Special Exposure Cohort Petition
under the Energy Employees Occupational Illness Compensation Act

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

OMB Number: 0920-0639 Expires: 05/31/2007

Special Exposure Cohort Petition — Form B

B Survivor Information — Complete Section B if you are a Survivor or representing a Survivor.

B.1 **Name of Survivor:**

Mr./Mrs./Ms. First Name Middle Initial Last Name

B.2 **Social Security Number of Survivor:**

B.3 **Address of Survivor:**

Street Apt # P.O. Box

City State Zip Code

B.4 **Telephone Number of Survivor:** ( ) -

B.5 **Email Address of Survivor:**

B.6 **Relationship to Employee:** ☐ Spouse ☐ Son/Daughter ☐ Parent ☐ Grandparent ☐ Grandchild

Go to Part C.

C Employee Information — Complete Section C UNLESS you are a labor organization.

C.1 Nam

Mr./Mrs./Ms. First Name Middle Initial Last Name

C.2 **Former Name of Employee (e.g., maiden name/legal name change/other):**

Mr./Mrs./Ms. First Name Middle Initial Last Name

C.3 **Social Security Number of Employee:**

C.4 **Address of Employee (if living):**

Apt # P.O. Box

City State Zip Code

C.5 **Telephone Number of Employ**

C.6 **Email Address of Employee:**

C.7 **Employment Information Related to Petition:**

C.7a Employee Number (if known):

C.7b Dates of Employment: Start 1962 End 1964

C.7c Employer Name: (NUMEC) NUCLEAR MATERIALS & EQUIPMENT CORP.

C.7d Work Site Location: APOLLO, PA

C.7e Supervisor's Name (DECEASED)

HAS A NIOSH CLAIM #

Go to Part E.

Name or Social Security Number of First Petitioner:

2 SEC 00047

Special Exposure Cohort Petition
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Special Exposure Cohort Petition — Form B

Appendix — Petitioner 2

Use of this form and disclosure of Social Security Number are voluntary. Failure to use this form or disclose this number will not result in the denial of any right, benefit, or privilege to which you may be entitled.

Use this Appendix for Petitioner 2.

This appendix form is to be used as needed. Petitioner 2, or his or her representative, should complete the parts applicable to him or her.

Refer to the General Instructions on completing petitioner information for Parts A, B, or C.

If you need more space to provide additional information, use the continuation page provided at the end of the form and attach the completed continuation page(s) to Form B.

Except for signatures, please **PRINT** all information clearly and neatly on the form.

If you are:	☒ An Energy Employee (current or former),	Start at C
	☐ A Survivor (of a former Energy Employee),	Start at B
	☐ A Representative (of a current or former Energy Employee),	Start at A

A Representative Information — Complete Section A if you are authorized by an Employee or Survivor(s) to petition on behalf of a class.

A.1 **Are you a contact person for an organization?** ☐ Yes (Go to A.2) ☐ No (Go to A.3)

A.2 **Organization Information:**

Name of Organization

Position of Contact Person

A.3 **Name of Petition Representative:**

Mr./Mrs./Ms. First Name Middle Initial Last Name

A.4 **Address:**

Street Apt # P.O. Box

City State Zip Code

A.5 **Telephone Number:** ( )

A.6 **Email Address:**

A.7 ☐ Check the box at left to indicate you have attached to the back of this form written authorization to petition by the survivor(s) or employee(s) indicated in Parts B or C of this form. An authorization form for this purpose is provided.

If you are representing a Survivor, go to Part B; if you are representing an Employee, go to Part C.

Name or Social Security Number of First Petitioner:

D Labor Organization Information — Complete Section D ONLY if you are a labor organization.

D.1 **Labor Organization Information:**

_____
Name of Organization

_____
Position of Contact Person

D.2 **Name of Petition Representative:**

_____

D.3 **Address of Petition Representative:**

_____
Street Apt # P.O. Box

_____
City State Zip Code

D.4 **Telephone Number of Petition Representative:** (____) ____-_____

D.5 **Email Address of Petition Representative:** _____

D.6 **Period during which labor organization represented employees covered by this petition** (please attach documentation): Start _____ End _____

D.7 **Identity of other labor organizations that may represent or have represented this class of employees (if known):**

_____

Go to Part E

Name or Social Security Number of First Petitioner: __ ___

E Proposed Definition of Employee Class Covered by Petition — Complete Section E.

