

# 2017 CONSTRUCTORS CISE AWARD APPLICATION

## Date:

## **PART 1: Constructor Application Information**

**CONSTRUCTOR NAME:**

***(As it will appear on the award)***

**CONSTRUCTOR CLASSIFICATION**1

|  |  |
| --- | --- |
| **NAICS Code** | **Size Category** |
| 236 – General Building Contractors | >200,000 and< or = 500,000 work hours/year |
| 237 – Heavy Construction Contractors | > 500,000 and < or = 3 million work hours/year |
| 238 – Specialty Trade Contractors | > 3 million work hours/year |

|  |  |
| --- | --- |
| **CEO/COO:**        Title:  Address:  City:  State:  Zip:  Telephone:  Fax:  E-mail: | **PREPARER:**  Title:  Address:  City:  State:  Zip:  Telephone:  Fax:  E-mail: |

**Y N Please select the answer that best represents your organization**

Has your organization had any fatalities during the past three years (from the date of this submission) within NAICS 23 – Construction?

Is your organization listed on OSHA’s Severe Violators Enforcement Program (SVEP) or any similar program where you operate outside the United States?

**TO BE COMPLETED BY SPONSORING ORGANIZATION (if applicable):**

National Association/Local User Council:

Submitted by:

Date:

Phone:

Email:

## **PART 2: Constructor Statistical Report**

|  |  |  |  |
| --- | --- | --- | --- |
| **Years Reported** | **2014** | **2015** | **2016** |
| **Total Hours Worked** (in thousands) 2 |  |  |  |
| * Direct hire personnel hours 3 |  |  |  |
| * Subcontracted personnel hours 3 |  |  |  |
| **Constructor Total Site Personnel** (annual avg.) |  |  |  |
| **Number of incidents:** (from OSHA 300 log4) |  | | |
| * Total Recordable Cases 5 |  |  |  |
| * Lost Workday Cases6 |  |  |  |
| * Fatalities 7 |  |  |  |
| * Regulatory Sanctions 8 |  |  |  |
| **Explain** any Fatalities or Regulatory Sanctions |  | | |
| **OSHA Incidence Rates** (see formula) 9 |  | | |
| * Fatalities Plus Lost Workday OSHA Rate |  |  |  |
| * Recordable OSHA Rate |  |  |  |
| **Interstate EMR** 10 |  |  |  |

**1**: North American Industry Classification System(see Appendix 1)

**2**: Site Assigned Personnel Only (Omit head and regional offices)

**3**: Of your total hours recorded above, what percentage of the work is directly performed with your own forces, and what percentage is subcontracted to others? (The total of the two must equal 100 %.)

**4**: Include statistics for your own company and your subcontractors

**5**: OSHA Total Recordable Injuries/illness (Columns H, I, and J from OSHA 300 log)

**6**: OSHA Classification “Lost Workday Case-Away from Work” (Column H from OSHA 300 log)

**7**:Total of Column G from OSHA 300.If there are any mitigating circumstances, please feel free to present details surrounding the case in the space below ‘Regulatory Sanctions’.

**8**: Any significant Regulatory Sanction for personnel safety. Example: In the USA, this would be a Willful Violation as defined by OSHA (a violation that the employer intentionally and knowingly commits. The employer is aware that a hazardous condition exists, knows that the condition violates a standard or other obligation of the Act, and makes no reasonable effort to eliminate it.)

**9**: OSHA Incident Rates – Cases per 200,000 hours worked

**10:** EMR – Experience Modifier Rate as evidenced by insurance carrier letter

## **PART 3: Constructor Project Information**

***(NOTE: This part must be limited to 6 printed pages.*** ***Charts, graphs, or other illustrations may be embedded only in Part 3 and must be included in the page count.)***

**CONSTRUCTOR NAME:**

1. List below three clients on whose jobs your safety practices and performance can be verified.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Years when work was performed, and approximate size (Effort-hours or $ value)** | **Company and Contact Person** | **City** | **State** | **Zip** | **Telephone** |
| **A.** |  |  |  |  |  |  |
| **B.** |  |  |  |  |  |  |
| **C.** |  |  |  |  |  |  |

1. Description of operation, i.e., type of projects/work, typical clients, size, geographical area of operation. Describe any special circumstances/situations that make this achievement particularly noteworthy.

1. Attach a general description explaining you’re your organizations safety management program, including the policies and procedures, and how it meets the intent of the Tactical Elements of the Construction Owners’ Safety Blueprint:

**Note:** Refer to **CURT Report R-807, Construction Owners’ Safety Blueprint,** for detailed explanations of each Tactical Element listed below.

1. Policy and Leadership

1. Risk Management

1. Legal Requirements and Standards of Operations

1. Strategic Planning, Goals, and Objectives

1. Structure and Responsibility

1. Programs and Procedures

1. Asset and Operations Integrity

1. Emergency Preparedness

1. Awareness, Training, and Competency

1. Investigation and Corrective Actions

1. Communications

1. Document Control and Records

1. Measuring and Monitoring

1. Audits

1. Review

1. Innovative Practices

1. Any additional methods, practices or procedures which contributed to success

**APPENDIX 1**

#### North American Industry Classification System -- United States, 2002

Construction 23

Construction of buildings 236

Residential building construction 2361

Nonresidential building construction 2362

Heavy and civil engineering construction 237

Utility system construction 2371

Land subdivision 2372

Highway, street, and bridge construction 2373

Other heavy and civil engineering construction 2379

Specialty trade contractors 238

Foundation, structure, and building exterior contractors 2381

Poured concrete foundation and structure contractors 23811

Structural steel and precast concrete contractors 23812

Framing contractors 23813

Masonry contractors 23814

Glass and glazing contractors 23815

Roofing contractors 23816

Siding contractors 23817

Other foundation, structure, and building exterior contractors 23819

Building equipment contractors 2382

Electrical contractors 23821

Plumbing, heating, and air-conditioning contractors 23822

Other building equipment contractors 23829

Building finishing contractors 2383

Drywall and insulation contractors 23831

Painting and wall covering contractors 23832

Flooring contractors 23833

Finish carpentry contractors 23835

Other building finishing contractors 23839

Other specialty trade contractors 2389

Site preparation contractors 23891

All other special trade contractors