

**THE SOUTH TEXAS
INDUSTRIAL INDUSTRY SAFETY EXCELLENCE
AWARDS PROGRAM**

Sponsored by

CONTRACTORS SAFETY COUNCIL OF THE COASTAL BEND

PORT INDUSTRIES OF CORPUS CHRISTI

CONTRACTORS SAFETY COUNCIL OF THE TEXAS MID-COAST

**2009
OWNER AWARD PACKET AND APPLICATION**

Recognizing Excellence

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↑ Call if you have questions

THE SOUTH TEXAS INDUSTRIAL INDUSTRY SAFETY EXCELLENCE AWARDS PROGRAM

I. Purpose

The Owner Safety Awards Program is intended to recognize commendable safety management by member companies with exemplary safety programs, including effective contractor safety management. Awards will be awarded to the companies who can show the most exemplary programs of company and contractor safety management that go beyond merely adopting a safety program, to demonstrating a serious, vigorous, persistent owner's management commitment to make the program work. The strategy underlying the awards program is to recognize stellar performers in their efforts on "Improving Owner/Contractor Safety Management" and Safety Excellence.

The awards are intended to convey local industry's combined and full support of hands-on management of safety by owners whose performance indicates recognition of their direct economic stake in the safety performance of their own company and their constructors. Accident costs are a business expense to owners and a controllable cost that can be reduced by owners. This can be achieved through establishment of an effective safety program executed by constructors and aggressively supported by owners.

For the purpose of this program the South Texas area is defined as including the counties of: Matagorda, Jackson, Calhoun, Victoria, Goliad, Refugio, Aransas, Bee, Live Oak, San Patricio, Duval, Jim Wells, Nueces, Kleberg, Brooks, Kennedy, Hidalgo, Willacy, and Cameron.

II. Criteria for Application Evaluation

The Award evaluation will be based on:

- A. OSHA/MSHA injury/illness statistical data for your site personnel. **All applications require attached OSHA 300 logs.**
- B. A written synopsis of the Owners' safety management program and their contractor's required safety management process. (5 page maximum).
- C. On-site evaluations of selected "Excellence" applicants by a team of safety professionals and/or a third party audit.

III. Award Categories: Safety Excellence, Most Improved, Safety Merit, and Participating

Annual safety awards will be awarded to qualified recipients for each Standard Industrial Classification (SIC) Code Groups:

Awards may be presented in the following Owner work-hour categories for each SIC Group:

- A. **Less than 500,000 work hours annually.**
- B. **500,000 to 1,000,000 work hours annually.**
- C. **1,000,001 to 2,000,000 work hours annually.**
- D. **2,000,000 and over work hours annually.**

IV. Instructions for Completing the Application

PART 1

Complete the statistical data on Part 1 of the application form to provide the quantitative measure of your facilities safety performance and the performance of your site contractors. The data is requested for the years 2007, 2008, and 2009, and can be taken directly from the OSHA/MSHA Log. The statistical data submitted must match your OSHA 300 logs. Statistics should be for all owner site employees in Part 1(A), OSHA logs are required, and all site contractors in part 1(B), No OSHA logs required for contractors. Injury/illness data will be for work performed in the South Texas area as per your selected category. See page 2 for list of counties.

No awards will be awarded to any owner company that has had a fatality in its 2009 submitting category.

No awards will be awarded to any owner company that has received a willful OSHA citation in its 2009 submitting category.

PART 2

Complete Questions 1&2.

1. Brief description of company, approximately 25 words, which can be used at the banquet ceremonies to introduce the company as the award is received.
2. Attach a general description of your safety management program and your program for contractor safety management, maximum of five pages.

VI. Instructions for submitting the Application

All award applicants are required to complete the application in full, attach OSHA 300 Logs (no Contractor OSHA logs), and have it signed by an authorized management representative. The completed application must be submitted to the following address by the **closing date, March 31, 2010.**

*Contractors Safety Council of the Coastal Bend
Attn: Awards Panel
P.O. Box 23066
Corpus Christi, Texas 78403*

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Awards Program Schedule

February 10, 2010:	Applications will be available
March 31, 2010:	Applications must arrive in the CSC Office or be Post marked by this date. Applications are reviewed for compliance by CSC and/or the Committee Chairman, as they are received.
April 12-16, 2010:	Review panel award recommendations and audit assignments (3:00pm)
April 19-30, 2010:	Audits conducted and references checked by assigned auditors
May 3, 2010:	Auditors Recommendations for awards to the Awards Committee
May 7, 2010:	Final selections made by review panel
May 7, 2010:	Plaques Ordered
May 7, 2010:	Invitations to Awards Banquet will be distributed
May 21, 2010:	Final day to R.S.V.P. for Banquet reserve seating
June 3, 2010:	Awards Banquet & Presentations: Congressman Solomon P. Ortiz International Center

VIII. Selection Process and Awards Presentation

The Awards Panel will review and evaluate all completed applications and make awards based on a consensus decision by its members. Participants and recipients of the South Texas Industrial Industry Safety Excellence Awards will be announced at the awards ceremony and banquet.

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OWNER SAFETY AWARDS**

APPLICATION FORM -- Part 1

Owner Facility Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

SIC Code: _____ **Work-Hour Category:** _____ (see Page 2)

Years Reported:	<u>2007</u>	<u>2008</u>	<u>2009</u>
<u>Part 1A - Company Site Personnel</u>			
Number of: (From OSHA/MSHA Log)			
Total Hours worked	_____	_____	_____
a. Fatalities	_____	_____	_____
b. Lost Time Rate	_____	_____	_____
c. Total OSHA Recordable Rate	_____	_____	_____
d. Number of OSHA Willful Violations	_____	_____	_____

Years Reported:	<u>2007</u>	<u>2008</u>	<u>2009</u>
<u>Part 1B - For Contracted Site Personnel</u>			
No Contractor OSHA Logs are required			
Total Hours Worked	_____	_____	_____
a. Fatalities	_____	_____	_____
b. Lost Time Rate	_____	_____	_____
c. Total Recordable Rate	_____	_____	_____
d. Number of Willful Violations	_____	_____	_____

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APPLICATION FORM - PART 2

Owner Facility Name: _____

1. Brief description of company, approximately 25 words, which can be used at the banquet ceremonies to introduce your company as the award is presented.

2. Attach a general description of your safety management program and include your program for contractor safety management, maximum of five pages.

ATTACH a copy of your OSHA 300 Logs for 2007, 2008, & 2009, that support your application, (no OSHA Contractor logs are required).

I certify that information contained herein has been verified and is accurate.

Prepared By: _____ **Title:** _____ **e-mail:** _____

Signature: _____ **Date:** _____ **Phone:** _____

Company Officer: _____ **Title:** _____ **e-mail:** _____

Signature: _____ **Date:** _____ **Phone:** _____