The Dayton Builders Exchange (DBX) "Best Practices in Safety" Program Award recognizes DBX member companies in good standing that have demonstrated a commitment to improving jobsite safety through development, implementation, and enforcement of a safety and risk management program.

This program is more than an award program and companies are not in competition with other companies. The program is designed to not only recognize you for your commitment to safety, but to also provide you with an in-depth evaluation of your safety program by an industry professional. Because of the unique nature of this award, you can use it effectively with your clients, insurance company and even OSHA.

Eligibility:

Submissions must come from a DBX member company in good standing with a documented safety/risk management program including a formal written safety program.

Confidentiality:

The information in Section 1 of this application, and any reference in any part of this application to a specific company, <u>will not</u> be included with the application when the submissions are judged. All information provided on this application will be kept in strict confidence. DBX reserves the right to publish any innovative safety ideas from the submissions 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 strict confidence.

<u>Judging</u>:

Applications will be judged anonymously by an industry panel headed up by nationally renowned OSHA / Workers Compensation Attorney, Gary Auman, of the Legal Firm Auman, Mahan and Furry.

Deadline:

Deadline for entries is <u>August 4th, 2021</u>. Winners will be announced during Team Building Night on August 26, 2021.

<u>Entry Fee:</u> There is a \$200 entry fee to have your safety plan reviewed by Gary Auman. <u>In return, you will</u> receive a detailed, written critique of the information provided with your application. This evaluation <u>letter is designed specifically to facilitate ongoing safety program improvement for every participating</u> <u>member.</u> The entry fee also includes a complimentary registration to Team Building Night. You can submit the payment via the attached form or by check. If applying online, there is also an option to pay via credit card at the end of your application submittal.

Entry Submission:

Three easy ways to submit your application:

- 1. Apply online at <u>www.bxdayton.com</u> (Member Services Section)
- Mail this completed application to: Auman, Mahan & Furry, Attn: Brenda Lightner 110 North Main St., Suite 1000 Dayton OH 45402
- 3. Email a scan of your completed application to Brenda Lightner at brl@amfdayton.com

More Information:

Questions regarding the application may be directed to Gary Auman at <u>gwa@amfdayton.com</u> or by calling 937-223-6003.

Instructions

Please complete the following information about your company. Complete and accurate information will help the judging process and will likewise assist your company in receiving appropriate consideration. Feel free to attach additional paper if necessary for longer answers. **DO NOT SUBMIT YOUR ENTIRE COMPANY SAFETY PROGRAM. YOUR APPLICATION WILL BE REJECTED.**

Section 1: General Information

any Name		
ct Name		
SS	City	StateZip
none	Email	
e check one: Small Company (less Medium Company (1 Large Company (mo	s than 100,000 man-hours) 00,001 – 500,000 man hours) re than 500,001 man-hours)	
your company have a formal written s	safety program? Yes No	
s your: EMR Rate Lost Time Ra	te Total Recordable Injury Rate (T	RIR) Restricted Duty Rate
		ich additional pages.
e make your responses as complete a	as possible. All individual questions mu	ust be answered directly and
ically. <u>DO NOT SEND A COPY</u>	OF YOUR ENTIRE SAFETY PI	ROGRAM!
so will result in rejection of your appl	ication.	
•	• •	es 🗆 No
company expectations? Please pro orientation and describe your orien	ovide a list of the topics you cover with tation program. Also include informati	them during this
Please describe your comprehensiv with safety including injury recordke safety program violations.	ve recordkeeping program. Include AL eeping, training recordkeeping, and dis	L records you maintain in connection ciplinary recordkeeping with regard to
	ct Name	ct NameCity ssCity noneEmail

4)	Please describe how you comply with the OSHA requirement for competent persons on each job site?
5)	Please describe in detail your safety enforcement program.
6)	Does your company have a PPE hazard assessment, training, and/or audit program? □ Yes □ No If yes, please explain the program:
7)	Do you have a substance abuse program? □ Yes □ No If yes, please describe the program:
8)	Does your company have a formal Heat and Cold Illness Prevention Program? □ Yes □ No If so, please describe these programs.

9)	Do you conduct random job s	ite inspections and safety audits	? 🗆	Yes	No
	If yes, who conducts these?	How are they conducted, and w	hat do they	cover?	

10)	Does your	mpany have an Emergency Action Plan including first-aid, communication, and evacuation?
	□ Yes	∃ No

If yes,	how do you	communicate t	this program	to your e	employees i	n the field a	and how a	re they t	rained on
the pro	ocedures?								

Section 3: For Informational Use and Bonus Points

The questions in this section will be used for informational purposes only and may count as bonus points towards your overall score.

1) Do you feel you do anything innovative in your safety program - anything unique or not typical of industry standard practices? If so, please explain the practice and its benefit to your company.

2) What is your greatest risk as a Contractor and how do you mitigate that?

All applications will be graded and recognition will be awarded at a Bronze, Silver, Gold, Platinum or Participant level. Each applicant will be judged anonymously and will receive a letter critiquing their program from Gary Auman. All participants will receive certificates, and those receiving Bronze, Silver, Gold, or Platinum awards will receive recognition during Team Building Night on August 26, 2021.

Please indicate to whom you would like the feedback sent and their email address

Name	Email
Payment Information:	
Check for \$200 made payable to DBX	MasterCard AmExp Discover
Name on Card	Card Number
Billing Zip Code	Expiration Date
All applications and appropriate fees mu	st be received no later than <u>August 4, 2021.</u>

For Office Use Only:	DATE RECEIVED	ENTRY NO.	