bureau of Mines approved respirators for pneumoconiosis-producing dust to workers in the following areas:
  - A. All muller operations except the core room muller and exhaust ventilated unit in the casting clean-up area.
  - B. Conveyor loading area for the shot blasting unit.
  - C. All shakeout operations except the No. 3 unit which is exhaust ventilated.

Respirators are recommended only as a temporary means of protection until exhaust ventilation or other permanent controls are installed.

3. Repair the ceiling ventilating fan located over the main aisle near the No. 5 molding unit.
4. Reduce dust exposure at the facing sand mullers for the Nos. 1 and 2 molding units and the No. 3 molding unit.

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Crane Company  
New Castle, Pennsylvania 16101

-2-

September 15, 1967

Enclosing and exhaust ventilating the mullers and skip hoists should help reduce dust levels. Dust controls are also needed for the manual handling of facing sand. Wetting the sand before loading into the muller should be considered.

5. Exhaust ventilate the No. 2 shakeout area and the shakeout grate in the clean-up area. Dust from the latter unit appeared to increase the dust concentration significantly at the exhaust ventilated muller located across the aisle. (See Table 1.) Exhaust ventilation should also be considered in the No. 4 shakeout area.

Mr. Reagan, in his letter dated August 8, 1966, stated that consideration was being given to the above recommendations. On subsequent visits to the plant it was found that Recommendations Nos. 2 and 3 were accomplished. As of August 9, 1967, the date of our latest visit by Mr. John Pierro, industrial hygienist of this office, Recommendations Nos. 1, 4 and 5 had not as yet been effected. Please notify this office in writing, within 15 days following receipt of this letter, of the measures taken to comply with our recommendations and the date on which such measures are expected to be completed.

Very truly yours,

H. J. Suroviec  
Regional Industrial Hygienist  
Region III

HJS:JAP:ilp

Certified Mail No. 556053

Re: Crane Co. - New Castle, Pa.

PA 2 - 100-1000000

880 Main St. - New Castle, Pa. 16101

PA 2 - 100-1000000

REGION III  
 PROD. MFG. OR SERVICE Cast  
Iron Boilers & Radiators  
 DATE 8/9/67  
 PLANT Crane Company

DEPARTMENT OF HEALTH  
 OCCUPATIONAL HEALTH  
 FIELD ACTIVITY REPORT  
 8 1/2 x 11

EMPLOYEES  
 MALE 448  
 FEMALE 22  
 TOTAL 470

COUNTY  
37  
 IND. CODE  
33

ADDRESS  
Box 711, New Castle, Pa. 16101

PERSON INTERVIEWED R. P. Reagen

TITLE Personnel Manager

PURPOSE: INVEST.; SURVEY; INSPECT.; PRELIM.; F.U.; CONF.; VISIT;  
 REASON: SELF-INIT.; O.D. REP.; COMPL.; REQUEST; SOURCE

| SPECIFIC HAZARD OR<br>CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS                              |  | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|----------------------------------------------|--|--------------|----|----------|
|                                 |                    | WRITTEN -- VERBAL                            |  | YES          | NO | IN PROG. |
| Silica dust                     | 400                | 1.) Institute chest X-ray program            |  |              | X  |          |
|                                 |                    | 2.) Supply approved respirators              |  | X            |    |          |
|                                 |                    | 3.) Repair ceiling ventilation fan           |  | X            |    |          |
|                                 |                    | 4.) Exhaust ventilate the mullers            |  |              | X  |          |
|                                 |                    | 5.) Exhaust ventilate shakeout<br>operations |  |              | X  |          |

SAMPLES COLLECTED N/A TOTAL

DETERM. MADE N/A TOTAL

MEDICAL N/A O.D. REPORTED, NO. & KIND N/A

REMARKS A follow-up visit and inspection was made at the same time. The company's program  
to replace the unapproved respirators with approved BY John Pierro

PUNCH CARD ☒ YES ☐ NO FOLDER ☒ YES ☐ NO

respirators has been very successful. All workers who wear respirators are now using one of four different approved models supplied by the company.