E.1 **Name of DOE or AWE Facility:** (NUMEC) NUCLEAR MATERIALS & EQUIPMENT CORP.

E.2 **Locations at the Facility relevant to this petition:**

NUMEC APOLLO OFFICE BUILDING
NUMEC APOLLO PLANT

E.3 **List job titles and/or job duties of employees included in the class. In addition, you can list by name any individuals other than petitioners identified on this form who you believe should be included in this class:**

ALL NUMEC OFFICE EMPLOYEES ADMINISTRATIVE & CLERICAL
ALL NUMEC APOLLO PLANT EMPLOYEES

E.4 **Employment Dates relevant to this petition:**

Start 1957 End 1983

Start _____ End _____

Start 02/14/1963 End URANIUM FIRE INCIDENT

E.5 **Is the petition based on one or more unmonitored, unrecorded, or inadequately monitored or recorded exposure incidents?:** ☒ Yes ☐ No

If yes, provide the date(s) of the incident(s) and a complete description (attach additional pages as necessary):

DATE OF INCIDENT IS 02/14/1963

SEE ATTACHED AFFADAVIT

Go to Part F.

Name or Social Security Number of First Petitioner: _____

F Basis for Proposing that Records and Information are Inadequate for Individual Dose — Complete Section F.

Complete at least one of the following entries in this section by checking the appropriate box and providing the required information related to the selection. You are not required to complete more than one entry.

F.1 [X] I/We have attached either documents or statements provided by affidavit that indicate that radiation exposures and radiation doses potentially incurred by members of the proposed class, that relate to this petition, were not monitored, either through personal monitoring or through area monitoring.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that potential radiation exposures were not monitored.

OFFICE WORKERS DID NOT WEAR DOSE BADGES AND WERE NOT MONITORED IN THE OFFICE BUILDING.

F.2 [X] I/ We have attached either documents or statements provided by affidavit that indicate that radiation monitoring records for members of the proposed class have been lost, falsified, or destroyed; or that there is no information regarding monitoring, source, source term, or process from the site where the employees worked.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that radiation monitoring records for members of the proposed class have been lost, altered illegally, or destroyed.

MONITOR INSTRUMENTS WERE NOT ADEQUATE

Part F is continued on the following page.

Name or Social Security Number of First Petitioner: _____

Continuation Page — Photocopy and complete as necessary.

65

SEC PETITION 00047 AFFADAVIT
NUMEC APOLLO SITE

RADIOACTIVE INCIDENT 02/14/1963

THIS WAS A WORKDAY FOR ME AND I WAS IN AND OUT OF THE NUMEC OFFICE AND PLANT IN APOLLO, PA.

AN UNCONTROLABLE URANIUM FIRE ERUPTED INSIDE THE APOLLO PLANT DISPERSING SEVEN POUNDS OF RADIOACTIVE SMOKE AND DUST INTO THE AIR AND ONTO THE OFFICE BUILDING, PLANT, SIDEWALKS AND PARKED VEHICLES AT THE NUMEC SITE.

THE RADIATION WAS EQUIVALENT TO 20,000 CHEST X-RAYS ACCORDING TO NUCLEAR RESEARCHER WHO TESTIFIED IN A COURT OF LAW IN PITTSBURGH, PA. IN WHICH THE NUMEC NEIGHBORS WON A $36.7 MILLION LAWSUIT AGAINST NUMEC-ARCO-BABCOCK & WILCOX FOR CAUSING THEM CANCER AND DEATHS FROM THE RADIOACTIVE EMISSIONS FROM THE NUMEC PLANTS SMOKESTACKS.

ALL NUMEC WORKERS WERE ALSO AFFECTED. WORKERS WERE NOT AWARE OF THE SERIOUSNESS OF THE INCIDENT UNTIL IT WAS DECLASSIFIED YEARS LATER.

THIS INCIDENT IS ONLY ONE OF MANY TIMES THAT HIGHLY CONTAMINATED SMOKE SPEWED DOWN ONTO THE NUMEC APOLLO WORKSITE. USUALLY IT RAINED URANIUM HEXAFLOURIDE FROM THE SHORT SMOKESTACKS OF THE APOLLO PLANT AND IT COATED EVERYTHING AT THE SITE AND AROUND THE SITE. THE ROGER D. CALDWELL ARCHIVES CLEARLY SHOWS THE FALLOUT PATTERN OF CONTAMINATION FROM THE SHORT SMOKESTACKS,

OFFICE WORKERS DID NOT WEAR DOSE BADGES

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 10, 2008

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 10, 2008

Mary J. Applegarth 7.18.06

Attach to Form B if necessary.

