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**APPENDIX A:  
SAFETY PREQUALIFICATION FORM**

**Instructions:**

Candidates must complete the Safety Prequalification Form in the file *FILE\_NAME.xlsx*. Candidates must submit information for all construction work performed by the firm, regardless of contract type, including as a prime, joint-venture partner or subcontractor.

**The text below summarizes the information requested in the Safety Prequalification Form. Responses to questions #1 – #3 and Step 1 are required; see underlined, bolded instructions below for determining whether Step 2 and/or Step 3 is required.**

**1. Contact Information**

**2. Acknowledgement**

Please print and sign a hard copy of your Safety Prequalification Form.

By signing this Safety Prequalification Form, the undersigned certifies under penalty of perjury that signer personally reviewed all information contained in this submittal and certifies that all information provided is complete, accurate, and contains no false or misleading information.

**3. Documents to Submit with this Form**

3.a. Submit the past three years of your firm's OSHA 300A forms.

3.b. If required to complete Step 3 (below), submit the following documents:

3.b.1. Additional documents specified in Step 3.

3.b.2. Explanation of any OSHA violations identified in Step 3, below

3.b.3. Explanation of any fatalities identified in Step 3, below

SFPUC may in its sole discretion adjust your firm's Safety Qualification status based on information in the above-referenced documents submitted with this form.

**Step 1**

**4. Occupational Safety and Health Administration (OSHA) For 300A Summary of Work-Related Injuries and Illness**

4a. Please provide your firm's construction related data from your OSHA 300A forms.

4b. Enter the North America Industrial Classification System (NAICS) rate associated with your industry

4c. Is your firm's recordable case rate worse than industry standard for two of the last three years?

**5. Has your firm received an OSHA Serious, Willful or Repeat violation in the last three years, regardless of appeal status?**

**6. Has your firm experienced a workplace fatality in the last three years?**

**If you answered "No" to every question above (4.c., 5 and 6), you do not need to complete Steps 2 or 3, below.**

**You may complete this process by submitting this Safety Prequalification Form and the last three years of your OSHA 300A Forms to the SFPUC.**

**If you answer "Yes" to any of the questions 4.c., 5 and 6, proceed to Step 2.**

**Step 2**

## **7. Work Loss Rate**

- 7a. Your firm's loss work data from your OSHA 300A form
- 7b. Your firm's NAICS rate associated with your industry
- 7c. Is your firm's Work Loss rate worse than industry standard for two of the last three years?

## **8. Has your firm received an OSHA Willful or Repeat violation in the last three years, regardless of appeal?**

### **9a. The annual total hours worked for last three (3) years by all employees as reported on your OSHA 300A form**

### **9b. Provide the number of Serious violations issued by OSHA over the past 3 years, regardless of appeal status.**

### **9c. Your serious OSHA violation rate per 200,000 hours**

### **9d. Does your firm have more than one serious OSHA violations per 200,000 hours, regardless of appeal status?**

## **10. Did OSHA issue your firm a citation for any incident in which there was a fatality in the last 3 years?**

*If the answers to question 7.c, 8, 9.d and 10 are all "No", you do not need to go to step 3*

*You may complete this process by submitting this Safety Prequalification Form and the last three years of your OSHA 300A Forms to the SFPUC*

*If you answer "Yes" to any questions 7.c, 8, 9.d and 10, proceed to Step 3.*

## **Step 3**

### **11. Occupational Safety and Health Administration (OSHA) For 300A Summary of Work-Related Injuries and Illness**

**Your firm's data for the last three (3) years, as provided in Q.4**

### **12. Safety Document Submittals**

- 12.a. Does your firm have an Injury and Illness Prevention Program?
- 12.b. Does your firm have a Drug and Alcohol Free Workplace Policy?
- 12.c. Does your firm have a Job Hazard Analysis (JHA) Procedure?
- 12.d. Does your firm have a Corporate Safety Manual?
- 12.e. Does your firm have an Injury and Incident Investigation Process?
- 12.f. Does your firm have any Employee Safety Training Programs?
- 12.h. Does your firm have a Safety Field Audit Process?
- 12.i. Does your firm have a Daily Safety Pre-Task Planning Process?

### **13. OSHA Serious Violations**

Violations should only be listed once. Please list Federal and State OSHA Serious violations issued over the last three (3) years.

Please add rows to provide additional citations/violations, as necessary.

Applicant must provide copies of the citation, any appeal and an explanation of corrective actions.

**14. OSHA Willful and Repeat Violations**

Provide a description and explanation for each Willful and Repeat violation

**15. Workplace Fatality**

Provide a description and explanation for each fatality cited by OSHA.