



***NORTHWINDS
CONSTRUCTION***

Contractor Safety Program

**NORTHWINDS
CONSTRUCTION**

This safety program was developed by:



www.csc-safety.com

SUBJECT: Contractor Safety Program

REGULATORY STANDARDS: OSHA - 29 CFR 1926 and 1910 (Selected portions)

GENERAL: NORTHWINDS CONSTRUCTION recognizes that good communication is a necessary element of maintaining safety at our worksites. Communication amongst Contractors must be established to discuss and identify safety hazards and prevention practices that each may bring to the worksite. Contractors must also discuss the Company's safety requirements and verify compliance prior to commencing with a project. Therefore, NORTHWINDS CONSTRUCTION has implemented the following contractor safety policy for our worksites so that on the job injuries are minimized and work practices may be standardized.

RESPONSIBILITY: The Safety Manager is the program coordinator, acting as the representative of NORTHWINDS CONSTRUCTION owners, who has the ultimate responsibility for all facets of this program. The Safety Manager is the sole person authorized to amend these instructions. NORTHWINDS CONSTRUCTION has authorized the Safety Manager and any Supervisor or Employee to halt any operation of NORTHWINDS CONSTRUCTION where there is danger of serious personal injury. Supervisors are required to ensure their employees are aware of the contents of this program and have received the required safety training before working in any areas where hazards exist. Contractors and Contractors will be required to provide a written safety program which describes contractors or Contractor's has agreed to comply with another contractor's policies and procedures which have been approved by NORTHWINDS CONSTRUCTION.

Section	Contents of the Contractor Safety Program	Page
1	Written Program	3
2	Pre-Qualification. Contractors Safety Performance History	3
3	Responsibilities	4
4	Contractor Administrative Safety Requirements	6
5	Contractor Safety Training Requirements	7
6	Contractor Recordkeeping Requirements	7
7	Contractor's General Safety Requirements	8
8	Post Job Contractor Performance Reviews	10
9	Forms	10

CONTRACTOR SAFETY PROGRAM

1. Written Program.

A Written Contractor safety policy establishes guidelines to be followed for contractors working at our work sites. The rules established intended to:

- 1.1 Provide a safe working environment.
- 1.2 Govern NORTHWINDS CONSTRUCTION relationships with outside Contractors.
- 1.3 Ensure that Contractors employees are trained to protect themselves from all potential and existing hazards.
- 1.4 The effectiveness of the Contractors safety program depends upon the active support and involvement of all employees. This plan is intended to implement a program to ensure that all Contractors work practices are carried out safely to minimize the possibility of injury or harm to the Contractor's employees. It is intended to serve as an additional tool in safeguarding the health and safety of employees.
- 1.5 The Contractors safety policy establishes uniform requirements designed to ensure that Contractors safety orientation, coordination, and safety administration practices are communicated to and understood by employees.
- 1.6 If employees have any questions of what is expected from them they should ask their Supervisor or contact their Safety Manager.
- 1.7 This document is provided to ensure all corporate safety plans, policies and procedures are communicated to all participating Contractors. It also provides an avenue for Contractors to communicate their safety plans, policies and procedures to the company. This program aims to prevent personal injuries and illnesses.

2. Pre- Qualification. Contractor's Safety Performance History.

The following listed steps are the standard procedures for evaluating and choosing Contractors by reviewing their safety performance.

NORTHWINDS CONSTRUCTION shall obtain and evaluate information regarding a Contractor's safety performance when selecting a Contractor to perform any type of contract work.

- 2.1 In an effort to determine past safety performance, the group or individual

selecting the contractor shall request the contractor's:

2.1.1 **Experience Modifier Rate.** The Contractor's Experience Modification Rate (EMR) for workers' compensation for the past **three years**.

2.1.2 **OSHA 300 & 300A Summary Forms.** The OSHA forms, which includes the injury and illness rates (number of lost-time accident cases, number of recordable cases, number of restricted workday cases, number of fatalities) for the past **three years**.

