Instructions:
Please complete this application and submit it with a check payable to “National Insulation Association” for the $250 application processing fee. Companies applying for the first time receive a discount of 50% and should send a check for $125. (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 1, 2022, at the address below. All completed applications and appropriate fees (make checks out to “National Insulation Association”) should be mailed to:

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

You can also email your completed application to BRL@AMFDAYTON.COM and call 703-464-6422, ext. 113 to pay the credit card rate ($255 for repeat applicants/$130 for first-time applicants) over the phone.

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. Please read each question carefully and be sure you respond to each part of any multi-part question. Please type your response to each question on a separate piece of paper.

UNLESS ATTACHMENTS OR COPIES OF YOUR PROGRAM ARE REQUESTED, THEY WILL NOT BE GRADED.

Only NIA Associate (Manufacturer) 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 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.

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 it does not implement and enforce the requirements, policies, and procedures in its

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

Company Name __________________________________________________________
Address ________________________________________________________________________________
City ___________________________ State _________________ Zip Code ________________
Contact for Report Verification _________________________________________________________
Phone __________________ Email ____________________________________________________________

Who is responsible for safety in your company?
Name ________________________________________________________________
Phone __________________ Email ______________________________________________________

1. Does your company have a formal written safety program? ___ Yes ___ No
   If yes, how long has it been in place? __________________________________________________

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 a NIA member in good standing (NIA membership dues have been paid).
   a) ___ Yes
   b) ___ No (Associate members must be members in good standing for this application to be considered, meaning 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.)

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Section 3: Company Safety Program Questions

1. A strong safety culture is integral in establishing your commitment to safety. Please describe how your company addresses safety culture by answering the following questions: How do you engage your employees in your safety programs and culture? How do you demonstrate management’s commitment to your safety culture? What level of commitment do you expect from your leadership team to your safety culture? How do you encourage and obtain employee involvement in creating and maintaining a safe workplace through safety and health communications, goal setting and measurement, and the commitment of resources to your safety culture? In addition to the preceding, what other programs do you have that lead to a strong safety culture?

2. Please describe in detail your machine guarding program. Include in your response the types of guarding you use, employee training, worksite inspections, and your procedure for evaluating the guarding on new equipment and machinery.

3. OSHA is moving to promulgate a specific standard for heat illness prevention. We believe that OSHA will be guided in this effort by the new OSHA Administrator, Doug Parker, who may well be guided by the heat illness prevention standard he administered in California as the Cal OSHA Administrator. Please describe in detail the steps you take to protect your employees from heat illness, including but not limited to, complying with the NIOSH criteria document on heat illness prevention currently accepted by OSHA as feasible steps for an employer to take to prevent heat illnesses in the workplace.

4. Describe the procedures you use in your locations to identify potential hazards in each workplace. Include information as to how you engage your employees in this process and train them on hazard recognition. In addition to the preceding, include in your response items such as job site analyses (JSAs), standard operating procedures, pre-shift inspections and meetings, and management of change.

5. Describe, in detail, your procedures for accident investigation. Include who initiates the accident investigation, team makeup, and what criteria are used to make these decisions. Factors may include the severity of injuries, or potential injuries, and damage to property or equipment. Detail the training of any personnel who may be assigned to perform an accident investigation. Please describe your procedures for conducting an accident investigation in detail. This may include, but not be limited to, the handling of witnesses, physical evidence, photographs, etc. If either the makeup of the investigation team or the procedure for conducting the investigation may change from incident to incident, please describe how and why this may occur. Also, discuss how you ensure that the conclusions and recommendations drawn from the accident investigation are communicated and implemented after the investigation. Please attach a copy of your accident investigation form and explain any parts of the form that are not self-explanatory.

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Section 4: Submission Information

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

Name ___________________________________ Email __________________________________________

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 September 1, 2022, and mailed to:

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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 67th Annual Convention, March 15–17, 2023, at the Hyatt Regency Maui Resort & Spa, in Maui, Hawaii.

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