

# National Drilling Association

## Drilling Contractor Safety Award Program

As a leading drilling industry advocate for safe mineral exploration, geotechnical and environmental drilling operations, the National Drilling Association has instituted a Safety Award Program to recognize its drilling contractor members' outstanding safety performance. The program allows drilling contractors of similar size to compete for an award based on their incident rates. Safety Award recipients will be honored, each year, at the NDA Annual Convention.

### Eligibility Requirements

To be eligible to participate in the National Drilling Association Safety Award Program, a company must meet the following eligibility requirements:

- 1) Drilling contractor companies must be a "Regular Member" Contractor of the NDA both at the time of application and at the time that award recipients are determined.
- 2) Drilling contractor companies must have had field exposure from their own employees (not subs) during the qualifying period. For the purposes of the NDA Safety Award Program, applicants combine injury/accident data for field, shop, and office employees.
- 3) Drilling Contractor companies must not have had a fatality of any of their own employees during the qualifying period.

### Award Criteria

Based upon their hours of exposure, drilling contractor companies will enter the National Drilling Association Safety Award Program in one of three categories:

- 10,000 to 250,000 annual exposure hours
- 250,001 to 500,000 annual exposure hours
- more than 500,000 annual exposure hours

All award categories for the National Drilling Association's Safety Awards are based on the company's previous calendar year Incident Rate.

Companies in any category that have an incident rate below the average total case rate of injuries and illnesses of all companies that have entered the NDA competition will be named the Safety Award winners.

### Application Requirements

Each eligible company applying for the NDA Safety Award must meet the following requirements:

- 1) Submit a completed National Drilling Association Safety Award Application (with signature).
- 2) Companies with 10 or more employees must submit a copy of their OSHA 300A Summary of Work Related Injuries and Illnesses report for the previous calendar year. **(Note: This information will remain completely confidential and will be used only to calculate the company's loss ratio).**
- 3) Submit all original application documents to the NDA by **June 30<sup>th</sup>** of the year.

# NATIONAL DRILLING ASSOCIATION SAFETY AWARD APPLICATION

To compete for a National Drilling Association Contractor Safety Award, you must complete and sign this application and return it with a copy of your company's OSHA 300A Summary of Work Related Injuries and Illnesses reports covering the previous calendar year. If you have any questions, please call the NDA at (877) 632-4748.

## COMPANY INFORMATION

Company Name: \_\_\_\_\_ Number of employees in the United States: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Contact Person Responsible for your Safety & Health Program:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Contact Person Completing Entry (if different from above):

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## SAFETY & HEALTH

If your company has over 10 employees, you must attach the OSHA 300A Summary report for the previous year for all work performed for your company's USA office(s).

Reporting Year ..... **20** \_\_\_\_\_

Line 1 - Total Recordable Cases (total of lines (H), (I) and (J) on OSHA Form 300A). . \_\_\_\_\_  
*(Includes total number of cases with days away from work, job transfer or restrictions and other recordable cases)*

Line 2 - Total Employee Hours Worked During the Year ..... \_\_\_\_\_

Formula to calculate your company's Incident Rate:

$$\begin{array}{ccccccc} \underline{\hspace{2cm}} & \times & 200,000 & = & \underline{\hspace{2cm}} & \div & \underline{\hspace{2cm}} & = & \boxed{\hspace{2cm}} \\ \text{(Line 1 above)} & & & & & & \text{(Line 2 above)} & & \text{(Incident Rate)} \end{array}$$

\*Combine injury/accident data for field, shop, and office employees.

## CERTIFICATION

I certify that the information on this application is true, correct and complete.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Title of person completing entry

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## AWARD INSCRIPTION

If my company is a recipient of a National Drilling Association Safety Award, I would like it to be inscribed with my company's name EXACTLY as indicated here: (please print clearly)

\_\_\_\_\_

**APPLICATION DEADLINE** - The National Drilling Association must receive your completed, mailed entry form and attachment by June 30<sup>th</sup>. Mail to: National Drilling Association, 4036 Center Rd, Suite B, Brunswick, OH 44212. (or) Email to [becky@nda4u.com](mailto:becky@nda4u.com)