

**VIRGINIA READY-MIXED CONCRETE ASSOCIATION
SAFETY CONTEST REPORT (Return by Friday, April 11, 2014)**

For the period of January 1, 2013 through December 31, 2013.

Please read carefully and complete each section. Submit one form per plant.

Company Name: _____

Plant Name: _____

Plant Location (City): _____

Plant Location (State): _____

_____ Number of DOT-reportable accidents at this plant in 2013

_____ Number of fatalities resulting from DOT-reportable accidents at this plant in 2013

_____ Number of fatalities of outside contractors at this plant in 2013

OSHA 300A Summary Log Information:

_____ Number of employee hours worked at this facility

_____ Number of fatalities (Item G: 300A Log)

_____ Number of injuries/illnesses with days away from work (Item H)

_____ Number of injuries/illnesses with job transfer or restriction (Item I)

_____ Number of other recordable cases (Item J)

_____ TOTAL number of days away from work (Item K)

_____ TOTAL number of days on job transfer or restriction (Item L)

_____ TOTAL number of injuries (Item M1)

_____ TOTAL number of skin disorders (Item M2)

_____ TOTAL number of respiratory conditions (Item M3)

_____ TOTAL number of poisonings (Item M4)

_____ TOTAL number of hearing loss cases (Item M5)

_____ TOTAL of all other illnesses (Item M6)

I, the undersigned representative of the aforementioned company, certify that the information in this document is correct to the best of my knowledge

Signature

Print Name

Title

Contact Phone Number