Name or Social Security Number of First Petitl

Continuation Page — Photocopy and complete as necessary.

E5

SEC PETITION 00047 AFFADAVIT
NUMEC APOLLO SITE

THE COUNTER PROLIFERATION PAPERS
FUTURE WARFARE SERIES NO. 2
ISRAEL'S NUCLEAR WEAPONS
THE THIRD TEMPLE HOLY OF HOLIES BY WARNER D. FARR LTC US ARMY

FOUND ON THE FOLLOWING WEBSITES
① WWW:AV.AF.MIL/AU/AWC/AWCGATE/AWC-CPS.HTM
② HTTP:FAS.ORG/NUKE/GUIDE/ISRAEL/NUKE/FARR.HTM

UNITED STATES AIR FORCE COUNTER PROLIFERATION CENTER
325 CHENNAULP CIRCLE
MAXWELL AF BASE, AL 36112-6427

THE ARTICLE SAYS THAT 100 KILOS OF PLUTONIUM THAT WAS MISSING SINCE THE 1960'S WAS FOUND IN THE 1990'S WITHIN THE STRUCTURAL COMPONENTS OF THE CONTAMINATED NUMEC APOLLO PLANT WHEN IT WAS DECOMMISSIONED BY THE NRC. THIS IS THE CONCENSUS OF THE FACULTY AT THE UNITED STATES AIR WAR COLLEGE.

I. RECALL THAT GOVERNMENT AGENTS WERE INVESTIGATING MISSING RADIOACTIVE MATERIALS WHEN I WORKED AT THE NUMEC OFFICE BUILDING IN 1964

1-18-06 Mary J. Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Attach to Form B if necessary

Name or Social Security Number of First Petitior

Special Exposure Cohort Petition
under the Energy Employees Occupational Illness Compensation Act

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

Special Exposure Cohort Petition — Form B

OMB Number: 0920-0639 Expires: 05/31/2007
Appendix — Continuation Page

Continuation Page — Photocopy and complete as necessary.

F1

SEC PETITION 00047 AFFADAVIT
NUMEC APOLLO OFFICE BUILDING
DOSIMETRY BADGES

I WORKED IN THE ACCOUNTING DEPARTMENT AT THE NUMEC OFFICE BUILDING IN APOLLO, PA. FROM 1962 — 1964. RADIATION EXPOSURES AND RADIATION DOSES POTENTIALLY INCURRED BY OFFICE WORKERS WERE NOT MONITORED THROUGH PERSONAL MONITORING OR THROUGH AREA MONITORING. OFFICE WORKERS DID NOT WEAR DOSE BADGES AND THERE ARE NO DOSIMETRY REPORTS ON OFFICE WORKERS THAT I AM AWARE OF.

1-18-06 Mary J. Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Attach to Form B if necessary.

Name or Social Security Number of First Petitione

12

Continuation Page — Photocopy and complete as necessary.

SEC PETITION 00047 AFFADAVIT
NUMEC, APOLLO OFFICE BUILDING
F1 CONTAMINATED TIME CARDS

TENS OF THOUSANDS OF TIMECARDS BECAME HIGHLY CONTAMINATED WITH PLUTONIUM & URANIUM DUST BECAUSE OF THEIR PHYSICAL PRESENCE IN THE NUMEC APOLLO & PARKS PLANTS. WORKERS ALSO CONTAMINATED THEIR CARDS BY TOUCHING THEM WHEN THEY PUNCHED IN & OUT. THESE CONTAMINATED CARDS WERE THEN BROUGHT INTO THE OFFICE BUILDING WHERE CLERKS WORKED ON THEM FOR PAY PURPOSES. EVERY TIME CARD WAS FIGURED BY A CLERK WITH A PENCIL & ADDING MACHINE. ALL OF THE TIME CARDS LAYING ON DESKS RESULTED IN A CONTINUOUS RADIOACTIVE DUST OFFICE POLLUTION BY ABSORPTION, INHALEATION, & INGESTION. THE ACCOUNTING DEPARTMENT STORED BOXES & BOXES OF HIGALY CONTAMINATED TIMECARDS FROM THE PREVIOUS PAY PERIODS OVER THE YEARS.

THE OFFICE WORKERS NOT MONITORED WITH DOSE BADGES OR AREA MONITORING.

