



Henry D. McMaster  
Governor

Emily H. Farr  
Director

## 2019 Safety Achievement Award Application For Public Sector

This application should be submitted by April 26, 2019, to the Division of OSHA by email or address listed above. All information submitted should pertain to calendar years 2017 and 2018. Submission of this application is voluntary.

### Submit with your application:

- OSHA Form 300 and OSHA Form 300A for calendar years 2017 and 2018.
- Supporting documentation of how the company encouraged a safe environment culturally and in the community. Including but not limited to:
  - Company Policy/Procedures
  - Pictures
  - Programs
  - PowerPoint Slides

### COMPANY INFORMATION

Name of Company (List as you want to appear on award): \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Management Official / Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Company's Standard Industrial Classification (NAICS Code)\* or Industry Type: \_\_\_\_\_

1. Please describe your scope of work:

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2. Did your company have 100 or more full-time employees during 2017 and 2018?  YES  NO

**If no**, proceed to Question 6.

3. **Employee Hours** (Please attach OSHA 300 and 300A logs):
- |  | <u>2017</u> | <u>2018</u> |
|--|-------------|-------------|
| a. Average number of employees:                      | _____       | _____       |
| b. Total number of employee hours worked: <b>EH:</b> | _____       | _____       |
- (You may multiply 4a. by the average number of hours worked by employees during the year to get the EH.)

4. **Incidence Rate** (Please attach OSHA 300 and 300A logs):
- |   |            |       |       |
|---|------------|-------|-------|
| a. Total recordable cases:  | <b>TC:</b> | _____ | _____ |
| b. Multiply TC by 200,000 and divide by EH to find your company's incident rate (IR): | <b>IR:</b> | _____ | _____ |

5. Award Category (Check all statements which apply):

**Palmetto Shining Star**

- No fatalities or recordables during calendar year 2018 (TC = 0)
- A reduction of at least 20 percent in an employer's incidence rate between 2017 and 2018
- Employer's incidence rate during calendar year 2018 was at least 50% below the 2017 South Carolina incidence rate for the applicable State or Local government NAICS. See column three entitled "Total Recordable cases" in the Table here:  
<http://www.scosha.llronline.com/BLS/injuryinless/2017/2017%20I&I%20Table%206.pdf>

**Rising Star**

- Employer's incidence rate during calendar year 2018 was at least 50% below the 2017 *national* incidence rate for the applicable State or Local government NAICS. See column three entitled "total recordable cases" in the Table here: [https://www.bls.gov/iif/oshwc/osh/os/summ1\\_00\\_2017.htm](https://www.bls.gov/iif/oshwc/osh/os/summ1_00_2017.htm)

**Gleaming Star**

- Less than 100 employees

***\*Responses to the following must be provided by all employers, regardless of Award category sought\****

6. What have you done within the last year, culturally within your company to encourage an environment of safety? (Supporting documentation to verify *must* be attached. May include additional sheets for explanation.)

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7. How have you encouraged safety in the community within the last year? (Supporting documentation to verify *must* be attached. May include additional sheets for explanation.)

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**SIGNATURE OF MANAGEMENT OFFICIAL:**

*Your signature certifies that the information and attached verification documents are true. Penalty for false information includes but is not limited to disqualification for this year's and next year's award.*

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Print Name and Title

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Signature

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Date