Mr. Reagen stated that since the last visit to the company, they have had a change in plant managers. According to him, the old plant manager had felt that it would be impossible for them to exhaust ventilate the sand mullers and shakeout units in question. He did not know if the present plant manager was familiar with our survey report or not. He also stated that the company is no longer planning to institute the chest X-ray program.

Since the plant manager was unavailable at the time of the visit, a follow-up letter will be sent to him stating the recommendation and asking him to let us know of their plans to comply with them.

FORM DA-501-B  
300M 10-58

SUBJECT: Change in name of Plant

TO: E. J. Baier, Chief  
Industrial Hygiene Section  
Division of Occupational Health

FROM: J. W. Knauber *J. W. Knauber*  
Regional Industrial Hygienist  
Region III

*Louise  
Mrs. E. Baier*  
COMMONWEALTH OF PENNSYLVANIA  
976 South Main Street  
Meadville, Pennsylvania  
March 16, 1960

MAR 18 1960

National U. S. Radiator Company has changed name to Crane Company.  
Address is: East Washington Street, New Castle, Pennsylvania.

JWK/rh

*3-18-60 Notation made and furnished back.  
L.H.B.*

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350 North  
20-0090

BUREAU OF OCCUPATIONAL HEALTH  
734 WEST FOURTH STREET  
WILLIAMSPORT, PENNSYLVANIA 17701

November 16, 1972

CERTIFIED MAIL

Crane Company  
(Somerset Plant)  
P. O. Box 392  
Somerset, Penna. 15501

Attention: Mr. Richard Payne  
Personnel & Industrial Engineer

Gentlemen:

On September 6, 1972, a survey was conducted in your plant to re-evaluate the batch mix operator's exposure to dust containing quartz.

Airborne dust exposures were determined by particle count. The results are listed in the accompanying Table as million particles per cubic foot of air (mppcf) along with an explanation of the method used to calculate the threshold limit value (TLV). Settled airborne dust samples were collected to determine quartz content and the results are also listed in the Table.

The findings of this survey indicate that the modifications to the local exhaust ventilation system for the batch mix car have failed to adequately reduce the batch mix operator's exposure to dust containing quartz to less than the TLV and the screw transport system and the dumping of the fine material contributed greatly to his exposure.

Therefore, based on the findings of this survey, you are ordered to submit to this office within 30 days of the receipt of this report a detailed engineering plan and compliance schedule for the reduction of the operators exposure to dust containing quartz to a permissible level in the batch mixing department. (Sections 201.11 & 201.71)

Also continue with your current programs for personal respiratory protection and chest x-ray for the employee in the batch mixing department as prescribed in Chapter 201, Sections 201.13 and 201.14 until his exposure is reduced to a permissible level.

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PA 17120-0090

*Encl  
File*

*11-17-72*

Crane Company

- 2 -

Enclosed are copies of our Hygienic Information Guides entitled, "Occupational Pneumoconiosis", "Personal Respiratory Protective Equipment", and "Ventilation", our booklet entitled, "Dust", and Chapter 201, as amended.

If you have any questions, please let us know.

Sincerely yours,

*RB*

Russell Bobkoskie  
Regional Industrial Hygienist  
Williamsport Regional Office

RLB/jsa

Enclosures

Dept. of the General Record  
Pamphlet 6022

PA STATE ARCHIVES

350 North Second Street, Harrisburg, PA 17120-0030  
PA Historical & Antiquarian Society

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF OCCUPATIONAL HEALTH

Table

Dust Concentrations

Crane Company  
Somerset, Pennsylvania

| Location                                | Threshold limit value*<br>(million particles per cubic foot of air) | Count    | Remarks                                                                                 |
|-----------------------------------------|---------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------|
| +                                       |                                                                     |          |                                                                                         |
| Batch mixing department<br>(24% quartz) | 9                                                                   | 4        | Batch mix operator's<br>exposure during crush-<br>ing of scrap clay                     |
|                                         |                                                                     | 5        |                                                                                         |
|                                         |                                                                     | 18<br>23 | Batch mix operator's<br>exposure during weigh-<br>ing of coarse material                |
|                                         |                                                                     | 457      | Batch mix operator's<br>exposure during trans-<br>port and dumping of<br>fine material. |

