



2009 Chapter Safety Awards Application



Recipients will be determined by identifying those companies with meritorious safety performance per membership classification and by size of organization. Safety factor calculations incorporate the use of the OSHA frequency formula. The "reporting year" is the 2008 calendar year. All information provided in this application remains strictly confidential. Complete the form using the data from the company 2008 OSHA Form 300.

1. Total number of man-hours worked in 2008? _____
2. Did OSHA issue citations to your company in 2008? Yes _____ or No _____
If Yes, number of citations per category: Other than Serious # ___ Serious # ___ Repeat # ___ Willful # _____
3. How many "days away from work" were reported: Item (H) _____
4. Per your 2008 OSHA 300, how many "remained at work-other recordable cases" were reported: Item (J) _____
5. What was your company Experience Modification Ratio (EMR) for 2008? _____
6. Does your company:
 - a. Require documented, weekly safety toolbox talks for all site personnel? Yes _____ No _____
 - b. Perform safety/training/communication audits? Yes _____ No _____
 - c. Have a written safety program? Yes _____ No _____
 - d. Require safety orientations for new employees? Yes _____ No _____
 - e. Have a substance abuse program? Yes _____ No _____
 - f. Use incentives to encourage active involvement in safety programs? Yes _____ No _____
 - g. Have a person or group established to perform safety/loss control duties? Yes _____ No _____
 - h. Perform written safety/loss control surveys of key areas of its operation? Yes _____ No _____
 - i. Have a formal disciplinary program for safety violators? Yes _____ No _____

Completed entry applications must be received in ABC Chesapeake's office by the close of business **Friday, August 28, 2009**. All applications must be attested to by a company officer and **include a copy of the company's 2008 OSHA 300 Form**.

Awards will be presented at the Excellence in Construction Awards Banquet Wednesday, September 30, 2009

Company: _____	
Person Preparing Entry: _____	
Title: _____	
Phone: _____	Fax: _____
Company Classification: General Contractor _____ Specialty Trade Contractor _____ Construction Manager _____ Contractor Supplier _____ (ABC Chesapeake reserves the right to verify and place participants into correct categories)	
Company Size: (based on man-hours worked during reporting year)	
0-39,999 _____	40,000-79,999 _____
80,000-159,999 _____	160,000-319,000 _____
320,000-499,999 _____	500,000 or more _____
Company volume of work based on 2008 gross receipts: \$ _____	
Attested: _____	_____
Company Officer Signature	Company Officer Printed Name
A company is not eligible for consideration if it had an OSHA recordable fatality or a repeat or willful violation during the reporting year.	

Please return completed application and 2008 OSHA 300 form to Fax: 410.263.2510, ●
Mail to: Associated Builders and Contractors Chesapeake ● 100 West Street ● Annapolis, MD 21401
Or Email to: ahicks@abc-chesapeake.org