

## GALION SAFETY COUNCIL

### Semi-Annual Report

Instructions for your ***Semi-Annual Report Form*** for the current reporting period.

*This instruction sheet should be used as a guide in completing the BWC's Division of Safety & Hygiene semi-annual report form.*

#### **Directions:**

- The top portion of the form is self-explanatory. Your account number, company name, address, etc. has been completed for you. Make any corrections that are necessary to your company identification. The person completing the semi-annual report should fill in the "Submitted by" information.
  
- **(1) Date of Most Recent Lost-Time Injury or Illness**  
This is the date of the most recent injury that resulted in an employee missing at least one full day of work. The date does not necessarily have to be during this period (for example, if the last injury your company had was 3 years ago, then you would put that date).
  
- **(2) and (3) Average Number of Employees/Total Hours Worked**  
Multiply *the average number of employees x the average number of hours worked per week x the number of weeks in the six-month period.* (i.e. 725 employees x 40 hours = 29,000 hours x 26 weeks in the six month period = 754,000 hours)
  
- **(4) Deaths**  
Taken from OSHA 300 Log column G, the number of deaths that resulted from an occupational accident during this six-month period.
  
- **(5) Number of Injuries/Number of Workdays Lost**  
Taken from OSHA 300 Log column H, the number of occupational injuries or illnesses resulting in days away from work. (For example, if you filled in line #1 with a date that was during the current 6-month period, then there should be at least a "1" written on line #5).
  
- **(6) Number of Workdays Lost**  
Taken from OSHA 300 Log column K, the total number of days employees were away from work as a result of occupational accidents during the six-month period. (For example, if two people were off due to injuries, take the number of days they were each off and add them together.)  
  
**NOTE:** If the days away from work resulted from an accident which occurred in a previous six-month period, but the person did not miss any work until the current six-month period, you will have to send an updated form for the previous period, listing the date of that accident.

**Filing the semi-annual reports is required for your company to qualify for the (up to) 4% discount on your workers' comp insurance premium for the July 2010 to June 2011 fiscal year.**

**Your support and cooperation are appreciated!**