2019 Brilliance Awards Nomination Form

Category: Safety Champion

Company Name: ____________________________________________

Company Representative: ____________________________________

Provide us with a brief description of your business: ____________________________________________

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________________________________________________________________________

1- Is the business certified as a minority? Please check all that applies:

Minority Business Enterprise? ☐ Yes ☐ No
Women Business Enterprise? ☐ Yes ☐ No
Disadvantage Business Enterprise? ☐ Yes ☐ No
Historically Underutilized Business ☐ Yes ☐ No
Small Business Enterprise ☐ Yes ☐ No
Other: ____________________________________________

2- In what year was the business incorporated? _________

3- Number of employees? _________

4- How many projects did the company complete in 2018, where they mostly residential or commercial?

________________________________________________________________________

5- What was the business revenue in 2018? ________________________________

6- What is your company EMR (Experience Modification Rating)? ________________________________
7- Describe your company’s safety program and how you enforce safety on the jobsite

8- Is anyone in your company OSHA certified? If so, tell us about the certification

9- Describe what your company does to train new workers on jobsite safety