

FORM & CONTENT OF A COMPLAINT / DIVISION ACTION ON COMPLAINTS

437-001-0285 Form and Content of a Complaint. Any person may complain to the Administrator of possible violations of any statute or of any lawful regulation, rule, standard or order affecting employee safety or health at a place of employment. A complaint, whether oral or written, should specify:

- (1) The name of the employer;
- (2) The location of the place of employment;
- (3) Where the condition or practice occurs in the place of employment;
- (4) The nature and frequency of the hazard;
- (5) The number of employees affected by the condition or practice;
- (6) The way in which the complainant is affected by the condition or practice; and
- (7) Whether the complainant desires the complainant's name and address to be kept confidential.

Stat. Auth.: ORS 654.025(2) and 656.726(3).
Hist: WCB Admin. Order 19-1974, f. 6-5-74, ef. 7-1-74.
WCD Admin. Order, Safety 5-1978, f. 6-22-78, ef. 8-15-78.
WCD Admin. Order, Safety 4-1981, f. 5-22-81, ef. 7-1-81.
APD Admin. Order 7-1988, f. 6-17-88, ef. 7-1-74.

437-001-0290 Division Action on Complaints.

- (1) At the complainant's request in writing, their identity shall be kept in confidence. Any employee of the Department who fails to maintain that confidence is subject to disciplinary action.
- (2) Complaint inspections shall be scheduled as provided for in OAR 437-001-0055(3).
- (3) Any person making a complaint to the Division shall receive written notice of the Division's action if the complainant's address is provided.
- (4) Any complainant who feels that the complaint was not adequately investigated by the Division may contact the Administrator for a review of the matter.

Stat. Auth.: ORS 654.025(2) and 656.726(3).
Hist: WCB Admin. Order 19-1974, f. 6-5-74, ef. 7-1-74.
WCD Admin. Order, Safety 5-1978, f. 6-22-78, ef. 8-15-78.
WCD Admin. Order, Safety 4-1981, f. 5-22-81, ef. 7-1-81.
APD Admin. Order 7-1988, f. 6-17-88, ef. 7-1-74.

DISCRIMINATION COMPLAINT

437-001-0295 Discrimination Complaint.

(1) An employee or prospective employee may file a complaint as provided in ORS 654.062(5) if the employee believes discrimination has occurred because:

(a) The employee opposed a practice forbidden by, or engaged in a practice provided for, in the Oregon Safe Employment Act; or

(b) The employee refused in good faith to be subjected to imminent danger provided the employer refused to correct the hazard or it was not possible to notify the employer of the danger and the employee has notified the OR-OSHA Division or other appropriate agency, of the hazard, unless excused on the basis of insufficient time or opportunity as stated in OAR 839-003-0025, Bureau of Labor and Industries rules.

(2) The complaint shall be filed with the Commissioner of the Bureau of Labor and Industries, 800 NE Oregon Street, Portland, Oregon 97232, within 90 days after the employee had reasonable cause to believe discrimination occurred. The complaint may also be filed in any Circuit Court of the State of Oregon.

(3) The complaint may also be filed with the U.S. Department of Labor, 3056 Federal Office Building, Seattle, Washington 98174, as stated in 29 CFR 1977.15.

Stat. Auth.: ORS 654.025(2) and 656.726(4).

Stats. Implemented: ORS 654.001 through 654.295.

Hist: WCB Admin. Order 19-1974, f. 6-5-74, ef. 7-1-74.

WCD Admin. Order, Safety 5-1978, f. 6-22-78, ef. 8-15-78.

WCD Admin. Order, Safety 4-1981, f. 5-22-81, ef. 7-1-81.

APD Admin. Order 6-1987, f. 12-23-87, ef. 1-1-88.

APD Admin. Order 7-1988, f. 6-17-88, ef. 7-1-74.

OR-OSHA Admin. Order 7-2002, f. 11/15/02, ef. 11/15/02.

OR-OSHA Admin. Order 8-2007, f. 12-3-07, ef. 12-3-07.