Occupational Safety and Health Administration
Complaint

U.S. Department of Labor

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

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.

LOG # 1637

For Official Use Only

Area	Date Received	Time

Region	Received By	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
UNION CARBIDE CORPORATION

Employer's Address *(Street)* *(City)*
Hwy. 146 and Hwy 1765

(State) *(Zip Code)* Telephone
Texas City, TX 945-7411

1. Kind of business
mfg. chemical

2. Specify the particular building or worksite where the alleged violation is located, including address.
Area where bldg. 119 was.

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

Jim Rex, Supervisor Operations

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

1. Employee exposure to polyvinyl choride gum while cleaning dumpster buckets.

UCTC 21222

OSHA-7 (Rev. October 1977)

CONTINUED ON REVERSE SIDE