2.1.3 **Total Recordable Incident Rates (TRIR).** The Contractor's TRIR for lost time and recordable accidents for the past **three years**.

Note: For Contractors whose safety performance on the job is not known, other measures will be discussed and considered to achieve completion of the safety performance review.

2.1.4 **OSHA Compliance & Citation History.** The Contractor shall provide records of any citations for safety violations occurring within the last **three years**, to determine the frequency and type of safety laws violated.

5.1.5 **Fatality History.** The Contractor shall provide records of any incidents resulting in a loss of life that occurred within the last **three years**.

3. Responsibilities.

3.1 Company Responsibilities. Our company has specific safety responsibilities when hiring Contractors to come onto our worksites, onto the grounds, or into a building or facility to perform work. Company responsibilities when hiring Contractors include the following listed steps. The company will:

3.1.1 Take steps to communicate company & site specific safety requirements and potential hazards to Contractors workers who perform work on our projects.

3.1.2 Obtain and evaluate information regarding the Contractors employer's safety performance and programs.

3.1.3 Inform the Contractors of known potential fire, explosion, or toxic release hazards related to the Contractor's work and the process.

3.1.4 Explain the applicable provisions of the emergency action plan to the Contractors, and require that the Contractors disperse that information to a worker who will work at this site.

- 3.1.5 Require the Contractors to develop and implement safe work practice procedures to control Contractors employee entry into hazardous work areas.
 - 3.1.6 Require the Contractors to maintain a contract employee injury and illness log.
 - 3.1.7 Periodically evaluate the Contractors employer's fulfillment of his or her responsibilities under this policy.
 - 3.1.8 Hire and use only Contractors who meet our Pre-Qualification Criteria as required.
- 3.2 NORTHWINDS CONSTRUCTION will review all Contractor's safety programs before hiring them to do a project.
- 3.3 Contractors Responsibilities. Contract employees must perform their work safely. Considering that Contractors often perform very specialized and potentially hazardous tasks, such as confined space entry activities and non-routine repair activities, their work must be controlled. Contractor's responsibilities when accepting contracts with this company include the following listed steps. The contractor will:
- 3.3.1 Have a current certificate of insurance for workers' compensation and general liability coverage that meets our minimum requirements.
 - 3.3.2 Designate a competent person that will remain on site with the crew at all time. If the designated competent person has to leave the site, a secondary competent person will be designated that will remain on the site with the crew or all work activities will be stopped until the designated competent person returns to the job. **Please refer to the Competent Person Designation Form included within this program.**
 - 3.3.3 Assure that all contract employees are trained in the work practices necessary to safely perform his or her job.
 - 3.3.4 Instruct all contract employees in the potential fire, explosion, or toxic release hazards related to his or her job and the process.
 - 3.3.5 Assure that all contract employees know the applicable provisions of the emergency action plan.
 - 3.3.6 Document and provide records employee training upon request by our project management team.
 - 3.3.7 Inform all contract employees of and then enforce safety rules of NORTHWINDS CONSTRUCTION.
 - 3.3.8 Inform our project management team of incidents that occur on our project and provide a complete incident investigation that includes

root cause and preventive measure. The Contractors will also verify that a drug screen was conducted for their personnel involved in an incident.

3.3.9 Require that all Contractors abide by the same rules to which our Company is bound by.

3.3.10 Abide by the facility smoking rules. Smoking is prohibited in certain areas of our projects.

4. Contractor Administrative Safety Requirements.

The contractor's Safety Manager or designated personnel is responsible for developing and maintaining their safety program. A copy of the safety program will be requested at the worksite which must remain accessible to all Employees for review. The plan shall be located in a designated area at each jobsite. In addition, the Contractor's Safety Manager or designated personnel is responsible for maintaining any records related to the Contractors safety program. The Contractor's safety program shall include, but not limited to the following:

- The Owner's Commitment to Safety Letter- Signed
- Company Personnel Responsibilities- Owner, Project Managers, Site Supervisors, Employees
- Company General Safety Policies & Rules
- Incident Prevention & Reporting Procedures
- Emergency Response Procedures
- Personal Protection Equipment Requirements
- Personnel Safety Training Requirements
- OSHA Recordkeeping
- Hazardous Communication
- Substance Abuse Programs
- Fire Prevention & Protection
- 1st Aid & Sanitation

- Housekeeping

Site Specific Safety Programs shall also be requested as required by the client owner or task to be performed.

