March 16, 2010

UNIVERSITY OF WASHINGTON
Attn: Shair Spung, Risk MGMT
PO Box 351276
Seattle, WA 98195-1276

Inspection: 313893174
  UBI: 178019988
  Region: 2-Safety
  Inspector: DAN PITTS (B2108)
  Reference: 202917837

Dear Employer:

Enclosed are the results of the safety and health inspection of your workplace. This packet contains:

• Citation Invoice – The total assessed penalty is $390.00.
• Citation and Notice of Assessment — Washington Administrative Code (WAC) Violations.
• Hazard Correction instructions and form – Correct all violations and return written verification or additional penalties may result.
• Employer Appeal Rights – You have 15 working days to appeal this citation.

You must immediately post this Citation and Notice of Assessment at or near where the violation(s) occurred, where employees can easily find and read it, or where employees normally receive posted information. All postings must remain until you have corrected all violations, or for three working days, whichever is longer. “Working day” means a calendar day, except Saturdays, Sundays and all legal state holidays.

The Occupational Safety and Health Administration (OSHA) publishes Division of Occupational Safety and Health (DOSH) inspection results on the Internet at www.osha.gov, since this information is available under provisions of the Federal Freedom of Information Act. It is posted 30 days after the date the results are issued.

If you have questions, call the compliance supervisor, NICKOLAS STILNOVICH, at (206) 515-2885.

Respectfully,

Michael A. Silverstein
Michael A. Silverstein
Assistant Director
Division of Occupational Safety & Health

Enclosure(s)
Summary of Assessed Penalties
The Citation and Notice of Assessment includes a full description of each violation.

<table>
<thead>
<tr>
<th>Violation Item</th>
<th>Violation Type</th>
<th>WAC</th>
<th>Correction Due Date</th>
<th>Penalty Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-1</td>
<td>Repeat General</td>
<td>296-800-14005</td>
<td>6/17/2010</td>
<td>$390.00</td>
</tr>
<tr>
<td>2-1</td>
<td>General</td>
<td>296-800-32005(1)</td>
<td>Corrected</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Total assessed penalties $390.00

PAYMENT INFORMATION

Payment is due 15 working days from receipt of this citation.
Make check payable to the Department of Labor and Industries.
Write Inspection number 313893174 on the check and mail to:

Attn: DOSH Cashier
Department of Labor and Industries
PO Box 44835
Olympia, WA 98504-4835
Or deliver to: Any L&I office
Violation 1 Item 1

WAC 296-800-14005

Violation Type: Repeat General

The employer did not ensure that the accident prevention program was tailored to the needs of the particular operation and to the type of hazards involved. The accident prevention program did not address hazards associated with the safe use and operation of golf carts.

The University of Washington includes a wide range of hazards with potential for injury that can be controlled through a properly developed and implemented accident prevention program.

The violation above is cited as a repeat of Violation #1, Item #1, cited on BIIA Board Order/Remand with Sidebar Inspection #311406862 issued on 5/29/2009. You must provide proof of correction by the correction date shown below. Failure to meet this date may result in penalties.

The following additional correction documentation is required for this violation: Copy of the Accident Prevention Program pertaining only to golf carts.

Correct by: 6/17/2010
Assessed penalty: $390.00
Violation 2 Item 1  
Violation Type: General  
WAC 296-800-32005(1)

In the following instances, the employer did not report two in-patient employee hospitalizations to the Division of Occupational Safety and Health (DOSH) within 8 hours of the incident as required by this standard.

1. The employer did not report an in-patient employee hospitalization on November 11, 2009. DOSH was not notified until November 30, 2009.

2. The employer did not report an in-patient employee hospitalization on November 26, 2009. DOSH was not notified until November 30, 2009.

The lack of notification to DOSH of an employee in-patient hospitalization can result in a delayed and incomplete investigation that can increase the possibility of another employee hazard exposure.

To report, call 1-800-423-7233 for the DOSH toll-free hotline or contact your nearest Labor & Industries office by phone or in person, or call the OSHA toll-free hotline, 1-800-321-6742.

This violation was corrected during the inspection.  
Assessed penalty: $0.00
What you must do now:

- Check the correction due date(s) shown on the enclosed Hazard Correction Form. You must fully correct the hazards by these dates.
- Describe on the form how you corrected each hazard, rather than what you intend to do in the future. Examples:
  
  **Right:**  All staff have received the required training.
  
  **Wrong:**  All staff will receive the required training next week.

- Use attachments if you need more space. Submit additional documentation of hazard correction if requested in the citation packet.
- Fill in the date you corrected the hazard and sign.
- Post a copy of the completed form for at least three working days, or until you have corrected all violations, whichever is longer. It must be posted near the hazard location or in a place that is readily accessible by affected employees and their representatives.
- Send your completed form to the address provided.