\*Threshold limit value (TLV) applicable to airborne dust exposure for an 8-hour working day as determined by a standardized impinger sampling and microscopic dust counting technique:

$$TLV (mppcf) = \frac{300}{\% \text{ quartz} + 10}$$

Survey by:  
Andrew J. Majer  
Industrial Hygienist

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DEPARTMENT OF ENVIRONMENTAL RESOURCES  
OCCUPATIONAL HEALTH

7315

PAGE 1 OF 1  
REGION IV  
DATE COLLECTED 9-6-72  
DATE SUBMITTED 9-8-72  
DATE REC'D IN LAB 9/14/72

APP ELEMENT \_\_\_\_\_

## SAMPLE AND LABORATORY REPORT

COMPANY (Name)

(Address)

Crane Company

Somerset

PRODUCT MANUFACTURED OR SERVICE  
sanitary wearMATERIAL SAMPLED  
settled airborne dustAPPARATUS AND SUCTION SOURCE  
N.A.COLLECTED BY  
Andrew J. MajerCOLLECTION MEDIUM  
N.A.ANALYSIS DESIRED  
% free silica

OTHER SUBSTANCES PRESENT

COMMENTS

| SAMPLE NUMBER | SAMPLING LOCATION AND OPERATION | AIR VOL. | LABORATORY RESULTS |
|---------------|---------------------------------|----------|--------------------|
|               |                                 |          | % FREE silica      |
| 4-2253        | rolling-crushing of clay area   |          | 24 *               |
| 4-2254        | silo-weighing & unloading area  |          | 1 *                |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |
|               |                                 |          |                    |

## REPORT OF ANALYSIS

\* No cristobalite or tridymite detected.  
Analysis by x-ray diffraction.

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Please Contact:

PA STATE ARCHIVES

350 N

7320-0090

ANALYSIS TIME

DATE FINISHED

DATE RECEIVED

ANALYSIS BY

CHIEF, LABORATORY SECTION

DATE TYPED

DATE MAILED

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HEALTH  
OCCUPATIONAL HEALTHREGION IV  
PROD. MFG. OR SERVICE  
china fixtures  
DATE OF ACTIVITY 2-2-72FIELD ACTIVITY REPORT  
(Occupational Health)*Z Janakian*  
*Dr. Rapp*  
*File*

## PLANT

Crane Company

## ADDRESS

Somerset, Penna. P. O. Box 392

## ZIP CODE

15501

## TELEPHONE

814-445-6581

## PERSON INTERVIEWED

Mr. Richard Payne

## TITLE

Personnel Manager

## EMPLOYEES

MALE 99

FEMALE 6

TOTAL 105

## IND. CODE

3261

## COUNTY

56 - Somerset

## PUNCH CARD

YES ☒NO ☐

## FOLDER

YES ☒NO ☐

## N.S.N.

YES ☒NO ☐

PURPOSE: INVEST.; SURVEY; INSP.; PRELIM.; F.U.; CONF.; VISIT; OTHER \_\_\_\_\_

REASON: SELF-INIT.; P.D. REP.; COMPL.; REQUEST; SOURCE \_\_\_\_\_

SAMPLES COLLECTED \_\_\_\_\_

TOTAL \_\_\_\_\_

(NO. &amp; KIND)

DETERM. MADE \_\_\_\_\_

TOTAL \_\_\_\_\_

(NO. &amp; KIND)

MEDICAL — O.D. REPORTED, NO. &amp; KIND \_\_\_\_\_

## RECOMMENDATIONS AND REMARKS

| SPECIFIC HAZARD<br>OR CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS    |  | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|--------------------|--|--------------|----|----------|
|                                 |                    | WRITTEN --- VERBAL |  | YES          | NO | IN PROG. |

Follow-up visit made to check compliance for recommendations made as a result of a silica dust survey made 6-9-71 (see report 7-20-71.)