5. Contractor Safety Training Requirements.

5.1 Contractor Safety Training Requirements. NORTHWINDS CONSTRUCTION requires that all Contractor's employees receive training on all hazards to which they may be introduced to as required by the Local, State and Federal Regulations. In addition, equipment specific safety training shall be provided as required by the Manufactures.

The Contractors must:

- 5.1.1 Have a Designated Competent Person on site with the crew. The designated competent person shall be on site at all time when the Contractor's work is in progress.
- 5.1.2 The Site Supervisor (Foreman) shall obtain a current 1st Aid/ CPR & AED training certificate and Industry Specific OSHA 30 Hour.
- 5.1.3 Train all workers on all safety and health hazards and provisions applicable to the type of work being performed, and provide documentation of such training to our company's designated representative.
- 5.1.4 Train employees on where to obtain first aid, medical services, fire protection and emergency evacuation.
- 5.1.5 Implement process and task specific safety training. (i.e. Fall Protection, LOTO, Fire Protection, Equipment Operator, etc.)

6. Contractor Recordkeeping Requirements.

6.1 Contractor's Recordkeeping Requirements. The Contractors will:

- 6.1.1 Keep a copy of their Safety & Hazardous Communication Programs on site that will be accessible to their personnel at all time.
- 6.1.2 Keep records of all training conducted for their workers and provide copies of the training upon request by our project management team.
- 6.1.3 Keep copies on file of all forms or statements related to the contract that are required by the company to be filled out before or during contract work. This shall include, but is not limited to Job Safety Analysis, Equipment Inspections, Toolbox Talks, etc.

- 6.1.4 Have on file the telephone numbers of the nearest hospital, ambulance service, and fire department.
- 6.1.5 Have copies on-site of all Safety Data Sheets or other required information about chemicals relevant to the work on-site.
- 6.1.6 Keep an OSHA recordable injury and illness log, as well as copies of accident reports on all accidents that occur on the project.

7. Contractor's General Safety Requirements.

7.1 Before the contract work begins, the Contractors must:

- 7.1.1 Designate a representative to coordinate all safety and health issues and communicate with NORTHWINDS CONSTRUCTION designated representative.
- 7.1.2 Provide documentation of any necessary safety training, as described in the Training Requirements section of this policy, to NORTHWINDS CONSTRUCTION designated representative.
- 7.1.3 Provide information to NORTHWINDS CONSTRUCTION designated representative on the safety and health hazards that may arise during the course of the Contractor's work and the means necessary to avoid danger from those hazards, including Hazard Communication and all other potential hazards.
- 7.1.4 Obtain from NORTHWINDS CONSTRUCTION any safety rules and regulation in effect at the site or potential hazards present that may affect the Contractor's work.
- 7.1.5 Be certain to be informed of any emergency signals and procedures that may be put into operation in areas where the contractor's employees are working. The Contractors should be certain to have the telephone numbers of the nearest hospital, ambulance service, and fire department.
- 7.1.6 Advise and train its employees on hazards associated with the work to be performed, including any Hazard Communication or other hazard information provided to Contractors by this company's designated representative.
- 7.1.7 Keep NORTHWINDS CONSTRUCTION designated representative fully informed of any work that may affect the safety of NORTHWINDS CONSTRUCTION employees or property. This includes complying with the state and federal right-to-know legislation and providing the designated representative appropriate Safety Data Sheets (SDS) or other required information about chemicals the contractor will bring onto the site.
- 7.1.8 Know who to call and what to do in emergencies, including where first aid and medical services are located and train employees on

this.

