



STATE OF WASHINGTON
DEPARTMENT OF LABOR AND INDUSTRIES
Division of Occupational Safety and Health
PO Box 44600 • Olympia, Washington 98504-4600

August 5, 2020

SEASOFT SCUBA GEAR INC
WATERMARK SCUBA GEAR INC
434 Nw Prindle St
Chehalis, WA 98532-2031

OSHA #: 1462128
Inspection: 317958063
UBI: 604064730
Region: 4-Health
Inspector ID: J2313
Reference: 209480063

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 \$85,239.00
- **Citation and Notice of Assessment** – Washington Administrative Code (WAC) Violations.
- **Employer Certification of Abatement instruction 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.

Because this inspection is public information, the result will be posted online 30 days after the above date by the Department of Labor & Industries. You may view it at <https://secure.lni.wa.gov/verify> .

Please visit www.lni.wa.gov/PublicRecords if you would like to request a copy of the inspection file. Your choices are:

- Safety & Health Citation Only
- Safety & Health Brief Inspector Summary Report (short description the inspector writes to summarize the reason for the inspection only – not complete file)
- Safety & Health Detailed Inspection Summary Report (detailed summary of inspection including penalty calculation only – not complete file)
- Safety & Health Citation and Complete Inspection File (The complete legal file which contains the detailed information regarding the inspector’s findings, the citation, and calculation of any penalty. This will be especially helpful if you are contemplating filing an appeal.)

If you have questions, call the compliance supervisor, Lyndsey Banks, at (360) 902-5409.

Respectfully,

L&I Assistant Director
Division of Occupational Safety & Health

Enclosure(s)



Invoice

Inspection: 317958063

UBI: 604064730	Issued: August 5, 2020
Legal Name: SEASOFT SCUBA GEAR INC	Opening Conference: February 10, 2020
DBA Name: WATERMARK SCUBA GEAR INC	Closing Conference: July 28, 2020
Inspection: 434 Nw Prindle St,	Inspector ID: J2313
Site: Chehalis, WA, 98532-2031	

Summary of Assessed Penalties Due

The Citation and Notice of Assessment includes a full description of each violation.

Violation Item	Violation Type	WAC	Correction Due Date	Penalty Amount
1-1	Willful Serious	WAC 296-62-07521(9)(a)	Corrected	\$18,000.00
1-2	Willful Serious	WAC 296-62-07521(13)(a)(i)	9/7/2020	\$18,000.00
1-3	Willful Serious	WAC 296-62-07521(9)(b)(ii)	8/9/2020	\$18,000.00
1-4	Willful Serious	WAC 296-800-23060(1)	Corrected	\$18,000.00
2-1	Willful General	WAC 296-62-07521(5)(g)	Corrected	\$9,639.00
3-1	Serious	WAC 296-800-15030	8/18/2020	\$600.00
3-2	Serious	WAC 296-800-27010	Corrected	\$600.00
3-3a	Serious	WAC 296-800-28030(2)	Corrected	\$600.00
3-3b	Serious	WAC 296-800-28030(4)	Corrected	\$0.00
3-3c	Serious	WAC 296-800-28030(8)	Corrected	\$0.00
3-4	Serious	WAC 296-800-28035(2)	Corrected	\$600.00
3-5	Serious	WAC 296-806-40510	Corrected	\$1,200.00
4-1	General	WAC 296-841-20005(1)	Corrected	\$0.00
4-2	General	WAC 296-842-14005	9/7/2020	\$0.00
<b style="color: red; text-decoration: underline;">Total Penalty Due				\$85,239.00

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 317958063 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



Washington State Department of
Labor & Industries
Division of Occupational Safety and Health

Post This Document

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UBI: 604064730

Issued: August 5, 2020

Legal Name: SEASOFT SCUBA GEAR INC

Opening Conference: February 10, 2020

DBA Name: WATERMARK SCUBA GEAR INC

Closing Conference: July 28, 2020

Inspection Site: 434 Nw Prindle St Chehalis, WA 98532-2031

Inspector ID: J2313

Message

This employer has been identified as a Severe Violator Enforcement case under the Labor & Industries Division of Occupational Safety & Health's (DOSH), Severe Violator Enforcement Program (SVEP). Your company will be subject to follow-up inspections to determine if the conditions cited here still exist in the future. Follow-up inspections of this company will continue at a heightened level until the Department is satisfied that the conditions no longer exist.

The following violations qualify this employer for SVEP:

1-1 (Willful Serious)

1-2 (Willful Serious)

1-3 (Willful Serious)

1-4 (Willful Serious)

The Occupational Safety & Health Administration (OSHA) has been notified. For further information, please refer to DOSH Directive 2.68 and OSHA Instruction CPL 02-00-149.

