AMPLE#3	5 K. W.
	ole for Established Firm
WITH UN	n EMR Average Less Than .85
The particular of the particul	Please do not omit any information
	DEPARTMENT OF TRANSPORTATION Safety Index Rating Form
Date: XX / XX / 2013	Vendor Number <u>X1234</u>
Firm Name: XY	ZFirm
Contact Person Safe	ty Manager or Officer
Address:	
Telephone Number: $(\chi\chi\chi)$ χ Facsimile Number: $(\chi\chi\chi)$ χ	$\frac{XX - X \times X}{XX - X \times X}$
Division. 300/300A The submission of this form must it and applicable OSHA 200/300 it suspensions referenced in Part II q 1f firm has 10 Part II #2. The maximum score for this evalue sum of the points calculated in Part I 300	the in the prequalification office of the Scheduling and Contract include a letter from the firm's insurer indicating the EMR numbers, logs as well as any OSHA/ VOSHA citations or VDOT issued westions 3, 4 & 5. ation is 300. The Contractor's score is determined by deducting the I and Part II and deducting it from 300. -8 - 56 = 236 (Part I Total Points) - (Part II Total Points) = arch + 1 = 2 from 300
(Subtract Pa	
· · · · · · · · · · · · · · · · · · ·	OFFICIAL USE ONLY
Safety Index Rating:	Prequalification Expires:
Approved By:	Date:
Notes:	
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	DAGEI

- 1

Example for Established Firm with an EMR Average Less Than 185 (continued) Form C-38 10-3-07

PART I: Contractor's Safety Philosophy Profile (20 Points)

Listed below are questions to be used to determine your company's overall safety philosophy profile. Please provide the answer that best describes your company's present business approach and attitude towards safety.

1. Does your company have a designated safety manager? If so please provide:

____Yes No

Company Safety Manager: Name: ______ Phone: ______

2. Does your company provide pre-employment drug screening for all potential field employees?

3. Are regular safety meetings held on project sites with all on-site employees?

Yes No

Yes No

4. Does your company check motor vehicle records for all employees who operate company vehicles?

Yes No

5.) Are all company employees provided with formal safety training?

If so provide a brief synopsis of the types of formal safety training provided to your employees

IF the <u>-Give exact date (M/D/Y) of most</u> unswer is <u>recent formal training inaclass</u> room setting <u>-Give Specific description of</u> <u>n information</u>

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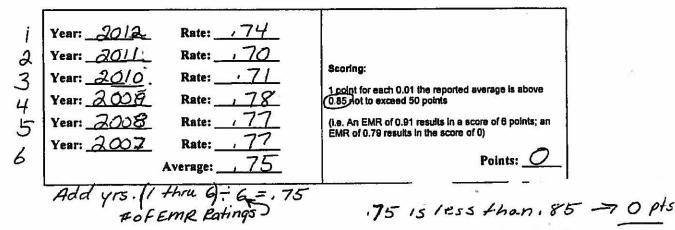
Part I: Point Total (total number of "No" responses x 4): 2×4=8_7

Example for Established Firm with an EMR Average Less Than, 85 (continued) Form C-38

PART 2: Contractor's Safety Operating Profile (280 Points)

Listed below are questions to be used to determine your company's safety operating profile. Please provide the answers that best describe your company's present business operating practices regarding safety.

- 1. List your firm's Experience Modification Rate (EMR) for the six most recent years: (Information is available from your workers' compensation insurance carrier)
 - If your business does not have six years of rates available use most recent available.
 - If you do not have an EMR, please attach an explanation (i.e. marine contractor).



2. Using your firm's OSHA 200/300 log and the formula below, determine your Incidence Rate for Total Recordable Cases for the three most recent years of available data[†]. The Department will compare the rate to OSHA's most recent national industry average for those years.

Incidence Rate for total recordeble cases = (Number of recordable incidents --- total hours worked by all employees during the calandar year) x 200,000 2012 Available October 2013

U.S. Industry^{tt} Average Contractor Add Years Year: 2012 Rate: 8.0 (1 + hru 3): 3= Year: 2011 Rate: 5.2 5.6 Year: 2010 Rate: 3.6 Contractor Year: 2011 Rate: 6,3 ,75 Year: 2010 Rate: 6,0 Scoring: Year: 2009 Rate: 5,2 0 points for Rating < 0.75/1 point for each 0.01 above 0.75 up to a ,21×100= Avg.: 5.83 Rating 5.6-5.83= Avg.: 5.6 maximum of 50 points (Rating = 1.25) 21 Points: 2/ 96 Rating: (Contractor Avg + Industry Avg) 196

¹ Last three available years, Contractor and Industry years do not need to reflect the same period.

"U.S. Industry Rates are available on the Bureau of Labor Standards website: http://data.bls.gov/IIRCI -> Use this website to find U.S. Industry Rates

North American Industry Classification System code (NAICS): XXXXXX (See NAICS codes listed on last page) Note: If OSHA 200/300 logs are not maintained, please attach an explanation.

3. Has OSHA or VOSH issued to your company and declared (final) any citation(s) for repeat violation(s) of any OSHA defined serious injury in Virginia in the past 5 years? Yes _____ No. If yes, please attach a detailed list of the violations.

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Scoring: 0 Points if answered "No". If yes, 10 points for each citation not to exceed 60 points.

Points: 20 2×10=

Example for Established Firm with EMR Average Less Than ,85

> Form C-38 10-3-07

4. Within the last two years, has your company received any final citations classified by OSHA or VOSH as being willful in Virginia? 1/Yes _____No If so, how many citations: _____. Attach copy(ies) of the citation(s).

Scoring: 0 Points if answered "No". If yes, 15 points for each citation not to exceed 60 points.

Points: <u>15</u>

Points:

5. Has your company within the last three years received any formal written suspensions by the Virginia Department of Transportation for violation of one of the safety emphasis areas below? If applicable, attach a copy of each written suspension.

	1	Date Issued
Excavating, Trenching, or Shoring:	YesNo	
Fall Protection:	Yes	
Crane Safety:	Yes	
Equipment Safety Devices (backup alarms, etc.):	Yes No	
Workzone Traffic Control:	Yes No	

Scoring: 15 points for each response of "Yes" not to exceed 60 points.

Questions _ Part II: Point Total: (sum of points from questions 1 - 5) 1. + 2. + 3. + 4. + 5. = PART # : POINT TOTAL 0+ 21 + 20 + 15 + 0 = 56

PART 3: Certification

I hereby certify that the information provided in this document is true and accurate to the best of my knowledge. Material misrepresentations in any section shall be reason for discounting some or all points that the sections allows toward prequalification.

Signature:	Safet	Manager	Date:	M/D/YR	
Name:		Title:			
	(print or type)				

North American Industry Classification System codes (2002)

237310: Highway and Street Construction except Elevated Highways
237310: Bridge and elevated highway construction
237990: Tunnel Construction
238210: Highway lighting and signal installation
238320: Bridge Painting

If your company performs multiple classifications listed above along with Highway and Street construction, use NAICS Code 237310.

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For additional NAICS codes, contact OSHA of the U.S. Department of Labor or visit their website.