



## THE VOICE OF THE INSULATION INDUSTRY

## NIA's Safety Excellence Award

2019 NIA Distributor/Fabricator Member Application

A NIA Member-Only Program

#### Instructions:

Please complete this application and submit it with a check payable to "National Insulation Association" for the \$250 application processing fee. (Note: The NIA Board of Directors has kept the application cost down as a benefit to NIA members. NIA underwrites a portion of this program to help keep the application fees low.) This form must be received no later than **September 3, 2019**, at 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."** 

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

Please do <u>not</u> attach your safety program to this application. Instead, please answer each question <u>in your own words</u> based on what is included in your safety program. UNLESS ATTACHMENTS OR COPIES OF YOUR PROGRAM ARE REQUESTED, THEY WILL NOT BE GRADED. Only NIA Distributor and Fabricator members are eligible to use this form. Distributor and Fabricator members must be in good standing for this application to be considered (i.e., your company's NIA membership dues must be paid in full by the time applications are judged and at the awards presentation). To check your company's membership status, please email *membership@insulation.org*. Please note that no exceptions will be made to this requirement. You may use additional pages to provide a complete narrative response to each question.

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 <u>only</u> to evaluate components of the applicant's safety program for best practices. We do not consider injury rates or Occupational Safety and Health Administration (OSHA) citations in our evaluation. Even a company with the best safety program can run afoul of OSHA if it does not implement and enforce the requirements, policies, and procedures in its safety program. NIA urges all applicants in our safety recognition program to consistently and fairly enforce the requirements and policies set out in the safety programs they submit for evaluation.

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

Address					
		Zip Code			
Contact for Report Verification					
Phone	Email				
Who is responsible for safety in your	company?				
Name					
Phone	Email				
right to publish any innovative safety ideas from information regarding accident or injury statistic confidence within NIA and the Health and Safe	om the entries for the good of t stics, or any other information in	dentified by the applicant as proprietary, will be kept i			
1. Please check one for your insulation but a) Small Company (fewer than 100,	,000 man hours)	pond to your current NIA dues category):			
b) Medium Company (100,001 to 500,000 man hours) c) Large Company (more than 500,001 man hours)					
I confirm that my company is a Distribution     Yes	itor/Fabricator member of N	IA. (Please check <u>one</u> .)			
b) No					
• ——	mber in good standing (NIA r	nembership dues have been paid).			

# **Section 3: Company Safety Program**

1. Please describe your vehicle and driver safety programs (describe how you determine that employees are
qualified to drive any vehicles for your company and the training and instructions you give to them.)
2. Please describe your onboarding process for new employees, including training in hazard recognition. Also, describe how you continually educate your employees about safety.
3. Describe your company's electrical safety program.
4. Describe your fire safety program, including, but not limited to, fire extinguishers, fire suppression systems and flammable materials storage, and how you address employee response to a fire emergency in your EAP.
5. Please describe your program for contractor and subcontractor selection and safety management.

6. Describe your policy for frequent and regular safety inspections and your corrective action policy (this includes your safety enforcement policy.)
7. Describe your premises security program, including employee training and policies on buildings and ground security, access control, and workplace violence prevention.
8. Please describe your procedure for accident investigation. Please identify the person or persons in your company who are authorized to perform accident investigations. Please attach a copy of your accident investigation form.

### **Section 4: Submission Information**

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

Name	 Email	

Questions regarding the application process may be submitted to Aimee Doyle at <u>adoyle@insulation.org</u>. All completed applications and appropriate fees (make checks out to "National Insulation Association") must be received no later than September 3, 2019, and mailed to:

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

Winners of NIA's Safety Excellence 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 65<sup>th</sup> Annual Convention, April 15–17, 2020, at the JW Marriott Scottsdale Camelback Inn Resort & Spa, in Scottsdale, Arizona. (See www.insulation.org/convention2020 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.