Violation 1 Item 1

Violation Type: Willful Serious

WAC 296-62-07521(9)(a)

Employer did not maintain all surfaces as free as practicable of accumulations of lead. Cited for removable lead contamination on surfaces in the kitchen, work areas, floors of the facility, and areas where employees eat. Without maintaining the workplace as clean as is practical, lead may be carried to and contaminate employee eating areas, restrooms, or other employee use areas. Lead may be ingested from hands that have become contaminated from contact with lead dust on surfaces. Lead accumulations on floors may become airborne during dry sweeping or other cleaning activities, resulting in employee inhalation of lead. Employees exposed to lead are at risk of developing serious neurological damage, blood effects, reproductive effects, or other serious illnesses.

This violation was corrected during the inspection.
Assessed penalty: \$18,000.00

Violation 1 Item 2

Violation Type: Willful Serious

WAC 296-62-07521(13)(a)(i)

Employer did not provide employees information on the hazards of lead. Cited for not training employees on the contents of Appendices A & B of the lead safety standard, including health effects of lead exposure, key elements of the lead standard, and how these affect employees. Without training, employees may not know the hazards of lead and how to avoid lead exposure. Employees exposed to lead are at risk of developing serious neurological damage, blood effects, reproductive effects, or other serious illnesses.

The following additional correction documentation is required for this violation: Provide adequate lead safety training.

Correct by: 9/7/2020
Assessed penalty: \$18,000.00



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**Citation and Notice of Assessment
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Violation 1 Item 3

Violation Type: Willful Serious

WAC 296-62-07521(9)(b)(ii)

Employer did not prohibit dry sweeping of floors contaminated with lead. Cited for employees sweeping lead-containing residues and debris into a dust pan. Dry sweeping of floors or other surfaces can cause lead residues to become airborne, where employees may inhale it. Employees who inhale lead are at risk of developing serious neurological damage, blood effects, reproductive effects, or other serious illnesses.

**Correct by: 8/9/2020
Assessed penalty: \$18,000.00**

Violation 1 Item 4

Violation Type: Willful Serious

WAC 296-800-23060(1)

Employer did not provide a separate lunch room for employees who are exposed to lead. Cited for not having a separate lunch area for employees who work with lead, and eat lunch at their work stations. Without a separate lunch area, employees may eat in areas that are contaminated with removable lead. Employees who eat in areas where lead contamination may develop may ingest lead. Employees who ingest lead are at risk of developing serious neurological damage, blood effects, reproductive effects, or other serious illnesses.

**This violation was corrected during the inspection.
Assessed penalty: \$18,000.00**

Violation 2 Item 1

Violation Type: Willful General

WAC 296-62-07521(5)(g)

Employer did not perform additional monitoring of employees when there has been a process change. Cited for not performing full-shift air monitoring of employees who work with lead-containing materials which produce lead dusts; employer moved manufacturing facility in April 2019; employer's processes changed after the move. Without full-shift air monitoring being performed, an employee's exposure to airborne lead dusts cannot be quantified.

**This violation was corrected during the inspection.
Assessed penalty: \$9,639.00**

Violation 3 Item 1

Violation Type: Serious

WAC 296-800-15030

Employer did not ensure that emergency washing facilities are readily accessible. Cited for not having a compliant emergency eyewash available in the facility, where employees work with Rainbow RH-109 (SDS Information: Category 2A, Causes serious eye irritation.) and Methyl Ethyl Ketone (SDS Information: Category 2A, causes serious eye irritation). Without a compliant eyewash available, employees do not have a means of rinsing chemicals from their eyes should a splash occur. A splash to the eye of a severely irritating chemical can cause serious eye injury of a limited nature.

Correct by: 8/18/2020
Assessed penalty: \$600.00

Violation 3 Item 2

Violation Type: Serious

WAC 296-800-27010

Employer did not ensure that floors are safe. Cited for not ensuring the floor in the dry suit manufacturing area is in good repair, in that the floor is cracked and presents a tripping hazard. A serious trip hazard exposes employees to head or other serious injury from falls.

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

Violation 3 Item 3a

Violation Type: Serious

WAC 296-800-28030(2)

Employer did not remove damaged electrical cords from service.
Cited for the following instances:

- Damaged electrical cord near sewing area.
- Damaged electrical cord near storage racks.

Use of damaged electrical cords can expose employees to electrical shock.

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



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Violation 3 Item 3b

Violation Type: Serious

WAC 296-800-28030(4)

Employer did not use flexible cords in a safe manner. Cited in the following instances:

- Extension cords attached to walls and ceilings
- Extension cords used as permanent power to hanging light fixtures.
- Electrical cords run through walls.
- Electrical cords used as a substitute for fixed wiring.

Unsafe use of electrical cords can expose employees to the risk of electrical shock.

This violation was corrected during the inspection.
Assessed penalty: Included in Violation 3 Item 3A

Violation 3 Item 3c

Violation Type: Serious

WAC 296-800-28030(8)

Employer did not maintain flexible cords (extension cords) so that they are in good condition. Cited for a spliced electrical cord in the dry suit manufacturing area. Use of spliced electrical cords can lead to electrical shock.