1.18.06

Mary J. Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Attach to Form B if necessary.

Name or Social Security Number of First Petitioner: _____

F1
F3
F4

Continuation Page — Photocopy and complete as necessary.

SEC PETITION 00047 AFFADAVIT

DOE/EW/40017-T6

DEPARTMENT OF ENERGY REPORT DATED 04/30/1997
APOLLO DECOMMISIONING PROJECT APOLLO, PA.
FINAL TECHNICAL REPORT

THE DECONTAMINATION REPORT OF APOLLO STATES THAT THE APOLLO PLANT OFFICE BUILDING WAS NOT AN ORIGINAL PART OF THE APOLLO PLANT DECOMMISSIONING PROJECT. IT WAS INCLUDED AS PART OF THE PROJECT IN THE SPRING OF 1993 AFTER IT WAS DETERMINED THAT FLOOR BOARDS AND DRAW LINES CONTAINED URANIUM LEVELS THAT EXCEEDED .30 PCI/G.
THE APOLLO OFFICE BUILDING AND PLANT BOTH HAD TO BE CAREFULLY DEMOLISHED. CONTAMINATED DEBRIS AND SOIL CONTAINING >30 PCI/G WAS LOADED ON GONDOLA CARS AND TAKEN AWAY FOR CONTROLLED OFFSITE DISPOSAL.

NIOSH'S OWN RECORDS PRESENTLY SHOW THE HIGH RESIDUAL RADIOACTIVE CONTAMINATION THAT EXISTED WHEN THE NUMEC SITE WAS DEMOLISHED.

I RECALL IN THE YEARS 1962-63-64 WHEN I WORKED IN THE ACCOUNTING DEPARTMENT IN NUMEC WHICH WAS LOCATED ON THE SECOND FLOOR OF THE SMALL THREE STORY BUILDING, THAT THERE WAS A CHEMICAL TESTING LAB BELOW OUR LARGE OFFICE.

1-18-06 Mary J. Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Attach to Form B if necessary.

Name or Social Security Number of First Petitioner: _____

12

F2

Special Exposure Cohort Petition
under the Energy Employees Occupational Illness Compensation Act

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

Special Exposure Cohort Petition —Form B

OMB Number: 0920-0639 Expires: 05/31/2007
Appendix — Continuation Page

Continuation Page — Photocopy and complete as necessary.

SEC PETITION 00047 AFFADAVIT
NUMEC APOLLO SITE

RADIATION MONITORING INSTRUMENTS

RADIATION DOSES AND RADIATION EXPOSURES WERE ~~NOT~~ MONITORED ACURATELY. THEY WERE MONITORED ~~IN~~ADEQUATELY AT THE NUMEC APOLLO AND PARKS SITE. ACCORDING TO THE ROGER D. CALDWELL ARCHIVES WHO WAS A PIONEERING HEALTH PHYSICIST WHO WORKED AT BROOKHAVEN NATIONAL LABORATORY IN THE HEALTH AND SAFETY GROUP AT THE NUCLEAR MATERIALS AND EQUIPMENT (NUMEC) IN APOLLO, PA. DURING THE 1960'S AND INTO THE 1970'S ROGER STRUGGLED WITH THE CHALLENGES OF PROTECTING WORKERS FROM INTAKES OF URANIUM AND PLUTONIUM. HE MEASURED HOW WELL PROTECTION HAD SUCCEEDED USING BIOASSAY, AIR SAMPLES, AND WORKPLACE INDICATORS.

HE SHOWED THAT TRADITIONAL INDICATORS WERE NOT ADEQUATE AND DEVELOPED NEW MEANS TO MONITOR WORKERS THAT WERE ADEQUATE.

1-18-05

Mary J Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Attach to Form B if necessary.

Name or Social Security Number of First Petitioner: _____

12

F1
F3
F4
E5

Special Exposure Cohort Petition
under the Energy Employees Occupational Illness Compensation Act

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

Special Exposure Cohort Petition — Form B

OMB Number: 0920-0639 Expires: 05/31/2007
Appendix — Continuation Page

Continuation Page — Photocopy and complete as necessary.

ROGER D. CALDWELL ARCHIVES

ON THE INTERNET HTTP://BIDUG.PNL.GOV/RDC.HTM.

