



The Theodore H. Brodie Distinguished Safety Award

2015 NIA Associate Member Application Form

A NIA Member-Only Program

Instructions:

Please complete this application and submit it, with a check for the \$250 application processing fee, to be received no later than **January 29, 2016**, to the address below. Companies applying for the first time receive a discount of 50% and should send a check for \$125. **Please make checks payable to "National Insulation Association."**

Dunlevey, Mahan & Furry
Attn: Gary Auman, NIA Legal Counsel
110 North Main Street, Suite 1000
Dayton, OH 45402-1738

Please do not attach your safety program to this application. Instead, please answer each question in your own words, based on what is included in your safety program. Only NIA Associate members are eligible to use this form. Associate members must be members in good standing for this application to be considered—i.e., your company's 2016 NIA membership dues must be paid in full by the time applications are judged. To check your company's membership status, please email membership@insulation.org. Please note that no exceptions will be made to this requirement.

Please complete all information. (Incomplete applications and those without appropriate payment will not be considered.)

Section 1: General Information

This safety recognition program is intended only to evaluate components of the applicant's safety program for best practices. We do not consider injury rates or OSHA citations in our evaluation. Even a company with the best safety program can run afoul of OSHA if they do not implement and enforce the requirements, policies, and procedures in their safety program. NIA urges all applicants in our safety recognition program to enforce the requirements and policies set out in the safety programs they submit for evaluation consistently and fairly on every job site.

Company Name _____
Address _____
City _____ State _____ Zip Code _____
Contact for Report Verification _____

To download additional copies of this application, please visit www.insulation.org.

Phone _____ Email _____

Who is responsible for safety in your company?

Name _____

Phone _____ Email _____

Confidentiality: The information in Section 1, and any reference in any part of this application to a specific company, will not be included with the application when the submissions are judged. This information will be kept in strict confidence. NIA reserves the right to publish any innovative safety ideas from the entries for the good of the industry. However, any company-specific information regarding accident or injury statistics, or any other information identified by the applicant as proprietary, will be kept in confidence within NIA and the Health and Safety Committee as it applies to the specific company.

Section 2: Category

1. Please check one (for your insulation business—this must also correspond to your current NIA dues category):
 - a) Small Company (fewer than 100,000 man hours)
 - b) Medium Company (100,001 to 500,000 man hours)
 - c) Large Company (more than 500,001 man hours)

2. I confirm that my company is a NIA Associate member.
 - a) Yes
 - b) No

3. I confirm that my company is an NIA member in good standing (2016 NIA membership dues have been paid).
 - a) Yes
 - b) No (Associate members must be members in good standing for this application to be considered—i.e., your company’s 2016 NIA membership dues must be paid in full by the time applications are judged. To check your company’s membership status, please email membership@insulation.org. Please note that no exceptions will be made to this requirement.)

Section 3: Company Safety Program

1. In addition to a new employee safety orientation, what does your company do to increase your employees’ investment in safety (such as participation in incentives, safety audits, etc.)? _____

2. Do you have a lock out–tag out program? Yes No

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If yes, please describe your program. _____

3. Do you have a written policy in place describing progressive discipline for safety violations? ___ Yes ___ No
If yes, describe the basic components of the policy and how you ensure it is applied consistently.

4. How are your employees held accountable for documenting daily inspections and maintenance of safety-related equipment on all machinery and vehicles they use?

5. How do you ensure equipment with safety defects is taken "out of service" until repaired?

6. Describe in detail how you effectively communicate your safety program to the workforce and disseminate basic safety skills and training. (Include frequency and general content of formal safety meetings, informal shop floor discussions, outside training, etc.) Describe when and how you train your employees on your safety program and the safety rules they are required to adhere to.

7. Explain your company's Electrical Safety Process.

8. Does your company have a safety audit program at each facility? Yes No
If so, please explain the program and include the frequency of safety audits.

9. Does your company have a Personal Protective Equipment (PPE) hazard assessment, training, and audit program? Yes No
If so, please explain the program.

10. Describe your program for identifying hazardous materials, communicating material hazards to your employees, and handling and storing hazardous materials. In addition to your written response, please attach a copy of your Hazard Communication Program.

11. Does your company have a heat-illness policy? ___ Yes ___ No
If so, please explain the policy.

Section 4: Safety Policy

Winners of the Theodore H. Brodie Distinguished Safety Award will be chosen on the basis of their safety program, means of communication and training, and company safety policy. Safety programs are not judged against other safety programs—only against an “ideal” program. Winners will be announced and recognized during NIA’s 61st Annual Convention and WIACO, April 20-23, 2016, at the Boca Raton Resort and Club, in Boca Raton, Florida. (See www.insulation.org/convention/2016 for details.) Photographs will be taken of winners present and made available to award recipients upon request. The photos may also be used in NIA publications and marketing materials.

Section 5: Submission Information

Please indicate to whom you would like the safety program improvement feedback sent and the correct email address.

Name _____ Email _____

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Questions regarding the application process may be submitted to Aimee Doyle at adoyle@insulation.org. All completed applications and appropriate fees (make checks out to "National Insulation Association") must be received no later than January 29, 2016, and mailed to:

Dunlevey, Mahan & Furry
Attn: Gary Auman, NIA Legal Counsel
110 North Main Street, Suite 1000
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The 2014 Associates (Manufacturer) category winners were:

Bronze:

- CertainTeed Corporation, *Valley Forge, PA*
- Proto Corporation, *Clearwater, FL*

Silver:

- Industrial Insulation Group, *Brunswick, GA*

Gold:

- Armacell, *Mebane, NC*
- Armacell (Atlanta location), *Atlanta, GA*
- Pittsburgh Corning, *Pittsburgh, PA*
- Roxul USA, *Milton, Ontario, Canada*

Platinum:

- Dyplast Products, LLC, *Miami, FL*
- ITW Insulation Systems, *Houston, TX*

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