Rec #1. Reduce exposure to silica dust — etc. This may best be accomplished by either improving the existing ventilation controls or installing a new L.E.V. system. Installed a large additional blower at the mid point in the L.E.V. system to increase exhaust capabilities. Plant also installed draw curtains which will be to aid in better capture of dust particles and to prevent dust being spilled on floor. Also plant has a maintenance and clean out program for the entire L.E.V. system.

Rec #2. "Complied with — has approved dust respirators

Rec #3. Complied with — has respirators maintained in accordance with Chapter 201 - Section 201.13 (a) & (b).

Rec #4. Complied with — x-ray program section (a) & (b). The MD is Dr. Steven Y. Toth of Somerset. *due Nov. 1973*

Plant to do a follow-up silica dust survey within a period of 3 months.

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350 North Street, Harrisburg, PA 17120-0090

PA Historical & Museum Commission

BY Andrew J. Majer

WINS 1,5

☐ OVER

RIH *KB*

*Full & Attach P.C.*

NH-19003 REV. 12-67

REGION IV

PROD. MFG. OR SERVICE

Toilet Wares

DATE OF ACTIVITY Mar. 10, 1969

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HEALTH  
OCCUPATIONAL HEALTH

FIELD ACTIVITY REPORT

|                  |                      |
|------------------|----------------------|
| EMPLOYEES        | COUNTY               |
| MALE <u>109</u>  | <u>56 - Somerset</u> |
| FEMALE <u>18</u> | IND. CODE            |
| TOTAL <u>127</u> | <u>32</u>            |

PLANT

Crane Company (Somerset Div.)

ADDRESS

Somerset

ZIP

15501

PHONE

814-455-6581

PERSON INTERVIEWED

Mr. J. Coughenour

TITLE

Plant manager

PURPOSE: INVEST.; SURVEY; INSPECT.; PRELIM.; F.U.; CONF. IT:

REASON: SELF-INIT.; O.D. REP.; COMPL.; REQUEST; SOUR

| SPECIFIC HAZARD OR<br>CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS    |  | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|--------------------|--|--------------|----|----------|
|                                 |                    | WRITTEN --- VERBAL |  | YES          | NO | IN PROG. |
|                                 |                    |                    |  |              |    |          |
|                                 |                    |                    |  |              |    |          |
|                                 |                    |                    |  |              |    |          |
|                                 |                    |                    |  |              |    |          |

SAMPLES COLLECTED  
(NO. & KIND)

TOTAL

DETERM. MADE  
(NO. & KIND)

TOTAL

MEDICAL - O.D. REPORTED, NO. & KIND

PUNCH CARD

YES ☒

NO ☐

FOLDER

YES ☒

NO ☐

REMARKS: Update punch card dated Jan. 1968. P.C. accurately written as to operations, hazards and controls. Shown thru plant by Mr. Coughenour.

At weighing-silo operation delete the  $TiO_2$ , barium carbonate dust and Imperial clay dust hazards as these are no longer being used. Also it was observed that during "Drop-In" visit the employees in this area were wearing at all times an approved dust respirator even though these is LEV and collectors. A silica dust survey could be made in this plant at the silo mixing and grinder areas. Uses Wilson BM 2170 dust respirators.

ADD:

Grinders  
(earthenware)

silica dust, noise, dermatitis  
(abrasive, carborundum dust,  
Al. oxide dust, illumination

LEV to outside, some wetting,  
dust respirators, personal  
hygiene, protective clothing  
good lighting

No air recirculation units or tank entry. No machine shop operation, welding or solvent degreasing. Has excellent wall & ceiling fans throughout plant. Most operations are wet material.

ADD:

To mold operation

"Ultracal #30,  
(U.S. Gypsum Co.)  
"Best Wall Plaster Pottery K-59  
(Pacifico Co.)