AND SPECIFICALLY THE ARTICLE ENTITLED ENVIORNMENTAL MONITORING NEAR A MULTI-STACK URANIUM PLANT BY R.D. CALDWELL AND R.F. CROSBY. THE ARTICLE HAS DIAGRAMS AND PICTURES OF THE NUMEC PLANT SHOWING FALLOUT PATTERNS FROM THE 124 SMOKE STACKS THAT WERE ONLY 40 FT TALL. THE OFFICE BUILDING WAS NEAR THE STACKS WHICH HAD RAINCAPS ON THEM AND WOULD FORCE THE CONTAMINATED SMOKE DOWN. A CHART ON PAGE 23 INDICATES 10% OF THE OUTFALL WOULD HAVE CONTAMINATED THE OFFICE AREA WHICH WAS ONLY 30 FT HIGH. THE CHART ALSO SHOWS A MUCH HIGHER % OF CONTAMINATION THE CLOSER TO THE OUTSIDE PLANT WALLS AND ALMOST ALL AROUND THE WALKWAYS AND ENTRANCES. THE CONTAMINATION HERE IS THE SAME AS ON THE ROOF OF THE PLANT WHICH IS THE HIGHEST CONTAMINATION READING POSSIBLE. ROGER CALDWELL WORKED AT NUMEC AND CONDUCTED THESE TESTS MR CALDWELL IN HIS OWN WORDS STATED "A BETTER SET FOR DOWNWASH CANNOT BE IMAGINED." MR CALDWELL WAS AN OUTSTANDING HEALTH PYSICIST AND THE RECIPIENT OF MANY AWARDS IN HIS FIELD. MR CALDWELL DIED AT THE AGE OF 39. BEFORE MR CADLWELLS DEATH, HE RECORDED MANY HIGHLY RADIOACTIVE INCIDENTS AT NUMEC WHICH CAN BE FOUND ON THE INTERNET IN THE "RODGER D. CALDWELL ARCHIVES"

MR CALD-WELLS CHARTS SHOW THE CONTAMINATION FALLOUT PATTERN FROM THE APOLLO PLANT SMOKESTACKS. THIS PATTERN PROVES THAT THE INCIDENT AT THE PLANT ON 02/14/1963 WOULD HAVE CONTAMINATED THE NUMEC APOLLO SITE INCLUDING THE OFFICE BUILDING.
THE OFFICE WORKERS WERE NOT MONITORED WITH DOSE BADGES.

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

1.18.06

Attach to Form B Finance Page

Name or Social Security Number of First Petitioner: 1

8

F.3 ☐ I/We have attached a report from a health physicist or other individual with expertise in radiation dose reconstruction documenting the limitations of existing DOE or AWE records on radiation exposures at the facility, as relevant to the petition. The report specifies the basis for believing these documented limitations might prevent the completion of dose reconstructions for members of the class under 42 CFR Part 82 and related NIOSH technical implementation guidelines.

(Attach report to the back of the petition form.)

F.4 ☒ I/We have attached a scientific or technical report, issued by a government agency of the Executive Branch of Government or the General Accounting Office, the Nuclear Regulatory Commission, or the Defense Nuclear Facilities Safety Board, or published in a peer-reviewed journal, that identifies dosimetry and related information that are unavailable (due to either a lack of monitoring or the destruction or loss of records) for estimating the radiation doses of employees covered by the petition.

(Attach report to the back of the petition form.)

Go to Part G.

G Signature of Person(s) Submitting this Petition — Complete Section G.

All Petitioners should sign and date the petition. A maximum of three persons may sign the petition.

Signature _____ Date 01/17/06

Signature _____ Date _____

Signature _____ Date _____

Notice: Any person who knowingly makes any false statement, misrepresentation, concealment of fact or any other act of fraud to obtain compensation as provided under EEOICPA or who knowingly accepts compensation to which that person is not entitled is subject to civil or administrative remedies as well as felony criminal prosecution and may, under appropriate criminal provisions, be punished by a fine or imprisonment or both. I affirm that the information provided on this form is accurate and true.

Send this form to:

SEC Petition
Office of Compensation Analysis and Support
NIOSH
4676 Columbia Parkway, MS-C-47
Cincinnati, OH 45226

If there are additional petitioners, they must complete the Appendix Forms for additional petitioners. The Appendix forms are located at the end of this document.

1-18-06
Mary J. Applegarth

NOTARIAL SEAL
MARY J. APPLEGARTH, Notary Public
Moon Twp., County of Allegheny
My Commission Expires Mar. 13, 2008

Name or Social Security Number of First Petitioner: _____