7.2 During the contract work, the Contractors will:

- 7.2.1 Have a designated representative on site that is responsible for safety and is attentive to the work being carried out at all times when Contractors are working at the project site. The designated representative shall implement a job hazard analysis procedure that all personnel will be required to conduct prior to starting a work task daily. The designated representative shall also conduct safety inspections of all personnel work areas as work is in progress.
- 7.2.2 Ensure that all Contractors are abiding by the terms of this plan.
- 7.2.3 Perform its work while the jobsite is operating, if necessary, and establish necessary safe practices to permit work under operating conditions without endangering this company's employees and property. This includes but is not limited to barricading, sign-posting, and fire watches.
- 7.2.4 Make sure that any equipment, chemicals, or procedures used by the contractor to perform contracted work meet all OSHA requirements.
- 7.2.5 Be held responsible and accountable for any losses or damages suffered by NORTHWINDS CONSTRUCTION as a result of Contractors negligence.
- 7.2.6 Provide its employees with medical care and first-aid treatment.
- 7.2.7 Use only ingress and egress designated. The Contractors also will ensure that each Contractor's employee is issued and wears some form of easily seen identification. This may include a company shirt, hardhat with a logo or identification badge.
- 7.2.8 Provide supervisors and employees who are competent and adequately trained, including training in all health and safety aspects of the work involved in the contract.
- 7.2.9 Provide all tools and equipment for the task at hand, including personal protective equipment (PPE). Contractors must ensure that all employees are instructed in its proper use and that all equipment, tools and P.P.E. issued is in proper working order.
- 7.2.10 Maintain good housekeeping in the workplace.
- 7.2.11 Follow specific instructions supplied by NORTHWINDS CONSTRUCTION should emergency alarms be activated.
- 7.2.12 Notify the designated representative immediately of any OSHA recordable injury or illness to Contractor's employees occurring while on our work site. Provide a copy of each completed incident report to our designated representative.

7.2.13 Receive and use a copy of NORTHWINDS CONSTRUCTION written safety policies and procedures.

7.3 After conclusion of the contract work, the Contractor is responsible for cleaning all work areas and disposing of any discarded materials in a proper and legal manner.

8. Post Job Contractor Performance Reviews.

Upon completion of the project, NORTHWINDS CONSTRUCTION may conduct a post job performance review with the contractor. The review shall include, but not limited to the following requirements:

8.1 Administrative & Safety Program Review

8.2 Supervision & Leadership as it pertains to Safety

8.3 Site Personnel Participation as it pertains to Safety

8.4 Incident Statistics- Site Personnel/ Man Hours worked/ TRIR

9. Forms.

#	Form Name	Page #
1	Contractor Safety Policy Acknowledgement Form	11
2	Competent Person Designation Form	14
3	Contractor Pre-Qualification Form	16

Contractor Safety Program Acknowledgement Form

Contractors shall be familiar with and abide by the safety rules and regulations of **NORTHWINDS CONSTRUCTION** and of any governmental body having the authority to control the manner or method of carrying out the work, including, but without limitation the Williams-Steigner Occupational Safety and Health Act of 1970 (OSHA), all rules and regulations established pursuant thereto, and all amendments and supplements thereto. **NORTHWINDS CONSTRUCTION's** contractors are expected to implement and enforce their safety program to the fullest extent relative to their scope of work. In no way does **NORTHWINDS CONSTRUCTION** release the Contractors of their responsibilities concerning safety issues. It shall be the responsibility of the Contractors to furnish and pay for any special tools, personal protective equipment, and safety training required to comply with the safety standards herein stated.

