

Form A to 16 VAC 25-60-307
(Section 307 of these regulations)
Sample Abatement-Certification Letter (Nonmandatory)

(Name), Regional Director
Virginia Department of Labor and Industry
Address of the Regional Office (on the citation)

[Company's Name]
[Company's Address]

The hazard referenced in Inspection Number [insert 9-digit #] for violation identified as:

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

Citation [insert #] and item [insert #] was corrected on insert date
by: _____

Citation [insert #] and item [insert #] was corrected on [insert date]
by: _____

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

Signature

Typed or Printed Name

Form B to 16 VAC 25-60-307

(Section 307 of these regulations)
Sample Abatement Plan or Progress Report (Nonmandatory)

(Name), Regional Director
Virginia Department of Labor and Industry Address of Regional Office (on the citation)
[Company's Name]
[Company's Address]

Check one:
Abatement Plan []
Progress Report []

Inspection Number _____
Page _____ of _____
Citation Number(s)* _____
Item Number(s)* _____

Action	Proposed Completion Date (for abatement plans only)	Completion Date (for progress reports only)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

Date required for final abatement: _____

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

Signature

Typed or Printed Name

Name of primary point of contact for questions: [optional]
Telephone number: _____

*Abatement plans or progress reports for more than one citation item may be combined in a

single abatement plan or progress report if the abatement actions, proposed completion dates, and actual completion dates (for progress reports only) are the same for each of the citation items.

Form C to 16 VAC 25-60-307
(Section 307 of these regulations)
Sample Warning Tag (Nonmandatory)

□	
WARNING:	
EQUIPMENT HAZARD CITED BY VOSH	
EQUIPMENT CITED:	
HAZARD CITED:	
FOR DETAILED INFORMATION SEE VOSH CITATION POSTED AT:	
CITATION #	
CONTACT DOLI	Region
at ()	