2017

ROCK SOLID SAFETY AWARD ENTRY FORM

OHIO AGGREGATES & INDUSTRIAL MINERALS ASSOCIATION

746 Morrison Rd., Gahanna, OH 43230 Entries must be received at the OAIMA office by October 19, 2018 2017

name of company

MSHA or OSHA ID:

Signed OAIMA Safety Pledge *		
Please indicate the criteria in each o	olumn for which your operation qualifies and	
1 Point Each	2 Points Each	5 Points Each
Compliance with approved training plan * Provide safety equipment for employees * Procedure for pre-shift inspection follow-up on mobile equipment Daily work area inspections * Hearing conservation program * Written substance abuse policy Near miss reporting * Hazard Communication Program	incidents * Written contractor safety policy * Conduct personal exposure * sampling for respirable dust (silica) and noise *	Conducted a comprehensive safety & health inspection in 2017 (Non-MSHA) * Performed (in-house) safety an health system review(s) in 2017 * No MSHA reportable or OSHA recordable injuries or illnesses in 2017 * No final S & S citations (or OSHA equivalent) or VPID less than national average in 2017 *
Total Points (maximum 8 points)	Total Points (maximum 14 points)	Total Points (maximum of 15 points used)
(7 points required for Rock Solid)		
* Requires attached documentation.	See Instruction packet.	
		ROCK SOLID EXCELLENCE
Point Total Summary		IN SAFETY
+	One-Point Category Total	Y N Did you achieve the Gold level of points?
+	Two-Point Category Total	Y N Did you attain at least 7 points in the 1-point category?
	Five-Point Category Total (maximum of 15 points)	Y N Did you experience zero MSHA reportable or OSHA recordable
	Total Points	injuries or illnesses in calendar year 2017?
Bronze 14 points or more 22 points or more Gold 30 points or more	If your total equals 30 points or more, answer the questions to the right in order to determine qualification for Rock Solid Excellence in Safety.	Y N Did you experience zero final MSHA S&S citations (or OSHA citations for a Serious violation) or VPID less
I certify that the information submitted on this worksheet is correct and I have supplied requested documentation for verification.		than national average?
Signature		Y N Did you attain 15 points in the 5-point category?
Nameprinte	1	Qualification requires an affirmative answer to all five questions.
Address		
		name of operation
Email		type of operation: Surface, Underground, Facility, OSHA