A. Without limiting the foregoing, Contractors shall specifically be expected to:

1. Require all of their employees, visitors, and suppliers to wear hard hats and safety glasses at all times while on the jobsite. Some performances will require the wear of face shields/goggles when chipping or cutting concrete, cutting metal or steel, and grinding, etc. As a construction site, workers will be required to dress appropriately.
2. Responsible for providing employee safety training as required by OSHA & the Manufacturers. Documentation to verify completion of the task specific safety training shall be provided to **NORTHWINDS CONSTRUCTION** project management team.
3. Provide tools and equipment including ladders, platforms, lifts, and scaffolding conforming to OSHA requirements. The Contractors shall ensure that all tools and equipment are inspected prior to use daily.
4. Provide and use a complete Personal Fall Arrest Systems; which consists of a full body harnesses with a lanyard, attached to an approved anchor point while at heights / areas above 6'. The Contractors shall ensure that all personnel installing and using fall protection equipment obtain fall protection safety training as required by OSHA.
5. If it becomes necessary to have access to any opening or shaft or to remove any guardrail system, Contractors shall see that the openings or shafts are adequately protected while the work is in progress and that covers or guardrails are replaced before leaving the area. If a Contractor does not follow this procedure, **NORTHWINDS CONSTRUCTION** will

assess a back charge for its time and material in order to correct the problem.

6. Require the foremen & crew to conduct or participate in safety meetings weekly or as required while on our projects. The Contractors shall maintain records of the safety meetings. The sign in sheets shall include the date conducted, site name, foreman's name, safety topic discussed and participant's signatures. Copies of the sign in sheets will be provided upon request from **NORTHWINDS CONSTRUCTION's** project management team.
 7. Require foreman to report incidents that occur on our project to the **NORTHWINDS CONSTRUCTION** project management team immediately. A detailed incident investigation [identifying root cause(s)] report will be completed by the Contractors. A copy of the completed report will be provided to **NORTHWINDS CONSTRUCTION** for our records.
 8. Provide **NORTHWINDS CONSTRUCTION** project management with an official letter identifying the designated competent person responsible for ensuring compliance with OSHA requirements. The designated competent person will remain on site at all-time when the crew is working on our project. **NORTHWINDS CONSTRUCTION** will provide the competent person form.
 9. Furnish the Contractor's supervisor with a first aid kit that is fully stocked and readily available to the Contractor's employees. **NORTHWINDS CONSTRUCTION** first aid kit will be available as a secondary 1st aid kit.
 10. Provide Safety Data Sheets (SDS) specific to the chemicals & materials used or stored on our site. The SDSs will be maintained on site at a designated location in your SDS book.
 11. Furnish the crew with adequate firefighting equipment and approved chemical storage units. (i.e. fire extinguishers, metal approved gas cans, etc.)
 12. Furnish the crew with potable drinking water. The water shall be provided in an approved container (sealable lid with a tap) equipped with disposable drinking cups and a trash receptacle.
- B. If Contractor's foreman and/or his employee(s) do not comply with the above, **NORTHWINDS CONSTRUCTION** has the authority to remove them from the project and Contractors agrees to provide a new foreman and/or employees(s) who will abide by the safety rules.

- C. If it is necessary for **NORTHWINDS CONSTRUCTION** to loan hard hats or other safety equipment to employees of the Contractors, their visitors or suppliers, in order to comply with state and federal law, there may be a back charge against the Contractors for each hard hat or piece of safety equipment loaned. This money shall be withheld from the monthly payments due the Contractors. Safety equipment loaned that is not returned will also be back charged at replacement cost.

- D. Contractors shall be responsible for providing drug-free employees to the Construction jobsite. Contractors warrant and agree to advise its employees that alcohol and drugs will not be tolerated on any **NORTHWINDS CONSTRUCTION** jobsite. Contractors shall conduct a post-incident drug test on any Contractor employees involved in an incident. **NORTHWINDS CONSTRUCTION** reserves the right to direct random drug testing of all Contractor employees on its worksite(s), if reasonable suspicion of substance abuse is being experienced on said sites. This test will be conducted as outlined in the **NORTHWINDS CONSTRUCTION** Substance Abuse Program testing procedure (copy available upon request.) If Contractor's employee refuses a drug test in either case, **NORTHWINDS CONSTRUCTION** will not allow him or her back on the project site.

