



## Industrial Safety Award Required Information North Carolina Trucking Association

Company Name: \_\_\_\_\_

	Number of Employees	Employee-Hours Worked	Number of Lost Workday Cases*	Fatalities	Frequency Rate
LINE HAUL/OTR DRIVERS					
LOCAL DRIVERS					
DOCK					
SHOP					
OTHERS					
TOTAL					

**THE FOLLOWING CERTIFICATION MUST BE SIGNED BY AN EXECUTIVE OFFICER OF THE COMPANY**

I hereby certify that the above information is correct to the best of our knowledge and belief. I agree that an audit of the records may be made prior to the announcement of any award to this company.

\_\_\_\_\_

(Signature)

(Title)

- Please note number of cases – not number of lost workdays.
- Failure to consent to an audit or rendering of records will therefore make the contestant ineligible for any award for the contest year (see page 2, number 8).

## REPORTING OF LOST WORKDAY CASE EXPERIENCE

1. Employee **Hours Worked** — Annual employee hours worked shall be determined on the basis of 50 weeks of work per year for each individual.
  
2. **Optional Procedure** —Drivers
  - A. Using drivers' logs the carrier may determine hours worked for a peak two-week period and a slack two-week period and calculate an average number of hours worked per week by drivers. To calculate employee hours worked per year, this average shall be multiplied by the number of drivers and then multiplied again by 50.
  
  - B. The following weekly averages may be used which include driving and non-driving time:  
  
Local Drivers: 41.2 hours per week per driver  
Line Haul Drivers: 52.25 hours per week per driver  
  
Proceed as set forth in option A to calculate annual employee hours worked for drivers.
  
3. **Employee**—Any person directly in the service of the contestant shall be considered an employee whose work time and involvement in a lost workday case shall be counted without regard to the status of the individual as a company employee, independent contractor, or one whose services have been obtained through a labor leasing organization, or otherwise. The term "employee" does not include in the services of independent outside agencies who may be at work on the carrier's premises or vehicles (e.g. plumbers, electricians, construction workers, tire specialists, lubrication specialists, etc.), incidental to their normal duties.
  
4. Lost workday case—Any work-related injury or illness which causes an employee to experience days away from work, days of restricted work activity, or both, beyond the day of the injury or onset of the illness.
  
5. **Reporting by job classification** —**Separately** report the experience of personnel in each job classification listed on the form. If there are no employees in one or more of the job classifications shown, enter the letters N/A under the column "Number of Employees."
  
6. Reporting by private carriers — A private carrier shall report only the employee — hours worked and the lost workday cases of personnel directly involved in its transportation operations.
  
7. **Incidence Rates** —**The** incidence rates shall be expressed in terms of the number of lost workday cases per 200,000 employee hours worked computed by the following formula:  
$$\text{Incidence Rate} = \frac{\text{Lost Workday Cases} \times 200,000}{\text{Employee Hours Worked}}$$
  
8. OSHA LOGS — OSHA 300 and 300A logs MUST be submitted with completed contest form. You may remove employees' names from the 300 form to maintain compliance with HIPAA.