July 6, 2012

BOEING COMPANY THE
BOEING COMMERCIAL AIRPLANE
100 North Riverside
Mc 5003-3357
Chicago, IL 60606-1596

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 $3,600.00
- **Citation and Notice of Assessment** – Washington Administrative Code (WAC) Violations.
- **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](http://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, ERIC WISEMAN, at (425) 290-1429.

Respectfully,

**Anne F. Soiza**
Anne F. Soiza
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>Serious</td>
<td>296-800-14025</td>
<td>Corrected</td>
<td>$3,600.00</td>
</tr>
<tr>
<td>2-1</td>
<td>General</td>
<td>296-800-21005</td>
<td>Corrected</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Total assessed penalties**

$3,600.00

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**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 315789933 on the check and mail to:

**Attn:** DOSH Cashier  
Department of Labor and Industries  
PO Box 4835  
Olympia, WA 98504-4835  
Or deliver to: Any L&I office
Violation 1 Item 1  
WAC 296-800-14025  
Violation Type: Serious

In the following instances, the employer did not supervise and enforce their accident prevention program in a manner that was effective in practice.

A Boeing 787 Aircraft #21 was to be towed along Taxiway Alpha at Paine Field Everett on February 3, 2012 per the employer's written Aircraft Towing Procedure.

1. Supervision verbally instructed the tow team leader to deviate from written aircraft towing procedures by removing the two wing walkers and tail walker from their assigned positions while towing the aircraft on the taxiway. The wing walkers and the tail walker were not in their assigned positions which assists in the monitoring of the safety of the chock walkers and provide capability to signal with their assigned devices to stop the tow when necessary.

2. The tow team leader did not effectively enforce the aircraft towing procedure. The tow team leader did not stop the tow when the chock walker drifted out of the assigned position.

This violation was corrected during the inspection. 
Assessed penalty: $3,600.00

Violation 2 Item 1  
WAC 296-800-21005  
Violation Type: General

The employer did not provide adequate task lighting for the move of a Boeing 787 Aircraft #21 along Taxiway Alpha at Paine Field Everett on the evening of February 3rd 2012. During a recreation of an aircraft tow, lighting levels varied from 1-2 foot-candles. When determining average light levels, no single lighting level can be less than 1.5 foot-candles for non task outdoor activities. The minimum average lighting level for non task outdoor activities is 3 foot-candles.

This violation was corrected during the inspection. 
Assessed penalty: $0.00
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.

For violations classified as serious, willful, repeat serious, or failure to abate serious, an employer must correct the violations by the date listed on the Citation and Notice / Employer’s Certification of Abatement form unless a stay of abatement date is requested in the appeal as described on this page. A stay of abatement date means the employer’s requirement to abate or correct the hazard is put on hold until the appeal is resolved. All general and repeat general violations under appeal automatically have stay of abatement dates until a final order on those violations has been issued. If you only need an extension of an abatement date, please see the above section entitled, **“If you are unable to fix the hazard(s) by the correction due date(s)”**.

**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 in the top right corner of this page.)
- 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.

If you are requesting a stay of abatement date for serious, willful, repeat serious or failure to abate serious, you must also include:
- Each violation and item number for which a stay of abatement date is requested; and
- The reason for the stay of abatement date request.

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>
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<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>
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</tbody>
</table>