

Maine Department of Labor

Bureau of Labor Standards
Workplace Safety & Health Division

Inspection Number: 1819673
Inspection Date: 04/16/2025-04/24/2025
Issuance Date: 05/21/2025



Citation and Notification of Penalty

Company Name: Town of Casco/ Bulky Waste - Transfer Station
Inspection Site: 449 Leach Hill Road Casco, ME 04015

Citation 1 Item 1 a Type of Violation: **Serious**

29 CFR 1910.134(e)(1): The employer did not provide a medical evaluation to determine the employee's ability to use a respirator, before the employee was fit tested or required to use the respirator in the workplace.

The Town of Casco Bulky Waste and Transfer Station did not provide medical evaluations for employees required to wear N95 respirators. Medical evaluations were not complete for four of 4 employees.

Acceptable and feasible methods to correct the conditions include but are not limited to: Provide, obtain, and maintain medical evaluations for all employees who use respiratory protection. Employees who do not receive a medical evaluation shall be restricted from tasks requiring a respirator until they receive a medical evaluation by a Physician or Other Licensed Health Care Professional (PLHCP). Use of respiratory protection and respirator fit testing is only conducted on employees who have a current medical evaluation from a PLHCP.

Date By Which Violation Must Be Abated:
Proposed Penalty:

June 25, 2025
\$700.00

Citation 1 Item 1 b Type of Violation: **Serious**

29 CFR 1910.134(f)(2): The employer did not ensure employees using a tight-fitting facepiece respirator were annually fit tested.

The Town of Casco Bulky Waste and Transfer Station did not complete fit testing on N95 respirators. Fit testing was not completed for four of 4 employees.

Acceptable and feasible methods to correct the conditions include but are not limited to: Provide qualitative or quantitative fit testing for employees required to wear respirators. Provide initial and annual fit tests prior to use as well as if the employer observes visual changes in an employee's physical condition that could affect respirator use / fit.

Date By Which Violation Must Be Abated:
Proposed Penalty:

June 25, 2025
\$0.00

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Citation 1 Item 1 c Type of Violation: **Serious**

29 CFR 1910.134(k): The employer did not provide annual respirator training to employees who are required to use a respirator in the workplace.

The Town of Casco Bulky Waste and Transfer Station did not complete annual training for employees required to wear N95 respirators. Annual refresher training was not completed for four of 4 employees.

Acceptable and feasible methods to correct the conditions include but are not limited to: Conduct annual training ensuring all employees can demonstrate knowledge found in 29 CFR 1910.134(k) of the OSHA respiratory protection standard titled "Training and Information".

Date By Which Violation Must Be Abated:

June 25, 2025

Proposed Penalty:

\$0.00

Citation 1 Item 2 Type of Violation: **Serious**

29 CFR 1910.1030(g)(2)(iv): The employer did not ensure annual training for employees with occupational exposure to blood or other potentially infectious material was provided within one year of their previous training.

The Town of Casco Bulky Waste and Transfer Station did not ensure that employees who have been determined to have occupational exposure to blood or other potentially infectious materials received annual training within one year of their previous training. Training was not complete for six of 6 employees.

Acceptable and feasible methods to correct the conditions include but are not limited to: Annually train all employees on the minimum training elements found in 29 CFR 1910.1030(g)(2)(vii)(A) through 29 CFR 1910.1030(g)(2)(vii)(N).

Date By Which Violation Must Be Abated:

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Proposed Penalty:

\$700.00

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Citation 2 Item 1 Type of Violation: **Other-than-Serious**

29 CFR 1910.1030(c)(1)(iv): The Exposure Control Plan was not reviewed and updated at least annually.

The Town of Casco Bulky Waste and Transfer Station did not review the Exposure Control Plan (Bloodborne Pathogens) at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. Documentation did not show when the program's last review was conducted.

Acceptable and feasible methods to correct the conditions include but are not limited to: Review and update at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Date By Which Violation Must Be Abated:

June 25, 2025

Proposed Penalty:

\$0.00

A handwritten signature in black ink, appearing to read "St. Greeley".

Steven L. Greeley, Director
Workplace Safety & Health Division

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ABATEMENT CERTIFICATION WORKSHEET

Town of Casco/ Bulky Waste - Transfer Station
449 Leach Hill Road
Casco, ME 04015
Issuance Date: 05/21/2025

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List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return to: Workplace Safety & Health Division, 45 State House Station, Augusta Maine 04333-0045.

Citation Number 1 and Item Number 1 was corrected on April 29, 2025
By (Method of Abatement): All 4 employees medically evaluated for
for respirator wear. All fit tested for respirators scheduled.

Citation Number 1 and Item Number 1b was corrected on _____
By (Method of Abatement): _____

Citation Number 1 and Item Number 1c was corrected on June 5, 2025
By (Method of Abatement): All Transfer Station Bulky Waste employees
received annual respirator training

Citation Number 1 and Item Number 2 was corrected on April 19, 2025
By (Method of Abatement): _____

Citation Number 2 and Item Number 1 was corrected on June 6, 2025
By (Method of Abatement): All employees reviewed Exposure Control plan after
being reviewed and updated on

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

Anthony Wase
Signature
Anthony Wase
Typed or Printed Name

Date
Town Manager
Title