**Note:** If we do not receive written confirmation you have corrected the hazards, we will take follow-up action, which may include additional penalties. If you provide us with false information, you may face criminal penalties.

If you are unable to fix the hazard(s) by the correction due date(s):

We must receive your written request for an extension before the correction due date(s) listed for the hazard(s). Correction due dates are shown on the enclosed Citation and Notice of Assessment and on your Hazard Correction Form(s).

Extensions are not automatically granted. To be considered for an extension, you must provide the following:

- Inspection number, employer name, telephone number, and site address.
- Violation and Item number for each requested extension.
- Correction due date on the citation and additional time needed.
- Steps taken to fix the hazard by the correction due date.
- Why you cannot correct the hazard by the correction due date.
- How you will protect your employees until you fix the hazard.

For more information, contact: NICKOLAS STILNOVICH, Compliance Supervisor
Or call: (206) 515-2885
Department of Labor and Industries
315 5th Ave S Suite 200
Seattle, WA

You must post all documentation associated with your request for extension with your citation packet. All postings must remain until you have corrected all violations, or unless you have appealed and received and posted your hearing notice.
Hazard Correction Form
Inspection: 313893174

UBI: 178019988
Legal Name: UNIVERSITY OF WASHINGTON
Site Address: North side of Kane Hall, Seattle, WA, 98195

Issued: March 16, 2010
DBA Name: UNIVERSITY OF WASHINGTON

You must complete this form and return it to: DAN PITTS, Department of Labor & Industries
Division of Occupational, Safety and Health, 315 5th Ave S Ste 200,
Seattle, WA 98104
Or Fax to: (206) 515-2879

Violation(s) are fully described in the Citation and Notice of Assessment section.

<table>
<thead>
<tr>
<th>Violation, Item &amp; Group#</th>
<th>Type of Violation</th>
<th>WAC# Violated</th>
<th>Correction Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-1</td>
<td>Repeat General</td>
<td>296-800-14005</td>
<td>6/17/2010</td>
</tr>
</tbody>
</table>

How you corrected the hazard ➔

Date you corrected the hazard ➔

I certify that the hazards described in this Employer Certification of Hazards Corrected have been corrected as described above. Affected employees and their representatives have been informed of the correction activities. I am aware that knowingly providing false information may result in criminal penalties (RCW 49.17.190(2)).

Signature
Name

Title
Date
Phone No.

DOSH USE ONLY

DOSH Reviewer's Signature
Date

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For Employers

If you are cited for a violation of Occupational Safety and/or Health rules, you have the right to appeal the citation. **You have 15 working days from the date you receive this citation to appeal.** (RCW 49.17.140(1)) “Working day” means a calendar day, except Saturdays, Sundays and all legal state holidays. Your appeal must be in writing. It may be mailed, faxed, or personally delivered.

**Your appeal must include:**
- Name, address, telephone number, and fax number if available of the employer who is appealing, and for the employer’s representative, if any, such as an attorney or interpreter.
- Inspection Number (You will find this nine-digit number on your citation.)
- Statement explaining:
  1. What you think is wrong with the citation and any related facts.
  2. How you think the citation should be changed.
  3. What relief you are seeking and why.

Note: Employees and/or employee representatives may elect to participate in appeal hearings.

**Posting requirement:**
You must post your appeal documents (along with this citation packet) until the appeal is resolved. You must also post all other documents related to this appeal.

For Employees or Their Representatives

If your employer is cited, you may only appeal the correction due date(s).

**Your appeal must include:**
- Your name, address, telephone number, and fax number if available and the same information for anyone who is representing you, if any.
- Inspection number.
- Statement explaining why the correction due date should be changed.

<table>
<thead>
<tr>
<th>Send all appeals to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Director for DOSH</td>
</tr>
<tr>
<td>Attn: Appeals Program</td>
</tr>
<tr>
<td>PO Box 44604</td>
</tr>
<tr>
<td>Olympia, WA 98504-4604</td>
</tr>
<tr>
<td>Fax to: (360) 902-5581 or deliver to: Any L&amp;I office</td>
</tr>
<tr>
<td>For more information call the Appeals Program: (360) 902-5486.</td>
</tr>
</tbody>
</table>