- E. It shall be the responsibility of all Contractors to provide the appropriate Safety Data Sheets (SDS) to **NORTHWINDS CONSTRUCTION** for all hazardous chemicals being used by their company at the jobsite.

Acknowledgement

I acknowledge that I have read and verify that I understand my responsibilities as a Contractor of **NORTHWINDS CONSTRUCTION**.

I also acknowledge that I am responsible for complying with Contractor safety program requirements.

Company Officer (Print Name)

Company Officer (Title)

Company Officer (Email Address)

Company Officer (Phone Number)

Company Officer (Signature)

Date

Designated Competent Person Acknowledgement Form

OSHA'S Definition of a Competent Person

One who is capable of identifying existing and predictable hazards in the surroundings, or working conditions which are unsanitary, hazardous, or dangerous to employees, and who has authorization to take prompt corrective measures to eliminate the hazards.

Requirement

The contractor's designated competent person shall be onsite with their personnel at all time when work is in progress. If the competent person is required to leave the site, the contractor shall designate a secondary competent person to remain on site with the crew or the work shall be stopped until the competent person returns. This form shall be completed by an officer of the company.

Responsibility

The designated competent person is responsible for recognizing and correcting safety hazards associated with the work activities on the jobsite.

The designated competent person shall be responsible for the following:

- Verify that all personnel are fit for duty and ready to work.
- Verify that all personnel have the required personal protective equipment prior to starting the work shift daily. This will include the company's minimum P.P.E. requirements.
- Discuss the daily work activity and establish safety measures for the crew prior to starting the work shift. This may include, but not limited to identifying specific P.P.E. requirements, establishing personal fall protection measures, addressing existing site safety hazards, etc.
- Verify the crew is equipped with a stocked 1st Aid Kit, Potable water with disposable cups, Safety Data Sheets specific to the chemicals used at the jobsite and Portable Fire Protection that is accessible to the crew at all time. The crew must also have access to a restroom or portable facility.

- Verify their personnel have current safety training as required by the task. This may include, but not limited to fall protection, ladder use, scaffold safety, heavy equipment, aerial work platform, forklift operator safety training, etc.
- Verify personnel are inspecting tools, equipment and work areas daily prior to starting work.
- Report near miss, property damage and personnel injury incidents that occur to the site project management team immediately.

Acknowledgment – Company Officer

I, _____ representing, _____
Officer of the Company (Print Name) Subcontractor
has designated the personnel listed below as our competent person. I acknowledge that this individual meets OSHA’s Competent Person requirements. I also acknowledge that this individual has the authority to stop work and correct hazards associated with our scope of work.

Acknowledgment – Designated Competent Person

I acknowledge that I understand my responsibility as the designated competent person. I also understand that I have the authority to stop work and correct safety hazards associated with our scope of work.

I hereby accept the responsibility and duties for the position of competent person, and agree to conduct these functions to the best of my ability, taking in to consideration the safety of the employees under my direct supervision and myself.

Competent Person (Print Name)

Competent Person (Signature)

Contact Phone Number

Date

Authorization- Company Officer

I hereby attest that the information contained in this form is true, complete and correct to the best of my knowledge and authorize _____
(Print Competent Person’s Name) to represent our company as the designated competent person.

Company Officer (Print Name)

Company Officer (Signature)

Contact Phone Number

Date

Contractor Pre-Qualification Form

Pre-Qualification Details

Company Information

Contractor:			
Address:			
Person's Name Completing this form:			
Title:			
Office:		Cell:	
Email Address:			
Describe the Services your company performs:			
When was your company established?			