The violations above have been grouped because they involve similar or related hazards that may increase the potential for illness or injury resulting from an exposure or accident. A single penalty is applied to the first item in the group.

This violation was corrected during the inspection.
Assessed penalty: Included in Violation 3 Item 3A

Violation 3 Item 4

Violation Type: Serious

WAC 296-800-28035(2)

Employer did not make sure that receptacles do not have live parts exposed. Cited for missing and damaged electrical receptacles in the dry suit manufacturing area. Employees exposed to unguarded, live electrical wires could receive a shock.

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



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Violation 3 Item 5

Violation Type: Serious

WAC 296-806-40510

Employer does not have a work rest (tool rest) for a bench grinder. Cited for the bench grinder in the shop area having no tool (work) rest, and the wheel adjustment allowed for a 1/2" gap between the wheel and the guard. Once attached, a work rest should be adjusted so that the gap is no greater than 1/8" to the wheel. Without proper guarding and adjustment, a grinding wheel may catch part of an employee's hand, arm, or clothing, causing amputation or other serious injury.

This violation was corrected during the inspection.
Assessed penalty: \$1,200.00

Violation 4 Item 1

Violation Type: General

WAC 296-841-20005(1)

Employer did not conduct exposure monitoring to determine employee exposure to organic solvents. Cited for not performing monitoring of employees who use a variety of glues and solvents to manufacture wet and dry suits. Without exposure monitoring, employees may not know if they are exposed to air contaminants above the Permissible Exposure Level (PEL).

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

Violation 4 Item 2

Violation Type: General

WAC 296-842-14005

Employer did not provide medical evaluations for employees who wear tight-fitting respirators. Cited for not providing medical evaluations for employees who wear half-mask, tight-fitting respirators while working with lead shot, and while manufacturing wet and dry suits. Without a medical evaluation, an employee may experience health complications from wearing a tight-fitting respirator.

Correct by: 9/7/2020
Assessed penalty: \$0.00

What you must do now:

- Check the correction due date(s) shown on the enclosed Employer Certification of Abatement 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 Employer Certification of Abatement 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:
Or call: (360) 902-5409

Lyndsey Banks, Compliance Supervisor
Department of Labor and Industries
PO Box 44810
Olympia, WA 98504-4810

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.



Employer Certification of Abatement Form

Inspection: 317958063

UBI: 604064730

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Legal Name: SEASOFT SCUBA GEAR INC

DBA Name: WATERMARK SCUBA GEAR INC

Site Address: 434 Nw Prindle St, Chehalis, WA, 98532-2031

You must complete this form and return it to: LISA VAN LOO, Department of Labor & Industries
PO Box 44810, Olympia, WA 98504-4810
Or Fax to:

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

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
1-2	Willful Serious	WAC 296-62-07521(13)(a)(i)	9/7/2020
Violation Summary: Provide adequate lead safety training.			
How you corrected the hazard →			
Date you corrected the hazard →			

I certify that the hazards described in this Employer Certification of Abatement Form 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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You must complete this form and return it to: LISA VAN LOO, Department of Labor & Industries
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Or Fax to:

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

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
1-3	Willful Serious	WAC 296-62-07521(9)(b)(ii)	8/9/2020
Violation Summary: Dry sweeping of floors.			
How you corrected the hazard →			
Date you corrected the hazard →			

I certify that the hazards described in this Employer Certification of Abatement Form 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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DBA Name: WATERMARK SCUBA GEAR INC

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You must complete this form and return it to: LISA VAN LOO, Department of Labor & Industries
PO Box 44810, Olympia, WA 98504-4810
Or Fax to:

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

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
3-1	Serious	WAC 296-800-15030	8/18/2020
Violation Summary: No eyewash for employees working with chemicals.			
How you corrected the hazard →			
Date you corrected the hazard →			

I certify that the hazards described in this Employer Certification of Abatement Form 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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You must complete this form and return it to: LISA VAN LOO, Department of Labor & Industries
PO Box 44810, Olympia, WA 98504-4810
Or Fax to:

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

Violation, Item & Group#	Type of Violation	WAC# Violated	Correction Due Date
4-2	General	WAC 296-842-14005	9/7/2020
Violation Summary: No respirator medical evaluations.			
How you corrected the hazard →			
Date you corrected the hazard →			

I certify that the hazards described in this Employer Certification of Abatement Form 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

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, personally delivered or electronically filed. If you electronically file, the Department will send an automated acknowledgement that the appeal was received. **If you do not receive acknowledgement, please ensure you have addressed it to the correct email.** You can also contact the Appeals Program at the number listed below.

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.

Send all appeals to:

Assistant Director for DOSH
Attn: Appeals Program
PO Box 44604
Olympia, WA 98504-4604
Fax to: **(360) 902-5581** or deliver to: **Any L&I office**
Electronically to: DOSHAppeals@Lni.wa.gov

For more information call the Appeals Program: **(360) 902-5486.**

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