



Occupational Awards Program
SUPERIOR SAFETY PERFORMANCE AWARD

The National Safety Council's **Superior Safety Performance Award** recognizes companies, units and/or facilities that have achieved a minimum of ten consecutive "perfect record" years, operating without incurring an occupational injury or illness resulting in days away from work.



Awards are available for \$150 each

CRITERIA:	RECOGNITION:
<ul style="list-style-type: none"> Participants must have zero fatalities, zero injuries, and zero illnesses that involved days away from work in their 6-digit NAICS Code during a minimum consecutive ten year period (extending at least 120 months in duration). Any organization recording a fatality or injury that involved days away from work will not be considered. 	<ul style="list-style-type: none"> Qualified companies, units and facilities can purchase a Superior Safety Performance Award to display their achievement at their organization. Pricing: Superior Safety Performance Award \$150 or Superior Safety Performance Award and NSC Proud Member Flag \$200 (plus shipping, handling and applicable tax).
	TO APPLY FOR THIS AWARD:
	<ul style="list-style-type: none"> Review your self-reported data to determine if you are eligible for consideration (based on program criteria). Complete Section A and B of the application and order form with desired payment. Fax or Mail Completed Form To: National Safety Council, Attn: Motivation & Recognition Dept., PO Box 679 Itasca, IL 60143-0679 Fax: 630.775.2185 Apply online at www.nsc.org/superiorsafetyaward

Your application will be evaluated shortly after receipt. If your company, unit or facility is deemed eligible based on your self-reported data, your award will be mailed within 4-6 weeks to the shipping address indicated on your order form.

The National Safety Council reserves the right to change, without notice, any statement in the Occupational Awards Program concerning, but not limited to, rules, policies, awards, delivery dates/methods, and fees.



Occupational Awards Program:
SUPERIOR SAFETY PERFORMANCE AWARD APPLICATION

National Safety Council | Motivation & Recognition Department | P.O. Box 679, Itasca, IL 60143-0679
Ph: 800.621.7619 | Fax: 630.775.2185 | E-mail: awards@nsc.org | Web: www.nsc.org

SECTION A

Participant / Shipping / Award Information

PARTICIPANT / BILLING INFORMATION:

Date Submitted: ____/____/____ Membership ID# of location applying: _____

Note: Each physical location must have its own separate Membership I.D. Number. Your Membership I.D. Number must correspond with your location address. If you do not know your Membership I.D. Number, please contact the NSC Customer Relations Department at 800.621.7619

Company: _____

Safety / Mgmt Contact: _____ Title: _____

CEO's Name: _____ Director of Safety's Name: _____

Street Address: _____ Suite/Unit: _____

City, State, Zip: _____

Phone: _____ Fax: _____ Email: _____

SHIPPING INFORMATION: Complete only if different than above.

NOTE: Please use a physical street address, do not use a PO Box as awards are normally shipped via UPS.

Company: _____ Contact: _____ Title: _____

Street Address: _____ City, State, Zip: _____

CUSTOM AWARD INFORMATION:

Print your information below *exactly* as you would like it to appear on your award.

Company Name (Line 1): _____

Company 2 / Plant (Line 2): _____
(not required)

City and State (Line 3): _____



Occupational Awards Program:
SUPERIOR SAFETY PERFORMANCE AWARD ORDER FORM

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 Ph: 800.621.7619 | Fax: 630.775.2185 | E-mail: awards@nsc.org | Web: www.nsc.org

SECTION B

Record / Industry / Order Information

RECORD INFORMATION:

Participants must have continued without the occurrence of an occupational injury or illness involving days away from work or death for a period of at least 10 consecutive years or 120 months.

Date Record Started: ____/____/____ **Date Record Reached:** ____/____/____

Has record ended? Yes No **Total Employee Hours:** _____

INDUSTRY INFORMATION:

Provide the following information that best describes your North American Industry Classification.
Example: Mining-surface bituminous coal, Paper-folding paper-board boxes, Utility-gas distribution, etc.

NAICS Code (6-digit): _____ (If you do not know your NAICS Code, call 973-625-5626
 or log on to www.naics.com/search.htm)

Industry: _____

Specific Product or Service: _____

ORDER INFORMATION:

PRODUCT NO.	DESCRIPTION	MEMBER UNIT PRICE	QTY. TO ORDER	TOTAL PRICE
SSPAWARD	Superior Safety Performance Award	\$150.00		
SSPAWARDFL	Superior Safety Performance Award and NSC Proud Member Flag	\$200.00		

**Sales Tax: Please add applicable sales tax in AL, CA, CT, FL, GA, IL, KY, MN, PA, TX, VA.	<u>Order Amount</u>	<u>Shipping Charge</u>	Sub-Total
	Orders up to \$35.00	\$5.95	
***Shipping & Handling: Rates do not apply for Canadian or International orders. Call for pricing. EXPRESS DELIVERY overnight, second-day or Saturday delivery available for additional fee. For orders that are not prepaid, there will be a handling fee of \$5.00 with standard shipping and \$10.00 with expedited shipping.	\$35.01 - \$50.00	\$7.20	**Sales Tax
	\$50.01 - \$100.00	\$8.45	***Shipping / Handling
	\$100.01 - \$150.00	\$9.60	
	\$150.01 - \$200.00	\$10.80	TOTAL
	\$200.01 - \$300.00	\$12.00	
	\$300.01 - \$400.00	\$13.20	
	\$400.01 - \$500.00	\$14.45	

PAYMENT METHOD (Prepayment is required for orders under \$50.00)

- Payment Enclosed** Make check or money order payable to National Safety Council Credit Card: Visa MasterCard Discover American Express
- Payment by Credit Card** CC# _____ Expires: ____/____
- Send Invoice:** PO# _____ Signature (required): X _____

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 Motivation & Recognition Department
 P.O. Box 679, Itasca, IL 60143-0679
 Fax: 630.775.2185

Thank you for your order!