General Safety Questions

Do you have a full-time safety coordinator or manager?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide their contact information below.		
Name:		Phone:
Email:		
If no, who manages your Company's safety responsibilities?		
Name:		Phone:
Email:		
Written Safety Program		
Do you have a Written Safety Program?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your safety program include the following?		
The Owners Commitment to Safety Letter- Signed		Yes <input type="checkbox"/> No <input type="checkbox"/>
New Hire Orientation		Yes <input type="checkbox"/> No <input type="checkbox"/>
Company Personnel Safety Responsibilities		Yes <input type="checkbox"/> No <input type="checkbox"/>
Company General Safety Policies and Procedures		Yes <input type="checkbox"/> No <input type="checkbox"/>
Incident Prevention & Reporting Procedures		Yes <input type="checkbox"/> No <input type="checkbox"/>
Emergency Response Procedures		Yes <input type="checkbox"/> No <input type="checkbox"/>
Personal Protection Equipment Requirements		Yes <input type="checkbox"/> No <input type="checkbox"/>
Personnel Safety Training Requirements		Yes <input type="checkbox"/> No <input type="checkbox"/>
OSHA Recordkeeping		Yes <input type="checkbox"/> No <input type="checkbox"/>
Hazardous Communication		Yes <input type="checkbox"/> No <input type="checkbox"/>
Substance Abuse Program		Yes <input type="checkbox"/> No <input type="checkbox"/>

Fire Prevention & Protection		Yes <input type="checkbox"/>	No <input type="checkbox"/>
1st Aid & Sanitation		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Housekeeping		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Safety Training			
Do you provide safety training for your employees?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the safety training documented?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are safety training records kept upon completion?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you provide your employees copies of the records?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Safety Meetings			
Do you conduct Company Safety Meetings?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Owner & Management Safety Meetings		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, how often?			
Supervisor / Foreman Safety Meetings		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, how often?			
Field Personnel Safety Meetings (Toolbox Talks)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, how often?			
Safety Inspections			
Do you conduct safety inspections of your work sites?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, who conducts the inspections?			
Name:		Title:	
Email:		Phone:	
How often are inspections conducted?		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
Are the inspections documented?		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
Do you track the corrections recorded?		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
Incident Investigations			
Do you require your employees to report incidents?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you conduct documented incident investigations?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, do you identify the root cause of the incident?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you communicate the incident details upon completion of the incident investigation to your employees to prevent reoccurrence and or use your findings to establish lessons learned?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Safety Performance History			
Experience Modifier Rate (EMR)			
What is your Company's Workers Compensation (EMR) for the past 3 years?			
2013:		2014:	
Instructions:		Please provide a verification letter from your insurance company or a copy of the National Council Compensation Insurance, Inc. (NCCI) report for each year requested.	
Total Recordable Incident Rate (TRIR)			
What is your Company's Total Recordable Incident Rate (TRIR) for the past 3 years?			
2013:		2014:	
TRIR Formula:	Number of Incidents(Recordable & Lost Time) x 200,000 divided by the total number of hours worked = Incident Rate		
Instructions:	Please provide copies of your OSHA 300 Form and OSHA 300A Summary		

Form for the past 3 years.	
Has your company had any fatalities in the past 3 years?	
Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, explain:

Has your company received any citations for Non-Safety Compliance from OSHA or any other governing body in the past 3 years?	
Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, provide the following information:
Number of Citations:	Severity of Citations:
Do you currently have any pending Citations? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Information Submittal

Please check the boxes below for the information you will be submitting with this Pre-Qualification.	
<input type="checkbox"/>	EMR Verification Letter (Past 3 Years)
<input type="checkbox"/>	TRIR Verification Letter (Past 3 Years)
<input type="checkbox"/>	OSHA 300 Forms (Past 3 Years)
<input type="checkbox"/>	OSHA 300A Summary Forms (Past 3 Years)
<input type="checkbox"/>	Safety & Health Program
<input type="checkbox"/>	Hazardous Communication Program
<input type="checkbox"/>	Personnel Safety Training Records
<input type="checkbox"/>	Insurance Certificates
<input type="checkbox"/>	Contractor Safety Program Acknowledgement Form
<input type="checkbox"/>	Competent Person Designation Form
<input type="checkbox"/>	Other:

Completion

Please complete the section below to verify completion of this Pre-Qualification prior to submitting it.	
Name:	Title:
Email:	Phone:
Signature:	