AS LISTED

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360 North Third Street, Harrisburg, PA 17120-0090  
PA (114-1000) & 1-800-392-0000

BY A.J. Majer

RIH

WINS 3.5

*4/3/69  
JH*

3-21-68

Continued - Page 2

*file*  
 Crane Company  
 (Somerset Division)  
 Somerset, Pennsylvania 15501

| OPERATION                          | HAZARD                        | CONTROL MEASURE                                                                                                |
|------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------|
| Inspection of glazed units -Contd. |                               |                                                                                                                |
| Baking finished<br>Vitreous China  | Heat 2650°<br>Carbon Monoxide | Enclosed Kilns with Local<br>exhaust outlets.<br>Covered pipes & Ducts.<br>Louvers in roof.<br>Asbestos Gloves |
| Gas Fired Kilns (2)                |                               |                                                                                                                |
| Inspection - Glost<br>2 Units      | Silica Dust                   | L.E. - B.M. approved<br>Reciprocators<br>300 F P M (4 Sec. exposure)                                           |
| Inscription<br>2 Units             | Silica Dust                   | Local Exhaust                                                                                                  |

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350 North Second Street Harrisburg, PA 17120-0000

PA Historical &amp; Museum Commission

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HEALTH  
OCCUPATIONAL HEALTH  
FIELD ACTIVITY REPORT  
8 1/2 x 11

REGION IV  
PROG. MFG. OR SERVICE Sanitary wear  
DATE August 22, 1966  
PLANT Crane Company

EMPLOYEES  
MALE 75  
FEMALE 5  
TOTAL 80

COUNTY 56  
IND. CODE 32

ADDRESS Somerset, Pa.

PERSON INTERVIEWED Mr. C. W. Byford TITLE Superintendent  
PURPOSE: INVEST.; SURVEY; INSPECT.; PRELIM.; F.U.; CONF.; VISIT;  
REASON: SELF-INIT.; O.D. REP.; COMPL.; REQUEST; SOURCE

| SPECIFIC HAZARD OR<br>CONDITION | WORKERS<br>EXPOSED | RECOMMENDATIONS  | ACCOMPLISHED |    |          |
|---------------------------------|--------------------|------------------|--------------|----|----------|
|                                 |                    | WRITTEN - VERBAL | YES          | NO | IN PROG. |
| Silica dust                     | 25                 | None             |              |    |          |
|                                 |                    |                  |              |    |          |
|                                 |                    |                  |              |    |          |

SAMPLES COLLECTED \_\_\_\_\_ TOTAL \_\_\_\_\_  
(NO. & KIND)  
DETERM. MADE \_\_\_\_\_ TOTAL \_\_\_\_\_  
(NO. & KIND)  
MEDICAL \_\_\_\_\_ O.D. REPORTED, NO. & KIND \_\_\_\_\_

REMARKS The present PIR should be retained. The company has made several notable improvements

in dust control since the last inspection. A new BY W. C. Mawhinney  
PUNCH CARD ☒ YES ☐ NO FOLDER ☒ YES ☐ NO

enclosed screw conveyor has replaced a conveyor belt in the mixing area. Larger and more powerful fans have been installed in the local exhaust down draft system at the Clay Dept. inspection. Two new grinding units in the glost inspection area have enclosures with local exhaust and 15 horsepower motors. Inscribing the company name in the finished product is done with a small blasting unit using #180 grit from J. H. Mathews Co. This unit blasts the surface with metallic grit for 4 seconds. The grit is collected in the enclosed unit. A new local exhaust outlet has been installed at the plaster mixing area.

There was a recent claim for silicosis by an employee who had worked for 20 years in the mines. He had only worked for this company for a few years. The claim is still under litigation. Chest X-rays are now required in pre-employment physical examinations. Accompanied by Mr. Byford.

The company name has been changed from Alliance Ware Inc. to Crane Company, Somerset Division.

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PA Historical & Museum Commission